



Risk Management SNAPSHOT

Current issues and hot topics
in healthcare risk management.



CMS Establishes Maternal Health and Safety Standards/ Requirements with The CY 2025 OPPS Final Rule

The Centers for Medicare & Medicaid Services (CMS) announced new baseline health and safety requirements for hospitals and Critical Access Hospitals (CAHs) providing obstetrical (OB) services to make pregnancy, childbirth, and postpartum care safer. These new requirements will require all hospitals providing OB care to implement changes in order to comply. Your MMIC Risk Manager is available to assist you with these changes if needed.

CMS has finalized new health and safety requirements for hospitals and CAHs providing obstetrical services, which set baseline standards for the organiza-



tion, staffing, and delivery of care within obstetrical units, update the quality assessment and performance improvement (QAPI) program, and require staff training on evidence-based maternal health practices.

Read the [CMS press release on policies to reduce maternal mortality, increase access to care, and advance health equity](#).

The American Hospital Association (AHA) published a [statement](#) expressing concern that CMS' approach may "inadvertently reduce access to

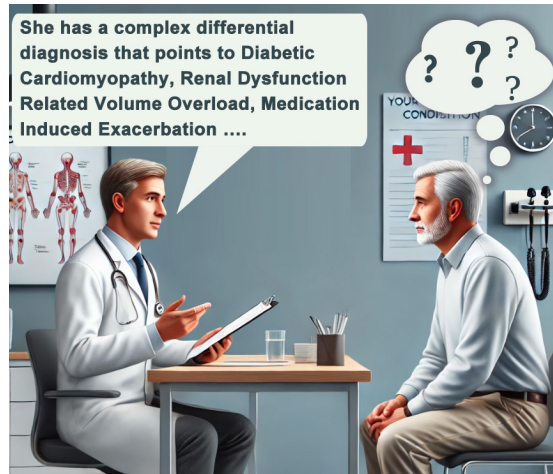
maternal care."

MMIC offers policy premium discounts for hospitals that successfully participate in our Safe Care: Obstetrics program. For more information, contact your MMIC Risk Manager.

*This article falls under **Legal/Regulatory** in the Enterprise Risk Management (ERM) risk domains.*

Risk within this domain incorporates the failure to identify, manage and monitor legal, regulatory, and statutory mandates on a local, state and federal level. Such risks are generally associated with fraud and abuse, licensure, accreditation, product liability, management liability, Centers for Medicare and Medicaid Services (CMS) Conditions of Participation (CoPs) and Conditions for Coverage (CfC), as well as issues related to intellectual property.

Is Health Literacy a Risk Management Concern?



Health literacy is not a new topic in healthcare. But is it a common topic that is discussed and integrated into the actions of your local risk management team?

Despite being a central focus of the [Healthy People 2030 Objectives](#), the [CDC](#), [AHRQ](#), and other leading health organizations, health literacy has not been a common focus found in many risk management plans. High-risk events that can lead to claims, such as informed consent issues, medica-

tion management events, management of chronic conditions, and discharge activities, all have health literacy implications. Identifying and implementing health literacy risk recommendations, such as implementing [plain language](#) for all patient-facing materials and conducting a risk analysis of your organization using [AHRQ's Ten Attributes of Health Literate Health Care Organizations](#) as a framework for identifying opportunities for improvement could create a significant impact in mitigating your patient safety events.

Medical Mutual has a [practice tip for Health Literacy](#) to help you. Please don't hesitate to reach out to your assigned risk manager for further assistance or call the Medical Mutual Risk Management Department directly at 1-800-942-2791.

*This article falls under **Clinical/Patient Safety** in the Enterprise Risk Management (ERM) risk domains.*

Risks associated with the delivery of care to patients, residents and other health care customers. Clinical risks include: failure to follow evidence based practice, medication errors, hospital acquired conditions (HAC), serious safety events (SSE), health care equity, opportunities to improve safety within the care environments, and others.

Depression Is a Risk Factor for Falls Among Nursing Home Residents, Study Finds

What are you considering in your risk factors for your residents when evaluating them for their safety concerns? Are you including depression? According to a report published, depression should be considered in your assessment of your residents.

A clinical daily news article by McKnight's released December 9 titled [Depression is a risk factor for falls among nursing home residents, study finds](#). The article outlines the report that reviewed seven studies published in seven countries. Results showed that depressive symptoms and falls among older adults were common in nursing homes. According to the article, older adults with depression can have a higher risk of falling due to behavioral, neuromuscular, or pathological pathways. Depressed residents may be less active, which can also lead to those falls.



The full report and research, [Relationship Between Depression and Falls Among Nursing Home Residents: Integrative Review](#), is available from the Interactive Journal of Medical Research.

Medical Mutual offers a comprehensive [practice tip on falls prevention and reducing fall-related injuries](#). Explore the guide for actionable insights.

*This article falls under **Operational** in the Enterprise Risk Management (ERM) risk domains.*

The business of health care is the delivery of care that is safe, timely, effective, efficient, and patient-centered within diverse populations. Operational risks relate to those risks resulting from inadequate or failed internal processes, or systems that affect business operations. Examples include risks related to: adverse event management, credentialing and staffing, documentation, chain of command, lack of internal controls, supply chain and identification of existing opportunities within management oversight.

Unintentional Medication Discrepancies at Care Transitions Leads to Patient Harm and Increased ED Visits

Ineffective medication reconciliation processes can pose significant risks, particularly in older patients with critical illnesses. Transitions in care continue to be problematic across care settings.

A recent study published in [BMC Geriatrics](#) demonstrates “a substantial prevalence of unintentional medication discrepancies among critically ill older adults during care transitions, significantly increasing the risk of ED visits within a month of discharge. The findings highlight the crucial need for systematic identification and management of medication discrepancies throughout the care transition process to enhance patient safety.”



Medication reconciliation failure can harm patients, leading to professional liability actions, [as illustrated in our Case Study, Failure of Medication Reconciliation Process](#).

For more information, [review our practice tip, Medication Safety in the Office Practice](#).

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Guidance Aims to Reduce Delirium in Older Adults After Surgery



The American Society of Anesthesiologists (ASA) will release a new practice advisory in 2025 for older adults scheduled for inpatient surgeries surrounding the cognitive and other complications of anesthesia common in older patients.

The ASA newsroom released a press release [Recommendations May Help Reduce Delirium in Older Patients Having Surgery](#) regarding the new 2025 practice advisory that focuses on care preoperatively, intraoperatively, and postoperatively. The advisory is focused on

patients 65 and older who are more at risk of developing delirium after surgery.

Read the [2025 American Society of Anesthesiologists Practice Advisory on Perioperative Care for Older Adults Undergoing Inpatient Surgery](#)

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ECRI's 2025 Top 10 Health Technology Hazards List

ECRI, a nonprofit organization that works to improve the safety, quality, and cost-effectiveness of healthcare delivery, has released its annual Top 10 list that highlights health technology hazards in healthcare facilities. Which hazard do you think earned the #1 spot?

Each year, ECRI releases a Top 10 list of hazards that deserve attention from risk management and patient safety professionals in order to keep their patients and organizations safe. For 2025, the top hazard was identified as risks with AI-enabled health technologies. Other topics covered include technology use at home, vendor technology, cybersecurity, fire risks with oxygen, and more. Even if you are not a subscriber of ECRI, they offer open access to their Executive Brief, which outlines the entire top 10 list along with practical recommendations for mitigating each risk/hazard listed. Download your copy of the [Top 10 Health Technology Hazards for 2025, Executive Brief](#).



MMIC offers a practice tip to help navigate AI in healthcare safely: [Artificial Intelligence in Healthcare](#)

*This article falls under **Technology** in the Enterprise Risk Management (ERM) risk domains.*

This domain covers machines, hardware, equipment, devices, wearable technologies and tools, but can also include techniques, systems and methods of organization. Health care has seen an escalation in the use of technology for clinical diagnosis and treatment, training and education, information storage and retrieval, and asset preservation. Examples also include Electronic Health Records (EHR) and Meaningful Use, financial and billing systems, social media and cyber security; cyber risks can be significant.