



Medical office managers take on a complex role. They must successfully navigate a wide array of tasks – from effectively navigating employee relations to ensuring office compliance with current legal standards.

One expert in medical office management says of the field, "Managing a primary care practice, whether large or small, is no simple matter. It's a demanding job that involves battling with insurers to get paid, addressing complex daily workflows that lead to multiple inefficiencies, and staying abreast of all the latest rules and regulations."

Individuals pursuing a career in medical office management should strongly consider taking part in valuable training and certification programs. Such programs are uniquely designed to provide guidance and information about the complex nature of managing a medical office.



Promoting Compliance: Mitigating Potential Issues with Fraud and Abuse Cases

A key issue faced by medical office managers relates to compliance with legal regulations and other requirements regarding billing and coding. Experts have estimated that in 2014 alone, costs related to healthcare fraud and abuse totaled between 60 billion and 80 billion dollars. As incidences of healthcare fraud and abuse have continued to rise, the costs associated with such abuses have risen as well. This is evidenced with both medicare compliance issues and cases of fraud within the commercial health insurance companies.

Researchers have stated of the issue that, "In an attempt to control healthcare fraud a number of statutes have been created and expanded over time. Of these, the following four laws have been significantly modified and expanded to more accurately address the ongoing issues with fraud: The False Claims Act (FCA), the Anti-Kickback Statute (AKS), the Physician SelfReferral Act (Stark Law), and the Civil Monetary Penalty Statute (CMP)."

Effective medical office management practices necessitate familiarity with existing laws regarding healthcare fraud and abuse. Medical office managers must also keep pace with changes to healthcare laws so as to ensure complete continuity of office compliance. This is especially true in recent years, as billing and coding requirements have become increasingly complex.

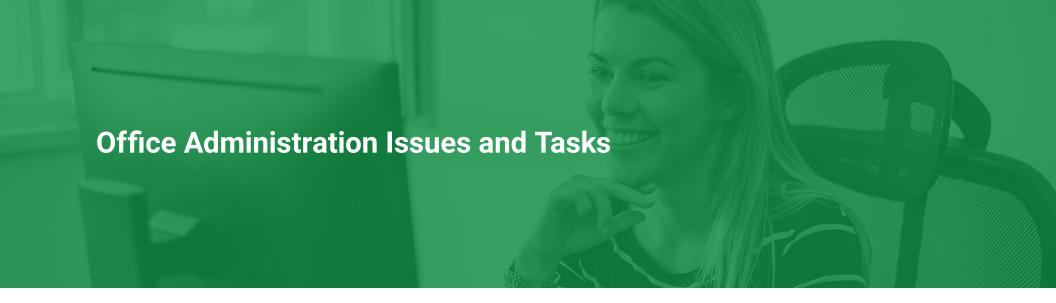
Some common examples of fraud and abuse in a medical context include:

- Billing for a service or item that was not provided
- Offering an incentive to a Medicare patient that is not offered to another patient who does not have Medicare
- Providing a service that is not medically necessary or that does not meet professionally recognized standards
- Submitting bills to Medicare that are higher than those submitted for patients who do not have Medicare
- Using an incorrect provider number when seeking payment
- Sharing patients' Medicare numbers or other personally identifiable information for the purpose of filing false claims
- Accepting bribes or kickbacks from pharmaceutical companies or other entities within the healthcare sector

Experts in the field of medical office management clearly state that office managers must take the steps necessary to ensure compliance with fraud and abuse regulatory frameworks. According to a review by Bloomberg Law, "In the last six years or so, [health insurance companies] have stepped things up—supplying claims, deposition transcripts, and other documents to U.S. Attorneys and the DOJ, [said] Marcia Augsburger with King & Spalding in Sacramento, California...This change in focus has increased the need for providers to ensure they comply with claim coding, claim submission, and other requirements to head off the possibility that a billing oversight lapse will turn into a criminal fraud prosecution."

Other key compliance issues for medical office managers relate to:

- Adhering to MACRA and the Quality Payment Program
- Complying with HIPAA requirements
- Complying with OSHA guidelines
- Implementing the OIG's recommended compliance program
- Developing and instituting policies and procedures that inhibit fraud and abuse
- Identifying and controlling potential risks related to medical identity theft
- Being aware of legal protections and risk management guidelines and putting in place policies and practices so as to ensure compliance



Additional common medical office administration tasks relate to relationship management between the practice and its employees and the practice and its patients. Effective medical office managers successfully establish guidelines that dictate appropriate management practices for organization operations and the physical facility as a whole. They also put in place time management and productivity practices.

From a patient-practice perspective, it is imperative that medical office managers thoroughly understand and practice key guidelines and requirements for handling patient data. Proper administration of medical records is an important aspect of this. Other critical tasks relate to practices for terminating the patient-provider relationship, patient education, verification of patient information and collections procedures.

Medical office managers must also be aware of best practices for maintaining positive and appropriate relationships with employees. Familiarity with laws and legal guidelines governing employment is essential. Furthermore, business policies and practices and the employee handbook must conform to these regulatory frameworks.

Additional tasks associated with personnel management include:

- Interviewing candidates and hiring staff
- Building a cohesive team of employees
- Managing office conflicts
- Navigating staff grievances
- Conducting evaluations and managing performance issues
- Creating and disbursing compensation and benefits packages
- Properly maintaining employee personnel files
- Properly handling sensitive employee information
- Setting goals and establishing practices for meeting them
- · Conducting effective staff meetings
- Establishing and carrying out termination procedures and conducting exit interviews



Another key role played by medical office managers relates to finances. No office can function effectively without appropriate financial controls in place. Medical office managers should have the skills and abilities necessary for developing accurate budgets, cost analyses, financial reports and financial forecasts. They should also be familiar with practices related to revenue and cost accounting. Furthermore, it is important that medical office managers have an understanding of how to perform such functions in the specific context of a medical practice.

The Benefits of Medical Office Management Certification

The American Academy of Pediatrics states that a strong medical office manager is an invaluable asset for physicians. This is because such managers are capable of successfully alleviating the administrative burden associated with a practice. Medical office managers work behind the scenes to ensure that the practice runs smoothly and effectively. They create and implement policies and practices that adhere to regulatory frameworks, legal guidelines and commonly known best practices. This serves to create a cohesive team that is able to provide the highest quality care possible to patients.

The <u>Certified Medical Office Manager (CMOM) program</u> empowers individuals in the field with the skills and knowledge they need to effectively run a medical office. The program, offered by the <u>Practice Management Institute (PMI)</u>, ensures that medical office managers are well able to keep pace with this constantly evolving field. PMI as an organization exists to provide high quality training and professional certification to individuals working in medical offices.

Each program administered by PMI is designed to provide both new and experienced professionals with the knowledge, skills and abilities to run an effective medical office. In a field that is rapidly changing, PMI helps professionals to keep up with industry guidelines, requirements and best practices. Individuals in the field of medical office management would highly benefit from participating in the CMOM program offered by PMI.

Regardless of an individual's current experience level, the CMOM program offers key insights and training regarding essential tasks in the medical office environment. After completing the program, CMOMs will be able to effectively demonstrate their managerial competency and will be well-positioned to advance their careers in the field.



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