COMMUNIQUÉ

I cannot believe this is my last article as president of Missouri MGMA and what a ride it has been. We had a fantastic year with our quarterly connections, monthly webinars, Friday focus questions and last but not least our annual conference in May.

Speaking of the conference what an experience that was. Greg and his conference planning committee hit it out of the park with the level of education the conference offered. It was amazing to meet all the first time attendees and catch up with those of you who come year in and year out. A special thank you to our business partners and exhibitors at the conference as their contributions is the reason we are able to have such a great conference event.

I am excited about the next chapter in my Missouri MGMA life in the role of past president. I want to personally thank every board member past and present as well as each and every one of you for allowing me to serve as your president and for making me feel so welcomed.

As always the entire board of directors are here for you if you ever need anything or have any questions. Please feel free to reach out anytime.

Travis Messer, MHA
President, Missouri MGMA
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Enhance patient satisfaction by reducing high costs and long wait times common to many prescriptions

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May 10-12, 2023
Doubletree Hilton Hotel
St. Louis - Chesterfield

MO MGMA 2023 Conference

SWING FOR the FENCES

Achieving Excellence in Healthcare Management

What an All-Star Spring Conference we had! I want to personally thank each and everyone of the attendees, vendors, and volunteers that made the conference last month a huge success. I am humbled by everyone's willingness to participate in the conference, visit with the sponsors and vendors, and network with their colleagues with welcoming open arms.

The speakers knocked it out of the park. The rest of the board and I received so many compliments on the quality of the speakers and the messages that they had to convey to our attendees. The vendors were very thankful for everyone's genuine participation, and I hope all of those that attended learned valuable lessons for themselves and their practices while also having fun swinging for the fences. I extended my stay at the hotel so that my kids could enjoy coming up to Chesterfield on Friday after school. They had a blast doing twists into the pool that evening, taking unending hot water showers, and then snuggling in the comfortable fluffy hotel beds. Fun was had by all and I had time to reflect on all the good things that had happened that week for me, my family, and MO MGMA.

It has been a great year for MO MGMA. I look forward to being your President for this upcoming term. I am honored to continue leading this organization into the future and I want you to know that I am always available for you if you have ideas, questions, or concerns. I welcome the feedback or if you just want to drop a line and say hello.

Take care and have a wonderful Summer wherever it takes you!

Greg Thompson, MBA
President-Elect and Conference Chair
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**Missouri MGMA gratefully acknowledges
the following companies for their sponsorship of our
2023 Annual Conference**
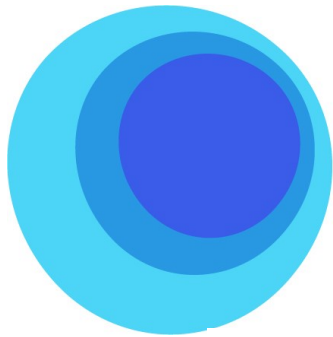
2023 ANNUAL CONFERENCE

2023 ANNUAL CONFERENCE

ACMPE Corner

What a wonderful conference we had in St Louis! The speakers were phenomenal and there were so many great takeaways.

Several were able to take advantage of the ACMPE workshop and mock exam. I am excited to hear the great reports from those who are preparing to take the exams soon.

Even though the conference is behind us, I am still available to help you prepare for credentialing as a Certified Medical Practice Executive (CMPE) or advance to Fellow in the American College of Medical Practice Executives (FACMPE).

Let me know what questions you have and how I can help you.

Professional Enrichment Award (ACMPE)

Congratulations to our scholarship winners, Melissa Smith and Katie Pieper. Melissa and Katie were recognized at our Annual Conference. Scholarships are awarded to Active Members who are pursuing certification or fellowship through the American College of Medical Practice Executives (ACMPE). This award is available on a quarterly basis and selected applicants can receive the award one time while pursuing certification and one time while pursuing Fellowship. Apply today!

(pictured above: Melissa Smith, Travis Messer, Katie Pieper)

IF NOT YOU …. WHO?

IF NOT NOW …. WHEN?

Contact me and let's get started today!

Kathie Huttegger, FACMPE
MO MGMA Forum Representative
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I hope everyone had a nice Memorial Day weekend reflecting on those men and women who have so bravely served our country. Summer is on the horizon! Please see below for some important regulatory updates.

National Policy Updates

MGMA shared their recent key advocacy efforts, all in support for:

- S. 1302 – the Resident Physician Shortage Reduction Act

- H.R. 2377 – the Saving Access to Laboratory Services Act
- Modifications to prior authorization programs, particularly with UHC
- The need for legislation to address physician workforce challenges

MGMA is also monitoring the government's debt ceiling and concerns over the U.S. defaulting on its obligations which could lead to delays in reimbursement for Medicare and Medicaid charges and premium hikes for ACA members.

Reminder... consider registering for the 2023 MGMA Summit: Moving Healthcare Forward event coming up June 6-8th!

Missouri's Sen. Josh Hawley filed S. 1560, the Rural Hospital Cybersecurity Enhancement Act, to address rural facilities being targets of cyber-attacks.

HHS is seeking comments through June 20th for their proposed rule changes to the 21st Century Cures Act:

- Electronic Health Record Reporting Program implementation

- Regulations on information blocking

- Revising Certification Program criteria as well as the standards and specifications of the program

- Adoption of USCDI Version 3

State Policy Update

A big shout out to the Missouri Foundation for Health for always providing excellent updates and helping to synthesize state information. If interested, consider subscribing to MFH's email updates using this form. You can also monitor bill progress here.

State Policy Updates continued

The Missouri General Assembly has 59 TAFP (truly agreed upon and finally passed) bills that await further action – 26 are from the House and 33 are from the Senate. Parson has until mid-July to approve or veto with new laws going into effect at the end of August. The veto session is scheduled for September 13th.

Of note are the following bills affecting healthcare:

Senate Bill 49 – prohibits gender transforming surgeries to minors

Senate Omnibus Bill 70 – professional licensing bill
- Establishes the Health Professional Loan Repayment Program under DHSS
- Creates the Health Professional Loan Incentive Fund for DHSS use
- Nursing Education Incentive Program eliminated the grant limit and will allow virtual education options to be included
- State Board of Nursing to collect a surcharge for the Nursing Education Incentive Program
- Prescription labeling now only requires prescriber name
- Licensure reciprocity to adopt interstate compacts
- Fentanyl testing no longer unlawful
- Expands opioid overdose treatment options for first responders
- Creates a collaborative practice agreement between physicians and PAs for Schedule II controlled substances

Senate Omnibus Bill 139 – designation bill
- Breast Cancer Awareness Day is the 1st Saturday in October
- Domestic Violence Awareness Day is the 3rd Saturday in October

Senate Omnibus Bill 157 – professional licensing bill
- Pharmacists can now order and administer FDA approved vaccines
- Health professional loans and grants establishing a Medical Residency Grant Program
- Many other key pieces of legislation like Bill 70 above

House Bill 417 – incentivizes citizens to gain additional employment skills
- Medical Residency Grant Program (same as 157 above)
- Nursing Education Incentive Program (same as 70 above)
- Creates the Upskill Credential Training Fund which includes health care training

Senate Bills 45 and 90 – Medicaid expansion
- Extends coverage for postpartum women to one year

As always, if you have any questions or thoughts on future topics, please don't hesitate to reach out.

Ashley Sipes

MO MGMA Legislative Liaison

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MGMA STATE AFFILIATE

JUNE WEBINAR
OPTIMIZING PRACTICE OPERATIONS

Presented by:
MICHAEL CASH, MHSA, FACMPE
Senior Medical Practice Consultant, SVMIC

13 JUNE 2023

1:00 PM EASTERN
12:00 PM CENTRAL
11:00 AM MOUNTAIN
10:00 AM PACIFIC

Eligible for 1.0 ACMPE credit

ABOUT THE WEBINAR:

This presentation covers medical practice operations and change management. It discusses ways practices can leverage technology to improve efficiency and the patient experience. Additionally, it covers considerations for the establishing and ending the patient physician relationship, medical records, service animals and facility management. Objectives: • Discuss evaluating practice operations and change management • Discuss technology tool to enhance efficiencies • Review medical records issues and the patient physician relationship • Discuss service animal guidelines • Review facilities issues

ABOUT THE SPEAKER:

Michael Cash, MHSA, FACMPE – Senior Medical Practice Consultant Michael is a Senior Medical Practice Consultant. He is from Hot Springs, AR. He graduated from the University of Central Arkansas with a Bachelor of Science degree and from the University of Arkansas at Little Rock with a Master's Degree in Health Services Administration. He completed an Administrative Fellowship at Staten Island University Hospital. Prior to joining SVMIC in 2016, Michael worked for Washington Regional Medical Center in Fayetteville, AR as the Director of Clinic Operations. Michael also worked for an independent physician group, Medical Associates of NWA (MANA), and performed duties as an Analyst, Clinic Director, and Radiology Director. Michael is a Fellow in the American College of Medical Practice Executives and a Past President of the Arkansas Medical Group Management Association.

MO MGMA webinars are approved for 1.0 CE credit hour of LIVE learning from MGMA state for those attending the live session.

Effective Financial Management to Guide Your Practice Through Uncertain Times

By Janet Boos, Vice President & General Manager
Veradigm (formerly Allscripts)

Current financial times are extremely challenging for today's healthcare practices. They face increasing difficulties with staff recruitment and retention, rising overhead costs, and patients who are having greater difficulties paying. Staff shortages mean Accounts Receivable (AR) often increases with fewer people to check eligibility, process claims, and manage denials. The resulting work backlog can easily overwhelm your staff.

The growing list of challenges can leave a practice floundering for answers—but that doesn't have to be the case. Keep reading for some best practices to help your organization deal more effectively with uncertain financial times—best practices to help you to maximize practice efficiency and create a clear plan for effective financial management.

Best Practice #1: Maximize efficiency

Your first best practice is to maximize practice efficiency where possible. One key strategy is to optimize provider schedules. With flexible scheduling options, practices can prioritize appointment types, reduce no-shows and last-minute cancellations, and make sure providers stay the right kind of busy.

You can also maximize efficiency by evaluating practice workflows: Make sure you are using a single, integrated platform to handle both clinical and financial practice data. For instance, it's critical for all your billing to be handled through a system directly integrated with your Practice Management (PM) and electronic health record (EHR) systems. Otherwise, staff will need to double-enter data, decreasing efficiency and introducing opportunities for error.

Using a single solution, such as Veradigm Practice Management, to handle all workflow steps reduces costs and increases operational efficiency. Veradigm PM can help you boost practice productivity by handling scheduling, collections, claims, and denials management with a single solution. Its integrated medical billing system automatically verifies eligibility. Integration with the EHR allows you to easily create "superbills" that automatically pull information directly from patients' chart notes, reducing double data entry and increasing accuracy. Veradigm PM can also help minimize errors and increase efficiency with automated, customized claims management workflows, which enable you to review and resolve claims before submission.

Veradigm PM and Revenue Cycle Services (RCS) can also help you automate workflows to improve resource productivity. Office staff can automate processes such as claim processing, statement generation, and collection letters, which can significantly reduce their manual work.

Best Practice #2: Benchmark productivity

Another best practice is benchmarking your staff's productivity. The benchmarking process allows you to evaluate whether your practice is doing well and, if not, helps you identify areas for improvement.

Successful benchmarking has several key components:

1.Standardize workflows

Before you can identify specific measures to track, evaluate, and potentially improve, you must first standardize how your staff operates. You can compare their efforts only when staff members use the same workflows.

2. Measure key performance areas

Next, you need to identify and track data that can help you evaluate your staff's performance, such as:

1. Days charges spend in AR
2. Charge lags
3. Number of payments posted in a day

If your existing PM system does not already provide the data you need, you may need to request analytics from your vendor. You need the ability to observe trends in your staff's performance to identify what processes are working and what are not; then, you need to incorporate some sort of feedback loop to integrate improvements.

3. Identify suitable benchmarks

Successful benchmarking also requires "benchmark data" from an independent source for comparison. This data needs to be something besides your previous performance; you don't simply want to measure yourself against how you were doing last month or last year. You want to measure yourself against your theoretical best performance.

Benchmarking data can be sourced from specific professional organizations, such as the American Orthopaedic Association or the American Academy of Pediatrics, or a broader type of organization, such as the Medical Group Management Association (MGMA).

The end goal is to use this data, alongside data collected from your practice, to increase visibility into your practice's performance.

Best Practice #3: Manage payer contracts

Another key best practice is ensuring you have all your payers' most recent contracts—and then putting that data to use.

You start by uploading payers' current fee schedules and contractual allowables into your PM platform. This enables you to track deviations when processing claims payments. Although you can write off small amounts, more significant deviations should go into a queue for follow-up and adjudication.

With Veradigm PM, integrated analytics enable you to evaluate other aspects of your payer contracts as well. For instance, what utilization are you getting for your managed care contracts? Managed care contracts provide your practice with fixed monthly payments. Analytics enable you to answer the question of the value of services you deliver for those contracts. You can evaluate how well you are being paid for different contracts with respect to how much each payer is utilizing your services.

Best Practice #4: Effective denial management

Implementing effective denial management strategies will help you resolve existing denials and prevent future denials. These include:

1. Get ERAs (electronic remit advice) electronically

Your first step for effective denial management is to try to get 80% to 90% of your ERAs electronically. An ERA is the health plan's explanation of claim payments, reporting reasons for each adjustment and the value of each adjustment. Contact payers who are still providing ERAs in paper form to see what it would take to convert to electronic.

This is a critical step because electronic posting is essential for effective denial management. ERAs for denials include reason codes, amounts, and Group Codes, which assign financial responsibility for the unpaid portions of claim balances. For example, the CO (Contractual Obligation) Group Code assigns responsibility to the provider; PR (Patient Responsibility) assigns responsibility to the patient. Once you identify those with the CO code, you can post those contractual adjustments to your system and use analytics to categorize them.

2. Categorize denials & create feedback loops

Categorizing the different types of denials is crucial because it enables you to pinpoint the practice areas—such as the front desk, eligibility, providers, or coders—responsible for those denials. For instance, once you identify denials caused by incorrect coding, you can return them to the physician or their coder for corrections.

If you don't categorize denials, they are usually addressed via a less efficient process: The billing office receives a denial, takes the time and energy (and associated cost) to rework and resubmit it, and the

denial's original source is never addressed. Without a feedback loop to prevent the issue's recurrence, the same error appears the next month, the month after, and so on. Each denial is reworked at a cost of $20 per iteration without ever being corrected.

By categorizing denials and using root-cause analysis, you can create feedback loops and initiate process improvements. This enables you to decrease denials and process cleaner claims, helping ensure faster payments and a more seamless cash flow.

Integrated end-to-end solutions from Veradigm can help your practice to harness the best practices mentioned above. Reach out today to speak with a Veradigm Account Executive to learn more about how Veradigm's solutions can help you meet your practice's goals; or download a graphic to optimize your revenue cycle process!

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