

Quarterly Communicator

The Official Newsletter of Colorado MGMA

Past President's Column **By Susan Young Donahue, FACMPE**

One of my duties as your Immediate Past President is to preside over the 2007 Nominating Committee and subsequently I would like to encourage each of you to consider joining your CMGMA Board either as an Officer or a Committee Member.

The Board currently is looking for volunteers to fill the positions of Legislative Liaison and Secretary. Both of these positions would start at the conclusion of our fall 2007 Conference.

The Legislative Liaison is a two-year commitment with the option to renew for an additional "two year term". The following is a brief outline of the "Responsibilities of the Position" and the "Criteria for Nomination":

Responsibilities of the Position

- Keep membership current on federal and state health care related legislation
- Distribute "Call to Action" emails and other correspondences
- Actively represent CMGMA in health care related legislation
- Develop and foster relationships with the legislative team at the Colorado Medical Society
- Develop relationships with Colorado Senators and Representatives
- Prepare and present a written report of current federal state legislation
- Prepare articles for the CMGMA newsletter

Criteria for Nomination

- Membership in CMGMA for at least one year
- Minimum of three years experience in medical management
- Personal commitment to advancement of both CMGMA and MGMA
- CMGMA meeting attendance

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President's Column **By Mike Bergerson**

Colorado MGMA held our Spring Conference in Colorado Springs on March 22nd and 23rd. We had approximately 100 health care administrators and approximately 50 corporate affiliates in attendance. The conference was structured with our opening social on Thursday evening, 5 diverse speaking events on Friday, along with expanded time for networking during our breaks and luncheon on Friday.

Currently Colorado MGMA membership is around the 300 member mark in 2007. Compared to prior years, our membership numbers are up. This is great news for our association and also reflective of our currently unstable health care market. With so many looming market conditions being debated at the state and national level for needed change, the voice of Colorado MGMA is more critical than ever. The successful impact of an organized Colorado MGMA effort working closely with our "like" state associations is clearly evident in the very recent successful signing of Senate Bill 79. Colorado MGMA Board member, Janet McIntyre, represented our association with the Colorado Medical Society, Colorado Association of Health Plans, and with national MGMA in order to get this legislation signed by our new governor. This new law now mandates payers to be more clear and straightforward in contracting with Colorado's health care providers. Colorado is the first state in the nation with such a law!

We find that there remains much confusion regarding the difference between our national association, MGMA, and our state association, Colorado MGMA. Both are separate legal entities that require separate membership dues each year. Colorado MGMA dues remained unchanged at \$80.00 in 2007. Colorado MGMA works closely with national MGMA, but our focus remains the state-wide and local needs of Colorado's group practice administrators. Please help Colorado MGMA to spread this message. Let's build our state association membership numbers in 2007!

The Colorado MGMA Board has listened, and continues to listen, to the feedback of our membership. Consistently we hear from members that education and networking are the two most important offerings provided to our members by Colorado MGMA. We are committed to continuing to deliver high quality educational and networking sessions for all Colorado MGMA members. In return, we would ask that you continue to provide your Colorado MGMA Board with feedback on how to improve your/our state association.

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2007 Conference Schedule

**Fall Conference
September 20-21, 2007**
Radisson Denver
Southeast
Denver, CO

**Visit www.cmgma.com
or call
303-756-8380
for more
information**

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The College Corner By Julie Kjack, FACMPE

YES, today it looks like Spring has really arrived! And it is time to do our spring housecleaning, and follow up on your career goals for the year. The goal for this year's American College of Medical Practice Executives (ACMPE) is to have 100 new Fellows walk the stage in Philadelphia. Along that line, it is time for those of you who are CMPE's (Certified Medical Practice Executives) to get your outline submitted. The 2007 MGMA annual conference in Philadelphia is October 28 thru the 31st. If you have never attended an annual conference, now is the time to do so. Philadelphia is a beautiful city and the convention center is centrally located. The meeting will be educationally stimulating and there is much to see and do in Philly.

In order to advance to Fellow this year it is important that your outline is submitted by May 11, 2007 and your final manuscript submitted by August 31, 2007.

CMGMA is offering a \$200.00 expense reimbursement for all CMGMA members who receive Fellowship this year and walk the stage in Philadelphia! CMGMA did this last year and your board of directors voted to make the offer permanent. How many times in our careers can we say that we got paid for doing something for ourselves? This is a wonderful incentive and it is my sincere hope that many of you take advantage of this fine offer.

Those of you who are Nominees and are ready to advance to CMPE you can test on July 28th. The testing is done locally at the MGMA office and you must register in advance. Registration deadline is July 13th. When I tested in 1993 I had to travel to Seattle and now you can test in our own state. Testing will also take place in Philadelphia on October 28, 2007.

The week after our CMGMA meeting in Colorado Springs I had the privilege of attending the California MGMA meeting in San Diego. As I have told you before, I am so proud to tell other states about CMGMA and what we are doing. California has chapters in 7 regions and one annual meeting that is held in the spring. Attendance was just under 300 and their conference started with a board meeting on Wednesday afternoon and ended Saturday at noon. This was my second CAMGMA meeting and it certainly was a positive experience.

Medical administration is our chosen career and it makes good sense to advance to Fellowship status in the American College of Medical Practice Executives – ACMPE. As of October 31, 2006 there were 531 Fellows and in February two more were added to that number. Today there are probably even more who have had confirmation that their paper was accepted. It is my hope that

Colorado has at least 5 new Fellows this year.

I encourage everyone who is a member of ACMPE to check out the wealth of information offered on the MGMA website: www.mgma.com. Click on "Professional Development" to find what you need to grow professionally thru ACMPE. If anyone would like to talk to me about the requirements and process I am available at my desk number, which is 303-597-4444 or my cell number which is 303-435-4444 or by email j.kjack@nwneuro.net

Colorado Legislative News By Janet McIntyre President-Elect

The legislative session will end around May 9, 2007. A number of healthcare bills have been debated this session—worker's choice of occupational medicine physician, some form of medical payments requirement for auto insurance, etc. The Democratically-controlled legislature and the Governor's office promised to work on healthcare and they have done so! Probably the most significant piece of healthcare legislation for physician practices was the passage of Senate Bill 79 (SB 79)—Fair and Transparent Contracts between physicians and health plans.

CMGMA was integrally involved over the past year to craft the language for SB 79. CMGMA worked on a task force with the Colorado Medical Society and the Colorado Association of Health Plans to have this bill ready for the start of the session in January. It passed through both the House and the Senate fairly quickly and was signed by the Governor 3/30/07. There was a ceremonial signing session down at the State Capitol on Doctor's Day. Thus, many white-coated physicians were on hand—and CMGMA was too!



*Governor Bill Ritter signs SB 79,
while Janet McIntyre, CMGMA
President -Elect looks on*

Highlights of this new law, that goes into effect 1/1/08, include:

- Contracts shall have a **summary form disclosure**—similar to a table of contents. This summary of key provisions will allow for comparison with other contracts.

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UNRAVELING THE MEDICAL BILLING MYSTERIES OF COLORADO'S CAR INSURANCE LAWS

As an attorney who represents people that have been hurt in car crashes, I get many questions about how billing works with the change in Colorado's car insurance laws. There is still much confusion about who to bill and how to get paid—so much so, that many physicians are gun-shy about treating people who have been hurt in a car accident.

On July 1, 2003, Colorado's car insurance laws changed dramatically. Under the old law known as Personal Injury Protection, or "PIP", every car insurance company doing business in the State of Colorado was required to provide a significant amount of medical coverage. PIP protected people injured in an accident regardless of fault. Under PIP, each person's own car insurance company paid auto-related medical bills up to \$100,000 for a period of 10 years. Additionally, the patient's own car insurance company was not allowed to be paid by the at-fault driver's insurance company. This is why the old law was called "No-Fault".

With the change in the law, who pays a patient's medical bills if he/she is hurt in a car crash?

The first and primary payer is still the patient's own car insurance company. But this coverage, which is now called "Med Pay", is no longer state-mandated. Rather, everyone can choose to purchase vastly varying amounts of Med Pay, ranging from no coverage at all up to \$100,000 in coverage. Additionally, under the current law, the car insurance company of the at-fault driver is ultimately responsible for reimbursing the victim's own insurance for medical bills. This is why the new law is no longer called "No-Fault" but is instead called "Tort".

As a medical practice manager, what is critical for you to understand is that despite the fact that the at-fault driver's insurance is ultimately responsible for paying the patient's medical bills, **rarely, if ever, does the at-fault driver's insurance pay the patient's medical bills up front.** This is because car insurance companies are not legally obligated to do so. So if you are billing the at-fault driver's insurance company, you can expect that those bills will be denied. Under the new tort system, a patient's medical bills only get reimbursed by the at-fault driver's insurance company at the end, when a settlement or verdict occurs.

What this means is that the questions you need to ask every patient who has been hurt in a car crash are:

- Who is your car insurance with?
- Do you have med pay?
- What is the amount of your med pay coverage?

It is easy for a patient to find out if he/she has Med Pay by making one call to his/her insurance agent. If the patient was a passenger in someone else's car, there may be additional Med Pay which covers that car.

Because Med Pay covers all occupants of a vehicle, this may be a hidden avenue for getting bills paid.

After Med Pay has been exhausted, or if there is no Med Pay coverage, then the patient's health insurance company is responsible for paying his/her bills. So, the next series of insurance questions you need to ask are the routine health insurance questions.

What do you do if the patient has no Med Pay and no health insurance? Depending upon the nature of your practice's income stream, you could opt to treat the patient on a lien. This does not always mean waiting until the case settles to get paid. There are now several different lien companies, including Medical Lien Management, Injury Finance, and Key Health who will pay physicians a reduced rate up-front so that you do not have to wait for payment. Another option, if you know and trust the attorney who represents the patient, is to enter into a lien agreement with that attorney. The advantage of entering into a lien agreement directly with the patient's attorney is that you get paid 100 cents on the dollar, versus having to accept a reduced rate. Obviously, there are some rare situations where a patient does not get the settlement that was expected due to pre-existing medical issues or unforeseen circumstances; however, these situations should be few and far-between. If you are working with a reputable attorney's office, that attorney should be properly screening the situation to ensure that there will be enough insurance money to cover 100% of your practice's bills.

There are still a few situations where PIP insurance provides benefits. If your office is treating a patient who was involved in a car crash in the year 2003 or earlier, then that patient's PIP claim remains open. Remember, PIP pays bills for a period of 10 years, so if a patient is telling you that he/she still has PIP coverage, that may be true. In that situation, you will need to obtain the PIP claim number and the name and phone number of the PIP insurance adjuster to verify the information.

Unfortunately, in my practice I have seen too many situations where a patient is denied care because of confusing billing issues. In order to give you a quick billing reference, I have created the attached chart. Additionally, I invite any of you who have billing questions to contact me directly so that we can make sure that people are not denied access to medical care that they require.

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	Billing Source #1	Billing Source #2	Billing Source #3	Billing Source #4
Does the patient have his/her own med pay through his/her car insurance?	If YES, find out amount and bill first. There may be more med pay from car patient was in. See #2. If none, see #3.			
Is there med pay from the car the patient occupied?		If YES, provides coverage. If none, see #3.		
Does the patient have health insurance?			If YES, bill health insurance when there is no med pay from any source or when med pay is exhausted. When there is no med pay and no health ins., decide if you want to accept a lien. See #4.	
Do you want to accept a lien?				If YES, decide whether you want to accept a reduced-rate up front from management company or whether you want to work directly with the attorney's office for 100% reimbursement when the case concludes.

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Colorado Legislative News continued

- Contracts and amendments will be written in **understandable terms**.
- Contracts cannot require physicians to participate with **all products** by a carrier. This is to be a mutually agreed upon point.
- Contracts cannot be sold, rented or gifted without the provider's written consent. This should defang **rental networks**.
- Contract **amendments** must be in writing and provide 90 days notice to allow for negotiation.
- Contracts can no longer have terms that force physicians to **waive rights** or benefits provided under state or federal law.
- Contracts cannot dictate **payer mix** to a practice. A group can close their practice to new patients of a single plan if they give the insurance 60 days notice and the reason for the closure.
- Means exist to both settle **contract disputes** and for enforcement of **statute violations**.

If you'd like to see the actual bill, go to:

http://www.leg.state.co.us/Clics/Clics2007A/csl.nsf/fsbillcont3/72F38827605ED90D87257251007B96B2?Open&file=079_rer.pdf



Conference Chatter

Spring in the Springs

- 100 attendees
- 41 vendors

Fall Conference

- 9/20-21, 2007
- Bob Vosburgh – *LIFT: Leadership that Soars Above and Beyond*
- Radisson SE Denver

Member Spotlight



Joan Austin
Pediatrics West

Looking for a veteran of medical practice management? Look no further than Joan Austin, who has managed Pediatrics West for 27 years!

Joan shines in both her people skills and proactive problem solving skills. She enjoys working with staff, physicians, and parents. She has seen the kids in the practice grow up and now bring their children to Peds West. Her approachable, connecting nature ensures that parent needs are met.

Joan's current challenge involves moving their primary office to a different location and opening a 2nd office – at the same time, of course!

Joan values Colorado MGMA for the great exchange of ideas at meetings. The local nature of the educational conference makes attendance very doable.

Joan and her husband have 3 grown daughters, so they often vacation with them in Portland, Chicago, and New York. Cruise vacations are also high on Joan's list. Joan also enjoys biking, reading, and knitting scarves.

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Salary Survey Deadline APRIL 23, 2007

**Colorado MGMA and CMS would love
to give you an iPod!**

Only two remain unclaimed!

Members of CMGMA, CMS and the component medical societies are invited to participate and receive a FREE copy of the 2007 Colorado Healthcare Staff Salary Survey Report. And, for those practices that contribute physician compensation, there will be a FREE copy of the 2007 Colorado Physician Compensation Survey Report!

These are the winners thus far:

- Judith Boesen, Administrator, Colorado Otolaryngology Associates, Colorado Springs,
- Nancy Timmons, Administrator, Front Range Center for Brain & Spine Surgery, PC, Fort Collins,
- Jennifer Burnet, Office Manager, Montrose Surgical Associates, Montrose, and
- Mary Jo Hartwell, Practice Administrator, Rocky Mountain Surgical Associates, Denver

Each week until April 23, a drawing of all survey respondents will be held, and the winning practice will receive an iPod.

**The iPods are available this year due to sponsorship
by Compass Bank.**

You are eligible for the drawing as soon as your questionnaire is received. Submit your completed questionnaire right away to have more chances to win!

No fewer than nine responses will be published for any compensation subcategory in order to protect confidentiality.

Go to the CMGMA web site: www.cmgma.com and download your questionnaire today! The results will be published in July, 2007.

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President's Column continued

Please mark your calendars now for our 2007 Fall Conference on September 20-21, 2007 to be held at the Radisson Hotel Denver Southeast, Denver, CO. This promises to be another high quality event for education and networking. Regardless of your practice's specialty(ies) or size, come and mingle with your peer medical group leaders. Talk and learn about state and national health care issues and bring this information back to your physicians. Stay informed and keep your practice informed. With a CMS fee schedule reduction of -10% looming for 1/1/08 and the Presidential Election scheduled for November 4, 2008, the next 1.5 years promises to be another period of significant change for our physician groups. Stay connected!

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Past President's Column continued

The Secretary position is a one year commitment but the first of a 4 year commitment. The Secretary is the first of four offices to include President-Elect, President, and Immediate Past President. The following is a brief outline of the "Responsibilities of the Position" and the "Criteria for Nomination":

Responsibilities of the Position

- Take meeting minutes of all Board of Director and general membership meetings
- Coordinate and develop the CMGMA Quarterly Newsletter
- Assist in development of future CMGMA educational programs

Criteria for Nomination

- Membership in both CMGMA and MGMA
- Minimum of 3 years experience in medical management
- Personal commitment to advancement of both CMGMA and MGMA
- CMGMA meeting attendance

Volunteering to several on the CMGMA Board has many wonderful rewards. Not only do you get an opportunity to brain-storm with a group of your peers, you have an opportunity to impact health care.

If you are interested in either of these positions or if you would like some additional information please feel free to contact me at 303-995-1240 or email me at www.rmpcmso@idcomm.com.



CMGMA's 2nd Annual Golf Tournament

Please join us at our 2nd annual golf tournament being held Monday, August 20, 2007 at the picturesque Ranch Country Club, 11887 Tejon Street in Denver, CO. It will be a scramble format with a 1:00 p.m. shotgun start. Competitive and novice (non-golfers) are encouraged to play.

Sign up a foursome or just yourself and we will pair you with other fun and exciting people. Dinner and awards will follow immediately after play. Cost is \$75.00 per player.

Look for further registration material coming out in April as well as sponsorship opportunities. For more information please contact Scott Raberge at 970-352-5000 ext. 321 or at scott@pfccollects.com