

ArcBI TS Newsletter

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ArcSys Hot Tip

Speaking at the HIMSS health IT conference in Las Vegas on 3/6/18, [Roger Severino](#), Director of Health and Human Services Office for Civil Rights, the HIPAA enforcement agency, said that providers may share Protected Health Information (PHI) with patients through standard text messages **and** email. Providers must **first** warn their patients that such communication is **not** secure, gain the patients' authorization, and **document** the patients' consent.

Change Is Good, Right?

Over time, menus can become cluttered. A report that worked 5 years ago may no longer have any relevance today. As new reports are created, we typically place them at "the end" of the list of choices. This can lead to a cluttered menu.

If you're willing, it is a very simple process to get rid of those un-used menu options. The downside, of course, is that if someone is accustomed to always running report #43 they will be quite surprised to see this option moved.

How do you easily change the menu? If you are a **super user**, type in -1 at the Select option on the menu. The following screen will appear:

Choose the option PURGE. This will bring up another screen:

If you answer Yes, then a list of options over 1 year old will be displayed and you will be given one more opportunity to abort.. If you answer No, nothing will be removed. Either way, another screen will appear:

If you answer Yes, then the process will optimize the number of menu options that appear in each column. If you answer No, nothing will change. And, if you are not happy with the end result, let us know and we'll put Humpty Dumpty back together again.

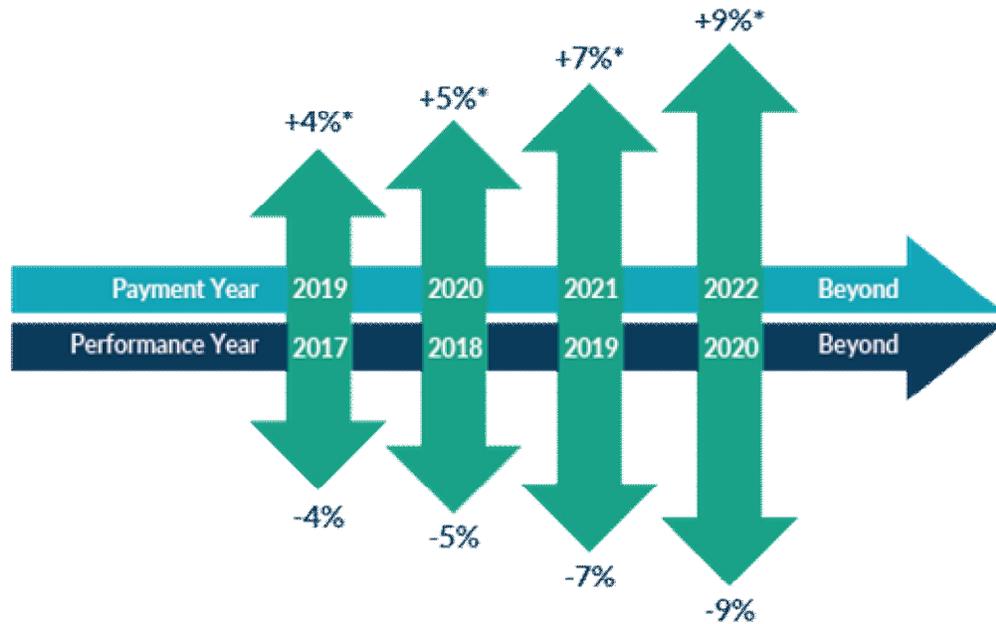


MIPS in 2018

A picture is worth a thousand words when it comes to visualizing how payments from Medicare can be adjusted in the coming years. Work done in 2017 will be reflected in payments received in 2019. The swing can be from -4% for not reporting to +4% for reporting everything and the kitchen sink.

Payment Adjustment Schedule Based on Performance Year

Adjustments occur two years after performance year



*Potentially up to 3 times these rates plus up to a 10% exceptional performance bonus

Doctors would rather treat people than worry about business considerations. The problem is, the consequences of non-compliance with MIPS and MACRA can sneak up on you because they aren't immediate. Those who are opting to not report in 2018 won't see any negative adjustments until 2020. Once they are noticed in the revenue stream, it is virtually impossible to get those penalties reversed. You will be giving up 5% of your Medicare reimbursements for the 2020 calendar year, and will likely be scrambling to ensure you are doing what you need to for 2019 reporting year compliance.

Every Quality Measure (QM) is based on the CPT codes and diagnosis codes billed to CMS. This means you can learn a lot about reporting from your claims. You can determine which measures make sense to report, which ones are the most common, how many instances and how much work will be required to report. Red Planet is ideal in performing the analysis through the use of ah hoc reporting and the utilization of Pivot Reports. MIPSPRO from Healthmonix is an ideal tool to submit reporting data.

Contact us and we can help you in deciding what is best to report.