



# SOUTH COUNTRY HEALTH ALLIANCE PROVIDER NETWORK NEWS

Volume 2, Issue 3 • May/June 2010

# Thank You!

## At A Glance

- Incentives for EMR ..... 2
- Health Care Home  
Implementation..... 3
- Medical Home Training.... 3
- Code Checks..... 4
- Credentialing Updates ..... 5

HEDIS 2010 is complete! South Country Health Alliance, along with Q Mark, Inc. would like to thank our providers for their cooperation with this year's HEDIS abstraction.

The HEDIS medical record abstraction process has now been completed. It is much work for everyone involved and your assistance is very much appreciated.

We thank you for partnering with us to improve the health of individuals, families and communities.

Please call or email us to discuss any significant plans to change your process for next year; including contact names and numbers, centralized abstraction for multiple clinics and/or new or closing clinics. Call Lori Nelson, Clinical Improvement Coordinator, at 507-431-6597 or email her at [lnelson@mnscha.org](mailto:lnelson@mnscha.org).

## Child and Teen Checkups *The Adolescent Encounter: The Basics and Beyond* June 23, 2010 in Moorhead

Who should attend: Public Health Nurses (PHNs), clinic nurses, primary healthcare providers, and other professionals who would like to enhance their knowledge, assessment and skills in working with adolescents. Additionally, this training is designed for professionals involved in providing Child and Teen Checkups screening services.

Visit the following website: <https://www.health.state.mn.us/divs/cfh/connect/index.cfm?article=mchedtrain.offerings>

This training is provided by collaboration with the Minnesota Department of Human Services and Health through the Child and Teen Checkups Program.

### Spotlight

Receive your bimonthly Provider Network Newsletter and Flash Bulletins automatically via e-mail! Get the most up-to-date information as soon as it is available. Eliminate interoffice routing and distribution by having multiple staff sign up!

To start receiving the Newsletter via e-mail go to [www.mnscha.org](http://www.mnscha.org) and click on the envelope icon





# Incentives to help implement an Electronic Medical Record

The HITECH Act of the 2009 Stimulus bill provides \$19 billion dollars to encourage the use of electronic medical records.

Starting in 2011, providers can receive an incentive of up to \$44,000 under the Medicare plan or up to \$64,000 under the Medicaid plan over a 5 year period to implement an EMR. Qualified providers can qualify under either incentive, but not both.

To qualify for the incentive payments under the HITECH Act, providers must demonstrate the “meaningful use” of a certified EMR.

“Meaningful use” includes:

- The EMR is used at the point of care
- Provide electronic prescriptions
- Ensures data sharing
- Must be capable of clinical reporting

## 2011 qualification criteria:

- 90 day reporting period to prove meaningful use through required measures

South Country Health Alliance has new **Take Charge!** Wellness program flyers and vouchers. Vouchers reward members for health maintenance activities like infant and teen check-ups, lead tests, mammograms and more. If you service South Country members, help spread the word about our **Take Charge!** program and sign those vouchers! Vouchers can be found online at [http://mnscha.org/members\\_healthpromo.htm](http://mnscha.org/members_healthpromo.htm).

South Country Health Alliance has a wealth of information on our website, [www.mnscha.org](http://www.mnscha.org). You can find our information about our company, programs, or technical documents you need to help serve our members. Don't forget to check it out today!

- One clinical decision support rule relevant to a specialty or a high clinical priority
- Electronic claim submission
- Electronic insurance eligibility
- Provide patients with timely electronic access to their health information
- Provide patients, upon request, with an electronic copy of their discharge instructions and procedures at the time of discharge; and
- Require the capability to exchange health information where possible in 2011, with participation in a national health information exchange by 2015.
- Physicians that do not adopt an EMR by 2015 will be penalized through decreases in Medicare reimbursements rates.

For more information on HITECH, please visit [HealthIT.hhs.gov](http://HealthIT.hhs.gov). ■

## SCHA Provider Network Management Staff

Mark Ward

*Director of Provider Network Management*

Jim Barkhaus

*Provider Network Manager*

Melissa Campbell, RHIA, CCS

*Provider Education & Coding Manager*

Jeanette Garcia

*Credentialing Specialist*

Christine Irish-Lamont, CCS-P

*Coding & Reimbursement Specialist*

Beth Eaton

*Coding & Reimbursement Specialist*

Carolyn Bauman

*Provider Data Application Analyst*

Bobbi Brabbit

*Office Support Specialist, Brainerd*

Carol Mahagnoul

*Dept. Support Specialist,  
Provider Network Management*

©2010 by South Country Health Alliance  
Provider Network News is a bimonthly publication of South Country Health Alliance. For submission information, or reprint permission, contact: SCHA, 110 West Fremont St., Owatonna, MN 55060, USA  
• E-mail: [mcampbell@mnscha.org](mailto:mcampbell@mnscha.org)  
• Web site: [www.mnscha.org](http://www.mnscha.org)

## CLICK ON ME!



Get the most up-to-date information as soon as it is available. Go to [www.mnscha.org](http://www.mnscha.org) and click on the envelope icon!

## REPORTING Fraud, Waste and Abuse

SCHA believes it is the responsibility of everyone to report suspected fraud, waste or abuse. You can report anonymously through our REPORT-IT hot line by calling 1-877-778-5463. You can also make a report at [www.reportit.net](http://www.reportit.net). Username: SCHA, Password: Owatonna



# Health Care Homes Implementation Certification Training Workshop

A workshop for Minnesota clinics and clinicians considering HCH Implementation

## June 18, St. Paul

8 a.m. - 4 p.m. Minnesota Department of Health, Snelling Office Park, Mississippi Room, 1645 Energy Park Drive, Saint Paul.

Register at: <http://www.acteva.com/booking.cfm?bevaID=202589>

## June 30, Duluth

8 a.m. - 4 p.m. Edgewater Inn and Conference Center, 2400 London Road, Duluth.

Register at: <http://www.acteva.com/booking.cfm?bevaID=203437>

\$15.00 Registration Fee - Max Participants: 40 at each location Lunch and Snacks provided Questions or Comments: phone 651-201-5421 or email health.healthcarehomes@state.mn.us

Presentation & Discussions led by: Marie Maes-Voreis, RN, MA, Program Director MDH Health Care Homes

This training was jointly coordinated by MDH Health Care Homes and MDH Minnesota Children with Special Health Needs in cooperation with American Academy of Pediatrics. ■

## Learning Objectives

At the end of this training participants will:

1. Describe the HCH standards and strategies to implement these standards in your practice.
2. Describe the components of HCH standards for patient/family involvement and how it relates to patient/family-centered care.
3. Identify three resources available to implement the HCH standards in your practice.
4. Describe the application process, timeline and documentation required for HCH certification.
5. Describe the resources available to clinics/applicants to help prepare for the HCH certification.
6. Identify at least one characteristic of the HCH payment methodology that is different from current practice.

## Medical Home Training Package Introduced by Lakewood Health System

Lakewood Health System, a comprehensive healthcare facility located in the heart of Minnesota, has introduced a step-by-step training package for the state-supported “health care home” model of health care. The package is available for purchase by other clinics and systems looking to build a similar model of care.

Lakewood Health System’s Medical Director, Dr. John Halfen began building the Medical Home at Lakewood in 2007. Due to the high number of requests to Lakewood Health System from other practices for guidance, a Medical Home Training Package was recently developed. The package includes:

- The book “Putting the Principles into Practice,” written by Dr. John Halfen, Medical Director and founder of Lakewood Health System’s Medical Home Program
- Patient perspectives
- Training presentation (in Power Point), narrated by Dr. Halfen
- Frequently asked questions with Dr. Halfen and Nicole Worden, Medical Home Care Coordinator at Lakewood Health System

Necessary documents for implementation, including steps for developing a medical home, program benefits, recommended team structure and principles, criteria for admission, consultation requests, and examples of patient communication materials

*Medical Home Training Package continued on Pg. 5*

## URGENT REQUEST

SCHA is looking for Contracted Providers who are preparing for Health Care Home (HCH) certification to pilot the HCH program with us. If you are currently pursuing certification through the Minnesota Department of Health (MDH) or plan to do so within the next six months, please contact SCHA Provider Network Management at [providerinfo@mnscha.org](mailto:providerinfo@mnscha.org) or call Carol at 507-431-6064.

# Code Checks



## Coding for Pressure Ulcers

When documenting for pressure ulcers there are two codes you must document: (1) the location of the ulcer and (2) the stage of the ulcer. Often times coders have to use the pressure ulcer unstaged code (707.20) because no stage exists in the documentation or lack of documentation explaining what stage the ulcer is that the patient has. When a patient has multiple ulcers each ulcer has to be coded separately by different sites such as coccyx and the heel. These ulcers also have to be coded separately if there are two different stages of ulcers. Accurate and complete documentation for two different sites and two different stages, plus the diagnosis of the underlying reason why the patient has the ulcer would be as shown below. Example: Patient comes in for evaluation of pressure ulcer of coccyx stage II and pressure ulcer of heel stage I due to atherosclerosis of extremities.

This would be coded:

Atherosclerosis of extremities with ulceration - code 440.30

Ulcer of coccyx -707.03 and stage II - code 707.22.

Ulcer of heel -707.07 and stage I - code 707.21

## Pressure Ulcer Stages and Codes

707.20 Pressure ulcer, unspecified stage

707.21 Pressure ulcer, stage I – erythematic (reddened skin)

707.22 Pressure ulcer, stage II – blister, abrasion (partial thickness skin loss)

707.23 Pressure ulcer, stage III – full thickness (skin loss, necrosis into subcutaneous)

707.24 Pressure ulcer, stage IV – full thickness skin loss (muscle, tendons, and tissues around bone)

707.25 Pressure ulcer, unstageable – inaccessible because of covered by eschar or grafted.

Please remember when documenting for pressure ulcers to document not only the site but the stage for more accurate documentation and accurate coding.

If you have any questions or any ideas of what you would like to see for coding tips, please contact Beth Eaton, Coding and Reimbursement Specialist, at (507) 431-6076 or email her at [beaton@mnscha.org](mailto:beaton@mnscha.org).

## Modifiers

As we continue our focus on modifiers, we will look at modifiers 80, 81, and 82 & AS (Assistant Surgeon) this will conclude our focus on modifiers. I hope you have found this to be helpful. If you have any other questions regarding modifiers please feel free to contact me. As with all modifiers their use should follow Current Procedural Terminology (CPT) guidelines.

### Modifier 80: Assistant Surgeon

This modifier is used when the as-

stant services are being provided by a Medical Doctor (MD). An assistant at surgery is a physician who actively assists the physician in charge of performing the surgical procedure. The assistant in this case provides more than just ancillary services.

- Global surgery rules do not apply with this modifier.

- Reimbursement may vary on these services; most payers have a list of procedures which they will allow payment to an assistant.

- One Exception on this would be for OB care and delivery.

An example of this would be; using 59510 for the primary surgeon, the assistant surgeon would bill 59414 with modifier 80

### Modifier 81 Minimum Assistant Surgeon:

This modifier is used to identify services of a surgical assistant with no “hands on,” assistance or a second or third assistant that falls into this category of minimum services.

- Supporting documentation describing the medical necessity for an assistant must be submitted with the claim.

- This modifier is not usually covered by Centers for Medicare and Medicaid (CMS)

### Modifier 82: Assistant Surgeon When Resident Surgeon not Available:

The use of this modifier is very limited, and used only when the services being provided are being done by a MD, documentation must be included stating that there

Code Checks Continued on Pg. 5



*Code Checks Continued from Pg. 4*

was not a qualified resident available in this situation.

AS (Assistant at Surgery) use this modifier when services are provided by Physician Assistant (PA) or Nurse Practitioner (NP)

If you have any questions or any ideas you would like to see for coding tips, please contact Christine Irish-Lamont, CCS-P, Coding and Reimbursement Specialist at 507-431-6594 or e-mail her at [cirish@mnscha.org](mailto:cirish@mnscha.org). ■

**Visit our web site at  
[www.mnscha.org](http://www.mnscha.org)  
for news,  
information, forms,  
and more!**

*Medical Home Training Package  
continued from Pg. 3*

The package is available for purchase by calling Kristen Svobodny at 218-894-8577. Cost of the training package is negotiable per quantities requested and/or if packages are distribution through state and regional non-profit organizations.

To learn more, visit Lakewood Health Systems website at <http://www.lakewoodhealthsystem.com/Services/MedicalHome.html> or contact Dr. John Halfen at 218-894-1551. ■



## Credentialing Updates

In an effort to cut cost and aid in streamlining the credentialing process, South Country Health Alliance (SCHA) is now sending practitioner acceptance letters via email. Notification will be sent to the credentialing

contact listed on the first page of the credentialing/recredentialing application within 15 days of approval. Please be sure to list a contact person and email address when completing the applications.

- By now you've probably heard of the Minnesota Credentialing Collaborative (MCC) and the outstanding benefits it offers providers. While SCHA continues to move in the direction of a paperless and more streamlined credentialing process by partnering with the MCC, we encourage you to ease your process by joining and submitting your credentialing/recredentialing applications with the MCC. It's a secure, one-stop, online shop for credentialing applications!! To join or learn more about the MCC, please visit: [www.mncred.org](http://www.mncred.org) or call (612) 360-9793.
- If you have questions regarding the credentialing process or need to access credentialing forms, visit our website at [www.mnscha.org](http://www.mnscha.org). Click on the Provider Resources tab then on the Credentialing link in the left navigation bar. You may also click on the Provider Manual link and then Chapter 5 - Credentialing to access more detailed credentialing information.

If you would like to speak to a credentialing representative directly, please contact: Jeanette Garcia at [jgarcia@mnscha.org](mailto:jgarcia@mnscha.org) or (218) 316-3180. ■