

2009
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TARHC ANNUAL CONFERENCE 2009 HIGHLIGHTS

The Texas Association of Rural Health Clinics' Annual Conference was held July 28-30, 2009, at the AT&T Conference Center and Hotel on the campus grounds of the University of Texas.

Programs covered were:

- ▶ the *Centers for Medicare and Medicaid Services* (CMS) policy updates;
- ▶ an overview of the certification process and priority status for RHCs by the *CMS Region VI* certification spokesperson;
- ▶ Texas Medicaid policy update for RHCs and the upcoming rural county CHIP changes next year, there will be two *vendors Superior and Molina, for the CHIP coverage* in the rural counties;
- ▶ Grant opportunity presentations for RHCs by the *federal Office of Rural Health Policy* and the *Texas Department of Rural Affairs (TDRA)* (formerly Texas Office of Rural Community Affairs (ORCA). The name change went into effect on September 1st;
- ▶ Other speakers gave information on their special RHC projects which included the *American Association for Accreditation of Ambulatory Surgery Facilities, Inc. (AAAASF)* who are now ready to submit their packet to CMS for approval as being the only non-government organization who can conduct initial surveys to certify clinics into the federal RHC Program nation-wide.;
- ▶ Another speaker gave an informative presentation on the *Public Health TV Program* designed for rural health clinics that will allow RHCs to present individual clinic specific health education programs to their patients. At this time, the company is identifying regions of Texas and pinpointing RHCs in those areas that they will approach to discuss the program implementation with;
- ▶ A detailed accounting and billing session was held for an extended period of time by a representative from the *company that manages the association functions of the National Association of RHCs (NARHC)*. The representative ended the day with an excellent program on inner-office relations among clinic staff members that kept the audience on their toes and prompted a lot of audience participation.
- ▶ The conference began its closing on the third day with an *overview of the Texas Legislative's 2009 results* and concluded with an *up-to-date PowerPoint briefing on the initiative to have providers establish electronic records in their offices.*



(Continued from page 1)

We want to thank our vendors who supported our conference in July. The sponsoring exhibitors were:

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|---|---|
| 1) Centers for Medicare & Medicaid Services (CMS) with Becky Peal-Sconce; | 11) Rx'n Go with Julie Mayer; |
| 2) DSHS Texas Primary Care Office with Cindy Ellis; | 12) Ramtech Building Systems, Inc. with Bill Barron; |
| 3) e-MDs with Dean Delleney; | 13) SMAART Medical Systems, Inc. with Randy Patterson; |
| 4) Humana, Inc. with Dr. George Smith; | 14) Southeast Texas Hospital System with Shannon Calhoun; |
| 5) IVCI with David Schlothauer; | 15) Texas A&M HSC-RCHI with Kim Clay; |
| 6) M&M Computer Services with Sandy Fitch; | 16) Texas Medicaid and Healthcare Partnership with Rhonda Williams; |
| 7) Merck & Company with Geri Watts; | 17) Texas True Choice with Rene Pacheco; |
| 8) National Library of Medicine with Lisa Smith; | 18) TimeLine Recruiting with Brad Nelson. |
| 9) Office of Rural Community Affairs with Theresa Cruz; | |
| 10) PracticeOne with David Wright; | |

MEMBERSHIP MEETING

Elections were held for board of directors' vacancies beginning in 2010 and the election results were: newly elected for two years was Julie McLemore from Sweetwater representing free-standing RHCs; and re-elected to another two-year term was Julie Sharp from Marlin representing provider-based RHCs. **Congratulations Julie and Julie. They will be joining Kathy Bunch, Anita Crisp, and John Everett whose current terms of office expire at the end of next year.**



MEDICARE ADVANTAGE PLANS READY TO BEGIN BENEFICIARY ENROLLMENT

Beginning November 15th the Medicare Advantage (MA) Plans, both for the health care services and the prescription drug plans, will be allowed to enroll new Medicare beneficiaries and establish MA clients into the MA plans. **The enrollment and changeover of plans sign-up period will last until December 31, 2009. The new coverage for those who enroll or change plans will start January 1, 2010.**

MEDICARE ADVANTAGE PFFS PLAN REQUIREMENT TO CONTRACT DIRECTLY WITH PROVIDERS IN 2011

Effective January 1, **2011**, (not this coming year but the year after) CMS is going to require that if there are two or more Private Fee-For-Service (PFFS) MA plans in a county, that these plans will be mandated to have the providers who want to participate as an eligible provider, sign a direct network participation agreement to provide services to their clients. Currently for MA PFFS beneficiaries, the provider does not have to see these MA PFFS clients. If a provider does treat the PFFS patient, then the provider is "deemed" a participating provider for that visit and accepts the Medicare reimbursement. But, remember for MA PPO and MA HMO clients the provider is supposed to be a **contracted** participating network provider to provide services to those MA network patients.

ANNOUNCEMENT October 30, 2009

FTC has extended the Red Flags Rule enforcement which goes into effect June 1, 2010. Updates will be in future newsletters.

IDENTITY THEFT RED FLAGS  RULE IN EFFECT? MAYBE!

On October 20, 2009, the U.S. House of Representatives passed HR 3763, which provides for an exclusion from the Federal Trade Commission (FTC) **Red Flags Rule** for health care practices, law offices and accounting firms with 20 or fewer employees. In addition, it would create a system where the Federal Trade Commission has some flexibility to waive implementation of the regulations for other industries.

Supporters of the bill, now in the Senate, argue that the FTC went beyond the intent of Congress by considering non-financial services related industries to be “creditors” under the Fair and Accurate Credit Transactions Act of 2003 (“FACTA,”) thereby forcing thousands of small businesses to develop and implement an identity theft program in compliance with the red flags rule. **If the bill I to exempt small businesses is not signed into law, the regulation will be enforced by the FTC with respect to all entities that meet the definition of “creditor” that was scheduled to start November 1, 2009.**



What is the Red Flags Rule? Congress directed the Federal Trade Commission (FTC) to develop regulations requiring “creditors” and “financial institutions” to address the **risk of identity theft**. The resulting **Identity Theft red flags rule** requires all such entities that have “covered accounts” to develop and implement written identity theft prevention programs. *The agency has been extended three times and now was supposed to have been in effect at businesses on November 1, 2009.*

The **identity theft prevention programs** must be designed to help identify, detect, and respond to patterns, practices, or specific activities - known as “*red flags*” - that could indicate identity theft.

This rule applies to all entities that regularly permit deferred payments for goods or services, including entities such as health care providers, attorneys, and other professionals, as well as retailers and a wide range of businesses that invoice their customers. *Congress defined a creditor to include entities that have not in the past considered themselves to be creditors.* For example, creditors include professionals, such as lawyers or healthcare providers who bill their clients after services have been rendered. Similarly, a retailer or service provider that on a regular basis allows its customers to make purchases or obtain services and then bills them for payment at the end of each month would be a creditor. ***The FTC’s Red Flags Rule policies are available at www.ftc.gov.***

2008 RHC AND FQHC MEDICARE PAYMENT COMPARISON

<u>Subject Item</u>	<u>RHC</u>	<u>FQHC</u>
Medicare Cap for 2008	\$ 75.63	\$ 100.96
Total number of sites submitting Medicare claims	3,382.00	2,907 .00
Total Medicare patients	1,645,413.00	982,215.00
Total number of Medicare claims	7,492,863.00	4,116,140.00
Total Medicare charges	754,276,321.00	447,884,790.00
Medicare payments	489,696,104.00	341,981,922.00
Average charge per claim	101.00	109.00
Average cost per claim	81.00	104.00
Average Medicare payment per claim	\$ 65.00	\$ 83.00

NARHC 2010 SPRING INSTITUTE - MARCH 24 TO MARCH 26, 2010

The National Association of RHCs Spring Institute for next year will again be held in San Antonio at the Hyatt Regency San Antonio which is located on the Riverwalk at 123 Losoya Street.

Room reservations **must be made no later than March 3, 2010**, at 12:00 am to receive the discounted room rate of \$159 per night plus tax. Call 800-233-1234 to make your reservation and mention you are attending the NARHC Spring RHC Institute. For conference updates check the 'events page' at <http://www.narhc.org>.

JOINT RHC ASSOCIATION ANNUAL MEMBERSHIPS NOW AVAILABLE



Are you a member of either the state association or the national association?
Now is the time to join both for one super savings discounted membership fee of only \$500.



The board of the Texas Association of Rural Health Clinics and the board of the National Association of Rural Health Clinics have agreed to a joint membership status for members who want to belong to both the Texas Association of RHCs and the National Association for a *combined membership fee of only \$500*. This will be an annual savings of \$200 whereas if you were to buy separate clinic memberships, you would pay \$300 for TARHC and \$400 for NARHC in 2009. Effective January 1, 2010, the National Association is increasing its clinic membership from \$400 to \$450. So for those clinics applying for the joint membership starting next year they will see an even bigger discount from what they will have to pay now to belong to both organizations. What makes more sense, \$500 or \$750 for both memberships?

Currently there are about 40 Texas RHCs that belong to the National Association. As of October 6, 2009, there were 316 certified RHCs in Texas and only 106 are members of the Texas Association of RHCs. **Take advantage of this special offer today!**

COUNCIL CONNECTIONS: GROUP PURCHASING PARTNER *TOGETHER WE MAKE A DIFFERENCE*

"Council Connections is as responsible for us being able to provide quality healthcare as any of our providers" - Executive Director of a Rural Health Center

Council Connections is a group purchasing organization (GPO) that offers **free membership** to help community clinics and health centers save money in all areas of purchasing. Since 1979, we have been helping clinics leverage their buying power and enhance their financial strength.

Council Connections understands the struggle to preserve and expand healthcare services in rural areas. The challenge of providing access to care for the rural population is a reality for all members of the Texas Association of Rural Health Clinics. Our mission is to provide significant discounts on the products clinics need to maintain and improve their services in order to take care of all patients that walk through their doors.

These discounts are available with national vendors for office supplies and furniture, IT products and services, medical/surgical supplies and equipment, dental supplies and equipment, capital and biomedical equipment, printing and forms, pharmacy products and services, and so much more!

We are excited by the opportunity to help members of TARHC save money through our free programs and services! Please contact Carrie Vogelsang at 1-800-640-1662 x331 or by email at cvogelsang@councilconnections.com to get started. You can also visit us online at www.councilconnections.com.

NEW MEMBER DIRECTORIES!

Have been mailed!