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The PBT Advantage

Physicians' Benefits Trust Life Insurance Company (PBT LIC) offers comprehensive and cost-efficient insurance plans, including Medicare Supplement and large group health insurance.



managing risk

No Foolin'

Practice Assessment Requests Due by April 1

As a practice manager, you know that controlling liability risks requires a team effort.



So take the lead and alert the ISMIE physicians in your practice that **April 1** is the priority deadline for scheduling a practice assessment for completion in 2015. He or she may [request one here](#) and then [explore this helpful preparation guide](#).

Upon completion of an assessment, your policyholder may also earn a 5% premium discount for two policy years.

For questions about practice assessments, please contact our Risk Management division at 800-782-4767 ext. 3300 or email riskmanagement@ismie.com.

Three Facts to Know If Your Office Received a Medicare Revalidation Request

The *Affordable Care Act* requires Medicare providers to revalidate periodically. If your office has received the yellow envelope from the Centers for Medicare and Medicaid Services (CMS) containing a request to revalidate, here's what to do.

1. Submit the application no later than 60 days from the postmark date on the letter.
2. Your revalidation application may be securely submitted online through the [Provider Enrollment Chain and Ownership System \(PECOS\)](#). The process is as simple as verifying or updating your information in PECOS.
3. To revalidate by paper, download the current [CMS 855-S Medicare Enrollment application](#) from the CMS website.

For more info, visit [CMS's enrollment webpage](#).

When Practice Changes Occur, Take This No-Hassle Step

Like any business, a medical practice is constantly evolving to better serve its clients - or in this case - patients. [ISMIE provides this simple change request form](#) for its policyholders should any of following occur.



- Changes to an office practice location or contact information (address, phone, fax, email).
- Changes to your practice time or patient volume (full-time, part-time, retired).
- Changes in practice relationships (partners, shareholders, employees or allied health professionals).
- Additions or deletions to your hospital affiliation.
- The desire to change policy limits of liability.
- The decision to add or drop medical practice activities (such as a nursing home practice, medical director or advisor position of a medical or day spa, or practice as a hospitalist).
- The deletion or any additional procedures to your practice (especially procedures not typically performed by physicians practicing within your trained medical specialty).

Once completed, the form may be faxed to 312-782-2023.

For further assistance regarding reporting practice changes, please [contact ISMIE Underwriting](#) or call 800-782-4767 ext. 3350. If utilizing an insurance broker, your physician may also wish to contact him or her.

Calm Your ICD-10-CM Anxiety with These Resources

The long-awaited (or dreaded!) implementation of the ICD-10-CM code set is six months away. To help your practice with this major conversion, here's some assistance to help manage the changeover.

- The Centers for Medicare and Medicaid Services launched a new webpage, [Provider Resources](#), a central hub of information related to the October 1 compliance date for the new code set.
- Attend the AMA's [ICD-10 Specialty Coding Summit](#), June 1-2, 2015, in Las Vegas, Nevada. CME available. [Register online](#) or call 855-225-5341. [Download](#) the brochure.

Just a few months remain before ICD-10-CM becomes the new coding standard. Make sure your practice is prepared with these resources!

Risk Tip: Synchronize a System for Communicating Patient Test Results

It's time for some bad news and good news concerning patient test results.

The *bad news* is that improper test follow-up is one of the major processes contributing to unsafe patient care and increased risk. The *good news* is that it's a process that you, as a practice manager, can positively impact.



So be sure to have a working system in place for test follow-up. The protocol should be accessible to pertinent staff and ensure that the results were:

- Reported to the physician.
- Reviewed by the physician, subsequently initialed and dated, or electronically signed.
- Communicated to the patient (or patient's guardian), along with any recommendation regarding any treatment or additional testing, when necessary.
- Filed in the appropriate section of the medical record.

For questions about maintaining test results records, ISMIE policyholders may contact our Risk Management Division at 800-782-4767 ext. 3300 or riskmanagement@ismie.com.

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Let us know how we can make *PM Update* more useful to you.
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