

KEYNOTES

“Your Key To The Future”

Volume 2006, Issue 2

Editor: Amy Van Maanen

President’s Report

Rose Mary Hunt

This is my first column as President of IAMSS. As I look back at my career at the starting point, I would have never imagined holding the position of President of a state association. As a child I was rather quiet and bashful, always the follower. I am sixth of seven children in my family and I always followed what my older brothers and sisters did.

When I started working in healthcare, I again was a follower. My sister worked at the hospital and knew of an opening so she got me an interview. I started at the “bottom of the food chain” as a file clerk in the medical records department. I spent all day filing and microfilming patient records. I was only 20 years old and had never really been one to take the lead. Lucky for me, in 1981 my then current supervisor took a different job and a new manager was hired. She helped me test my capabilities and gave me more responsibilities. Within a couple years I was given the job to “credential” new doctors. This mostly consisted of having a physician complete a 1 page form and give me a copy of his medical license and he was set to go to work. As regulations increased I continued to work on these applications, which included completing those four ply Data Bank paper forms when the Data Bank came into play. Unfortunately, by this time my supervisor and mentor was diagnosed with liver cancer and died within 3 months. The one thing she gave me was the courage to try new things and face new challenges. From that time on I went on to sit on some hospital commit-

tees and when the opportunity arose I was transferred to administration to become the “Medical Staff secretary.” I attended all the hospital committee meetings and took minutes on my brand new lap top computer. The doctors were so impressed they asked me to come to their monthly medical staff meeting. This was a meeting that no “outsider” had ever attended!!

After a couple years getting comfortable with the medical staff regulations, I decided it was time to advance my professional training. I started the NAMSS Independent Study Course and 18 months later sat for the CMSC exam. I didn’t pass the first time but didn’t give up and 6 months later passed the exam. Since that time I have become a manager and currently supervise 12 staff.

I attended the first IAMSS state meeting and have seen it grow with “home-made” leadership. It has been such a helpful organization over the years and I felt like I needed to give back to this group.

IAMSS is now getting ready to fill two open positions on the Board. This is a great opportunity for members to “get involved” at the board level. We all have potential to contribute to the association and it is always good to get some new personalities with fresh ideas. Believe me, if I can do it, anyone can!

UPIN Numbers

Submitted by Rose Mary Hunt

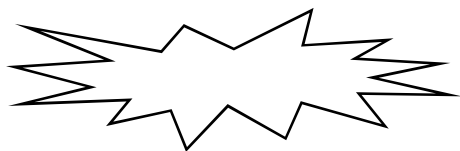
Section 9202 of the consolidated OMNIBUS Budget Reconciliation Act of 1985 required the Centers for Medicare and Medicaid Services (then known as HCFA) to establish a unique physician identifier for each physician and or non-physician billing Medicare Part B.

A UPIN is a six-position alphanumeric identifier that is assigned to all Medicare physicians, medical groups and non-physician practitioners. National Heritage Insurance Company currently administers the Registry.

UPINS are assigned to physicians, non-physician practitioners and medical groups that bill Medicare Part B. When a provider applies for a Medicare billing number also known as a provider identification number in order to submit claims to Medicare Part B the Medicare carrier submits a request for a UPIN via an electronic record to the UPIN registry. The UPIN registry processes the record, assigns the doctor a UPIN, and returns the record to the Medicare carrier.

This and much more information regarding UPIN numbers, including how to locate a number for a particular practitioner, is available at www.upinregistry.com.

**Coming Soon...
New & Improved
IAMSS
Website!**



Criminal Background Checks— Who's Doing them & When?

When a physician applies for a medical license, the Iowa Board of Medical Examiners completes a state criminal background check through the Department of Criminal Investigation (DCI) and a national check through the Federal Bureau of Investigation (FBI) as part of the licensing process.

Once a physician submits a licensure application, a fingerprint packet is sent to them. Upon receipt of the completed fingerprint card and signed waiver, a DCI check is completed within a couple days. A DCI check must be completed prior to a license being issued. Fingerprint cards are sent to DCI to be forwarded on to the FBI for a national check. A FBI check can take up to 12 weeks to receive.

The Board reviews all information received through the criminal background check to determine if a license can be issued. The Board reviews each background check with positive information on a case by case basis. A physician may have a criminal history and will still be issued a license. The Board looks at what the offense was, how long ago it occurred, if there are other offenses related to this same issue, and if the physician disclosed this information on the application. The Board cannot share the results of the background check with others.

Approximately 21 medical licensing boards conduct criminal background checks on physicians applying for a medical license.

Recently, an e-blast went out to the IAMSS membership inquiring as to who was performing criminal background checks. Given the responses, there is a mixture of those who are performing criminal background checks and those who are not. Of those performing the background checks, they are doing them at initial appointment only. Background checks are being done either through the company that the human resource department uses or using their own separate company. For some, the physician has to sign a separate release in order for the hospital to perform a criminal background check.

IAMSS Shirts	Press Release Subscriptions
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Get your IAMSS polo shirt at the next conference. The polo shirts come in white, gray, or yellow with the IAMSS logo on the upper left side. The shirts are \$20. Get your shirt at the next conference while supplies last.



How can a hospital find out sooner that the Board of Medical Examiners has filed charges against one of its physicians? The Board is not able to notify hospitals when the Board files charges on a doctor because we do not keep track of where a physician is privileged. But a hospital can receive Board action information at the same time the press does by subscribing to the Board’s press releases for \$24 per year.

To sign up go to www.docboard.org/ia/PDF_Files/PR-Subscription.pdf, complete the form and mail to the Board’s office.

Contact Gail Beebe at gail.beebe@iowa.gov or 515-281-6933 with questions.

Compliment from a Former Member

“I would like to let you know that my time associated with IAMSS was well worth it. I learned a great deal and your State Association is one of the best that I belonged too.”

Ginger Snyder, Midlands Choice

IAMSS Board of Directors

President - **Rose Mary Hunt**, Regional Medical Center, Manchester, IA, (563)927-7399
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President Elect—**Cheryl Swearingen**, Myrtue Memorial Hospital, Harlan, IA, (712)755-4417,
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Member at Large—**(Membership)** - **DeArliss Karsjen**, Mary Greeley Medical Center, Ames, IA, (515)239-2135 , karsjen@mgmc.com

Member at Large—**(Website)** - **Pamela Burlin**, Lucas County Health Center, Chariton, IA (641)774-3222, pburlin@lchcia.com

Member at Large—**(Newsletter)** - **Amy Van Maanen**, Iowa Board of Medical Examiners, Des Moines, IA, (515)281-6492, amy.vanmaanen@iowa.gov

IAMSS Board of Directors Election

In August an election will occur for two positions on the IAMSS Board of Directors. This year the secretary and a member at large position will be on the ballot. We are providing you with information about the candidates to assist you in making an informed decision.

The IAMSS Board of Directors selected a Nominating Committee in accordance with the IAMSS by-laws. This Committee has developed a slate of candidates for the secretary and a member at large position.

Candidates for the member at large position are the following:

Lori Brewer

Lori is the Administrative Assistant at Davis County Hospital, in Bloomfield Iowa. Davis County Hospital hires CredentiaSource to do their credential appointments. It is Lori's responsibility to review all the information received from CredentiaSource, organize and present to the Credential Committee, Medical Staff, Medical Affairs Committee, and then Board of Trustees. Lori continually reviews physician files and ensures their Iowa license, DEA, CSA and liability insurance certificates are current.

Lori joined IAMSS in the Spring of 2004 and has attended every conference since. Lori has not held an office previously but believes this is a valuable organization and is proud to be involved with it. Lori would like to become more involved in IAMSS.

Tami Klein

Tami is the Executive Assistant at Lakes Regional Healthcare in Spirit Lake. Tami's job includes credentialing, patient satisfaction surveys, incident reports, contracted services assistant liaison, contracts and agreement maintenance, physician committee arrangements, bylaws maintenance, bi-weekly employee newsletter, CMS forms, and peer review assistant.

Tami graduated in May 2006 from Iowa Lakes Community College with an Associates of Arts

and Associates of Science degree. Tami says she looks forward to being able to serve on the IAMSS board.

Candidates for the secretary position are the following:

Julie Cox

Julie has been employed with Mercy Medical Center-Des Moines since May 1988. Julie is currently the Credentialing Supervisor at Mercy Medical Center. Previous duties at Mercy have included Nursing Communication Secretary, Nursing Communication Liaison, and Medical Staff Coordinator.

Julie is a graduate of Des Moines Area Community College. Not only is she a member of IAMSS, but she is a member of NAMSS and the Iowa Credentialing Coalition. In Julie's free time she enjoys spending time with her family, gardening and collecting antiques. Julie appreciates your consideration and looks forward to representing your needs and interest in the future.

Kay Eker

Kay has worked in the Administration/Medical Staff Office at the Marshalltown Hospital for 32 years. The Marshalltown Hospital is licensed for 125 beds. They credential around 130 doctors and allied health professionals. Kay has seen many changes in the credentialing/privileging of physicians. Thirty-two years ago physician's completed a two page application and a half page reapplication. The organizing of medical staff support personnel has done a lot in the way of assuring that patients receive the best possible care from their physician while in the hospital setting and giving support staff, a uniformed approach to credentialing.

Kay has been a member of IAMSS and NAMSS since 1993. She has never served as an officer in IAMSS and sincerely believes that it is time that she give back to the organization that supports all that we do.

Kay her husband have been married for 41 years and they have one son.

AMA Physician Masterfile: Do you use it?

Submitted by Kathy Szary

Have you ever used the American Medical Association (AMA) Physician Masterfile report? If you are like me there are times when you get in a pinch and need to expedite the credentialing process so that a practitioner can begin practice ASAP.

Where do you go for this document, how much does it cost, and what does it provide you? First of all you must be registered with the AMA, get an account number, and establish a password. You may do this by contacting the AMA at their customer service number, which is (800) 665-2882, email them at <https://profiles.ama-assn.org/amaprofiles/>, or complete the New Customer Account Registration online. Once you get your account number and a password then you can order an profile, reappointment profile, or a physician assistant profile.

Costs? An online profile is \$31 for 1-2 or \$28 for more than 3; an online reappointment profile is \$14; and an online physician assistant profile is \$18. Online searches are usually available within an hour.

What do you get? The profile will provide you with the following information: medical school, internship, residency, and fellowship completion dates; license, DEA and board certification verification, and Medicare, Medicaid, or other federal sanctions. The only difference between the profile and reappointment profile is that the reappointment profile does not include the medical school, internship, residency, and fellowship information.

The PA profile includes education, certification, and licensure information.

The AMA Physician Profile has been designated by the American Board of Medical Specialties as an official ABMS® Display Agent of Member Board Certification data. As a result, the ABMS® board certification information on the AMA Physician Profile is considered a designated equivalent source in regard to credentialing standards that have been set forth by accrediting bodies such as the JCAHO and NCQA.

How do you do a search? You enter the practitioner's last name and date of birth. Advanced searches may include the practitioner's ECFMG number and medical school graduation year or the practitioner's former last name.

How do you pay? You may use a credit card or electronic funds transfer for online transactions. You may also fax or mail an order using a check. To do this you would need to download, complete, and send a signed AMA Profile Order Form and Request Agreement.

When you consider that some boards charge up to \$100 for certification verification and that some state licensing organizations also charge for verification, the fact that you can get verification online, usually in less than one hour, and for \$31 or less for a physician is a bargain! Just try it, you might like it!

Osteopathic Physician Profile

Did you know that you can order and receive the official Osteopathic Physician Profile Report online? You will get instant turnaround on your order. Visit their website at www.doprofiles.org to register!

Did you know that IAMSS is 129 members strong?



Advanced Credentialing Seminar—Don't Miss It!

On August 24-25, 2006, at Mary Greeley Medical Center, Carol Cairns, CPMSM, CPCS, will be joining us for IAMSS' first ever Advanced Credentialing Seminar. The seminar will cover the following topics:

- *Principles & Steps of Credentialing & Privileging and Legal Ramifications of Negligent Credentialing*
- *2007 JCAHO Medical Staff Standards (Credentialing, Privileging, Focused Professional Practice Evaluation, Ongoing Professional Practice Evaluation)*
- *Medical Office Best Practices (Meeting Management, Trend Toward Paperless or Less Paper Credentialing, Partnering with Medical Staff to Achieve Goals)*
- *Telemedicine: Credentialing, Privileging & Competence Assessment*

Carol is a senior consultant with The Greeley Company as well as the president of PRO-CON, a consulting firm in Morris, IL specializing in credentialing, privileging, medical organization operations and survey preparation. Carol has written resource books for HCPro and has been on the clinical faculty of JCAHO.

Rooms are available for at the Microtel Inn & Suites in Ames for \$59.95. Cut off date for reservations is August 13, 2006. When making reservations use Group # 82306 as a reference.

Send in your registration now!

What is FACIS?

Submitted by DeArliiss Karsjen

The Fraud and Abuse Control Information System (FACIS) is a web-based information service that screens individuals and entities in the healthcare field against a historical database of adverse actions. FACIS® reports on more than 50 types of healthcare professionals ranging from physicians and midwives to home health agencies and ambulatory services.

FACIS® offers three different search options via the Internet ranging in scope from the minimum federal requirements to a search inclusive of more than 800 sources. Users may access all service levels so that they may decide what level of screening is appropriate depending on each particular individual or entity. This provides the most efficient risk-management tool.

FACIS® provides two methods of screening regardless of the level selected: web-based single search and batch screening. The single search allows subscribers to query both individuals and entities on a one-at-a-time basis with instantaneous results. Batch screening allows the user to submit a file that lists the individuals or entities to be screened by FACIS®. The file may be submitted over the Internet and will provide the user with an electronic listing of results.

There are no subscription fees. Prices range from \$1/name submitted to \$5/name submitted, depending on the level at which you wish to search. A description of the three levels at which you can search is available on their website www.facis.com. On-line demonstrations can also be arranged by contacting them through their website.

Fall Conference—Save the Date!

The Fall Conference will be held on October 6 at Mary Greeley Medical Center in Ames, Iowa. The following topics will be presented at the conference:

- Delegation presented by Colleen Olson-Davis, CPCS, Provider Relations Manager for Welmark Blue Cross Blue Shield in Cedar Rapids, Iowa.
- Liability of physician malpractice and how it relates to credentialing presented by JoEllen Whitney, an attorney from Des Moines, Iowa.
- Board certification and the value of it; e-credentialing; maintenance of certification presented by Rob Nelson from the American Board of Medical Specialties.

Rooms are available for at the Microtel Inn & Suites in Ames for \$59.95. Cut off date for reservations is September 15, 2006. When making reservations use Group # 10506 as a reference.

Registration information will be sent in August!

What is CPMSM & CPCS?

NAMSS offers certifications for those in the credentialing profession. We have all seen the credentials CPMSM & CPCS behind individuals name's, but what do they mean?

An individual who is a Certified Professional Medical Services Management (CPMSM) is someone who is typically employed or contracted by a health care organization including, but not limited to, health plans, group practices, credentialing verification organizations or hospitals (health systems).

NAMSS describes those who hold a CPMSM as someone who is an integral part of the team that manages key systems and is responsible for maintaining compliance with regulatory and accrediting bodies, developing and implementing credentialing processes and procedures, and overseeing development of and adherence to governance bylaws, department rules and regulations, and medical staff, organizational, and/or practitioner/provider policies. A CPMSM may also be responsible for overall management of medical services functions (i.e. staffing, budgets, database administration, etc.), continuing medical education, and provider recruitment/relations.

A Certified Provider Credentialing Specialist (CPCS) is someone who is typically employed or contracted by a health care organization including, but not limited to, health plans, group practices, credentialing verification organizations or hospitals (health systems).

NAMSS describes a CPCS as someone who is an integral part of a credentialing team and may be responsible for maintaining compliance with regulatory and accrediting bodies, participating in the development and implementation of credentialing processes and procedures, governance bylaws, department rules and regulations, medical staff, organizational, and/or practitioner/provider policies, maintaining an accurate practitioner database, and collecting and analyzing verification information.

According to the most recent IAMSS Membership Directory, 11 members have earned the CPMSM designation and 10 have earned the CPCS designation. If this is something you have been thinking about pursuing, read a few of our member's comments as to why they obtained the certification and what it has done for them.

I have been certified for 8 years and I strongly recommend it to anyone considering it. I have earned much respect from both administration and our medical staff by having this certification. They look to me as the 'expert' in credentialing issues and many times have told me they are confident our credentialing is being done right. Before my certification I was an administrative secretary; since that time I have become manager of 11 staff. It gave me great satisfaction to pass the test after 18 months of preparing. I took the Independent study Course from NAMSS first and then sat for the exam.

Rose Mary Hunt

I felt it would be beneficial for my career. My hospital paid for my prep course, travel expenses and the exam itself.

Pam Burlin

I became certified in 1990 as a Certified Medical Staff Coordinator – they have changed our title. First of all, there is personal satisfaction, secondly it is a way of documenting and measuring one's competency in this important field. Our national association provides a lot of ongoing education via the web. Of course, there is also continuous learning in this field, which is really pretty unique.

Pat Stickney

Obtaining the NAMSS credentials of CPCS, CPMSM, or both provides the following: 1) promotes industry standards among people in our field, 2) distinguishes those professionals who demonstrate an established level of knowledge and expertise in the field, 3) provides prospective health-care employers to identify qualified candidates, 4) provides the opportunity for personal validation of professional competency, 5) promotes ongoing education through recertification requirements (which I have found invaluable) and for some, it may mean more money also.

DeArliss Karsjen

I got my CMSC (CPMSM) certification as soon as I became eligible. When I was hired it was put forward as a provision of hiring, since they felt JCAHO was impressed with the certification. Other than self-satisfaction, I don't think it's been of value. It was the hardest test I've ever taken in my life and I'm only missing a couple of credits for a Bachelor's degree.

Jeanne Gibson



E-Blast Questions & Responses

Q: Do you credential teleradiologists?

A: Thirteen of the 20 hospitals that responded credential teleradiologists and seven do not credential them.

Q: How many are putting physician's credentials online?

A: Staff privilege lists are in a Word document in a common directory for others to view. Lists are updated monthly for new appointments & reappointments or archived as medical staff leave.

A: We use PRIVplus software and have given various hospital staff read-only access to limited information.

A: This has worked well and has enabled us to do away with the binders of printed privilege lists. Also allows for 24/7 access to the information.

A: Our physician privileges are on the hospital intranet. It works really well and has been on the intranet for five to six years.

A: Our privileges are online which is much nicer. When privileges are updated on the database, with the hit of a button it is automatically uploads the information on the intranet. We use Med Cred software.

Q: ARNP—Credential or Not Credential? The ARNP will be providing health assessments of non-employees in the hospital, possible surgical assisting and primarily nurse family practice coverage at a rural clinic.

A: Credential.

Q: We contract with a locums group for weekend ER coverage. They have the physician complete their standard delineation of privilege form. I also have the physician complete our hospital privilege form. How would the State perceive this?

A: Hospital privileges are facility specific & should reflect what your facility can support. There is no need for physicians to complete the locums group's privilege form. You must use your facility's forms.

A: Privilege lists must be specific for the privileges/procedures you offer at your hospital. If a physician checks a privilege on the locums group's generic privilege form that you do not offer at your hospital, the Department of Inspections & Appeals will write you up

**Happy Retirement
Donna Hinch, CPMSM!**

Donna retired as the Medical
Affairs Coordinator at Genesis Medical Center
in Davenport, IA
on July 26, 2006.

