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Letter from the President



Brad Carney, CMPE, CPC
President, MGMA-MO

Memories. Maybe I'm a bit of a romantic, a dreamer. There are times I just like to reminisce about past experiences, past stories. I very distinctly remember sitting in Mrs. Carr's 3rd grade class in the late 1960's, something was said about the year 2000 and my immediate thought was I'll never live to see that! In my teens we went on a family canoe trip on the Current River, swollen from heavy rains. I'll never forget while helping hold a rope for the occupants to get out of the water, watching that water bend a canoe in half like it was a piece of paper. Then there was that evening at barbershop chorus practice in 1990 when my brother, Randy, announced that my wife and I just had a baby son, and we didn't even know Debbie was pregnant. He didn't bother to tell them we had gotten the call we had been chosen as adoptive parents.

Of course, there are the less pleasant memories, too. I had just finished my second semester at School of the Ozarks and spent the night with my grandparents. It was the morning of December 20, 1980 when Grandpa

Carney collapsed. I fell back to my CPR training from boy scouts, but there was nothing that could be done. Exactly one week before our wedding, too. He always liked to argue for fun and my wife still says he did it on purpose. And even though it was then that I knew I wanted to be in a position to help people there was a long path ahead of me.

Changes. The wedding was December 27th, 1980, the first of many changes over my lifetime. My college major changed from math to religion before I dropped out only to finish 15 years later with a business administration degree. I sat by helplessly and confused a few years later when my bride was diagnosed with diabetes. We both felt even more helpless when our 3-month old son had to have surgery, one that changed his life dramatically. He finally started gaining weight and would go on to be father to our only two grandsons (the only two for now anyway).

The career path changed from electrical work to retail management. Retail management led us from our home in Gladstone, MO to Des Moines, IA and back to Gladstone. When that company closed its doors forever I moved into a non-profit accounting position. That, in turn, led me to an accounts payable/accounts receivable position in a small internal medicine office. That's when things started changing real fast!!

continued on page 2

Letter from the President

Lessons. To say I've learned a lot in my lifetime would be an understatement. One of the biggest things I've learned is how much I don't know. Let me break down some of these experiences and, just maybe, you can glean something from my learning. From the memory of 3rd grade and the memory of the last time I saw my grandfather alive, you never know how long you will live. Nor do you know how long your loved ones will live. Cherish every moment. From the canoeing experience, always help others when you get a chance. It was some 30 years later visiting with some church friends that we pieced together they were on the other end of the rope. From a combination of the canoeing experience and my grandfather's death, always be aware of your surroundings. You never know when you will be called to execute your skills and training, or even just your gut instinct. Oh, and never be surprised at what someone else might say, especially my brother, Randy.

Heraclitus of Ephesus, a half a century before the common era asserted "Life is Flux." Without getting too deep into philosophy, his idea was the only constant in life is change. Marriage changed my life. The birth of both of my sons changed my life. Surgery dramatically changed my older son's life. Disease changed my wife's and my life. Yet, from each and every major change (and most minor ones) the outcome has included valuable lessons.

One other thought – change, even just the prospect of change – can also bring hope. We all need hope, something to which we can look forward, something for which we can strive. And I have high hopes for Missouri MGMA this year. By the time you read this we will have concluded our first meeting of the new fiscal year. I hope and plan to learn from Sharon Sagarra MBA FACMPE, our immediate past president. Ashley Petty, our president-elect, is filling the role of Master of Ceremonies for our 2019 spring conference, Ringmasters in Healthcare. Kyle Adkins CMPE has stepped into the role of treasurer. I want to welcome Daun Hills

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to the board in her leadership role as secretary.

And finally, if I may quote our own Sharon Sagarra from her article this same time last year: "Change – for better or worst – is part of our daily lives and despite how frustrating healthcare may get, knowing your Physicians, your staff, your practice is making a difference in the patients' lives makes it all worthwhile."

Brad Carney, CMPE
President, MGMA-Missouri
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MGMA-MO 2018 Spring Conference

Ringmasters in Healthcare

April 10-12, 2019

I have a friend that often uses the phrase, “Not my circus, not my monkeys.” However, when I think of all the demands of my office and making sure everything is running as it should, some days I feel as if it is a circus and these are definitely my monkeys. I’m sure most of us feel this way at some time during our career. We feel as if we are juggling all the demands of our jobs, all while trying to have a personal life and find some sort of balance.

There are so many different rings to healthcare. Much like a three ring circus, everything is happening all at once. Which “ring” do you focus on? Which item on your agenda is the most important? Maybe it’s CQR or balancing the budget. And while trying to keep your head above the paperwork you have employees that need to feel appreciated and valued. I’m not sure about everyone else but working on my leadership skills always seems to be an important ring of the circus. I feel like good leadership skills and becoming a “ringmaster” could be what keeps the three ring circus from becoming total chaos.

I would like everyone to think about the times in your career you felt like you were running a circus. How did you juggle the chaos? What techniques did you use to manage your time? These are a couple of questions and more I hope to answer at the spring conference in April. At the conference we will have so much time to collaborate and learn from each other. We will also have excellent educational opportunities. I am excited to introduce our 2019 Conference Planning Committee:

Brad Carney, CMPE
President, MGMA MO

Sharon Sagarra, MBA, FACMPE
Immediate Past President, MGMA MO

Kyle Adkins, CMPE
Treasurer, MGMA MO

Daun Hills
Secretary, MGMA MO

Beth Castens, MHA, CMPE
Cox Health, Springfield

Samantha Heydt, RN
Pediatric Associates of SWMO, Joplin

Mathew Rigdon
Cape Girardeau Surgical Clinic, Cape Girardeau

Amy Earp
SNC Squared, Joplin

Joseph Keane
Keane Insurance Group, St. Louis



Telemedicine Benefits and Risks

The healthcare landscape has changed radically in recent years. Implementation of the Affordable Care Act, expanding roles for nurse practitioners and physician assistants, meaningful use, and ICD-10 implementation are just the highlights. But one change that often gets overlooked is the rapid expansion of telemedicine—"the ability to provide interactive healthcare utilizing modern technology and telecommunications." Telemedicine includes interactive video, home monitoring devices, scanning and emailing photos, and myriad other ways physicians and patients can communicate without a face-to-face interaction.

Drivers

Several factors are driving the telemedicine explosion, including

- Convenience—a patient can sit in their living room and consult with a dermatologist who can view the problem area. A cardiologist can review monitor readings from their office while the patient is at home. Diabetics can check blood sugar levels and upload the results for their physicians to monitor.
- Cost savings—telemedicine allows physicians to consult with more patients within a shorter timeframe. This increases revenue for the physician, saves patients money on travel expenses, and decreases patients' time away from work and family.
- Efficiency—images and documents can be sent electronically. The consulting physician can then conduct an electronic visit with the patient. This decreases the potential for noncompliance (especially with regard to specialist follow-ups), saves time, and increases physician-to-physician collaboration.

Drawbacks

While technological advances have helped advance telemedicine, technological failures can be one of its biggest drawbacks. Networks are subject to interruptions, delays, system overloads, or other technical difficulties. Because telemedicine is wholly dependent on working technology, its effectiveness is severely hampered when technology fails.

Privacy, security, and confidentiality are other potential problems. Even when healthcare providers take necessary security precautions, hackers may still access

electronic communications—and HIPAA extends to the patient's living room. It's important to take necessary precautions to ensure telecommunications are as protected as possible. Use encrypted emails, consult with cyber-security experts when setting up your telemedicine practice, and develop a well-written consent form that addresses the risk factors of telemedicine.



It also is important not to overlook physical interactions between physicians and patients. Sometimes patients need a physical exam for an effective diagnosis (e.g. broken bones). Seeing patients in person helps establish a trusting, cooperative relationship that may be challenging to build electronically. Both parties may be more engaged if conversations are conducted in-person. This may be less of an issue if you only use telemedicine for established patients. It is still a good idea to suggest an annual in-office examination.

Mobile Apps

Mobile app use is booming. According to one estimate, the global mhealth market was valued at \$13.6 billion in 2015, with an expected compounded annual growth rate of 34% over the next six years. The implications are equally enormous.

Mobile apps can be used for anything from monitoring patients remotely to facilitating physician/patient communication. A brief review of cardiology related mobile



Telemedicine Benefits and Risks, continued

apps revealed several that allow physicians to demonstrate, illustrate, or show videos to patients to help explain certain conditions. Mobile apps also can provide decision support for physicians or help with diagnoses.

Dermatology apps can help patients track moles and other skin lesions to document changes. One app, developed by University of Michigan physicians, includes a skin cancer risk calculator. Another dermatology app claims to be 70% accurate in predicting the severity of a mole; dermatologists are about 85% accurate according to the same article.

Risk Management Considerations

Increased availability and real-time data are key telemedicine benefits. But while these two factors seem to foster patient/physician communication and nurture that relationship, they also may increase your risk exposure.

If you offer electronic availability to your patients, consider how it could negatively impact you when something doesn't go as planned for a patient. A plaintiff's attorney could present to a jury your claim to be available, and then state the patient didn't receive the type of response promised. The attorney could assert your failure to be immediately available directly led to the

patient's negative outcome.

Real-time data also can present challenges. On one hand, it may increase your effectiveness as a health-care provider. However, it also can create professional liabilities, particularly in the event of a claim. Consider: If you receive real-time blood sugar results from a patient and fail to notice a large spike or depression, could you be held liable for a negative outcome? A juror might look at this information and ask, "Why didn't the doctor notice this sooner?"

These examples highlight the importance of full disclosure and informed consent when it comes to telemedicine. It is important patients and healthcare providers are aware of both the advantages and limitations telemedicine presents.

You also may wish to consult with your insurance agent to determine if your current policy covers internet-based services.

- Jeremy A. Wale, JD, ProAssurance Risk Resource Advisor

Mr. Wale is a licensed attorney in Michigan where he works as a Risk Resource Advisor for ProAssurance. He has authored numerous articles about mitigating medical professional liability risk. Mr. Wale also conducts loss prevention seminars to educate physicians about new and emerging risks.



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<https://nwmomgma.wildapricot.org/event-2718979>



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ACMPE Update

The school year is about to begin, grade school, high school and college, each level of school will start classes in August. While, becoming a Certified Medical Practice Executive is not tied directly to school starting, school starting is a reminder on how fast the clock is ticking for the certification process within MGMA. Over the past year, I have highlighted the changes that are in store for the certification and fellowship process.

Have you thought about becoming a Certified Medical Practice Executive (CMPE) or pursuing your Fellowship in the American College of Medical Practice Executives (FACMPE), well there is no time like the present to begin the journey?

The Certified Medical Practice Executive (CMPE) credential expands upon your expertise and brings greater recognition from physicians, executives, industry professionals and peers.

The credential covers six areas of expertise that apply to practice management:

- *Operations management*
- *Financial management*
- *Human resource management*
- *Risk and compliance management*
- *Organizational governance*
- *Patient-centered care*

Enhance your business of care recognition and apply for CMPE today.

Qualifications: To apply for board certification and work toward obtaining the CMPE credential, you must:

- Be a current MGMA member at a National Level
- Pay a one-time \$250 application fee
- Submit your completed application form, along with documentation of two years of healthcare management experience, including at least six months in a supervisory role.

On the MGMA Missouri website are many of the reminders and sample questions to help you prepare for certification. The changes for certification are as follows:

For Nominees:

If YOU do **NOT** hold a bachelor's degree or have 120 college credit hours by December 31, 2018 they will need to:

- **Complete and pass** both examinations by the **December 1-15** exam cycle.
- **Log all 50 hours of continuing education (CE)** hours under the current CE requirements, starting 30 days prior to their acceptance date. **If your exams are passed, you will receive a 6 months extension to complete your 50 hours by June 31, 2019 under the 2019 continuing education requirements.**

If you **have** a bachelor's degree, 120 college credits or are currently in the process of completing your degree, you will remain as a nominee and will need to begin working toward the following starting on January 1, 2019:

- Earn your CMPE credential within three years. If accepted before January 1, 2019, you will have until December 31, 2021 to complete the program.
- Log 50 hours of CE credit under the new 2019 CE requirements.



**David A. Kelch,
MBA, FACMPE**

ACMPE Update, continued

For CMPE's pursuing Fellowship:

If you **do NOT hold a bachelor's degree** by December 31, 2018 you will need to:

- Receive approval on a business plan proposal or paper outline AND **submit a final business plan or manuscript by December 31, 2018.**

If you have a bachelor's degree AND seven years of healthcare management AND two years in a leadership role; OR you have a master's degree with five years management, AND two years in a leadership role, you will need to begin work on the following starting January 1, 2019:

- **Complete Fellowship within two years of your application date.** If accepted before January 1, 2019, you will have until December 31, 2020 to complete.
- If you have a paper outline submitted and accepted prior to January 1, 2019, you may continue working on your paper manuscript up until two years from their outline approval date. Starting in 2019, business plan submissions will be the only acceptable submission if no outline is previously accepted.
- Log 50 hours of continuing education (CE) every three years following the new 2019 CE requirements. These CE requirements also apply to maintain their current CMPE credential in 2019.

The time is now. There are two more testing sessions open in 2018.

Testing sessions

Sept. 8-22, 2018
Dec. 1-15, 2018

Exam Registration

July 23- Aug. 7, 2018
Oct. 22- Nov. 6, 2018

If you have any questions at all, please feel free to call or email me with your question. If I don't know the answer, we will find out an answer to your question together.

- David A. Kelch, MBA, FACMPE
MGMA-MO ACMPE Forum Representative
david.a.kelch@gmail.com

Welcome New Members

Encourage your colleagues to become members of MGMA-Missouri. They will reap the benefits of education, valuable networking, and learn about many issues dealing with practice management, legislation, and professional growth. To obtain a membership application, call the MGMA-MO office at (573) 556-6111, or sign up for membership on-line at www.mgma-mo.org.

MGMA-Missouri Membership Figures for August 2018

MEMBERSHIP REPORT

Active - 63
Business Partner - 41
Associate - 6
Faculty/Student - 4
Life - 2

Total Membership - 343

Active Member

Tim Kimball
Burton Creek Rural Clinic
West Plains

Stacy Loomis
Midwest Nephrology
Saint Peters

Allison Rhodes
Mercy Clinic
Joplin

Business Partner Member

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