

DR. KNOW

We won't change the way you do billing...we'll change the way you do business!

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You can view past issues of this newsletter on our website.

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CMS REJECTIONS

No More Corrections

The Centers for Medicare & Medicaid Services (CMS) says that as of 9-3-07, they will no longer correct billing or pay-to-provider information when billed by group practices.

This may lead to a large increase in denials

In the past, CMS would let you know via the EOMB that a HIC number, name, etc., was incorrect with ANSI denial codes, but continue to process the claim for payment.

On a similar note, when the NPI numbers were required as of 9-1-07, CMS experienced an issue with their computer system. The crosswalk for the legacy numbers and the NPI's was not working. This created a delay in payments. This delay took about five weeks to correct. Physicians received large Medicare checks recently and we hope the problem is permanently resolved.

INTERSTING TIDBITS

New Column

According to the Collection Bureau of America:

*The 6.1% average increase in employer-sponsored health insurance this year was the slowest rate of premium growth since 1999, when premiums rose 5.3%.

*Since 1970 healthcare spending per capita has grown from \$356 per person to \$6,697 in 2005. In this less than 40-year span healthcare has grown from consuming 7.2% of the Gross Domestic Product in 1970 to 16.0% in 2005.

*According to the U.S. Bankruptcy Courts, 6,705 businesses declared bankruptcy in the second quarter of 2007.

*The national foreclosure rate for July totaled 1 foreclosure filing for every 693 households, and 43 states experienced year-over-year increases.

TAMPER PROOF Rx PADS

Required as of 4-1-08

All Rx's handwritten or computer generated that are paid for by Medicaid are **required** to have three items on them as of the above date:

- *One or more industry-recognized feature designated to prevent unauthorized copying of a completed or blank Rx form
- *One or more industry-recognized feature designed to prevent the erasure or modification of information written on the Rx by the prescriber
- *One or more industry-recognized feature designed to prevent the use of counterfeit Rx forms.

Ask your Rx form vendor about these new requirements.

(NOTE: The original required date for this was 10-1-07, it has been extended to 4-1-08.)

AMA & WMS AT WORK FOR YOU

To the Tune of \$7 Million

According to an article in the Wisconsin Medical Society – Medigram, more than 900,000 physicians nationwide were represented by the AMA, state and county medical societies and other medical groups in the class action lawsuit against the for-profit insurance health plans of CIGNA, Aetna and BC Wellpoint. The suit involved civil violations of federal anti-racketeering laws.

For more details go to:

www.hmosettlements.com

HERE'S AN EMR IDEA

Check It Out Right Away

Recently, a Plexus client asked us to sit in on a demo for an EMR product that he found through his national association. It was a wonderful product that was web based and so easy to use. It was a little pricey, but it had a built-in fee allowance for the electronic tablet and after figures were crunched it was determined that the ROI was 10 months.

Please consider including Plexus in your demos and EMR purchases, this way we can learn your system and download chart notes whenever they are required by an insurance carrier or an attorney ourselves - no bother to your staff.

Checking with your state or federal specialty association is a great source for recommended products.

PLEXUS HOLIDAY SCHEDULES

Thanksgiving, Christmas & New Year's

Plexus will be closed on Thursday and Friday, November 22 and 23, 2007 for the Thanksgiving holiday.

We will be closed Monday and Tuesday, December 24 and 25, 2007 for the Christmas holiday.

For New Year's we will be closed both Monday and Tuesday, December 31, 2007 and January 1, 2008.

Have a great Holiday Season!