

December 2017

### Making a List ... for 2018

Santa should not be the only one who is making a list – and checking it twice – this time of year. Practice Administrators and Executives should be making their own lists of things to do and consider as we close out 2017 and prepare for 2018. This article suggests a few items you may want to have on your list.

#### Patient Registration

January 1 is often the start of new insurance policies. Again, this year, there will be more plans with high deductibles, high copays/coinsurance, and possibly new out of network financial requirements assigned as the patient's responsibility. Are you ready for these updates? Here are some items specific to your patient financials to consider:

1. Obtain copies of new insurance cards and verify eligibility. This should be done at every visit throughout the year but especially at the beginning of the new year. Existing patients may have new insurance benefits or a new insurance company. A fresh copy of the patient's insurance card (new or not) should be added to your records for easy reference in case of claim issues. A review of benefits is important so there are minimal surprises with how the claim processes.
2. For hospital based physicians, make sure to have a smooth process for obtaining the demographic information from your hospital(s), either through direct system access or via facesheets. Direct access is preferred to reduce issues with loss, delay, up-to-date accuracy on any changes, and to have access to medical records if needed for claim follow up.
3. Collect new deductibles and copays. Are your staff members prepared to ask for and collect new deductibles? Do you have a policy that helps them know what to do if the patient is not prepared to make this payment at the time of the visit? You might consider doing some role play in your team meetings to help the team know how to handle the various situations that can arise when asking patients for money. If hospital based, it may be advisable to assign a team member to call the patients directly either preceding or in follow up to the patient's receipt of your statement.
4. Review your patient financial arrangements. If you have any financial contracts for patient payments and other financial responsibilities, the beginning of the new year is a good time to review and update them. For example, you may want to adjust the payments based on the patient's new deductible and copay information.
5. Obtain new signatures on forms. HIPAA (Health Insurance Portability and Accountability Act of 1996) forms and certain other forms typically need to be timely in their signatures and dates. The patient's first visit in the new year can be a good time to get these signatures. Update all your financial forms to ensure they meet current regulatory requirements. For example, make sure that you are using the most recent version of the [Advanced Beneficiary Notice](#) (ABN). Review our previous

## Timely Topics

### PAYMENT AND PRACTICE MANAGEMENT

Timely Topic to ensure you are compliant with the ABN form and issuing requirements. Hospital based provider services may or may not be covered by the hospital's intake forms. Review those forms to verify.

#### **Financials**

As we begin the new year, it is also time to close out the old. Use this time to wrap up year-end initiatives and plan goals for 2018.

1. Be prepared to produce month end, quarter end, and year end financials. Check with your owner, Board and accountant to see what items need to be gathered and reports generated for the final 2017 financials and tax preparations.
2. Review your fee schedules and implement updates if appropriate.
  - a. Do you have any payers paying a particular code at 100%? If so, it may be time to consider updating your fees for that service.
  - b. If your practice management system houses payer fee schedules in addition to your gross fee schedule, make sure to update to the 2018 Physician Fee Schedule for Medicare. If you have any private payer contracts based on Medicare rates, update those schedules as well.
3. Review your budgets and 2018 financial projections. Do your budgets align based on the new fee schedules?

#### **Practice Operations**

There is always room for improvement in every practice. What do you want to include in your 2018 goals and initiatives? You may want to consider some of the next few items in developing your game plan for the new year.

1. Prepare to submit your data for the 2017 [Quality Payment Program](#) (QPP) by March 31, 2018. This submission can affect your payments in 2019 by as much as +/- 4% for the Merit-based Incentive Payment System ([MIPS](#)) and 5% for Advanced Alternative Payment Models (APMs) so don't miss this. The ASA offers information on the QPP specific to anesthesia and pain medicine that you can access [here](#).
2. Review the 2018 quality measures once that list is available and final from CMS and decide which ones your practice will report. When selecting quality measures, consider how those items will be completed and recorded in the course of your daily operations. Does each measure require any additional training or preparation so your staff and physicians and software will be prepared to capture the information needed to successfully report? Review additional information on ASA's website for [MACRA](#) and [MIPS Reporting](#) through the Anesthesia Quality Institute's National Anesthesia Clinical Outcomes Registry.
3. Prepare to participate in the Medical Group Management Association's (MGMA) 2018 surveys. In preparation for participation, fill out your [Practice Profile on the MGMA platform](#). This will ensure you receive survey requests most relevant to your anesthesia or pain practice.

## Timely Topics

### PAYMENT AND PRACTICE MANAGEMENT

4. Conduct a Strengths Weaknesses Opportunities and Threats (SWOT) analysis on your practice. What was done well and what could the practice improve upon for 2018? Based on your analysis, what goals do you want to put in place for 2018?
5. Update your coding and billing resources for 2018. ASA resources include the Relative Value Guide®, the CROSSWALK® and the Reverse CROSSWALK®. Other essential resources are the 2018 editions of the Current Procedural Terminology (CPT®), Healthcare Common Procedure Coding system (HCPCS) and the International Classification of Diseases, 10th Edition, Clinically Modified (ICD-10-CM) code sets. *(New ICD-10 codes went into effect October 1, 2017.)*

Taking time to reflect on 2017 can provide valuable insight on how to approach 2018 in your anesthesia or pain practice.

**Happy holidays and Enjoy a Wonderful New Year in 2018!**