

**Minutes**  
**July 17, 2013**

**I. Call to Order**

- A. Introductions
- B. Acceptance of Minutes
- C. Agenda Additions:

Go over, "To Do Items" from previous meeting

- 1. Kerry Allen to speak with her contact re: Humana challenges and speaker (Kerry to meet with her contact, Susan Passinault, next month).
- 2. Chris to ask Abby about Benchmark's Net Margin Line for clarity (Done; Barry to forward response to the group).

**II. Reports:**

- A. Executive Director Report – Barry Cargill
  - i. Call for Annual Speaker ideas. Please send to Cindy Thelen on Education Committee. Looking for a person from Reimbursement to be on Education Committee.
  - ii. ICD-9 Seminar on September 23-25
  - iii. Met with Michigan Department of Licensure and things are favorable. They are not willing to pay for the licensing. Agencies would incur the cost.
  - iv. Rebasing or further cuts by Medicare are a continued problem, as reimbursement continues to decline. Agencies are encouraged to write their congressional leaders.
  
- B. BCBS Liaison Meeting – Issue forms available – Submit to [maryp@homecaremi.org](mailto:maryp@homecaremi.org) Per Barry a meeting has been requested. However, agencies must pose questions in order for a meeting to be scheduled.
  
- C. Medicaid Liaison Meeting - Mike Hall – Meeting with State surveyor tomorrow.
  
- D. Biller's Committee – Dawn Hyder, Chair and Amy Gil, Co-Chair – Meeting in August. Suggestions to increase attendance: Call attendees to check if they are still interested and if new hires would like to attend; Identify and address complex billing problems; Speakers; Benchmark processes.
  
- E. NGS/CMS – Chris Kisell –
  - A. Incorrect Outlier payments are being recouped and paid; however, Medicare has identified an error in the "fix".

**IV. Old Business**

- A. Sequestration of 2% begun April 1. It affects patients with a discharge of April 1<sup>st</sup> and later. Advantage Plans are taking the 2% on the RAPS.

- B. Accountable Care Act – Penalties delayed till 2015. Insurance requirement to notify by October is still in place. Exchanges will be up by October. Barry to find and send requirements to the group. Covering employees with insurance will be very costly and could be a very large hardship.
- C. J6 Transition – Medicare is asking for any issues with the transition. Not many agencies have had a chance to see it through.
- D. Q-Codes - Agencies have had no claims yet.

**V. New Business**

- A. HIPAA Speaker – Duane Hopkins from Innovative CSI is willing to speak. Group agreed a workshop would be beneficial. Possibly a General (1/2 day) and a Technical (1/2 day). Amy to attend the Education Committee this month and forward topics to Cindy.

**VI. General Business**

- A. Payer Line

Medicare- Nothing

Medicare Advantage Plans – Choice Care Network

Medicaid- Nothing

BCBSM- Nothing

Other Payers - Nothing

- B. Product Line

Certified- Nothing

Hospice- Nothing

HME- Competitive bidding began July 1<sup>st</sup>. There is a hotline number for issues. Market Based Pricing is what is being proposed.

Private Duty- Nothing

**VII. To Do Items**

1. Kerry to speak with her contact re: Humana challenges and speaker next month.
2. Barry to send out BCBSM Liaison Minutes to group.

3. Amy to attend Education Committee re: HIPAA Speaker.
4. Barry to find the information on ACA requirements and send to all members.
5. Barry to send out Abby's response to Net Margin Clarification.

**VIII. Next Meeting is on August 21st, 2013 (Onsite).**

**IX. Attendees at the July Meeting**

Chair: Chris Kisell

Present: Mike Hall, Kim Jenks, Fred Lee, Kerry Allen, Amy Gil,  
Laurie Monas, Theresa Ray