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Magnolia minutes



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Message From The *President*



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2013 promises to be a very exciting and challenging year for healthcare and the leadership of MGMA of MS is committed to help you not only survive, but thrive in these changing times. 2012 was good year for our association. Under the strong leadership of Sheila Harkins as President and the hard work of Kristina Smith as Executive Director, we have grown in membership and reputation as the source for guidance and education in Mississippi for the medical practice management discipline. Please join me in expressing appreciation for all the tireless work these ladies have contributed to MGMA of MS.

Our objectives in 2013 are very specific, we want to continue our membership growth and we want this growth to be evenly spread across our great state. We are blessed to have willing members all across the state who have accepted appointments to our various committees and each member of the Executive Board has accepted my challenge to grow the membership in their assigned section of the state. I have the Delta, north of Warren County, so please refer any managers you know in this area who are not currently members. I am sure my fel-

low board members will appreciate any help you can give them in growing their assigned quadrant of the state so please enroll anyone interested. Information can be found at mgmams.com or by calling Kristina at 985-290-8020.

Additionally in this new year, MGMA of MS will continue to collaborate with the Mississippi State Medical Association (MSMA) on projects and issues that affect both associations. Your President Elect, Mechelle Duckworth, is currently working the MSMA staff to offer an expanded Insurance Forum this spring.

Your ability to grow and develop professionally through MGMA of MS programs was my focus last year. I sincerely hope we met your expectations of the summer and fall conferences. Please share any ideas you have for speakers or topics you feel our membership would appreciate.

The continued strength of our association depends on all of us sharing our knowledge, helping each other, and recruiting new members. Thank you for your trust in us as your leadership and please work with us to continuously improve our association.

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Message From The *Secretary*



Secretary

Justin Rhodes

Director of Clinic Operations

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“I look forward to meeting many of you in the days ahead and welcome your input and feedback on how we can serve our members and continuously improve our MGMA of MS chapter.”

Greetings fellow MGMA members! Let me start by thanking you for the opportunity to serve on your Leadership Board in 2013. I look forward to working closely with the talent in our organization to further enhance MGMA of MS and your membership experience.

MGMA is a fantastic organization that is dedicated to providing educational and networking opportunities to its members. With the fast-paced changes facing healthcare today, we rely on organizations like MGMA to keep us informed so we, as administrators, can proactively navigate and lead our practices in the days ahead. MGMA has been a tremendous asset to me personally as I have transitioned in my new role over the past year and a half. From educational conferences and work-

shops to the networking relationships established, I have been able to leverage these experiences to improve in my current administrative role.

I look forward to meeting many of you in the days ahead and welcome your input and feedback on how we can serve our members and continuously improve our MGMA of MS chapter. Our goal is to provide educational opportunities that matter most to you and your practice...your voice is important to us! In addition, please join me in reaching out to colleagues who are not members to help get them “plugged in” to what MGMA of MS has to offer. The speed of change in our medical groups show no signs of slowing down...engaging all our colleagues will help ensure we manage change successfully!

Bio:

Justin Rhodes has been serving as Director of Clinic Operations for Baptist Medical Clinic since June 2011. In this role, he is responsible for Baptist’s multi-specialty clinic network including Primary Care, Internal Medicine, Pediatrics, Convenient Care, Occupational Health, Cardiology, Neurology, Neurosurgery and Cardiovascular Surgery.

Prior to joining Baptist, Rhodes was Manager of Medical Management for Nissan North America, Inc. In his previous role, he was responsible for workers’ compensation, on-site healthcare delivery and analytics at North America Manufacturing operations in Smyrna and Decherd, TN and Canton, MS.

Under Rhodes leadership, Nissan’s Medical Management team was honored with the 2010 National Underwriter Award for Excellence in Workers’ Compensation Risk Management and the 2010 Theodore Roosevelt Workers’ Compensation and Disability Management Award.

Rhodes joined Nissan in August 2002 as a benefits analyst and was on the medical start-up team for the Canton plant. As a member of the management team since 2006, he held progressive positions in Safety and Medical Management.

Rhodes earned a bachelor’s degree in Finance from Arkansas State University in Jonesboro, AR, and a master’s degree in Business Administration from Mississippi College in Clinton, MS.

Rhodes is married to Lisa and they reside in Brandon with their three children: Addison (6), Marley Kate (3) and Brody (1).

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HHS Revises HIPAA Privacy Rule



Rich Sanders

The U.S. Department of Health and Human Services published in the Federal Register on January 25, 2013 the HIPAA/HITECH Act Omnibus Final Rule. The Final Rule, effective March 26, 2013, modifies the requirements of the HITECH Act Breach Notification Rule and the HIPAA Privacy, Security and Enforcement Rules. Covered Entities will be required to comply with most provisions by September 23, 2013. For Covered Entities and Business

Associates, they will have an additional year to restructure their Business Associate Agreements to comply with the Final Rule. Below, we have summarized the key provisions of the Final Rule.

I. Breach Notification Rule

The Final Rule revises the definition of a “breach” and the standard for determining whether patient notification is required. Previously, a Covered Entity or Business Associate was not required to notify patients of a breach of unsecured protected health information (PHI) if it determined, in good faith, that the breach would not result in a significant risk of harm to the patient. The Final Rule replaces the “harm” threshold with a “probability of PHI being compromised” threshold. The Final Rule states that any use or disclosure of unsecured PHI not permitted under the HIPAA Privacy Rule is presumed to be a breach requiring patient notification unless the Covered Entity or Business Associate demonstrates that there is “a low probability that the protected health information has been compromised.”

When determining whether there is a low probability that the PHI has been compromised, Covered Entities must take into account the following four factors: (a) the nature and extent of the PHI involved; (b) the unauthorized person who used the PHI or to whom the PHI was disclosed; (c) whether the PHI was actually acquired or viewed; and (d) the extent to which the risk to the PHI has been mitigated.

In addition, the Final Rule revises the definition of a “breach” to remove the exception for limited data sets that do not contain zip codes and dates of birth. Under the revised definition, an impermissible use or disclosure of such limited data sets is presumed to constitute a breach unless the covered entity or business associate is able to demonstrate there is a low probability that PHI has been compromised.

II. Business Associates and Contractors

Under the Final Rule, Business Associates and Contractors are now required to comply with the HIPAA Security Rule. The Final Rule provides a transition period of an additional year for Business Associate Agreements that are in currently in existence to come into compliance with the Rule. For example, Business Associate Agreements that existed prior to January 25, 2013, and that are not renewed or modified during the period from March 26, 2013 to September 23, 2013, should be revised to comply with the Final Rule by the earlier of two dates: 1) the date on which the agreement

is renewed or modified; or 2) September 22, 2014. Business Associate Agreements that contain automatic renewal provisions, without any additional change in terms, do not trigger the earlier deadline.

III. Revised Privacy Notices

HHS has revised the Privacy Notices section of the Privacy Rule to require providers to include additional information. The Privacy Notices must now grant the recipient the right to receive the breach notification. The revised Notices must also restrict health plans from using genetic information for underwriting purposes. In addition, Covered Entities must also obtain patient authorization before using PHI for marketing purposes and before selling PHI.

The revised privacy notices instituted under the Final Rule are considered to be material changes by OCR. Thus, covered entities will need to provide a revised Notice of Privacy Practices to individuals. Health Plans may provide the revised Notice of Privacy Practices by prominently posting the revised notice in its office or on its web site prior to September 23, 2013 (compliance deadline for the Final Rule) and by providing a copy of the revised notice in its next annual mailing.

IV. Penalties

The Final Rule increases the maximum penalty for a violation up to \$1.5 million per violation.

V. Sale of PHI

Also, included within the Final Rule is a prohibition on the sale of Private Health Information without prior patient consent.

VI. Marketing

The Final Rule has created dramatic changes to the marketing and fundraising requirements. The Rule requires that Covered Entities must obtain authorization before sending patients treatment or health care operations communications related to a company or product that the Covered Entity receives compensation.

VII. Disclosures to Health Plans

The Final Rule modifies the previous Genetic Information Non-discrimination Act, which prohibits health plans from disclosing genetic information for underwriting purposes. It allows patients to pay cash for a visit, for treatment or for a procedure. If the patient does this, he or she may instruct the Covered Entity not to share the information with the patient’s health plan.

VIII. Conclusion

This new rule issued by HHS will work to strengthen the privacy and security protection for health information. It also has significant revisions to forms that healthcare providers use on a daily basis, however, and should be addressed very soon in order to meet the deadline of September 23, 2013.

RICH SANDERS is President of THE SANDERS LAW FIRM, P.C. with offices in Atlanta, Birmingham, Montgomery and Jacksonville. The firm provides high-quality, affordable legal services to healthcare providers and can assist with compliance under the Final Rule. Rich can be reached at rsanders@southernhealthlawyers.com.



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