



Leaders Helping Leaders



Membership Matters

a publication for members of Oregon Medical Group Management Association

Message from the President - August 2021

Janet Mossman, FACMPE

As I enter the twenty-eighth year of my career, my eighth year serving on the Oregon Medical Group Management Association (OMGMA) Board of Directors, and as your newly elected President, I have noticed that our association has never been more relevant and important for those of us practicing in the field of Healthcare Administration than it is right now.

I know that your OMGMA Board of Directors have been working tirelessly to bring to its membership the most timely and relevant education and resources. As a team of healthcare administrative professionals, we have brought opportunities to learn, teach, mentor, and share top advice abundantly through many of our channels and association participation. This has allowed us to brainstorm, advocate, help legislate, and share top administrative advice as we work together to give back to our communities.

As an association, we have collectively joined with other organizations when it mutually benefited our respective members to bring resources to stay abreast of many changing requirements due to COVID this past couple of years as well as all other legal demands of our profession currently, in the past, as we will into the future.

I am proud of Oregon State MGMA Chapter's successes over the last year and a half, particularly in providing more opportunities for meaningful engagement of our members and sponsors, introducing innovative programming formats and topics, and providing professional development and outreach opportunities during a time when COVID had disrupted so much in our lives. In the year ahead, we will continue these initiatives, as well as add topics designed for the different demands and stages of your career, virtual programming, and events held in collaboration with other chapters in the northwest multi-state area and beyond. I know that we, your Board of Directors are working hard in planning educational options that leave us the ability to meet either in person or remotely depending on the stage and path COVID places us in moving forward. We are even looking into a hybrid option as well, so long as the cost isn't prohibitive. I, for one, am looking forward to the times that we can meet and network in person! So many of us have formed genuine friendships through our membership in OMGMA.



Lastly, I have only one ask. I ask that each of you personally help our professional association grow. If you happen to meet with, talk to, or know of someone who meets our membership criteria, i.e., healthcare CEO, CFO, COO, administrator, manager, supervisor, lead, or student would you please share our information. Let's give a hand up and make a difference in a professional's ability to have relevant resources easily accessible to them.

Please feel free to reach out to me personally if you want to share an idea, need some help, or want to become involved.

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Committee Corner

Partner/Exhibitor Committee

*Heidi Snyder, MHA
Committee Chair*



With the impact of COVID on our organization's Partners that provide us support we would like to encourage all our OMGMA members to consider reaching out to one Partner over the next three months to make a connection for a service you might need now or may need in the next two years. See a full list of our 2021 [OMGMA Partners HERE](#).

Our Partners are happy to help share information and advice where you may have a need and look forward to networking and building relationships to support our local medical community.

If you have feedback that you would like to provide as a Partner or as an OMGMA member for support and services, please email Heidi Snyder at: hsnyder@childrens-clinic.com.

Membership Committee

*Rondyann Gerst, CPC, CRHCP, CMPE
Committee Chair*



OMGMA's new Membership Committee Chair - Rondyann lives in La Grande. A small town in rural eastern Oregon. She has worked in healthcare administration for 28 years. She began her career managing a general surgery practice. Over the years she has managed various specialties from ENT, orthopedics, pediatrics, Ob/Gyn, urology, wound care, neurology and internal medicine. Currently, she is a Rural Health Clinic (RHC) Program Manager at the Oregon Office of Rural Health, where she provides technical assistance for RHCs across Oregon. Outside of work, you will find Rondyann hiking, mountain biking or cooking.

As the new co-chair of the membership committee, one of her goals is to educate Oregon practice leaders on the value of Oregon MGMA membership. With healthcare ever changing, a key element for medical practice leaders is to "stay ahead of the curve." OMGMA membership is an incredible opportunity to enhance professional development and don't forget to encourage colleagues to join Oregon MGMA by going to the website at omgma.com under the membership tab.

The many benefits of OMGMA membership include:

- Participate in state-wide conferences with a mix of medical practice leaders in one location.
- Participate in our [regularly scheduled webinars](#) on current topics to benefit your practice.
- Participate in educational outreach to all geographical areas of Oregon in Manager Time Out Meetings.
- Receive certification through the American College of Medical Practice Executives (ACMPE) using the education, support and resources provided to you as a member.
- Receive periodic legislative updates to keep informed on issues that face the healthcare community.
- Develop leadership skills and your professional network through your contribution on the Oregon MGMA Board or Committees.
- Advocacy both locally and nationally to help shape the future of our health care delivery system.
- New to medical group administration? OMGMA provides many mentoring opportunities for those looking to increase their knowledge and skill set.
- Discount for Worker's Compensation insurance through [SAIF Corporation](#) (if your group qualifies).
- [Online Career Center](#) if you are looking for work - or - if you are looking to fill a position in your organization.

Committee Corner

ACMPE Committee Donna Duval, FACMPE Committee Chair



ACMPE ADVANCEMENT

Congratulations to the following people who achieved their CMPE certification within the past six months: Eve Gray, Jamie O'Hollaren, Kim Magness and Leah Hamilton

CONTINUING EDUCATION

As a reminder, MGMA national and Oregon MGMA LIVE webinars and events count towards the 12 MGMA LIVE required hours.

Upcoming MGMA national LIVE events can be found by [visiting the events page](#). This includes upcoming live webinars.

ACMPE BOARD CERTIFICATION PREPARATION COURSE

Registration includes seven self-study session modules; and one quarterly live question and answer session that is also available as a recording in-between; and one exam that allows you to claim continuing education credit. You must attend all sessions to claim ACMPE and CEU credit.

The ACMPE Board Certification Preparation Course is designed to help healthcare professionals prepare for the ACMPE exams. This comprehensive course helps examinees identify content necessary to meet board certification standards, including financial management, regulatory compliance, organizational governance and departmental operations management and transformative healthcare delivery. To best prepare applicants for the examinations, topics are reviewed from the perspective of a variety of healthcare settings, including hospitals and ambulatory care settings.

Sessions 1 through 7 are self-study modules:

- Session 1: Overview
- Session 2: Operations Management Review
- Session 3: Financial Management Review
- Session 4: Human Resources Management Review
- Session 5: Transformative Healthcare Delivery
- Session 6: Risk and Compliance Review
- Session 7: Organizational Governance Review
- Session 8: Board Certification Preparation: Live Question-and-Answer Session held quarterly or recorded between live sessions at 1:00-1:30 PM ET (12 PM CT, 11 AM MT, 10 AM PT)

Dates of LIVE sessions: September 7, 2021- December 7, 2021

LEARN IT. EARN IT. SHARE IT.

WHAT IS AN MGMA DIGITAL BADGE?

Digital credentials enable the clear recognition, communication, and tracking of achievement. Organizations use Credly to issue portable and secure credentials that empower earners, make outcomes and skills more transparent, and gain actionable data and insights about how and where those credentials are being used.



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Manage your badges through Credly and share your achievements on various platforms such as:

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- Email Signatures
- Personal Websites

Helpful links to learn more about digital badges:

- [MGMA Credly Home Page](#)
- [Credly Support](#)
- [MGMA Digital Badges – More Information](#)

Committee Corner

Legislative Committee

Rachel O'Brien, MBA, BS, RN
Committee Chair



Debra Bartel, FACMPE, CRHCP
Committee Member - State



Christi Siedlecki, MSN, RN, FACMPE
Committee Member - National



Here is a summary of the main issues Oregon Medical Association (OMA) and Oregon Medical Group Management Association (OMGMA) followed this year during a full legislative session. As you know, Oregon has a long session (February – June) in odd years and a short session (February – April) in even years. Once we know more about the bills likely to make it into the short session next year, we will include information in an upcoming newsletter. FYI - The entire session was held in a virtual manner with all committee meetings conducted either via video link or cell phone.

HB 2508: Telemedicine Payment Parity

Status: Signed by Governor

HB 2508 extends payment parity to video and audio visits after the public health emergency is lifted. The bill ensures that health insurers cannot place barriers, such as forcing providers to use a certain platform or requiring the provider to be on a certain telehealth panel. The bill has an emergency clause which will allow it to go into effect once parity requirements are lifted under state regulations and agreements. It also requires that DCBS produce and present a report to the Legislative Assembly, by March 1, 2023, on the impact of telemedicine reimbursement on health insurance premiums.

HB 2517: Utilization Management Transparency Act **Status: Signed by the Governor**

Requires process information and approval criteria rule changes to be posted on an insurer's website and would require them to include specific reasoning with denials and explanations on what is needed to make the request complete. Additionally, strict determination response timelines are to be put in place.

The legislation also sought to modernize the submission process by requiring insurers to establish web-based submission portals. The OMA also advocated for the inclusion of step therapy exception criteria to allow more individualized care for chronic and complex conditions. Finally, the bill includes a provision that will allow a patient's step therapy history to follow them at a subsequent health plan, ensuring they would not have to repeat regimens already undergone. Most of the provisions take effect on January 1, 2022. The website portals must be in place by June 1, 2022.

HB 5024 A: Oregon Health Authority Budget

Status: Awaiting Signatures

With a robust budget and federal stimulus dollars the OHA budget increased by 6% for the biennium. The base budget includes serving all OHP patients with no benefit cuts. It also includes continuing all health care workforce incentive funding programs. The OHA budget contains a \$45 million investment into public health modernization programs.

HB 3036: Physician Assistants Update Status: Signed by the Governor

Created to help PAs become more easily hired into systems and clinics. The bill changes the term supervisory into collaboration to reflect the evolution of the PA and Physician relationship. The bill also allows employers to sign collaborating agreements, not just physicians, which can increase opportunities for PAs to find employment in Oregon health care settings. While the goal is to help Physician Assistants gain jobs, OMA is seriously concerned that the most recent changes will open the door for additional liability for all parties. OMA will closely monitor the implementation of the bill.

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Committee Corner

HB 3159 B - Real D & SOGI Data Collection

Status: Awaiting Signatures

Introduced to require all health care providers, CCOs and health care insurers to collect REALD (Race, Ethnicity, Ability, Language Data) and SOGI (Sexual Orientation and Gender Identity data) on each patient, not just those treated for or suspected to have COVID (currently required for COVID related services only). HB 3159B requires the Oregon Health Authority to establish a data system for other to access the data collected to make informed decisions. Lastly, it requires the OHA to report to the legislature on the collection and reporting of the data and it directs OHA to administer a grant program to provide funding to support safe data collection by specified organizations. OHA will need to create data collection mechanisms before requiring providers to collect. OHA anticipates total costs of \$9.8 million General Fund, \$5.6 million Other Funds, and \$2.8 million Federal Funds. Most of the costs are related to 43 new positions (32.25 FTE in 2021-23).

HB 2362 B: Mergers and Acquisitions

Status: Awaiting Signatures

HB 2362 creates a robust oversight process for proposed healthcare mergers, acquisitions, affiliations, and some contracting that builds on OHA's existing authority to review transactions involving Coordinated Care Organizations (CCOs) and extends this review to the full healthcare market — from service providers to insurance carriers. It also requires entities to demonstrate the transaction will benefit Oregonians by either: 1) reducing patient costs, 2) increasing access to services in medically underserved areas, or 3) addressing historical and

contemporary factors contributing to the lack of health equity in our state.

Also Of Note:

The proposed naturopath payment parity bill did not resurface after being sent to committee for discussion.


At the Federal Level

On July 1, 2021, the Department of Health and Human Services (HHS) released its first regulation implementing provisions of the No Surprises Act. On Dec. 27, 2020, the No Surprises Act was signed into law as part of the Consolidated Appropriations Act of 2021, with the goal of protecting patients from receiving surprise medical bills. The law, in part, allows providers and insurers to use an independent dispute resolution (IDR) process when disagreements arise over reimbursement. MGMA was successful in advocating that Congress forbid arbitrators from considering public payer reimbursement rates during the IDR process. The law goes into effect on Jan. 1, 2022.

For more information, review HHS' fact sheet and the interim final rule. MGMA will release a comprehensive analysis of the rule to members in the coming weeks.

Submitted by your OMGMA Legislative Committee: Christi Siedlecki, Rachel O'Brien and Deb Bartel with thanks to [OMA](#) for providing much of the summarized information.

Feel free to email comments, questions or requests to the OMGMA Legislative Committee at: advocacy@omgma.com

A graphic for an MGMA Washington Update webinar. The background features a large image of the U.S. Capitol dome under a sunset sky with an American flag in the foreground. Text on the left reads 'MGMA STATE AFFILIATE MEMBER WEBINAR' and 'MGMA WASHINGTON UPDATE'. Below that, the date and time are listed: 'TUESDAY, SEPTEMBER 14TH', '1:00 PM ET / 12:00 PM CT / 11:00 AM MT / 10:00 AM PT'. At the bottom right, there is a small portrait of Drew Voytal, MPA, with the text 'Guest Speaker: Drew Voytal, MPA Associate Director MGMA Government Affairs'. The ACME logo is in the bottom left corner.

MGMA STATE
AFFILIATE
MEMBER
WEBINAR

MGMA WASHINGTON UPDATE

TUESDAY, SEPTEMBER 14TH
1:00 PM ET / 12:00 PM CT /
11:00 AM MT / 10:00 AM PT

ACME

Guest Speaker: Drew Voytal, MPA
Associate Director
MGMA Government Affairs

Oregon MGMA Monthly Member Webinar Series

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and registration**

Featured Article

What healthcare IT companies must provide to support the future of primary care

By Leah Jones, Allscripts Senior Vice President and General Manager

The events of 2020, and the normalization of remote and COVID-safe care, have in some ways created innovations that sped up the adoption of telehealth and simplified care delivery. In many cases, clinicians still saw patients in person, and, naturally, this involved challenges. Primary care has especially been affected, and issues stemming back to before the pandemic are being exacerbated.

Average wait times to see a primary care physician continue trending upward, as only healthy patients can be seen in the physical office, and those who are sick or have symptoms must go to urgent care or be seen at curbside. Separate from COVID-19 is patients' growing expectations for on-demand care, reflecting their experiences of instant service and advice in other sectors of their lives.

Primary care physicians face increasing complications in meeting patient needs. As always, they have to cope with their own feelings of burnout, and often, this burnout is increased by disparate workflows and non-centralized patient information. More urgently when dealing with COVID-19, it's essential that physicians can easily risk score patients, alerting and prioritizing conditions in the EHR. They also must be able to determine which cases to prioritize for in-person visits, and which they could just as effectively handle remotely to help manage their daily workloads and ensure full focus on patients. Managing ongoing treatments and prescriptions—as well as tracking health trends in the local populations—is also critical to successful primary care delivery, even outside of pandemic circumstances.

It is these challenges and key functions that healthcare IT vendors must work to address with their primary care clients. We must ensure solutions are truly enabling practices to see more patients and providing efficient workflows while supporting the best quality of care. Beyond fundamental interoperability functions, the offers of optimal scheduling, integrated telehealth tools for easy virtual visits and systems that promote shorter wait times are increasingly critical.

As an example of optional scheduling, consider the following: A patient with a chronic condition like hypertension calls about an acute concern like pink eye, but hasn't actually seen a doctor about the chronic condition in two years. The EHR should identify all these characteristics for the physician and administrators. This facilitates appropriate schedule time to adequately address both issues and prioritize the patient appropriately. Continued use of optimal scheduling promotes maximized value-based care and effective, long-term health for the patient.

Primary care providers will especially need healthcare IT solutions that support things like practice optimization and virtual access as the pandemic continues to pose new challenges and at-risk patients are less likely to enter the physician's office. Fully integrated EHR, practice management and consumer engagement technologies, including those that alert patients for appointments, are also extremely valuable in prioritizing and scheduling patients for vaccines.

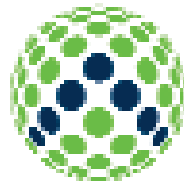
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Featured Article

Overall, the key lies in facilitating interactions between patients and providers, utilizing everyday devices both parties feel comfortable using. Doing so helps patients actively engage with providers as needed, eases clinician burden and optimizes practice operations, most urgently in a time of crisis. Healthcare IT vendors must help primary care physicians close care gaps and continue treating all patient segments to ensure their health and success in value-based care models.

To help navigate these complex and uncertain times, Allscripts experts identified five key drivers of change that practices should be on the lookout for this year.

Download our [Key Drivers of Change in 2021 eBook](#) to learn how Allscripts can help your practice succeed now and into the future.



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In The News

July 1, 2021 marked the start of a new term for your Oregon MGMA Board of Directors. Officers on the Presidential track rotated forward and two new Board Directors were added. We would like to introduce the two newest Directors to the Oregon MGMA Board:



*Jamie O'Hollaren, MA, CMPE
Providence St. Vincent Women's Clinic,
Portland*

Hello! I'm very excited to be joining the OMGMA Board. I have been in healthcare in the Portland area in a variety of leadership roles for over 20 years, most recently as the Sr. Clinic Manager for the Providence St. Vincent Women's Clinic. I have dual masters degrees in counseling and health psychology, and I am ACMPE-certified through MGMA. I am currently working on my Fellowship through MGMA, and hope to obtain that within the next year. I was born and raised here in Portland and foggy, rainy days are my favorite! I am married to a busy pediatric surgical specialist, and we have a daughter who is a sophomore in college. I am extremely passionate about advocacy and leadership and grateful to be on the Board. I look forward to meeting and working with you!

*Lisa Pickett, FACMPE
The Oregon Clinic Pulmonary, Critical Care
& Sleep Medicine
St. Vincent Mother Joseph
Portland, Tualatin, Newberg*



I have worked in healthcare too long to remember. I started as a Medical Assistant and over the years found myself in practice management. The years have been more rewarding than I could have imagined and I count myself amongst the lucky to have such a gratifying career. Outside of work I enjoy finding something creative and 'crafty' to keep me busy. I play several instruments and like to spend time each week practicing. One of my favorite activities is going for walks and you can find me strolling outside before the sun rises on most days.

A graphic for the FACMPE Scholarship. It features a blue banner at the top with confetti. Below the banner is a blue graduation cap and a rolled-up diploma with the word "Scholarships" written on it. To the right of the graphic, the text "FACMPE Scholarship" is written in large red letters. Below that, it says "Offered annually through Oregon MGMA to members who achieve their Fellowship." and "Apply by September 1, 2021". At the bottom, it says "More information and application can be found HERE." with "HERE" in blue.

FACMPE Scholarship

Offered annually through Oregon MGMA to members who achieve their Fellowship.

Apply by September 1, 2021

More information and application can be found [HERE](#).

PACIFIC NORTHWEST MEDICAL MANAGEMENT CONFERENCE

www.pnwmgmaconf.com

162 Attendees

25 Sponsors & Exhibitors

15 Concurrent Sessions

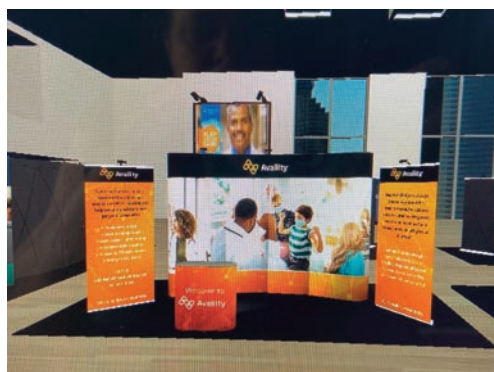
3 General Sessions

Recap By The Numbers

1 Awesome Emcee

5 Participating State MGMA Affiliates

2 Days of Virtual Education



Objective



- After this presentation, you should be able to understand the 2021 E/M changes and what it means for provider documentation.

2021 Evaluation and Management Changes

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