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### Editor

- Carolee Hildenbrandt  
RN MA  
Consultant  
Gold Health Strategies, Inc.

### Practice Manager Meeting

## Next Meeting :

**Wednesday,  
March 1, 2017  
8:00 AM**

Maimonides Administration  
Bldg.—2nd Fl. Conference  
Room

### Topic:

**What do I need to  
know about**

### DSRIP

**(Delivery System  
Reform Incentive  
Payment)**

## NEED HELP

- Practice Management problems
- Claims Issues
- Medical Policy Concerns
- Staff Training
- Customer Service

Call Carolee Hildenbrandt  
at 212-953-1504

Email:  
childenbrandt@  
goldhealthstrategies.com

### The IPA Adds Nursing Support For It's Members

We are pleased to announce the hiring of a part-time telephonic Patient Outreach Nurse for the Maimonides IPA effective February 1st. Mirel Herskovits, RN has worked full time at Maimonides Medical Center since 2008. She holds a B.S in nursing from Adelphi University and a Masters of Science in Nursing from Chamberlain College of Nursing. She will be working with practices to increase patient compliance with HEDIS Measures, such as Breast Cancer Screenings, Well Child Visits, and Diabetic Follow-Up. In addition, we hope she can help some practices better manage their complex chronic disease patients by reviewing their medical treatment plan and prescription adherence. When she contacts your office, please provide her with any assistance she may need. If you have any questions, please call Carolee Hildenbrandt at (212) 953-1504 or e-mail [childenbrandt@goldhealthstrategies.com](mailto:childenbrandt@goldhealthstrategies.com) . Thank you for your cooperation.

### What Does It Mean to Be a Medicare Non-Participating or Medicare Opt-Out Provider?

**Non-participating Medicare doctors** are doctors who do not accept Medicare's approved amount as payment in full and who do not routinely take assignment. Like participating doctors, non-participating doctors are required to bill Medicare for care they provide. Medicare will process the bill and reimburse the patient directly for Medicare's share of the cost of care (generally 80% of Medicare's approved amount for most medical services).

The patient needs to pay the non-participating doctors directly for the cost of care, however, in New York State, doctors can only charge 5 percent more (the 'limiting charge') than Medicare's approved amount for certain services. The patient will be reimbursed directly by Medicare. Note also that limiting charge laws do not apply to certain health care providers, such as durable medical equipment suppliers. If these providers (e.g., suppliers) do not accept assignment, their charges are not limited.

**Opt-out doctors** are doctors who have formally opted out of the Medicare program. Opt-out doctors do not have any limits set on their charges to Medicare patients. Opt-out doctors do not submit any bills to Medicare. If you opt-out of Medicare, the entire cost of care you provide must be paid by the patient.

**Very Important Note:** The doctor who has Opted-Out **must have** a signed private contract with the patient, stating that the patient understands that he/she is responsible for the full cost of the services. Medicare will not pay the patient for any of the cost of services received from an opt-out doctor.

### CPT Changes 2017

Every year, the CPT is updated with new, revised ,and deleted codes. Your staff must be ready to implement these changes and update the charge master. This task should be done as soon as possible.

### TCM & CCM

**TCM** (Transitional Care Management) and **CCM** (Chronic Care Management) are programs that provide additional services to the patient and full payment to the physicians.

Let the IPA help you and your patients achieve success in these programs. For more information regarding these programs, please feel free to e-mail Carolee Hildenbrandt at [childenbrandt@goldhealthstrategies.com](mailto:childenbrandt@goldhealthstrategies.com) .