

# COMMUNIQUE

June/July 2021



Wow, what a conference! I have heard so many good things from vendors and participants alike since our Branson conference as we were all so thankful to be together again! Thank you for joining us, if you were able to, and either way I hope you are able to join us next May in Branson again for another great conference. Daun Hills, and the conference planning committee, did a great job of kicking off her presidential year with her theme of “Riding the Waves of Healthcare”! The topics were timely and the networking was just what my team and I needed to recharge us for another year of the changes (waves) ahead and I hope you felt the same. Hats off to Daun and her team for such a well-organized and relevant conference.

As Daun gets ready to take over as president of MO MGMA, and I prepare to step into Ashley’s past-president role, I’d like to reflect a bit and offer some personal challenges to you. First, I’d like to thank Ashley Petty for her service to MO MGMA for the last 5 years. Ashley will be completing her commitment as a board member this coming month and I appreciate her so much. Ashley attended so many events, virtually and in person, over the past 5 years and traveled countless miles via road and air to represent the healthcare professionals of Missouri and we should all be very proud of her commitment. It isn’t an easy thing to do but she stayed the course and I’ll always be grateful to you Ashley. Thank you Ashley! I also owe Rebekah Francis a lot of gratitude for keeping us altogether this past year and for putting up with me along the way. I have high expectations about everything I do and MO MGMA is no different. Rebekah challenged us to be better every day and I can say we made a difference but it was in large part due to Rebekah. From the bottom of my heart, I appreciate you Rebekah and all you have done for MO MGMA!

My challenge to you personally is this...be just as committed to yourself professionally as you are your organization in the year(s) ahead. Be an advocate for yourself when it comes to the importance of life-long learning and your education. Push your own boundaries and consider becoming a Certified Medical Practice Executive (CMPE) this next year. If you won’t push yourself and work to become even greater, why would the people who report to you do so? We have no idea who is watching us and just what kind of impact we are having on others. Be committed to yourself and be your own best advocate. Lastly, consider how you can be even more involved with MO MGMA. We have multiple committees that we could use your help on. We want and need more strong board members in the future and perhaps you are up for that personal challenge. Consider all the ways, and ask any of us about, how you can personally leave a lasting imprint on healthcare in Missouri by making MO MGMA even better!

I want to personally thank my fellow board members who I’ve not mentioned yet in this article for their hard work as well. Travis Messer and Greg Thompson have both done an outstanding job this past year and I’ll always appreciate you guys for working so hard alongside of me. I also appreciate our AC-MPE Forum Rep, Stacey Reitzel, and our Legislative Liaison, Richard Langholz, for the work both of you have done this year. Great job guys!

Finally, it has been an honor and privilege to serve you this past year as President of MO MGMA and I look forward to even bigger and better things. It has absolutely been my pleasure to work with you as we strived to be Masters of Healthcare. May God bless us all as we move forward Riding the Waves of Healthcare!

# RIDING THE WAVES OF HEALTHCARE

Missouri MGMA Spring Conference  
May 5-7, 2021  
Branson Convention Center



I want to thank all of you who attended our Spring Conference, *Riding the Waves of Healthcare*.

We started the conference with two great workshops: Practice Manager Boot Camp with Kyle, Stacey and Greg that catered to managers of all levels and a Coding Boot Camp with Sherry and Sarah to get us all paid. We ended the first day with keynote speaker Paul Long who taught us to have some F.U.N.

On Thursday, we talked about what Congress is doing in healthcare, were given a Washington Update, talked about telemedicine both in practice and in billing, received some HR direction on people and change and learned some IT issues that can either hurt or help us.

Keynote speakers, Scott Foster, talked to us about Crucial Conversations, Marlene Chism helped us Drive Negativity out of the Workplace, and Ridley Barron reminded us that Every Second Counts.

The vendors and sponsors went out of their way to make, what was for most of us our first "live" event in over a year, extra special.

The food was great, venue was great but most of all the networking was great! I was so excited to see how happy everyone was to be live and in person for this conference.

This has been a year like no other before and I hope no other again. I do however feel that in some ways it has made us better. I think we value and cherish our time with each other more and maybe enjoy talking in person and not just texting when we can.

My conference committee of Kyle, Travis, Greg, Ashley, Connie, Diane, Kory and Rebekah had fabulous ideas and so much enthusiasm. I could not have done it without them.

For those of you who could not make it this year we sure hope you will *Save the Date* for next year's conference May 4-6 in Branson.

Thank you for allowing me to be your Conference Chair.

Daun Hills  
President-Elect & Conference Chair, MO MGMA  
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Missouri MGMA gratefully acknowledges  
the following companies for their sponsorship of our  
2021 Spring Conference:



AMN Leadership Solutions



# ACMPE Corner

## WOW! What an awesome conference!

We had an amazing conference in Branson last month. Excellent speakers, exhibitors, and your interest in pursuing ACMPE certifications and fellowships was inspiring! Thank you to everyone who stopped by our booth.



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## EXAMS

The LIVE online proctoring option has been extended to June 1!

You can register and sit for your exam in as little as 2 days' notice!

The ACMPE Board Certification examinations now reflect the new BOK framework.

## ACMPE BOARD CERTIFICATION PREP COURSE

The course is designed to help healthcare professionals prepare for the ACMPE exams. This comprehensive course helps examinees identify content necessary to meet board certification standards, including financial management, regulatory compliance, organizational governance and departmental operations management and transformative healthcare delivery. To best prepare applicants for the examinations, topics are reviewed from the perspective of a variety of healthcare settings, including hospitals and ambulatory care settings.

Sessions 1 through 7 are self-study modules:

- Session 1: Overview
- Session 2: Operations Management Review
- Session 3: Financial Management Review
- Session 4: Human Resources Management Review
- Session 5: Transformative Healthcare Delivery
- Session 6: Risk and Compliance Review
- Session 7: Organizational Governance Review

Session 8: Board Certification Preparation: Live Question-and-Answer Session (Live sessions are scheduled for June 1, September 7, and December 7)

# ACMPE Corner (continued)

## What, When, Where, & Why

### What you need to become Certified.

- Be a member of National MGMA
- Submit for Board Certification and pay application fee.
- Have 2 years of healthcare experience
- Bachelor's Degree or 120 college credit hours
- Pass multiple choice exam
- Pass scenario-based exam
- Earn 50 hours of continuing education credits

### When can you test?

ACMPE exam registration is on-demand.

### Where to test!

ACMPE program participants can register and sit for their exams with as little as two days' notice any time of the year.

On-demand Testing FAQ attached to email and uploaded in member community. Over 500 Scantron testing locations <https://www.scantron.com/site-closures-delays/>.

2021 registrants may select Live online-proctored format from the safety of your own home. To become board certified, you must register for and pass both the multiple choice and scenario-based exam requirement.

### Why you should become certified.

Find out why by visiting this link, <https://www.mgma.com/certification/board-certification>

## Need CEU Credits?

### CONTINUING EDUCATION

As a reminder, MGMA national, state, and local LIVE webinars and events count towards the 12 MGMA LIVE required hours.

### LIVE WEBINARS

Did you know that you can use the MO MGMA and MGMA Live webinars toward your CEU requirements? All the upcoming live webinars can be found on the MO MGMA Events page at <https://mgma-mo.org/upcoming-events> and MGMA Events page at <https://www.mgma.com/events>. There are always a few new webinars that you can register for and attend every month!

### ACMPE ARTICLE ASSESSMENTS

Contribute to your ACMPE continuing education hours by taking an assessment with select MGMA Insights articles. Each assessment is worth one ACMPE credit hour. NEW insight articles are available on the [ACMPE Article Assessments page](#).

# LEGISLATIVE NEWS

## Legislative News and Happenings

### MISSOURI STATEHOUSE

The Missouri General Assembly ended its session on May 14. Prior to adjourning, there was a flurry of activity involving health legislation. Two topics of special interest to Missouri medical groups involved Medicaid expansion the Prescription Drug Monitoring Program. In addition, there will likely be a special session called later on this year to address a bill



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Legislative Liaison*

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reauthorizing the Federal Reimbursement Allowance and other provider taxes. While failure to pass authorization for these programs have never happened in the past, the State has until September 30 to reauthorize this program that generates \$1.6B in revenue while helping secure \$3B in federal matching funds.

### A summary of **Medicaid expansion efforts.**

Because the General assembly failed to provide funding for Medicaid expansion, Governor Parson rescinded the state plan amendment that had been sent to the Centers for Medicare and Medicaid Services to authorize the program. While this was a setback, \$500 million was set aside in the Medicaid Stabilization Fund to enable spending not directly allocated in the Medicaid budget. Next steps will involve litigation whether Missourians have the right to enroll. As Medicaid expansion was approved by voters, the belief is that the courts will mandate to the General Assembly that they fund the program.

### Summary of **Prescription Drug Monitoring Program.**

The General Assembly enacted **Senate Bill 63**, which authorizes the creation of a statewide prescription drug monitoring program. The **state program** will be operated through a vendor. When it is available to dispensers throughout the state, it will supplant the current county-based vendor arrangement.

### Other news from Missouri involving healthcare legislation.

### **Missouri HealthNet proposed rule for provider-based RHC's.**

The MO HealthNet Division filed a proposed amendment, which was published in the May 17 *Missouri Register* (page 863) and has a 30-day comment period ending Wednesday, June 16. The rule amends the final settlement calculation for cost reports with a fiscal year ending in 2021 and forward. MHD proposes to use the Medicaid cost report rather than the

# LEGISLATIVE NEWS

Medicare Notice of Program Reimbursement. As a result, the costs associated with the hospital provider tax no longer will be considered in the settlement calculations

**Click on the “issue brief” to see a summary of the outcomes of other healthcare legislation considered by the 2021 Session of the General Assembly**

MHA’s [issue brief](#) summarizing outcomes of legislative proposals affecting health care providers and facilities.

## FEDERAL LEGISLATION

At a Federal level, advocacy and action are ongoing on several important issues impacting provider practices. The latest news on Federal advocacy by MGMA’s Legislative Affairs staff can be accessed through the MGMA website by clicking on the Advocacy tab.

### **Improving Seniors’ Timely Access to Care (H.R. 3173)**

This is a bill that will increase the transparency and streamline the prior authorization process for Medicare Advantage plans. An announcement from Missouri MGMA went out asking you to write member of Congress in support of this important legislation. You can access the Contact Congress letter [here](#)

**You can also provide feedback on the issues and problems associated with prior authorization using this link:** <https://forms.gle/AjoQB17v1fm7Jupa7> or by writing to [dvoytal@mgma.org](mailto:dvoytal@mgma.org).

### **Potential Modifications to the PRF**

MGMA is offering the following recommendations to the PRF program and guidelines

- Extend the deadline by which providers must use the COVID-19 PRF payments until the end of the COVID-19 Public Health Emergency. Currently, providers must use these funds by June 30, 2021;

- Expediently distribute the remaining funds to medical group practices and other providers;

- Expedite the release of formal reporting guidance;

- Simplify the PRF’s complex reporting requirements; and

- Ensure medical groups have sufficient time to report their use of funds.

# LEGISLATIVE NEWS

## MSSP application period begins next month

Beginning June 1, the Centers for Medicare & Medicaid Services will accept Notices of Intent to Apply (NOIA) for the January 1, 2022, start date of the Medicare Shared Savings Program (MSSP). While it is non-binding, groups that intend to apply for a 2022 start date must submit an NOIA via the [ACO Management System](#) by **June 7** at noon ET. Following the submission of an NOIA, a formal application period will be open from June 8-28. For information on the application process and timeline, medical groups can refer to the [MSSP Application Toolkit](#).

## CMS reweights 2020 MIPS cost scores

The Centers for Medicare & Medicaid Services (CMS) announced that all Merit-based Incentive Payment System (MIPS) eligible clinicians will see their 15% cost performance category zeroed out and redistributed to other performance categories. The agency reports that the volume of data available to calculate the scores for the cost measures significantly decreased overall when comparing to the prior years' data. As a result, CMS indicates it cannot reliably calculate scores for the cost measures to adequately capture and reflect the performance of MIPS participants. Clinicians do not need to take any action following this announcement because cost category performance relies on administrative claims data.

Finally MGMA is supporting the inclusion of additional Medicare-supported medical education positions in the upcoming infrastructure package. Continue to watch for announcements on how you can be involved as this legislation comes under consideration by the House and Senate.

## CLOSING THOUGHTS

As this is my last article I wish to share that I have enjoyed the privilege of serving as your Legislative Liaison the past 6 months. I appreciated your support for and interest in keeping abreast of important Federal and State legislative actions impacting Missouri medical practices. I encourage you to always keep abreast of national legislation using the advocacy tab on the MGMA website. At the State level remain watchful for announcements/newsletter articles from the Missouri MGMA and take the opportunity presented to serve as advocates for you and your colleagues. I leave you with this quote from Eleanor Roosevelt on everyone's involvement in our democratic (governmental) process.

*“Our children should learn the general framework of their government and then they should know where they come in contact with the government, **where it touches their daily lives and where their influence is exerted on the government. It must not be a distant thing, someone else's business, but they must see how every cog in the wheel of a democracy is important and bears its share of responsibility for the smooth running of the entire machine.***



## **Tuesday, July 13th: Online Reviews & Google Profiles: Marketing & Reputation Management for Practice Administrators**

Need to attract more patients & build your brand online? Come listen to experienced healthcare CEOs speak about the importance of online reviews & robust Google My Business (GMB) profiles. Attendees will walk away with action items that will help your practice dominate online searches for your practice and providers – making it easy for prospective patients to find your practice when searching for care in your area. Learn Search Engine Optimization (SEO) techniques for practice administrators that will help make your practice the clear choice among the competition.

### Learning Objectives

- ⇒ Understanding the role of online search in the patient's journey to selecting a doctor or practice.
- ⇒ Common pitfalls in reputation management and how to avoid them at your practice
- ⇒ How to optimize your online listings and create a stellar online image for both your practice and individual

*To register, login and go to [Webinar Registration](#) under the Members tab.*

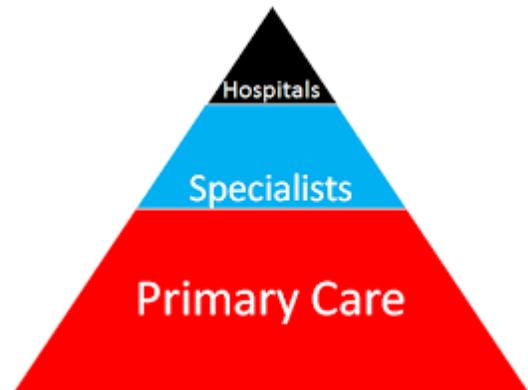
**MO MGMA webinars are approved for 1.0 CE credit hour of LIVE learning from MGMA for those attending the live session. Webinars are approved for 1.0 CE credit hour from MGMA for on-demand listening. July's webinar is approved for 1.0 AAPC credit.**



# What healthcare IT companies must provide to support the future of primary care

By Leah Jones, Allscripts Senior Vice President and General Manager

The events of 2020, and the normalization of remote and COVID-safe care, have in some ways created innovations that sped up the adoption of telehealth and simplified care delivery. In many cases, clinicians still saw patients in person, and, naturally, this involved challenges. Primary care has especially been affected, and issues stemming back to before the pandemic are being exacerbated.



Average wait times to see a primary care physician continue trending upward, as only healthy patients can be seen in the physical office, and those who are sick or have symptoms must go to urgent care or be seen at curbside. Separate from COVID-19 is patients' growing expectations for on-demand care, reflecting their experiences of instant service and advice in other sectors of their lives.

Primary care physicians face increasing complications in meeting patient needs. As always, they have to cope with their own feelings of burnout, and often, this burnout is increased by disparate workflows and non-centralized patient information. More urgently when dealing with COVID-19, it's essential that physicians can easily *risk score* patients, alerting and prioritizing conditions in the EHR. They also must be able to determine which cases to prioritize for in-person visits, and which they could just as effectively handle remotely to help manage their daily workloads and ensure full focus on patients. Managing ongoing treatments and prescriptions—as well as tracking health trends in the local populations—is also critical to successful primary care delivery, even outside of pandemic circumstances.

It is these challenges and key functions that healthcare IT vendors must work to address with their primary care clients. We must ensure solutions are truly enabling practices to see more patients and providing efficient workflows while supporting the best quality of care. Beyond fundamental interoperability functions, the offers of optimal scheduling, integrated telehealth tools for easy virtual visits and systems that promote shorter wait times are increasingly critical.

As an example of optional scheduling, consider the following: A patient with a chronic condition like hypertension calls about an acute concern like pink eye, but hasn't actually seen a doctor about the chronic condition in two years. The EHR should identify all these characteristics for the physician and administrators. This facilitates appropriate schedule time to adequately address both issues and prioritize the patient appropriately. Continued

## What healthcare IT companies must provide to support the future of primary care (continued)

use of optimal scheduling promotes maximized value-based care and effective, long-term health for the patient.

Primary care providers will especially need healthcare IT solutions that support things like practice optimization and virtual access as the pandemic continues to pose new challenges and at-risk patients are less likely to enter the physician's office. Fully integrated EHR, practice management and consumer engagement technologies, including those that alert patients for appointments, are also extremely valuable in prioritizing and scheduling patients for vaccines.

Overall, the key lies in facilitating interactions between patients and providers, utilizing everyday devices both parties feel comfortable using. Doing so helps patients actively engage with providers as needed, eases clinician burden and optimizes practice operations, most urgently in a time of crisis. Healthcare IT vendors must help primary care physicians close care gaps and continue treating all patient segments to ensure their health and success in value-based care models.

To help navigate these complex and uncertain times, Allscripts experts identified five key drivers of change that practices should be on the lookout for this year.

[Download our Key Drivers of Change in 2021 eBook](#) to learn how Allscripts can help your practice succeed now and into the future.



### Active Members

Marilyn Johnson  
Katy Trail Community Health  
Sedalia

Tiffany Long  
Katy Trail Community Health  
Warsaw

Susan Vermillion-Freeman  
Katy Trail Community Health  
Marshall

### Organizational Member

HCA Physician Services Group, Columbia

# "Caring for the Kingdom"



*A Kansas City Healthcare  
Community Education Touchdown  
September 22, 2021*



## *Event Co-Sponsors*

**Greater Kansas City MGMA**

**KCMPA**

**AAPC of Kansas City**



**Holiday Inn Airport**

**KCI Expo Center**

11730 NW. Ambassador Drive  
Kansas City, MO 64153

To assist practice managers, coders and their staff with quality education to keep them abreast of the latest technology and information.

***Everything you need at this link!***

**<https://gkcmgma.wildapricot.org/2021-Caring-for-the-Kingdom>**

# Prior authorization burdens for healthcare providers still growing during COVID-19 pandemic

*By Claire Ernst, JD*

For frontline medical group practices navigating the COVID-19 pandemic, there's been virtually no relief in sight when it comes to payer prior authorization (PA) requirements since 2020.

The Medical Group Management Association's most recent MGMA Stat poll asked medical groups: "How did payer prior authorization requirements change since 2020?" The vast majority (81%) answered "increased," 17% responded "stayed the same," and only 2% remarked they "decreased."

This poll was conducted on May 18, 2021, with 716 applicable responses.

Some healthcare leaders who reported PA requirements growing in the past year said they've had to add full-time position(s) to handle prior auth work due to several factors, including:

- Training for several variations/inconsistencies across payers on PA requirements
- Frequent updates in payer requirements (e.g., site of service updates)
- Understanding vague or opaque requirements, especially regarding step therapy
- Increasing rates of claim denials and requirements for peer-to-peer reviews
- Slow responses from payers for approvals, including lengthy holds for phone calls.

These factors are compounded by a tightening labor market, in which numerous workers consider leaving the profession and a sizable majority (88%) of healthcare leaders report having difficulty recruiting medical assistants (according to a May 4 MGMA Stat poll).

## Member feedback

Prior authorization (PA), a utilization management tool used by health plans to control costs, has been on the rise for years. Since 2016, MGMA members have reported that they experienced an increase in PA requirements over the prior year:

A March 29, 2016, MGMA Stat poll found 82% of healthcare leaders reported an increase in PA requirements from payers.

That percentage grew to 86% in a similar MGMA Stat poll from May 16, 2017.

The most recent poll conducted prior to the COVID-19 pandemic (on Sept. 17, 2019), found 90% of healthcare leaders reporting PA requirements on the rise compared to the previous year.

## Prior authorization burdens for healthcare providers still growing during COVID-19 pandemic (continued)

Medical groups faced unprecedented challenges stemming from the COVID-19 pandemic last year. Through #MGMAAdvocacy, we fought to keep group practices solvent and able to continue treating patients. Unfortunately, these poll results indicate that as practices struggled to keep their doors open, health plans continued to obstruct delivery of timely patient care.

### #MGMAAdvocacy

Last Congress, MGMA supported and helped draft the Improving Seniors' Timely Access to Care Act, which would put guardrails on Medicare Advantage (MA) plan PA requirements. More specifically, the bill would increase transparency around MA prior authorization requirements, standardize the PA process for routinely approved services, and establish an electronic PA program. Although not passed last Congress, this bill had immense support, including 280 cosponsors, a Senate companion bill, and endorsement from almost 400 organizations. Last week, the House reintroduced this legislation, and MGMA Government Affairs expect the Senate to reintroduce the bill soon. MGMA supports this bill and encourages MGMA members to reach out to their congressional representatives to voice support as well.

Last year, the Centers for Medicare & Medicaid Services (CMS) published a proposed rule that would streamline processes related to PA. Unfortunately, the rule would only place requirements on Medicaid and CHIP managed care plans, state Medicaid and CHIP fee-for-service programs, and Qualified Health Plans (QHP) issuers on the Federally-facilitated Exchanges (FfEs) — MA plans were left out. Right before President Biden took office, CMS finalized the rule and posted it online; however, it was never published in the Federal Register. It now is in limbo under the White House's Regulatory Freeze. MGMA has advocated for the inclusion of MA plans in this rule and is waiting on CMS to act.

#### MGMA's Position Paper on Prior Authorization

If you have any questions or reactions to final policies, please reach out to MGMA Government Affairs at [govaff@mgma.org](mailto:govaff@mgma.org).

Our ability at MGMA to provide great resources, education and advocacy depends on a strong feedback loop with healthcare leaders. To be part of this effort, sign up for MGMA Stat and make your voice heard in our weekly polls. Sign up by texting "STAT" to 33550 or visit [mgma.com/stat](http://mgma.com/stat). Polls will be sent to your phone via text message.

Source: May 25, 2021 MGMA Insights Newsletter ; reprinted with permission.