



PQRI: Success Threshold Lowered to 50 Percent of Eligible Patients

In response to physicians' frustration with narrowly missing the Physician Quality Reporting Initiative (PQRI) bonus, CMS lowered the claims-based reporting requirements for 2011 to 50 percent (from 80 percent) of eligible patients. In addition, incentives continue for physicians who successfully participate in the 2011 PQRI, with a 1.0 percent bonus on all Medicare allowable charges. In order to qualify, a physician must report on three or more measures (or less than three if fewer apply) at least 50 percent of the time. Similar to 2010, physicians will have the option to report on PQRI for

either a full year (Jan. 1 to Dec. 31) or a half year (July 1 to Dec. 31). Physicians will also continue to have the option to report via claims or registry reporting. Registry-based reporting, however, will continue to require successful reporting on 80 percent of eligible patients – but such reporting has a success rate of more than 90 percent today. Requirements passed in the new health care reform law will punish physicians who are not successfully reporting on PQRI measures by 2015.

Source: Ohio Medical Group Management Association (OMGMA) message July 2, 2010.

Anthem Recoupment Notification Enhancement

Anthem redesigned the Recoupment Notification page that appears at the end of your remittance advice when a negative balance is carried forward onto one or more subsequent remits. The change was implemented on April 19, 2010.

For more details, go to:

http://www.anthem.com/provider/noapplication/f1/s0/t0/pw_b144223.pdf?refer=ahpprovider&state=in.



Who is PRC Medical?

PRC is a leading provider of technology-enabled business services to the healthcare industry. Successful medical practices rely on our service, technology and expertise to maximize revenue and profitability. To win in today's challenging healthcare environment, you need PRC Medical on your team.

We help doctors get paid for what they do.

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- ✓ Billing
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Achieve Meaningful Use with Your Electronic Health Records (EHRs)

On Tuesday, July 13, the government released the Final Rules for the Meaningful Use regulation. This documentation details the requirements for eligible practices using an Electronic Health Record (EHR) to achieve Meaningful Use (MU) and become eligible to receive the government incentive compensation.

StreamlineMD is dedicated to actively supporting its clients in their efforts to achieve Meaningful Use. Consequently, StreamlineMD has hired an EHR Meaningful Use Specialist, Jackie Adams, for the sole purpose of partnering with the clients to assist them in understanding the requirements of and applying for the EHR incentive compensation. Some examples of methods that the EHR Meaningful Use Specialist will use to disburse

important information will be through:

- Monthly newsletter articles.
- COMING SOON: Quick Reference Material and helpful resource links on StreamlineMD's webpage.

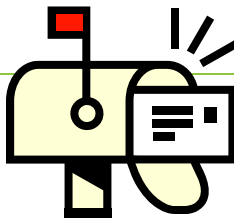
In addition, Jackie will be reaching out to each of our customers over the coming months to assess their current use of the product and to put in place a plan for achieving Meaningful Use.

The EHR MU Specialist will also be available by email and can be reached at jadams@streamlinemd.com.

StreamlineMD is proud of its status as one of an elite group of 2011 CCHIT certified EHRs and looks forward to continuing to serve its clients.

New Claims Address for Aetna Student Health

Please note that the mailing address for Aetna Student Health has changed from PO Box 15708, Boston MA 02215 to PO Box 981106, El Paso TX 79998.



What is StreamlineMD?

StreamlineMD is PRC Medical's branded collection of services for office physicians.

Services include:

- ✓ StreamlineEHR
- ✓ StreamlinePM+
- ✓ Streamline Billing

StreamlineEHR, Version 10.8



Get paid \$44,000 to use an EHR. To learn how go to:

<http://www.streamlinemd.com/hitech-act-incentives.aspx>

To learn more about StreamlineMD, visit us at:

www.streamlinemd.com or call 866.406.2224.

StreamlineMD, LLC is a wholly owned subsidiary of PRC Medical, LLC.

Jurisdiction 15 MAC Awarded to Cigna

This announcement is on the Palmetto GBA Medicare website, dated July 9, 2010: “CMS has made a decision on the J15 Medicare Administrative Contract (MAC), which includes Medicare Parts A and B for Ohio and Kentucky. Palmetto GBA teamed with another contractor to submit a proposal for Ohio and Kentucky. This proposal was not successful during the rebid process. CMS has awarded the J15 MAC to Cigna. We will continue to

share information with you through the Palmetto GBA website and listserv as more details become available regarding how these decisions will affect you. You may also refer to the CMS website for press releases and updates to the Medicare Contractor Reform web page for additional updates.”

The CMS press release link is http://www.cms.gov/apps/medica/press_releases.asp and the Medicare Contractor Reform

link is <http://www.cms.gov/MedicareContractingReform/>.

So far there have been no articles on the CMS website regarding this announcement.

Medicare Enrollment Guidance for Physicians that Infrequently Receive Reimbursement from the Medicare Program

Traditionally, most physicians have enrolled in the Medicare program to furnish covered services to Medicare beneficiaries. However, with the implementation of Section 6405 of the Affordable Care Act, some physicians will need to enroll in the Medicare program for the sole purpose of certifying or ordering services for Medicare beneficiaries. These physicians do not send claims to a Medicare contractor for the services they furnish.

In the process of implementing the provisions contained in the Affordable Care Act, CMS has become aware of several unique enrollment issues for certain types of physicians or

practitioners. Specifically, CMS modified the process of enrollment to accommodate the special circumstances of the following individual physicians and practitioners:

- Physicians employed by the Department of Veterans Affairs.
- Physicians employed by the Public Health Service.
- Physicians employed by the Department of Defense Tricare program.
- Physicians employed by Federally Qualified Health Centers (FQHCs), Rural Health Clinics (RHCs) or Critical Access Hospitals

(CAHs).

- Physicians in a Fellowship.
- Dentists, including oral surgeons.

For details on the modifications to the enrollment process for these special circumstances, visit the Special Enrollment Fact Sheet for Physicians with Infrequent Reimbursements at <http://www.cms.gov/MedicareProviderSupEnroll/Downloads/SpecialEnrollmentFactsheetInfrequentPhysicianReimbursement.pdf>.

Source: Healthcare Billing & Management Association (HBMA) Action-gram, July 15, 2010.