



OSMA News Now

The Latest News, Views, Updates, and Information for Physicians
from the Oklahoma State Medical Association

May 23, 2008

Legislative Update

The 2008 Oklahoma Legislative Session is coming to an end. Sine Die is scheduled for today Friday, May 23, 2008.

HCR 1092, by Representative Dr. Doug Cox, rejects a proposed rule by the Oklahoma Board of Nursing to increase prescription rights to 30 days for schedule III prescriptions. The OSMA is in support of this piece of legislation.

Please look for the 2008 Legislative Report with a complete update of all the legislation OSMA has supported, opposed and tracked this session.

SAVE THE DATE!

The Oklahoma State Medical Association and the Oklahoma County Medical Society will hold on June 18, 2008, from 5:00pm – 5:30pm a reception to meet Dr. Deborah Patterson, Lead Director for TrailBlazer Medical Review, Provider Education Activities, Lead Director for Policy Activities Related to Evaluation and Management, Cardiology, Allergy Immunology, Ambulance Service, Oversight of CMD/Medical Policy Departmental Quality Management and Performance Measurement/Reporting/Management Control. A 2 hour workshop will follow from 5:30pm – 7:30pm which will provide complete information on:

1. How to navigate the Trailblazers website
 2. All attending physicians (only physicians) will receive the E&M Guide Book
 3. Answer questions and problems physicians face with the transition
 4. Other strategic Medicare reimbursement issues physicians are facing
- The workshop will include dinner and offer 2 AMA PRA Category 1 Credits™ for all attending physicians. Cost will be \$25 for OSMA members and \$50 for non-members. Registration will be required. Please watch for more information to come next week in News Now. For further information please contact Sandy Deeba, OSMA CME Manager at (405) 843-9571 or 1-(800)-522-

Mark Your Calendars!

The OSMA state headquarters will be the host for a special event early next month. Please mark your calendars—U.S. Senator Tom Coburn, MD cordially invites Oklahoma physicians to join him for a reception in support of his senate colleague, Senator James M. Inhofe Friday, June 6, 2008 beginning at 4:30 pm at the OSMA, 601 NW Grand Boulevard in Oklahoma City.

The reception will be a chance to meet and learn about some of the critical Washington issues facing physicians, their patients and their practices as we enter one of the most important election cycles in the last 50 years.

Mary Anne McCaffree Seeking Election To The AMA Board Of Trustees

The Oklahoma State Medical Association (OSMA) and its delegation to the AMA, have nominated Mary Anne McCaffree, MD, for the American Medical Association (AMA) Board of Trustees. She is enthusiastically endorsed by the Heart of America Caucus, the American Academy of Pediatrics (AAP) and the American College of Chest Physicians (ACCP). Dr. McCaffree has always been a staunch advocate for physicians. She has been an AMA member since 1978 and began serving as a Delegate in 1992.

She served as the first female President of the Oklahoma State Medical Association and worked successfully to preserve the protected status of peer review. Dr. McCaffree led the fight against low Medicaid reimbursement while serving as Past President, working with the AMA Litigation Center and AAP leaders which led to the landmark Medicaid case increasing Medicaid reimbursement in Oklahoma. She was awarded the Ed L. Calhoun, MD, Leadership in Medicine Award in 2005, an award presented to an OSMA member physician in recognition of distinguished leadership and service to organized medicine. Dr. McCaffree also received the Woman in Medicine Award in 2007 and the Abraham Jacobi, MD, Award, honoring a physician who has effectively served both the AAP and the AMA at the highest levels.

Dr. McCaffree believes our profession must lead the evolution in health care to ensure that all patients have access to quality health care. She knows that physicians must be appropriately reimbursed and our ability to practice evidence-based medicine must be unencumbered by the liability crisis facing many of us today. As a member of the AMA Board of Trustees she will work diligently to make this a reality, and to encourage students, residents, and young physicians to remain engaged in their professional education and organized medicine to ensure we win these battles for our patients and ourselves.

Elections will be held at the AMA Annual Meeting June 17, 2008 in Chicago, Illinois.

Please join the OSMA in supporting Dr. McCaffree in her campaign for AMA Board of Trustees.

REMINDER! NATIONAL SURVEY GIVES PHYSICIANS A VOICE!

Look for it in the Mail! A reminder to members that the Physicians' Foundation for Health Systems Excellence is conducting a national survey designed to give physicians a voice!

The survey has been mailed to over 300,000 physicians and could be in your mailbox or on your desk today. The survey offers physicians an unrivalled opportunity to comment on the current state of medical practice in America. If you are concerned about your profession and your practice, please take a few moments to complete the survey and let your voice be heard. Please note that all responses to the survey are due back by Wednesday, June 25.

NPI News for Medicare FFS Providers

Today is May 23rd – Are You Ready?

As of May 23, Medicare FFS will require and send NPI-Only in ALL provider identifier fields for all HIPAA and paper transactions where a provider identifier is required. **If you send Medicare a transaction with a Medicare legacy identifier in any of the provider fields, your claim will be rejected.** These transactions include all electronic and paper claims (837I, 837P, NCPDP, DDE and paper CMS-1500 and UB-04), the 276/277 claims status transaction, the 270/271 eligibility transaction, 835 remittance advice and SPR paper remittance.

NPIs for Secondary Providers

If the entity that is required to be identified in the secondary provider field (i.e., the ordering/referring/attending/operating/supervising/purchased service/other/service facility provider or prescriber) does not furnish an NPI, the billing provider must attempt to obtain that NPI in order to enter it on the claim. The billing provider may use the NPI Registry (<https://nppes.cms.hhs.gov/NPPES/NPIRegistryHome.do>) to obtain the secondary provider's NPI or it may need to directly contact the ordering/referring/attending/operating/supervising/purchased service/other/service facility or prescriber in order to obtain the NPI.

- If the billing provider has exhausted all possibilities of finding the NPI of the ordering/referring/attending/operating/supervising/purchased service/other or prescriber, Medicare FFS is permitting the billing provider (in the X12N 837 transactions) or the service provider (in the NCPDP 5.1 transaction) to use their own NPI as the identifier for those secondary providers. Medicare will reject claims if Medicare policy requires a secondary identifier and there is no NPI present.
- For service facility location loop, if the billing provider is still unable to obtain the NPI of the entity, no identifier should be reported in that loop.

Need More Information?

Still not sure what an NPI is and how you can get it, share it and use it? As always, more information and education on the NPI can be found through the CMS NPI page www.cms.hhs.gov/NationalProvIdentStand on the CMS website. Providers can apply for an NPI online at <https://nppes.cms.hhs.gov> or can call the NPI enumerator to request a paper application at 1-800-465-3203. Having trouble viewing any of the URLs in this message? If so, try to cut and paste any URL in this message into your web browser to view the intended information.

Note: All current and past CMS NPI communications are available by clicking "CMS Communications" in the left column of the www.cms.hhs.gov/NationalProvIdentStand CMS webpage.

Reminder: CMS to Host Second National Provider Education Call on May 27th, 2008

The Centers for Medicare & Medicaid Services (CMS) will host the second national provider education conference call to address the implementation of the new Medicare Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) Competitive Bidding program scheduled to begin on July 1, 2008. This call is being conducted for Medicare fee-for-service DMEPOS suppliers, physicians, and other providers – all of which may be affected by the program. CMS Subject Matter Experts will be available to answer questions and address some of the exceptions and situations you may encounter as the program is implemented. To view a PowerPoint presentation that was used in the first national call, please click here: http://www.cms.hhs.gov/DMEPOSCompetitiveBid/Downloads/policy_teleconference_final.pdf

Conference call details:

Date: May 27, 2008
Conference Title: Medicare DMEPOS Competitive Bidding Program Q&A session
Time: 12:00-1:30 CDT

In order to receive the call-in information, you must register for the call. It is important to note that if you are planning to sit in with a group, only one person needs to register to receive the call-in data. This registration is solely to reserve a phone line, NOT to allow participation. If you cannot attend the call, replay information is available below.

Registration will close at 12:00 p.m. CDT on May 26, 2008, or when available space has been filled. No exceptions will be made, so please be sure to register prior to this time.

1. To register for the call participants need to go to: <http://www2.eventsvc.com/palmettogba/052908>
2. Fill in all required data.
3. Verify your time zone is displayed correctly the drop down box.
4. Click "Register".
5. You will be taken to the "Thank you for registering" page and will receive a confirmation email shortly thereafter. Note: Please print and save this page, in the event that your server blocks the confirmation emails. If you do not receive the confirmation email, please check your spam/junk mail filter as it may have been directed there.

For those of you who will be unable to attend, a replay option will be available shortly following the end of the call. This replay will be accessible from 3:00 p.m. CDT 5/27/2008 until 10:59 p.m. CDT 6/4/2008. The call in data for the replay is (800) 642-1687 and the passcode is 47261135.

2008 Oklahoma State Medical Association
and Oklahoma County Medical Society

TrailBlazer Workshop

**On March 1st Medicare Claims Processing for Oklahoma transitioned to TrailBlazer.
Stress no more! Your questions and issues will be answered at this workshop.**

Do you want to receive 2 hours* of CME?

**This Will Be THE Workshop To Attend Specifically Targeting
Oklahoma Physicians & Their Senior Practice Managers.**

June 18, 2008 • Home Builders 625 NW Grand Blvd, OKC

- AGENDA -

5:00 p.m. - 5:30 p.m.

RECEPTION HONORING DEBRA PATTERSON, MD

Medicare Contractor Medical Director, TrailBlazer Health Enterprises, LLC

5:30 p.m. - 6:00 p.m.

Buffet Dinner Served

*Tossed Green Salad with Dressings
Southern Style Fried Chicken
Mashed Potatoes/Gravy
Fresh Cream Corn
Homemade Rolls
Variety of Desserts
Ice Tea, Coffee and Water*

6:00 p.m. - 7:30 p.m.

"TrailBlazer Workshop"

Speaker: Debra Patterson, MD

- Lead Medical Director for TrailBlazer Medical Review and Provider Education Activities
- Lead Medical Director for policy activities related to Ambulance Services, Evaluation and Management, Anesthesia, Cardiology, Allergy and Immunology, Ophthalmology, Podiatry Services, and Chiropractic Services.
- Oversight of CMD/Medical Policy department Quality Management and Performance Measurement/Reporting/Management Controls
- Management duties for TrailBlazer Medical Policy staff

Moderator: Ken King, OSMA Executive Director

Target Audience

All Oklahoma Physicians and their Senior Practice Manager

Objectives

At the end of this presentation, participants will:

- Describe various Medicare rules and instructions and policies
- Apply principles of medical necessity to Medicare billing
- Educate Providers in TrailBlazer's approach to medical review, both manual and automated, of Medicare claims

7:30 p.m. - 8:00 p.m.

Question and Answer Session

Speaker Disclosure

Debra Patterson, MD is the Medicare Contractor Medical Director for TrailBlazer Health Enterprises, LLC and provides educational activities for Providers

REGISTRATION FORM

The workshop cost is \$25 for OSMA Members and their practice manager and \$50 for all OSMA Non-Members and their practice manager.

After completing this form, please mail or fax to: TrailBlazer Reception/Workshop, OSMA, 601 NW Grand Boulevard, Oklahoma City, Oklahoma, 73118. Phone: 405-843-9571 or 800-522-9452 Fax: 405-842-1834 (please mail payment with registration). Contact Sandy Deeba at the OSMA for further questions.

\$25 OSMA Member/Practice Manager \$50 OSMA Non-Member/Practice Manager

(Please Print)

OSMA Member Name: _____

Practice Manager Name: _____

Telephone: _____ Fax: _____

E-mail: _____

Address: _____

City: _____ State: _____ Zip: _____

PAYMENT

Members Attending _____

Non -Members Attending _____

TOTAL DUE: _____

Check Included

Credit Card

VISA MASTERCARD AMEX DISCOVER

Credit Card number: _____

Expiration: _____ 3-digit Card Code: _____

Signature: _____

Must receive registration by 5:00pm on June 16th, 2008.

CANCELLATION POLICY: Attendance cancellation must be made 5 business days in advance to receive refund.

Objectives:

1. Describe various Medicare rules and instructions and policies
2. Apply principles of medical necessity to Medicare billing
3. Educate Providers in TrailBlazer's approach to medical review, both annual and automated, of Medicare claims

*This activity has been planned and implemented in accordance with the essential Areas and Policies of the Accreditation Council for Continuing Medical Education (ACCME) through the joint sponsorship of the Oklahoma State Medical Association (OSMA) and the Oklahoma County Medical Society (OCMS). The Oklahoma State Medical Association (OSMA) is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to sponsor continuing medical education for physicians.

OSMA designates this educational activity for a maximum of 2 AMA PRA Category 1 Credits™. Physicians should only claim credit commensurate with the extent of their participation in the activity.