



Indianapolis Medical Management  
7330 Shadeland Station, Ste 200  
Indianapolis, IN 46256

## IMM INSIGHT

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### BILLING SERVICES NOW OFFERED!

IMM recognizes that these are challenging times for many physician practices. In an effort to help maximize reimbursement for our clients, IMM is now offering a hybrid billing model.

IMM has created a Billing Service which combines the expertise your practice currently has in place with **our team of experts** in payment posting and accounts receivable management. Together, IMM is prepared to partner with physician practices to maximize revenue cycle management.

IMM Billing Service offers the opportunity for practices to maintain their **current billing staff on site for face-to-face interaction with physicians and patients**. Our billing service will use best practice standards and the expertise of our team to obtain maximum reimbursement for your practice.

If the structure of your revenue cycle is not permitting optimal revenue cycle performance, it may be time to explore other structural models that may add functionality and/or focus attention on key revenue cycle processes. You may contact your IMM Business Consultant or Sue Gabriel at 621-7197 for more information.

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### ANNUAL OSHA AND HIPAA TRAINING

It's time to do your annual safety and HIPAA training for 2010. OSHA requires healthcare workers be re-educated each year. Annual education should include topics such as bloodborne pathogens, hazard communication and fire safety. As you know, HIPAA Regulations are changing and evolving. Annual HIPAA training with frequent reminders for staff is highly recommended.

Remember, all Community Health Network employees **MUST** complete NRCP, HIPAA, and other mandatory training every year. Again this year, the mandatory training is found in each individual's learning plan in MyLearning. All employees must finish mandatory training by June 30, 2010.

The annual mandatory education for VEI physician practice employees is as follows:

HIPAA Privacy ePak and exam  
HIPAA Security ePak and exam  
NRCP ePak and exam  
VEI CPI OSHA ePak and exam

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## RED FLAG REMINDER

Creditors and financial institutions that allow covered accounts must be in compliance with the Red Flags Rule **by June 1, 2010**, as outlined in 165 CFR Section 681.2. Under the rule, a physician or practice is considered a creditor if they extend “credit” which means they regularly defer payment for goods or services and have covered accounts. A covered account is (1) an account primarily for personal, family or household purposes, that involves multiple payments or transactions, including one or more deferred payments; and (2) any other account for which there is a reasonably foreseeable risk to customers, or to the safety and soundness of the financial institution or creditor from Identity Theft.

Although the Red Flags Rule does not become effective until June 1, 2010, **Community Health Network employed practices** who are managed by IMM should implement and follow identity theft prevention policy F015, which became **effective May 1, 2009**. All representatives and business associates have a duty to be vigilant for any evidence of a Red Flag, to notify the immediate supervisor and to report any evidence of a Red Flag or Identity Theft in accordance with the office incident reporting policies (CR9 and CR10). If there is sufficient evidence of a Red Flag, Identity Theft, or both, Security should be notified in accordance with the facility’s incident reporting policy so that an investigation can be initiated.

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## INDIANA UNCLAIMED PROPERTY AMNESTY PROGRAM

The Office of the Indiana Attorney General has instituted a **one-time only** Unclaimed Property Amnesty Program to help organizations who are holding unclaimed property to come into compliance with the [Unclaimed Property Act \(IC 32-34-1\)](#), **without the consequence of payment of accrued interest and applicable penalties**. Any business organization that has unclaimed property that should have been reported during this year or in previous years – but has not done so or has not done so in full compliance with the Unclaimed Property Act – may participate. To participate in the amnesty program eligible participants must:

1. Register on the division’s web site.  
<https://www.indianaunclaimed.com/apps/ag/ucp/userRegistration.html>
2. Submit a completed and signed Amnesty Agreement form to the Attorney General's Unclaimed Property Division.
3. Submit unclaimed property reports – **one for each of the last 10 years**, even if there is nothing to report – and remit all funds to the State **before November 1, 2010**.

**Organizations that fail to take advantage of the amnesty program will be charged interest and are subject to additional penalties.**

Property is “unclaimed” and must be reported if the owner cannot be found or contacted after the following period of years:

- Wages/payroll checks 1 year
- **Patient credit balances 3 years**
- Employee expense checks 5 years

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### INDIANA UNCLAIMED PROPERTY (CONTINUED)...

**The Unclaimed Property Act requires filing a report annually**, even if there is no unclaimed property on the books or if the value of any unclaimed property is minimal. Medical offices are subject to the provisions of this law.

Before reporting unclaimed property of more than \$50.00 to the State, the holder must perform due diligence. Due diligence is the process of sending a letter via first class mail or better to the last known address of all property owners no more than one hundred twenty (120) days and no less than sixty (60) days before the State's November 1 reporting deadline. This means the holder must complete due diligence between July 1 and November 1. Holders must mail checks to owners for whom they have the proper address and only report unclaimed property to the State if it meets the abandonment timeline. Due diligence is required for all property with a value of at least \$50.00 and optional on property worth less than \$50.00.

For additional information about the amnesty program see:  
<http://ucp.indianaunclaimed.com/attorneygeneral/ucp/reporting.html>  
[http://ucp.indianaunclaimed.com/attorneygeneral/ucp/holder\\_faq.html](http://ucp.indianaunclaimed.com/attorneygeneral/ucp/holder_faq.html)

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### CHANGES TO TIMELY FILING REQUIREMENTS

On March 23, 2010, President Obama signed into law the Patient Protection and Affordable Care Act (PPACA), which amended the time period for filing Medicare fee-for-service (FFS) claims as one of many provisions aimed at curbing fraud, waste, and abuse in the Medicare Program.

The time period for filing Medicare FFS claims is specified in Sections 1814(a), 1835(a)(1), and 1842(b)(3) of the Social Security Act and in the Code of Federal Regulations (CFR), 42 CFR Section 424.44. Section 6404 of the PPACA amended the timely filing requirements to reduce the maximum time period for submission of all Medicare FFS claims to one calendar year after the date of service.

Under the new law, claims for **services furnished on or after January 1, 2010, must be filed within one calendar year after the date of service.** In addition, Section 6404 mandates that claims for services furnished before January 1, 2010, must be filed no later than December 31, 2010. The following rules apply to claims with dates of service prior to January 1, 2010. Claims with dates of service before October 1, 2009, must follow the pre-PPACA timely filing rules. Claims with **dates of service October 1, 2009, through December 31, 2009, must be submitted by December 31, 2010.**

Section 6404 of the PPACA also permits the Secretary to make certain exceptions to the one-year filing deadline. At this time, no exceptions have been established. However, proposals for exceptions will be specified in future proposed rulemaking.

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**MEDICARE ADVANTAGE PATIENTS SWITCHING PLANS**

Some payers are dropping their Medicare Advantage products due to new rules requiring Medicare Advantage private fee-for-service plans to establish provider networks by 2011 and also changes that are the result of the Patient Protection and Affordable Care Act (PPACA). As a result, many beneficiaries are changing their Medicare coverage. **Remember to ask patients at every visit what type of Medicare plan they are enrolled in.** Also, remind them to bring an ID card when scheduling appointments.

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**PQRI CHANGES UNDER PPACA**

Under the recently passed Patient Protection and Affordable Care Act (PPACA), incentive payments for voluntary participation in Medicare’s Physician Quality Reporting Initiative (PQRI) will be reduced to 1 percent in 2011 and 0.5 percent from 2012–2014. An additional 0.5 percent incentive payment will be made to physicians who participate in a qualified Maintenance of Certification Program (quality practice-based learning programs through specialty boards). Also announced is that **beginning in 2015 physician payments will be reduced if they do not successfully participate in the PQRI program.** In 2015, the penalty will be 1.5 percent; in subsequent years it will be 2.0 percent. Contact your IMM Business Consultant to learn how to participate in PQRI.

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**IMM’S NEWEST BILLING AND CODING MEMBER**

Please join us in welcoming **Rhonda Williamson** as the new IMM **Billing Office Supervisor** effective April 5th. Rhonda comes to us with many years of billing experience at General Surgeons of Central Indiana (GSCI) and will be bringing the billing from this practice with her into the IMM Billing Service where she will be responsible for the day-to-day operations. Welcome aboard, Rhonda!

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Some Health Observance Dates for May

- American Stroke Month
- Hepatitis Awareness Month
- Lupus Awareness Month
- Melanoma/Skin Cancer Detection & Prevention Month
- Mental Health Month
- National Arthritis Month
- National Asthma and Allergy Awareness Month
- National Osteoporosis Awareness and Prevention Month
- World No Tobacco Day

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