



Magnolia Minutes

A Publication of MGMA of Mississippi

March 2010

A Message From the President

Bobbie Beard



Who would have ever predicted that the winter of 2010 would measure significant snow accumulations in 49 of the fifty states? "Go Figure?" Weather in North America has experienced changes unlike anything our country has seen in decades.

The similarities of uncertain weather patterns can be compared to the astonishing acts of our government in attempt to change healthcare. Although I believe we will all agree that we can't continue to deliver healthcare in its present form but recognize the grave disagreements within the White House. I encourage each of you to have a voice in our healthcare reform. Who would know the system deficiencies better than those closest to the issues? Please contact your Senators and have a voice in healthcare.

In an attempt to provide our membership with up to date education from our carriers, MGMA of MS board elected to replace the February meeting with an Insurance Forum. United Health Care and Blue Cross Blue Shield willingly accepted the invitation to discuss issues and/or concerns from our membership. These types of forums have been successful in other MGMA markets and we hope that all of you will continue to participate.

By popular request our summer meeting will be held at the Imperial Palace June 16th through June 18th in Biloxi. The theme this year is "Solving the Mysteries of Management". In addition to

informative speakers on educational topics we will incorporate a Murder Mystery into the meeting. Harold Ingram, our President Elect, has planned many exciting and fun opportunities through out the meeting.

I hope all of you will also make plans to attend the 2010 National MGMA convention held in New Orleans, October 24 – 27. This is an ideal opportunity to expand your knowledge base with all the resources MGMA has to offer and it's right in our back door. For more information on the National Convention please visit MGMA website.

Our organization and healthcare in general continues to move at a rapid pace. This requires the Board to be in constant communication concerning state and national healthcare topics. Due to the timeliness of topics most information is typically provided to our membership through "blast" e-mails and our state web site. If you are not getting e-mails from us please update your information with Karen Stuart, our Executive Director. It is our sincere desire to enhance your education needs through your membership. We are working diligently to lead, grow and promote the strong organization that MGMA of MS continues to be. Please feel free to contact myself or any of the board members for needs you may have within your practice or needs/ideas you may have for the organization. We welcome your thoughts and look forward to another banner year.



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10 ways to manage better during difficult financial times

By Michael O'Connell, FACMPE, MGMA member and vice president, Operations & Physician Services, Huron Hospital, East Cleveland Ohio

The recession has challenged medical practices to explore new — and old— ways to gain efficiency. Here are 10 ideas to consider.

1. Revamp staffing

Can you adjust staff? Todd Fowler, CMPE, MGMA member and chief administrative officer, Holzer Clinic, Gallipolis, Ohio, uses more nurse practitioners and physician assistants to improve efficiency, enhance access and lower costs.

2. Re-examine vendor agreements

Choose three services to evaluate. Vendors are usually willing to renegotiate agreements and explore options. Simrit Sandu, Cleveland Clinic's director of supply chain management, negotiated many price reductions to ensure continued business.

3. Evaluate your general ledger

David Hafler, CMPE, MGMA member and administrator, Mid Ohio Surgical Associates Inc., Columbus, evaluated the group expenses. His cost-saving ideas included bundling telephone and virtual private network providers, renting clinical space on a time-share basis, switching to an on-demand biohazard vendor and increasing the deductible on employees' health insurance policies. These changes reduced operating expenses by more than 10 percent.

4. Tighten front-end coverage verification

Rosie Taulbee, FACMPE, MGMA member and manager, Vitreo-Retinal Surgeons, Division of Tri-State Centers for Sight, Cincinnati, conducted pre-appointment insurance reviews for all patients, calling payers to verify patient responsibility amounts. Staff documented information during calls to confirm patients' appointments. As a result, the practice earned 5 percent more revenue and 12 percent more in cash collections in the last year.

5. See more patients

If a practice can see one more patient a day, it can add \$25,000 to the annual bottom line for primary care (assuming \$100 for a new patient visit) or \$50,000 for specialty care (assuming \$200 for a new patient visit). Is your group seeing all the patients it can? Fowler, at the Holzer Clinic, got the organization to promote education and screenings in mammography and colonoscopy. Screening visits surged, quality of care improved and revenue rose. One effort drove a 20 percent increase in testing over the same period in 2008. William Thorner, CMPE, MGMA member and senior business director at Cincinnati Children's Medical Center, implemented a new no-show management policy. The organization's medical practices have achieved full schedules; the bottom line has risen 5 percent.

6. Inventory your waste – go green

Medical groups create a lot of avoidable —and expensive— waste. Because disposal companies charge by the pound for biohazardous waste, and red bags often contain unnecessary items, a red bag inventory can save money. Gabriele Olinchic, manager of materials management and chair, Green Team, Huron Hospital and Medical Group, changed biohazard vendors to improve productivity and safety. The move saved the organization \$10,000 a year. Garbage sorting brings in money by recycling. Huron Hospital and Medical Group cut weekly solid waste disposal in half, saving \$24,000 annually. It gets \$1,200 a year by recycling scrap metal. Eliminating a Dumpster saved \$3,600 annually.

7. Conduct an energy audit

An energy audit can reduce use of electricity, gas and water. Using energy-efficient ballasts and lights, lowering the thermostat 1 degree and installing fuel-efficient energy units can drop costs. Thomas Anastasio, engineering manager at Huron Hospital and Medical Group, saw energy bills dip by \$15,000 in just one month after switching out ballasts and lights.

8. Conduct a technology audit

Technology can save money. Susan Milheim, senior director, patient financial services, Cleveland Clinic, gives patients an online option for their billing statements. The service eliminated 47,000 paper statements in one quarter and saved \$30,000. Cleveland Health Network MSO, Independence, Ohio, created an electronic filing system for explanation-of-benefit statements that cut time finding claims and saved an average of \$20,000 annually.

9. Review fee schedules, payment by managed care companies

Expect correct payment and inspect claims to learn whether expectations are being met. Randomly audit claims to determine if they are being paid according to contractual agreements. An annual fee-schedule review ensures that fees, adjustments and contracts are appropriately administered.

10. Provide better service

Patients don't want to wait. Cleveland Clinic created open access by opening more slots, reducing 10-14 day appointment scheduling waits in several specialties to one to three days. This approach generated higher patient satisfaction and stronger loyalty.

These examples illustrate the various approaches that medical groups pursue to maintain financial stability without compromising patient care, provider and employee satisfaction, and quality outcomes. Consider implementing them in your practice.

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Contact Karen Stuart at 601-758-0244 for more details!

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The MGMA (Medical Group Management Association) of Mississippi Scholarship Program is designed to financially assist qualified applicants in obtaining degrees from accredited academic institutions of higher learning, *located in Mississippi*, in the field of medical management or any field with any relation to medical management. The program is open to any student preparing to enter or already attending an accredited degree-granting Mississippi college or university and pursuing a bachelor, master's or doctoral degree.

The scholarships are awarded based on merit as measured by academic performance and extracurricular activities. The applicant's intended field of study is also considered in the evaluation process with preference given to those candidates pursuing a degree in medical management or a directly related field of study.

To retrieve more information or to print an application, please go to www.mgmams.com!



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Magnolia Minutes is published quarterly by The Medical Group Management Association of Mississippi and addresses both issues facing medical group managers practicing in Mississippi and broader issues facing medical practices nationwide.

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Submission of articles for publication is encouraged. Views of contributing authors do not necessarily represent the position of MGMA of MS.

To add names to our mailing list, or to submit an article for print, please email a request to Karen Stuart, Executive Director, at mgmaofms@msn.com or call 601.758.0244.

The Invisible Employee

Harold Ingram, MBA, President-Elect, MGMA of MS

You get to the office early to get some of “your” work done. As soon as 8:00 am arrives there will be telephone calls, the obligatory good mornings with the side commentaries of what happened on American Idol, and something concerning an issue with an employee. It seems there is always some employee related problem. The rest of the day is spent trying to squeeze in the things that only you can do between the interruptions.

Unless your clinic is very unusual, there are a few employees that stand out as high maintenance personnel. Some are chronically late. It seems that others have an uncanny ability to create discord among the troops. And, there are those that have the “what have you done for me lately” attitude that makes team-building extremely difficult. A lot of time is spent handling these employees. You see a seminar on “Dealing with Difficult People” and you wonder if you should attend.

As you leave your office to get that well-deserved cup of coffee, you pass by an employee that has been with the clinic for a while; you smile, and perhaps offer a courteous “good morning” but never stop. In the break room are three employees around the water cooler. It is obvious that two are engaged in conversation with the third just a bystander. As you return to your office you take a detour by the cubicle in the corner just to make sure June is there. You don’t really know when June comes to work or leaves. The time clock indicates she is there virtually every day for eight hours, so you occasionally walk by her work area just to check on her.

When the Sistine Chapel is mentioned, the first thing that comes to mind is Michelangelo. His painting in the Sistine Chapel is extraordinary. He was an exceptional individual. But, who built the chapel itself? It took a number of people whose names will never be remembered. It was those workers, however,

that gave Michelangelo the opportunity to paint the chapel’s ceiling.

Managers, perhaps the Michelangelo of the office, often take for granted the groundwork that is laid by their invisible employees. Time is valuable. As a manager, you spend it where you feel the demands are greatest. Rarely is it directed toward the invisible employee, the employee that comes early and leaves late but seems to never have overtime or the employee that pitches in although she is never asked to do so. These people provide the foundation for your office.

It is easy to give attention to those that demand it. The problem children are those that get the most time devoted to them. Take time for those employees that are not so demanding. On occasion recognize them publically. Take time to visit with them to let them know that they are noticed and not forgotten. The adage of people not caring how much you know until they know how much you care is certainly applicable in the clinic setting. As a leader it is important to solidify your foundation of invisible employees to be successful.



Beat the Afternoon Blahs

By Jerry V. Teplitz, J.D., Ph.D.

© 2003 Jerry V. Teplitz

You and your staff are tired at the end of the day. Is it the workload, or is there another reason? The other reason could be the lights over your head.

The right light can increase productivity in the workplace. Companies that use a "natural spectrum" fluorescent light have reported reductions in absenteeism, accidents, error rates and fatigue levels. Productivity has even gone up!

In the early 1960s, Dr. John Ott discovered that the color of the light to which an indoor plant is exposed to affected the plant's growth and development. If indoor lighting could do this to plants, Ott wondered, what was it doing to animals and humans? His initial research on the impact of lights on humans has led to the development of the science of photobiology.

In 1980, Dr. Alfred Lewy published a study at the National Institute of Mental Health that showed how different types of light act on human biorhythms. The study found that conventional indoor lighting, which lacks the full natural spectrum, "is interpreted by the brain's pineal gland as darkness." This is why many people feel depleted after the end of a day at work. It's as if you were staying up all night working.

In "Light - Medicine of the Future," Jacob Liberman, O.D., Ph.D., writes that natural spectrum lighting in the workplace "creates significantly lower stress on the nervous system than standard cool white fluorescent lighting and reduces the number of absences due to illness."

Here's what some users have said:

Judy Carberry, Legal Administrator at Bourne, Noll & Kenyon, said, "I used to tell people that I was a 'morning person' because by 3:00 p.m. I would want to take a nap. Well, that has certainly changed with the lighting. I no longer feel tired in the middle of the day and feel that the day goes by more quickly."

Claudio Rico of the Monterey Peninsula Board of Realtors reports that "the entire staff has reported increased energy, fewer headaches, less problems with moodiness and a generally heightened sense of well-being. Naturally, this has translated into less absenteeism."

Can these kinds of results happen in your office? There is an easy way to find out. Just relamp a couple of enclosed offices and see how the people feel. Just make sure you ask for "natural spectrum" tubes, as you want one that simulates sunlight in the visible and invisible wave lengths.

About The Author: Dr. Teplitz is an author, attorney and has a Ph.D. in Wholistic Health Sciences. He is author of Managing Your Stress, Switched-On Living and Brain Gym For Business. He speaks and consults on management, leadership, sales and personal development issues. Contact him at 800 77-RELAX (777-3529), Email Info@Teplitz.com or go to www.Teplitz.com.

NOTE: DR. TEPLITZ WILL BE THE KEYNOTE SPEAKER AT THE MGMA OF MS SUMMER MEETING!



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College Corner

I would like to encourage our members to get certified. We have scholarship opportunities, books you can check out from MGMA of MS library, and certified members to mentor you through the process. We will be happy to help you start the process in 2010. You will be pleasantly surprised when you find out you already know most of what's on the exams. Find a friend in MGMA of Mississippi and challenge each other through the certification process.

The American College of Medical Practice Executives has made the board certification exams more convenient to take by expanding locations to more than 200 sites throughout the United States. I encourage every member to go to the national MGMA website (mgma.com) for more information or contact the ACMPE help desk toll free at 877.275.6462, ext. 1869. And of course you can contact me at 601-709-7700 or jkay@mbhs.org.

The exam registration process includes four steps: first submit your eligibility requirements, next register and pay for exams, and then within 5 business days ACMPE will send you an email with a personal user name and password and fourth, you can log on to the ACT website and schedule your exam. Registration will be open from March 17th through May 9th, 2010 for the May 24-May 29, 2010 exam window; and June 2nd through July 25th 2010 for the August 9-14, 2010 exam window. Paper and pen exams will be available at the MGMA 2010 Annual Conference held this October in New Orleans, Louisiana.

Make a commitment to get certified this year. You will enjoy networking with your peers while testing your management knowledge. You will feel a great sense of accomplishment when you get the CMPE designation behind your name. Give me a call, I would love to help you get started.

Janice F. Kay, CMPE
National Membership and ACMPE Representative

ACMPE Body of Knowledge Quiz

Each issue of Magnolia Minutes will feature sample questions that you may find on the ACMPE Exams. Test your knowledge in each area of the Body of Knowledge!! (Answers on p.11)

Business Operations

1. Which of the following is NOT considered an effective step in developing a procedure manual?
 - A. Selecting a staff task force to organize the process.
 - B. Purchasing a model procedure manual as a guideline.
 - C. Obtaining support from the board of directors.
 - D. Appointing a staff member to write all procedures.

Financial Management

1. In a cash basis accounting system, capital equipment purchases are recorded as which of the following?
 - A. Debit equipment, credit cash.
 - B. Debit accounts payable, credit accounts receivable.
 - C. Debit cash, credit equipment.
 - D. Debit accounts receivable, credit accounts payable.

Human Resources Management

1. Which of the following is NOT part of the physician hiring process for a medical practice?
 - A. Verification of internship or residency.
 - B. National Practitioner Data Bank query.
 - C. Verification of training and education.
 - D. Verification of previous employment.

Information Management

1. Which of the following has proven to be the MOST effective means of communication?
 - A. Face-to-face.
 - B. Voice mail.
 - C. Electronic mail.
 - D. Written memo.

Organizational Governance

1. Which of the following business entity models have taxes paid by the business rather than "passed through" to individual shareholders?
 - A. Limited Liability Partnership.
 - B. Sole proprietorship.
 - C. S Corporation.
 - D. C Corporation.

Patient Care Systems

1. Which of the following provides an example of how an administrative system can improve the quality of clinical outcomes?
 - A. Development of a tickler file to remind diabetic patients to schedule eye exams.
 - B. Asking a nurse to call diabetic patients and ask about their health.
 - C. Researching potential complications of diabetes on the Internet.
 - D. Referring diabetic patients to an ophthalmologist.

Quality Management

1. What is the primary goal of quality improvement in a medical practice?
 - A. To reduce error and improve patient care.
 - B. To gain efficiency.
 - C. To increase profitability.
 - D. To reduce error and streamline business tasks.

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ACMPE Body of Knowledge Quiz Answers

Business Operations - D; Financial Management - A;
Human Resources Management - B; Information Management - A;
Organizational Governance- D; Patient Care Systems - A;
Quality Management - A

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