
VITALS

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Issue 1

Message from the Chief

Ron Flormann
CCO, Glenwood Systems LLC

Change starts today! If you wait for tomorrow, it NEVER happens.

I am amazed at how quickly 2010 is winding up; it seems like yesterday that we were wishing you a Happy 2010.

The medical industry continues to change at a pace faster than ever before. Healthcare reform is being thrust upon our industry by economics and legislation, forcing change.

Your medical practice is a business. It provides a service to consumers and income for employees. It supports the economy at every level whether sponsorship of a Little League Team or lunch purchased at the local deli to the taxes paid at the local, state and federal levels.

We read on a weekly basis about the shortage of primary care physicians; physicians claim that they are unable to see additional patients or costs have increased and revenue decreased to the point that they can no longer survive in

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Biller's Tips

Knowing the Insurance Coverage Upfront Prevents Loss on the Back End

Nat Loganathan
Founder, Glenwood Systems LLC

The #1 driver contributing to successful collection in a practice is Eligibility Checking. The current economic climate and a healthcare system in transition make it critical that your practice check your patients' insurance eligibility for *each* visit.

The industry has made it easier than ever to check a patient's benefits and participation status in the office prior to the patient encounter. Yet, we often see that eligibility checking is not taken seriously by the front desk staff. This lack of perseverance invariably leads to lost revenue and additional staff work, as patients are less likely to pay when billed post-visit.

Medicare and Medicaid HMOs are proliferating and patient carriers change with greater frequency, often without the patient's knowledge.

This becomes a challenging situation for the medical practice as patients tend to present Medicare / Medicaid as their primary insurance. The issue is further compounded when an office accepts the card without realizing that this patient may be in an HMO in which the practice is not a participant.

Another challenge facing the medical practice today is the HSA (Health Savings Accounts). In this case the patient is responsible for a high-deductible payment amount. The carriers only act as re-pricing agents in these HSA plans. It is important to recognize HSA patients and collect the patient responsibility portion up front.

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private practice. It is a travesty that this bastion of the American landscape, the private physician, is being compressed, squeezed and in some cases forced out of business. Understand this; it is no longer enough to measure practice health by patient count and cash flow.

Yet I see opportunity, an expanding segment of private practice physicians exercising true American entrepreneurialism and growing their medical practices. These physicians recognize that the industry is changing and they are evolving with it.

A new generation of successful physicians is using an organized combination of software, process and services to adapt to the changing private practice landscape and improve their business. They see the glass as “half full” and know that they need to drive continuous improvement in their private medical practice. Improvement requires hard work and focus (remember residency?). This means driving work flow efficiencies, reducing overhead costs, and assigning tasks to the lowest cost resource. It means marketing your practice to the patient consumer. It means looking at true practice management costs and measuring return on investment (ROI). It means changing how you execute the business aspects of your medical practice.

At Glenwood Systems, our products and service tools are designed to drive continuous business improvement in the private medical practice. We offer CCHIT 2011 certified ambulatory EMR with a 5 star usability rating, BUT we are not an EMR company. We provide billing software and services, BUT we are not a billing company. These are tools to achieve a level of continuous business improvement in the practice – reduce overhead costs, maximize revenue and profitability without sacrificing medical care.

Glenwood Systems is a medical practice business partner. We use EMR and billing as some of the tools to improve the workflow and practice profitability. We have business expertise to share with our physician partners. You practice medicine; we practice the business of medicine.

Our unique holistic approach is designed for the progressive practice determined to grow their practice or for the distressed practice struggling to manage costs and maximize revenue.

If you want to set a standard of continuous business improvement in your medical practice and reap the satisfaction and financial benefits, give us a call.

I look forward to hearing from you.



National Coordinator Posts Meaningful Use FAQ

The Office of the National Coordinator posted a set of frequently asked questions to help health care providers understand and meet requirements for the meaningful use rule. The 20 questions and answers cover topics ranging from reporting clinical quality measures to certification of electronic health records (EHRs).

Most of the questions address scenarios in which providers already use EHRs or modules to report data and what steps providers need to take to ensure they meet meaningful use.

In one question, a vendor asks whether it needs to seek testing and certification for an EHR module it wants to market when the complete EHR has already been certified. The answer is yes, the module also needs to be certified.

Another question posed asks whether a provider could seek certification for an earlier version of an EHR for which its vendor was not going to pursue certification. ONC said yes but noted among other things that the costs of certification would be borne by the provider in that case.

CMS, which released the meaningful use final rule in July, has said it will open registration for the incentive program in January. First payments to eligible physicians and hospitals could go out as early as May 2011.

To begin receiving payments, healthcare providers must have demonstrated meaningful use of certified EHRs for 90 days.

For more information, including the full list of FAQs, please visit:
http://healthit.hhs.gov/portal/server.pt/community/onc_regulations_faqs/3163

What's New at Glenwood

Low cost technology solutions for the physician office

For small and mid-size physician groups, one of the headaches in running the office is managing computers and networks. With the advent of EMR, paperless offices need to be up all the time. Significant downtime can disrupt the practice.

Fortunately, technology has come a long way in the last decade helping the physician eliminate the networking burden. It is now possible to configure the office with simplicity found in a home.

The following advances have made life easier:

- 1) All software required to run a practice (Scheduler, Billing, EMR, etc.) come with ASP model options. For one low cost, the physician can subscribe to a service like GlaceComplete that includes software, maintenance, updates and backup.
- 2) Cost effective and reliable broadband connectivity is widely available.
- 3) Cost of hardware is relatively cheap – a decent desktop costs only a few hundred dollars.
- 4) Integrated fax options are available – eliminating the need for dedicated fax machines.

Consider a solo practice with one physician and two full time employees subscribing to an ASP model with EMR. The following simple-to-use hardware configuration would suffice (with broadband subscription and an internet fax service):

- 2 Desktops / laptops connected to 2 all-in-ones and 2 Scanners (optional) (Approx \$1500-\$2500)
- 1 Tablet PC (Approx \$1000)
- 1 Wireless router (under \$100)
- 1 Spare desktop / laptop. 1 Spare all-in-one. 1 Spare wireless router (Approx \$750)

With the above configuration, upon any failure, it is easy to get back online with just swapping the spare hardware while troubleshooting the failed hardware. Failed hardware can simply be replaced as the cost of fixing hardware far exceeds buying new hardware. As the hardware price/performance ratio keeps improving, it is easy and cost-effective to keep upgrading to new hardware once every few years. If laptops are used instead of desktops, the office is fully portable to satellite locations!

With the main burden of software installation, maintenance and backup being eliminated from the office, the networking task is reduced to just plug and play of standard off-the-shelf low-cost hardware. Now *that* is a change you can believe in!

**Want more information?
Call Us
888-452-2363 (GlaceMD)**

Hospital patients pose a different challenge – they are not eligibility checked for Part-B or physician coverage in the hospital. And sometimes, physicians may not have an option of choosing patients with coverage only. It is important to establish arrangements with the hospital to make the hospital responsible for ineligible or non-covered patients.

Eligibility checking also ensures that the correct co-pay / coinsurance is collected. Co-pay / coinsurance vary for various types of services (sick visits/well visit, primary care/specialist etc.).

Eligibility checking tools like those included with the Glace products are a gateway to the eligibility checking clearinghouse. It is important to remember that while most major payers have a relationship with a clearinghouse, not every payer is connected via the clearinghouse. There are insurance carriers that may not participate or may have system issues that provide limited / time-restricted information.

It is recommended that when a “Not verified” status shows up, eligibility is checked by other means – a direct login into the carrier’s website or phone verification. Carrier website URL’s can be maintained as shortcuts in the desktop for easy access.

Bottom line – eligibility checking is a major step to ensure a 99%+ collection rate. Without eligibility checking, there is a significant chance that the physician services may not be fully reimbursed.

Here's a chuckle....

A pediatric nurse had the difficult assignment of giving immunization shots to children.

One day she entered the examining room to give four-year-old Lizzie her shot.

“NO! NO! NO!” she screamed.

“Lizzie,” her mother scolded, “That’s not polite behavior.”

At that, the girl yelled even louder, “NO, THANK YOU! NO, THANK YOU!”

**Practice Consultancy ~ Electronic Medical Records ~ Practice Management Software ~ Billing Services
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EHRs valuable to docs' maintenance of licensure, says FSMB

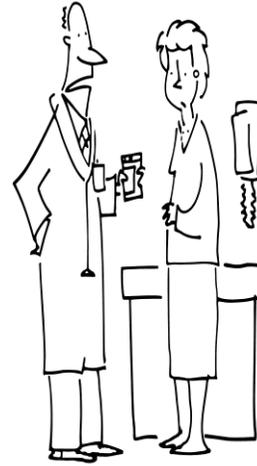
The Federation of State Medical Boards (FSMB) says it recognizes that electronic health records could be used by doctors both to improve patient outcomes and assess ongoing clinical competence for purposes of medical licensure.

In April 2010, the FSMB's House of Delegates approved a framework for Maintenance of Licensure (MOL) that recommends that physicians, as a condition of license renewal, "should provide evidence of participation in a program of professional development and lifelong learning."

"By utilizing health information technology, physicians under MOL could continually improve the care that patients receive from them, could better understand the impact of their care on patient outcomes and bring their practices in line with the latest medical research," adds Freda Bush, MD, chair of the FSMB's board of directors. "It would also enable physicians to use real-time comparative practice data to guide ongoing practice improvement efforts."

For more information please visit:

<http://www.healthcareitnews.com/news/ehrs-valuable-docs-maintenance-licensure-says-fsmb>.



"The side effects include extreme agitation and irritability from not being able to open the bottle."

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81 W. Main Street, West Wing 3rd Floor
Waterbury, CT 06702

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