

A collection of historical and nautical items is arranged on a light-colored surface. In the top left, a portion of a chessboard with a checkered pattern and several chess pieces is visible. Below it, a red ribbon with a circular medallion and a blue ribbon with a similar medallion are displayed. Two ornate medals, one with a white star and one with a red star, are also present. A pair of round, gold-rimmed spectacles lies in the center. In the bottom left, a circular compass with a white face and black markings is visible. A long, thin telescope with a red handle is positioned diagonally across the middle.

# Pirates of the Chesapeake Bay

Jama Allers  
Practice Consultant  
MedChi,  
The Maryland State Medical Society  
2008

# Code of Credentialing

- ◆ Uniform Credentialing Form
- ◆ Re-credentialing
- ◆ Reimbursement of Group Practice





# Uniform Credentialing Form

- ◆ 2008 Revision
- ◆ <http://www.mdinsurance.state.md.us/sa/documents/MDUniformCredentialingApplication12-07.pdf>
- ◆ CAQH



# Re-credentialing

- ◆ Carrier may NOT require a provider to re-credential:
  - Change in tax ID
  - Change in tax ID of employer
  - Change in employer if:
    - A par provider on the carrier's panel



# Re-credentialing

- ◆ Letter with the following information to the carrier.
  - Employer's Name
  - Contact Person
  - Address, phone, email, fax
  - Tax ID number



# Reimbursement of Group Practice

- ◆ Carrier to reimburse group of par provider at par rate if the new provider:
  - Is employed by the group
  - Has applied to carrier
  - Has a valid license
  - Is credentialed by an accredited hospital
  - Has professional liability insurance



# Reimbursement of Group Practice

- ◆ Carrier to pay an ACCEPTED provider from date of letter of intent.
- ◆ HOLD ALL CLAIMS until fully credentialed
- ◆ Carrier may reject provider for credentialing
- ◆ HMO's may not deny payment to provider solely as non-par



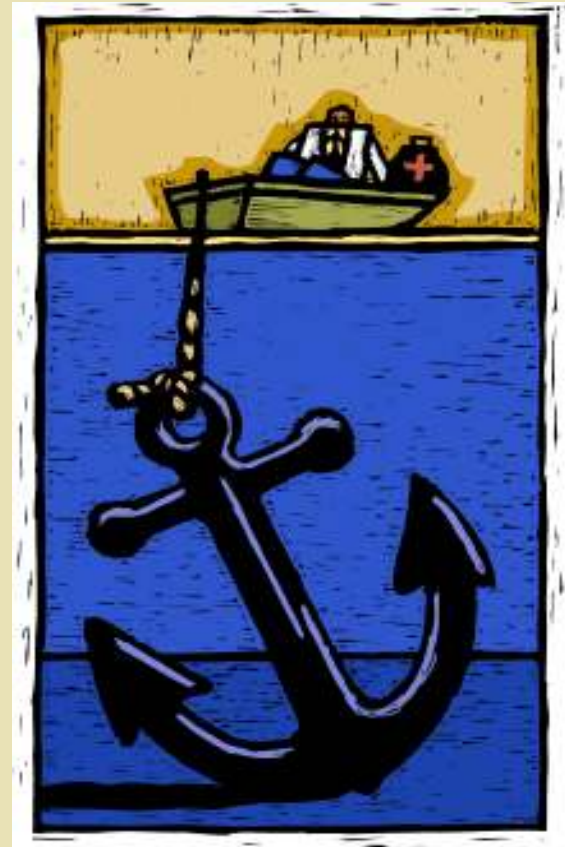
# Reimbursement of Group Practice

- ◆ Group Practice must notify patients in writing:
  - Treating physician is a non-par provider
  - Treating physician has applied to be par
  - Carrier has not complete assessment
  - Any covered services received by the carrier must be reimbursed by the carrier at par rates.



# Swashbuckling Insurance Contracts

- ◆ Termination
- ◆ Fee Schedule Attached
- ◆ Look at the Business Perspective





# Termination

- ◆ When does the contract expire
- ◆ “Evergreen Contracts”
- ◆ How much notice needs to be given when ending the contract
- ◆ Services Upon Termination



# Fee Schedule

- ◆ Is the fee schedule attached?
- ◆ Compare with other carriers with whom you participate
- ◆ Compare with public fee schedules, Medicare and Medical Assistance
- ◆ Cost
- ◆ E&M vs. Procedure Office vs. Hospital



# Look at the Business Perspective

- ◆ Know your numbers
  - How many patients
  - How many E&M, procedures
- ◆ Does this contract make sense?
- ◆ Sell yourself
  - Quality Measures
  - What set you apart from other practices

# Walking the Plank with P4P

- ◆ PQRI
- ◆ NCQA
- ◆ Self Audits





# Medicare PQRI

- ◆ 2007 Bonus
  - 1.5 % bonus with cap
  - 74 measures
- ◆ 2008
  - 1.5% bonus
  - 134 measures
- ◆ 2009
  - 2% bonus



# NCQA

- ◆ [www.ncqa.org](http://www.ncqa.org)
- ◆ Primary Care
- ◆ Heart/Stroke
- ◆ Diabetes
- ◆ Back Pain



# Self Audits

- ◆ Correct Diagnosis Codes
  - Highest level of specificity
- ◆ Up to Date
  - Med lists
  - Problem Lists, etc.
- ◆ Can you contact patients for recalls
- ◆ Patient Safety