



# OSMA News Now

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

May 30, 2008

## **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.

## **MARK YOUR CALENDARS**

Please mark your calendars for upcoming events for State Representative Dr. Doug Cox. Dr. Cox's re-election campaign is under way and it is very important that physicians across the state show support for the only physician in the State Legislature. If there is one race this year that all physicians should be involved in with financial support, it is the race to re-elect Dr. Cox. Please watch for more information regarding the Oklahoma City and Tulsa Events.

## **REGISTER NOW TO ATTEND!**

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. Debra 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. It will also include a 2 hour workshop from 6:00pm – 8:00pm 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 see attached information to complete. For further information please contact Sandy Deeba, OSMA CME Manager at (405) 843-9571 – 1-(800)-522-9452 or [deeba@osmaonline.org](mailto:deeba@osmaonline.org).

# Ask the CIS

## Answers from the National Cancer Institute's Cancer Information Service *Sponsored by Physicians' Campaign for a Healthier Oklahoma*

**Q:** What services does the Cancer Information Service provide?

**A:** The National Cancer Institute's (NCI) Cancer Information Service educates people about cancer prevention, risk factors, early detection, symptoms, diagnosis, treatment and research. Cancer Information Service (CIS) information specialists are knowledgeable, caring and experienced at explaining medical information in easy-to-understand language. The service is free, confidential and personalized.

CIS information specialists provide one-on-one information to cancer patients and their families, health professionals, and the public. CIS information specialists cannot provide medical consultations or make referrals to specific doctors. However, they can answer questions about cancer and tell you about NCI's printed and electronic materials. They also can help you learn about clinical trials (research studies with people) and cancer-related services and organizations.

You can contact the CIS in three ways, Monday through Friday:

- By telephone: Call 1-800-4-CANCER (1-800-422-6237) for service in English or Spanish from 9 a.m. to 4:30 p.m. local time.
- By TTY: People with TTY equipment may call 1-800-332-8615 between 9 a.m. to 4:30 p.m. Eastern Time.
- Over the Internet (instant messaging): People can get live, online help from the CIS through the LiveHelp instant messaging service on the NCI Web site at <http://www.cancer.gov>. LiveHelp is available from 9 a.m. to 11 p.m. Eastern Time.

In addition, the CIS provides one-on-one help with quitting smoking. For this free service, call the Smoking Quitline of the National Cancer Institute at 1-877-44U-QUIT (1-877-448-7848). Smoking cessation counselors are available from 9:00a.m. to 4:30 p.m. local time.

The National Cancer Institute's Cancer Information Service (CIS) is a trusted resource. Call us toll-free at 1-800-4-CANCER (1-800-422-6237) or visit us at [www.cancer.gov](http://www.cancer.gov).

### **NPIs for Secondary Providers Continues to be the Number One Reason Identified for NPI Rejects!**

If the entity that is required to be identified in the secondary provider field does not furnish an NPI, the billing provider must attempt to obtain that NPI to enter it on the claim. View this notice for important information. Because the NPI was implemented May 23, 2008, nationally for all Part B providers, legacy numbers of any type (UPINs/provider numbers) are no longer allowed and may not be present on any claim submitted to Medicare. Providers should not include legacy numbers for attending, referring, operating and ordering physicians or claims will reject. All tax ID/SSA numbers submitted by group physicians must also match the NPI numbers assigned to avoid additional rejects.

#### **Additional Guidance and Clarification for Identifying Secondary Providers in Medicare Claims**

In accordance with the National Provider Identifier (NPI) final rule, when an identifier is reported on a paper or electronically submitted claim for an ordering/referring/attending/operating/supervising/purchased service/other/service facility provider (in the X12N 837 claims transaction) or for a prescriber (in the NCPDP 5.1 retail drug claim transaction), **that identifier must be an NPI**. For Medicare purposes, this requirement is effective May 23, 2008. If the entity identified as the ordering/referring/attending/operating/supervising/purchased service/other/service facility provider or prescriber does not furnish an NPI at the time of the order/referral/purchase or time of service, the billing provider must attempt to obtain that NPI and report it on the claim. The billing provider may use the NPI Registry or contact the ordering/referring/attending/operating/supervising/purchased service/other/service facility or prescriber to obtain the NPI. While the implementation guides for the X12N claims transactions permit reporting of the Social Security Number (SSN) for some secondary providers if there is no NPI, CMS does not believe the billing provider will be successful in obtaining the SSN.

#### **Following is further guidance and clarification of these billing guidelines:**

- If the billing provider is unable to obtain the NPI of the entity to be identified in the service facility location loop, no identifier should be reported in that loop.
- If the provider is unable to obtain the NPI of the ordering/referring/attending/operating/supervising/purchased service other facility provider or prescriber, the **billing provider (in the X12N 837 transaction) or the service provider (in the NCPDP 5.1 transaction) should use its own NPI** to identify those secondary providers. Medicare will not pay claims if the secondary providers are not identified by NPIs.

#### **Medicare Claims Submitted by Third Party Billers**

Providers that use a third party to submit their Medicare claims, i.e.; clearinghouse or billing service, should verify that their claims contain no legacy numbers. It is recommended that the provider include the correct NPI information and exclude the legacy numbers on claims that are submitted to TrailBlazer by a third party.

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 each for OSMA Members and their practice manager and \$50 each 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 Deebe 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.