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President's Message

Dear Colleagues,

At our last MeAMSS meeting in Brewer we had a fabulous speaker - Liz Ashe. Her presentation was about conflict management and positive attitudes. It was very enlightening and a good reminder of how our behavior affects us and everyone around us. When confronted with conflict, how do you react? That is the key to the outcome. If you approach it with an aggressive, 'I'm not wrong,' or defensive attitude, the outcome will always be negative. If you approach conflict with an open mind and try to see the other person's perspective by actively listening, together you can solve most problems. In Liz's presentation she listed five active listening skills:

- Minimal verbal responses: A-huh; mmm; really; I see
- Asking open-ended questions beginning with How or What: What about our service upsets

you?

- Reflecting a feeling: Sounds like you are really annoyed
- Clarifying: Give me an example; please be more specific
- Summarizing: So let me see if I have heard you correctly and haven't missed anything. You state you....

Try these steps- they really do work.

Positive attitude, do you have one? This is a quote from Liz's presentation "Being happy and positive doesn't mean everything is perfect, it just means you've decided to see beyond the imperfections and enjoy the time you have to live. Time is very short. You can change your life by changing your attitude. Your constant companion is yourself and your attitude... The choice is up to you. You can choose to be a victim or you can choose control. You can watch life pass

you by or you can squeeze joy out of it. Live your life to the fullest, one day at a time."

If you missed our last MeAMSS meeting and would like a copy of her handout, please email me at rlyons@synernet.net.

Summer is here, get out and enjoy life!

Thank you,
Rose Lyons



CMS proposes changes to survey process

CMS has proposed to revise the survey, certification, and enforcement procedures related to CMS oversight of national accreditation organizations (The Joint Commission, DNV Healthcare, and the Healthcare Facilities Accreditation Program or HFAP). These revisions would implement certain provisions under the Medicare Improvements for Patients and Providers Act of 2008 (MIPPA).

The proposed revisions would also, according to the CMS announcement, clarify and strengthen our oversight of

accreditation organizations that apply for, and are granted, recognition and approval of an accreditation program in accordance with the Social Security Act. The comment period for the proposed rule, which was originally intended to end on June 4, 2013, is extended to July 5, 2013.

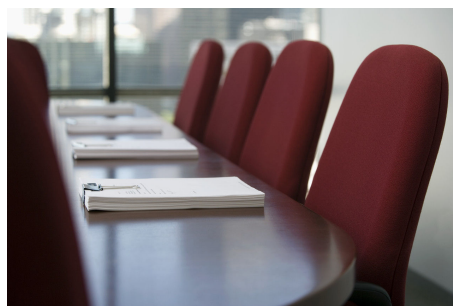
The proposed rule can be found in the Federal Register or <http://www.gpo.gov/fdsys/pkg/FR-2013-05-24/html/2013-12462.htm>.

Upcoming Educational Opportunities



Friday, August 2, 2013
Waldo County General Hospital in Belfast
8:30 am to 3 pm

Friday, November 8, 2013
Goodall Hospital in Sanford
8:30 am to 3 pm



Live Life to the Fullest:

"Life is like a taxi.
The meter just keeps
a-ticking whether
you are getting
somewhere or just
standing still."

Lou Erickson

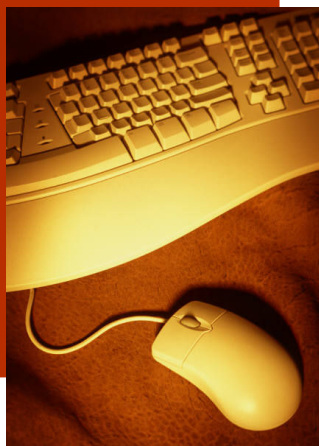
NAMSS Annual Conference &



September 21-25, 2013
The Westin Diplomat Resort & Spa
Hollywood, Florida

Register is now open online at: www.NAMSS.org

The NAMSS 37th Educational Conference & Exhibition offers more than 40 sessions tracked by new areas of focus (Credentialing/Privileging, Legal, Executive Leadership, and Professional Development) and level of experience (New to the Field, Newly Certified, and Experienced). You're free to choose your own educational focus — whether you want to learn more about credentialing services, regulations, administration, or groundbreaking technologies, the NAMSS Educational Conference has something for you. As a bonus, all sessions are CE-approved to help you gain credit toward renewing your NAMSS certification. New this year, NAMSS is offering more CE credits than ever before—16 to be exact!



2013 NAMSS Certification Testing Dates and Deadlines

Fall Testing Period
Application Deadline:
Friday, August 9, 2013
Testing Period:
Saturday, October 5 through
Saturday, October 26, 2013

The 2013 Candidate Handbook is available online at www.NAMSS.org

The NPDB-HIPDB Has Become the NPDB

Effective May 7, 2013, the National Practitioner Data Bank (NPDB) and the Healthcare Integrity and Protection Data Bank (HIPDB) are now one data bank: the NPDB.

Why have the NPDB and HIPDB merged?

Section 6403 of the Patient Protection and Affordable Care Act (ACA), signed into law on March 23, 2010, requires that duplication between the NPDB and the HIPDB be eliminated. Section 6403 also is intended to streamline operations.

What does the merger mean for users?

Essentially, there is no change to the reporting workflow or requirements, but users' query results may include reports that were not previously available to them. The HIPDB information was integrated into the NPDB, meaning that users who only queried the NPDB may receive expanded access to Data Bank information. If a user queried both the NPDB and HIPDB prior to the merger, their query results after the merger have not changed. Below are the changes that each user group may experience:

All Queriers: Information

previously collected and disclosed through the HIPDB will be collected and disclosed through the NPDB. Users may see Federal and health plan actions/decisions in their query results that they were not able to receive before because they were only available through querying the HIPDB. Continuous Query Users: Users may receive notifications for reports (specifically, Federal Government agency and health plan actions/decisions) that were previously unavailable to them. All Reporters: Reporters have not experienced any changes to reporting, as reporting requirements remain essentially the same.

What will be the cost for querying the Data Bank?

The fees for querying the Data Bank will be the same after the merger becomes effective. The annual subscription fee for Continuous Query will continue to be \$3.25 per practitioner enrolled. Traditional Query (also

known as One-Time Query) will remain \$4.75 per query. There are no plans to change the query fees at this time; however, if fees change, the Data Bank will publish information in the Federal Register and notify users. If you are a U.S. Department of Veterans Affairs (VA) hospital facility, please contact the Customer Service Center for additional information about fees.

Specific merger questions can be sent to the NPDB Policy Staff at NPDBPolicy@hrsa.gov. For technical assistance or general questions, please contact the

NPDB Customer Service Center at 1-800-767-6732 or help@npdb-hipdb.hrsa.gov.

The official website is: <http://www.npdb-hipdb.hrsa.gov/>



“What lies behind us and what lies before us are tiny matters compared to what lies within us.”

Ralph Waldo Emerson

What Will the Sunshine Act Mean for You?

On Friday, February 1, 2013, the CMS announced the release of the final rule implementing the Transparency Reports and Reporting of Physician Ownership or Investment Interests section of the Patient Protection and Affordable Care Act, commonly referred to as the ‘Sunshine Act.’



The Physician Payments Sunshine Act, commonly referred to as the Sunshine Act, is a provision of the Affordable Care Act that will make information about interactions between physicians and biopharmaceutical professionals available to the public. Specifically, the Sunshine Act requires that manufacturers of drugs, devices, biological and medical supplies report payments or other transfers of value they make to physicians and teaching hospitals.

How Will the Sunshine Act Work? In its final rule on the Sunshine Act, the CMS provided this timeline:

- ◆ Prescription drug manufacturers must begin to collect data on Aug. 1. Data collected for the period of Aug. 1 - Dec. 31, 2013, must be reported to CMS by March 31, 2014.

- ◆ Sometime after March 31, 2014, CMS will open a 45-day review period for physicians and teaching hospitals to review the information posted and dispute specific reported payments, if necessary.
- ◆ At the close of the 45-day review period, a 15-day period has been added for manufacturers to correct disputed data.
- ◆ In 2014, CMS will roll out a public website that allows users to search and download the data collected.

The Sunshine Act Final Rule Summary includes:

- 1) Timelines for collecting and posting information.
- 2) Information on the review period and the dispute resolution process

for physicians and teaching hospitals

- 3) How manufacturers must report research payments and meals
- 4) Differentiation between accredited and unaccredited CME

The Sunshine Act Summary of Definitions provides:

- 1) Definitions of Sunshine Act terms like covered recipients, manufacturer, teaching hospital and covered drug, device, biological and medical supplies
- 2) Information on what content must be included and what can be excluded from the report.

Source: <http://www.osteopathic.org/inside-aoa/advocacy/aoa-legislative-priorities/Pages/sunshine-act.aspx>

The Top 5 Continuous Query Questions Answered



Before organizations decide to enroll their practitioners in Continuous Query, they often have basic questions about the service. Below, the Data Bank answers the top five questions that may persuade your organization to switch from One-Time Query to Continuous Query. Many organizations consider Continuous Query to be a "best practice" because subscribers receive an initial query response for each enrolled practitioner and continue to receive ongoing monitoring for one year. When a report of a medical malpractice payment or other adverse action (such as a licensure or privileging action, Medicare/Medicaid exclusion, or health care-related conviction or judgment), is filed with the NPDB on an enrolled practitioner, your organization receives immediate notification. Continuous Query also meets legal and accreditation requirements (<http://www.npdb.hrsa.gov/hcorg/pdsAccreditation.jsp>) for querying the Data Bank. Organizations enrolled in Continuous Query believe it is a timely and easy way to keep track of their practitioners' report histories.

How do I activate and use Continuous Query?

Your Data Bank Administrator activates Continuous Query from the Administrator Options page and follows the online instructions. It is as simple as that!

How do I enroll practitioners and receive Continuous Query notifications?

Once your Data Bank Administrator activates Continuous Query, you will be able to enroll practitioners and receive Continuous Query benefits. Organizations may enroll all of their practitioners at one time, or choose to phase in practitioner enrollments over time. You can use the stored subject database to make enrolling easy.

How do I access a Continuous Query disclosure?

Accessing your Continuous Query notification is simple. When the Data Bank receives a report on an enrolled practitioner, the subscribing entity receives an email notification of the action and is advised to sign in to the Data Bank. The report can be accessed on demand via the Data Bank Options page by selecting Report Updates and following the on-screen instructions.

How do I update a practitioner profile in Continuous Query?

Organizations may need to update practitioner profile information with address changes, name changes, and updated licensure information, among other data. This process is easily explained in the Update a Practitioner Profile in Continuous Query page.

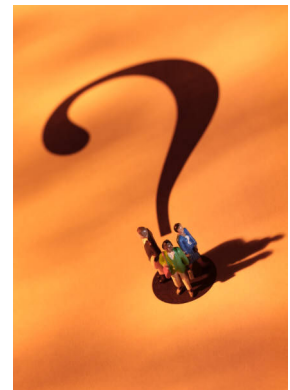
How do I renew or cancel Continuous Query enrollments?

Continuous Query enrollments are active for a period of one year. Organizations may renew

enrollments manually on an annual basis, or renew enrollments through an automatic renewal process. Every month, the Data Bank sends a summary email to alert each user of enrollments requiring renewals, or enrollments scheduled for automatic renewal.

The current fee for enrolling practitioners in Continuous Query is \$3.25 per practitioner. The fee ensures that your organization is notified of existing reports on enrolled practitioners, as well as new reports throughout the 12-month enrollment. What is keeping your organization from enrolling practitioners in Continuous Query today? Let us know by sending additional questions about getting started with Continuous Query to help@npdb.hrsa.gov.

Source: <http://www.npdbhipdb.hrsa.gov/enews/June2013enews.jsp>



Life's Ups and Downs:

"Sometimes
you're the
windshield;
sometimes
you're the bug."

Mark Knopfler

Membership News

A complete listing of MeAMSS members, by last name and by organization name, can be found at: <http://meamss.org/membership.asp>



Congratulations!

Helen Burnett and Laurie Kelley of Blue Hill Memorial Hospital, are to be congratulated on achieving their certifications in Spring 2013. Helen passed her CPCS certification and Laurie passed her CPMSM certification.

Dear members,

Volunteers for writing articles for our newsletter would be MUCH appreciated!

Please also send me any ideas for articles, information you think might be interesting for our members and any member news (weddings, births, graduations, job changes)

Thank you,
Helen

“We must become the change we want to see.”

Mahatma Gandhi



News Snippets

Cash-only doctors abandon the insurance system

Fed up with declining payments and rising red tape, a small but growing number of doctors are opting out of the insurance system completely. They're expecting patients to pony up with cash.

http://money.cnn.com/2013/06/11/news/economy/cash-only-doctors/index.html?iid=HP_LN&hpt=hp_c3

Texas Emergency Physician Sues Hospital in EMTALA Whistleblower Claim

A U.S. District Court in Texas allows a physician's retaliation claim against the hospital that allegedly terminated his privileges for reporting violations of the Emergency Medical Treatment and Labor Act (EMTALA).

http://www.pharmacychoice.com/news/article.cfm?Article_ID=835521

CMS Unveils Hospital Violations Database

For the first time, providers, payers, and patients now have an enormous searchable database containing documents detailing about 8,000 serious federal safety rule violations—many of which have caused serious patient harm or death - at about 1,000 U.S. hospitals since January, 2011.

<http://www.healthleadersmedia.com/page-2/QUA-290217/CMS-Unveils-Hospital-Violations-Database>

Lending Library

Materials will be on display at biennial MeAMSS meetings, but are available for loan at any time.

Items may be loaned for 90 days.

If you would like an item mailed to you, please complete the request form. It is located under the section *Policy & Bylaws* then under *Purchase and Loan of Educational Materials* policy. It can be faxed or emailed to Roseann Napoleone.

Once the request is received, the item will be mailed to you.

Roseann's contact information:
Ph: (207)283-7072
Fx: (207)283-7070
mad.rin@smmc.org

A list of materials is available online at: <http://meamss.org/Library.asp>





2012-2013 Board Members

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Useful websites:

<http://www.namss.org/>

<http://meamss.org/>

<http://www.docboard.org/docfinder.html>

<http://www.pfr.maine.gov/ALMSOnline/ALMSQuery/Welcome.aspx>

<http://www.npdb-hipdb.hrsa.gov/>

<http://www.ama-assn.org/>

<http://www.nccpa.net/Default.aspx>

<http://www.aana.com/Pages/default.aspx>

<http://www.nbcrna.com/Pages/default.aspx>

<http://www.amcbmidwife.org/index.php>

<http://www.nursecredentialing.org/default.aspx>

<https://www.doprofiles.org/index.cfm>

<http://www.osteopathic.org/Pages/default.aspx>

http://www.docboard.org/me/me_home.htm

<http://www.maine.gov/osteo/index.htm>

<http://www.maine.gov/sos/cec/rules/10/chaps10.htm>

<http://www.archives.gov/locations/index.html>

<http://www.cms.gov/>

<http://www.jointcommission.org/>

<http://www.qualityforum.org/Home.aspx>

http://www.simplesdatasolutions.com/sds_quiz.htm

<http://www.hcpro.com/credentialing-privileging/index.cfm>

Guidelines for submitting articles:

- Any text submitted other than by electronic means must be typed.
- Any photography submitted must identify individuals pictured and nature of photograph.
- Provide all details regarding events or announcements, including location and exact address, date, time, contact, and applicable telephone, fax, e-mail, and Website.
- Data submitted should be concise and not exceed 500 words.
- Please make sure you get permission for any article submissions.

Remember—This is your newsletter, let's share forms, policies, processes and any other tidbits of information that you think others may find useful.



<http://meamss.org/>