

Vital Sounds

A Newsletter for Health Care Professionals and Facilities

KaMMCO

Kansas Medical Mutual Insurance Company

www.KaMMCO.com

2017 is Here! Are You Ready for MACRA?

Attend a one-hour educational webinar on January 23 and receive CME.

In 2015, the Medicare Access and CHIP Reauthorization Act (MACRA) was passed by Congress heralding a new era of physician reimbursement effective in 2019 and based on patient care beginning in 2017. These new Quality Payment Programs will demand increased collaboration between care providers with a focus on preventative measures that result in better health, better care, and lower costs to patients.

Are you ready for MACRA? Is your practice prepared to meet the reporting and technology requirements of MACRA? Or will your practice face potential penalties for poor performance?

The Kansas Medical Society and KaMMCO Health Solutions invite you to attend **“Equipping Physicians for the Shift to Quality Payment Programs—Employing Data Analytics to Empower Physicians and Enhance Patient Care.”** The webinar will be presented by Laura McCrary, EdD, Senior Vice President, KaMMCO Health Solutions, Inc., and Executive Director, Kansas Health Information Network, Inc., on Monday, January 23, from 5:30 to 7:00 p.m. **This activity is approved for AMA PRA Category 1 Credit(s)TM.** For more information and to register in advance visit: www.KaMMCO.com and click on EVENTS.

This educational event is designed to empower physicians with the knowledge to enhance quality improvement and transform health care through the implementation of technology and utilization of MACRA-inspired reporting tools.

New Leadership for KMS

The Kansas Medical Society (KMS) Board of Trustees announced in late December that Jon Rosell will serve as the organization's next Executive Director. Rosell will assume leadership of the statewide physician organization on January 30 and follows Jerry Slaughter who has led KMS for 41 years.

For a decade, Rosell has served as the Executive Director of the Medical Society of Sedgwick County, where he led one of the most effective county medical societies in the nation, serving over 1,200 members across the full spectrum of medical specialties. Rosell is active nationally in medical society administration and serves as the current president of the American Society of Medical Society Executives, which represents more than 1,400 medical society professionals and 300 member organizations. He has been involved in a number of Wichita community, medical and economic development initiatives including serving as 2015 chairman of the Wichita Metro Chamber of Commerce.



*Jon Rosell, Incoming
Executive Director, KMS*

A graduate of Fort Hays State University, Rosell has a master's degree in special education from Kansas State University and a doctorate in special education administration from the University of Nebraska.

Slaughter announced his plan to step aside as KMS executive director in early 2016. He will continue to serve the medical society and its affiliated companies in a leadership role focused on the development of several strategic initiatives.

Analytics Dashboard Demonstrations Offered to KaMMCO & KHIN Members

KaMMCO is pleased to announce that healthcare professionals will have their first opportunity to attend a demonstration of KaMMCO Health Solutions' (KHS) innovative suite of analytic products and services on January 24 or January 25. Attendees will discover the resources they will need as they transition to the new era of Merit-Based Incentive Payment System (MIPS) and other Alternative Payment Models (APMs) related to MACRA.

For the 2017 reporting year, the MIPS composite score consists of three performance categories: Quality, Clinical Practice Improvement, and Advancing Care Information. The KHS analytics tools are designed to aid in reporting in all three MIPS categories by producing web-based dashboards that display patients' real-time clinical data.



Mary Matzke, KHIN
Project Manager



Susan Penka, KHS
Business Development
Representative

Plan to join KHS and learn more about the analytics tools and web-based dashboards by attending one of two upcoming webinars presented by Mary Matzke, KHIN Project Manager, and Susan Penka, KHS Business Development Representative. The one-hour webinars will be offered:

- Tuesday, January 24, 5:30-6:30 p.m. [Register here.](#)
- Wednesday, January 25, 12:00-1:00 p.m. [Register here.](#)

As a subscription-only tool set, the web-based dashboards offer reports on the High Risk Patient, Preventive Care, Readmissions and Disease Registry through the KHS Tier 1 package. Specially discounted pricing is extended to KaMMCO insured providers and hospitals as a

KaMMCO member benefit. Analytics subscribers can run and view reports derived from the patient data in the health information exchange as well as download and import the data into other software tools. Must be a KHIN member contributing data.

For more information, contact spenka@kammco.com.

Kansas Medical Malpractice Fund to Reduce Surcharge

Many Kansas healthcare providers will see a lower cost next year for participating in a state fund that backs them up if a medical liability claim exceeds their primary insurance. Healthcare providers as defined in KSA 40-3401 et seq. are required to participate in the Health Care Stabilization Fund, which is paid for through a surcharge on their primary liability insurance. Russ Sutter, an actuary with Willis Towers Watson, told an oversight committee in December that the Fund's board of governors had approved a reduction after claims and related legal fees came in below expectations in the fiscal year that ended June 30. "We advised the board to consider a modest decrease in its rates," Sutter said. The Fund's board of governors ultimately decided on a 2.7% overall reduction that will begin January 1, 2017, and be centered mostly on physicians, surgeons, chiropractors, registered nurse anesthetists, and podiatrists who have been in the Fund five years or more. Members of those groups, which include thousands of the Fund's 14,085 total members, will see 7% surcharge reductions. ([Wyandotte Daily](#), 12/2) Reprinted with permission from *PIAA Newsbriefs*.



HERE WHEN YOU NEED US

IN 2016 9 DEFENSE VERDICTS

1 MISTRIAL
1 PLAINTIFF
VERDICT
\$100,000

The AMA Adopts a Set of Principles on mHealth Applications

Yolanda Sims, JD, MHA

Loss Prevention & Risk Management Advisor

The American Medical Association (AMA) has issued new guidance to promote patient-centered care in digital mobile applications. Physicians are reluctant to introduce mHealth apps, associated trackers and sensors without evidence that ensures the applications are accurate, effective, safe and secure. The main conundrum for physicians---no consistent standards or quality mechanisms exists for mHealth apps. Some mobile apps and devices are subject to regulation under the Federal Drug and Food Administration (FDA), but many others are not. The AMA's Council for Medical Service acknowledges that not all applications undergo rigorous evaluation before deployment for general use which raises quality and patient safety concerns.

Another area of concern that stems from the use of mHealth apps is data protection. The AMA advises providers that utilize mHealth applications to discuss and document potential privacy and security risks that could impact patients should data become compromised. Despite the lack of a uniformed approach and in an effort to assist clinicians, the adopted principles suggest that any mHealth digital tools used for patient care should have the ability to do the following:

- Support the establishment or continuation of a valid patient-physician relationship;
- Have a clinical evidence base to support their use in order to ensure mHealth app safety and effectiveness;
- Follow evidence-based practice guidelines, to the degree they are available, to ensure patient safety, quality of care and positive health outcomes;
- Support care delivery that is patient-centered, promotes care coordination and facilitates team-based communication;
- Support data portability and interoperability in order to promote care coordination through medical home and accountable care models;
- Abide by state licensure laws and state medical practice laws and requirements in the state in which the patient receives services facilitated by the app;
- Require that physicians and other health practitioners delivering services through the app be licensed in the state where the patient receives services, or be providing these services as otherwise authorized by that state's medical board;
- Ensure that the delivery of any services via the app be consistent with state scope of practice laws; and
- Follow information and privacy laws to protect patient medical records.

Physician liability risks associated with the use of mHealth apps are still unclear. Therefore, the AMA strongly encourages physicians to seek legal counsel regarding specific questions.

Call for Leadership in Quality Nominations

The Kansas Healthcare Collaborative seeks nominations for the 2017 KHC Leadership in Quality Awards. The Awards will be presented at the 2017 Summit on Quality, May 10 in Wichita. The nomination deadline is Friday, January 13.



Sponsored by the KaMMCO (Kansas Medical Mutual Insurance Company) Foundation, the Awards are presented annually to recognize leadership and innovation in quality improvement and patient safety. The grand prize winner will receive \$5,000. All Kansas health care providers and organizations are eligible for the Leadership in Quality Awards.

Nomination forms are available online at: www.surveymonkey.com/r/2017KHC-Quality.

The KaMMCO Foundation is an ardent supporter of initiatives that improve patient safety, reduce risk of harm and focus on the patient as the center of care.

Questions should be directed to Toni Dixon, KHC communications director, tdixon@khconline.org.

Quality Improvement Advisors Engage with Practices



The Compass Practice Transformation Network in Kansas has a cadre of five Quality Improvement Advisors working with physician practices across Kansas to assess clinical performance, identify gaps in best practice and recommend improvement methods to refine patient care processes and quality outcomes in the clinical practice setting. The QIAs work closely with clinical staff to prepare offices for the new Quality Payment Program that is a part of the Medicare Access and CHIP Reauthorization Act of 2015 (MACRA).



The QIAs include (Pictured above; left to right): Jill Daughhetee, CMPE; Karlen Haury, MBA, PCMH-CCE; Mary Monasmith, RHIA, PCMH-CCE; Josh Mosier; and Jonathan Smith. Read more about the QIAs at the [KHC Staff page](#). QIA's may be contacted by calling the KHC office, 785-235-0763.

New Fact Sheet on HIPAA and Public Health Permitted Uses and Disclosures

The Office for Civil Rights (OCR) and the Office of the National Coordinator for Health Information Technology (ONC) have released a new Fact Sheet that explains how the HIPAA Rules permit disclosures of Protected Health Information (PHI) to support public health activities conducted by public health agencies, as authorized by state or federal law. It also gives a few helpful examples of sharing PHI in support of other important public health policies.

You may find the new Fact Sheet on ONC's website at:

https://www.healthit.gov/sites/default/files/12072016_hipaa_and_public_health_fact_sheet.pdf.