

# LRHA UPDATE

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**LRHA MISSION STATEMENT:**

*To serve as a unified voice for the promotion of rural healthcare through advocacy, education, and leadership.*

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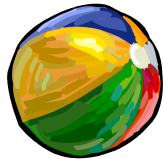


**LRHA HOPES  
YOU ENJOY  
YOUR SUMMER!!**

LOUISIANA RURAL HEALTH ASSOCIATION  
POST OFFICE BOX 387-NAPOLEONVILLE, LA 70390  
PHONE: (985) 369-3813 FAX: (985) 369-3630 WEB: WWW.LRHA.ORG

*A view from the field...*

*Dear Members, Colleagues, and  
Healthcare Leaders,*



### **LRHA Encourages Members to “Act Now” To Make A Difference in Health Care Reform**

For any health reform to be a success, the health care crisis in rural America must first be resolved. In rural America health insurance coverage does not equal access to a physician or other health provider. On June 19, 2009, LRHA sent out an advocacy alert requesting all members to act now to assist in making a difference in health care reform. It is vital for legislation that addresses the long-standing inequities and disparities in rural America to be included as part of Federal health care reform.

I sent a letter to Senator Vitter, Senator Landrieu, and Representative Melancon encouraging them help resolve the health care crisis. The letter expressed that rural America presents a unique set of challenges for health care reform. Rural people have less access to health networks and health care providers, greater rates of disability and chronic diseases, and higher use rates of all public health care programs.

A simple, yet multi-faceted solution to the complex problem of delivering health care in rural America is needed. In order for health reform to have any impact in rural areas, three legislative concerns must be addressed:

- 1) The workforce shortage crisis must be abated;
- 2) Inequities in Medicare reimbursements must be corrected; *and*
- 3) Long-standing disparities among vulnerable populations must be addressed.

It is our goal to continue to advocate for a strong rural package in the health reform bill. The LRHA would like to thank all members who took action and contacted Senator Vitter, Senator Landrieu, and Representative Melancon to encourage their support to include our top three RURAL legislative concerns in the Health Reform Bill.

**Executive Director**

## *News From CMS Region VI Insider*

### **Scam Alert**

CMS has become aware of a scam where perpetrators are sending faxes to physician offices posing as the Medicare carrier or Medicare Administrative Contractor (MAC). The fax instructs physician staff to respond to a questionnaire to provide an account information update within 48 hours in order to prevent a gap in Medicare payments. The fax may have the CMS logo and/or the contractor logo to enhance the appearance of authenticity.

Medicare FFS providers, including physicians, non-physician practitioners, should be wary of this type of request. If you receive a request for information in the manner described above, please check with your contractor before submitting any information. Medicare providers should only send information to a Medicare contractor using the address found in the download section of the CMS.gov website found at <http://www.cms.hhs.gov/MLNGenInfo/> or <http://www.cms.hhs.gov/MedicareProviderSupEnroll>

## **NOT A MEMBER?**



**To join the LRHA, please visit our  
website and fill out a membership  
application.**

# **JOIN NOW!**

**Already a member? Refer a friend to join . Tell them to  
visit the LRHA website.**



**New from the  
Medicare Learning  
Network**

The revised *Sole Community Hospital Fact Sheet* ( April 2009), which provides information about Sole Community Hospital classification and payments, is now available in downloadable format from the Centers for Medicare & Medicaid Services **Medicare Learning Network**.

**CLICK HERE TO ACCESS WEBSITE**

The revised *Rural Referral Center Fact Sheet* (April 2009), which provides information about Rural Referral Center program requirements, is now available in downloadable format from the Centers for Medicare & Medicaid Services **Medicare Learning Network**.

**CLICK HERE TO ACCESS WEBSITE**

***2009 Critical Access Hospital (CAH)  
Fact Sheet***

<http://www.cms.hhs.gov/MLNProducts/downloads/CritAccessHospfctsht.pdf>

***2009 Rural Health Clinic (RHC) Fact Sheet***

<http://www.cms.hhs.gov/MLNProducts/downloads/RuralHlthClinfctsht.pdf>

***2009 Federally Qualified Health Center (FQHC) Fact Sheet***

<http://www.cms.hhs.gov/MLNProducts/downloads/fqhcfactsheet.pdf>

***The Certificate of Medical Necessity (CMN)  
Web-Based Training (WBT)***

Revised in June, 2009, which is made available by the Centers for Medicare & Medicaid Services (CMS) Medicare Learning Network (MLN), contains information about the Certificate of Medical Necessity, commonly known as a CMN.

This course will be helpful to physicians, health care professional, and medical administrative staff in the completion, submission and maintenance of the documentation required to verify the CMN. It can be accessed by going to <http://www.cms.hhs.gov/MLNGenInfo>. Scroll to the "Related Links Inside CMS" section at the bottom of the page, and select Web Based Training (WBT) Modules. You will find the "Certificate of Medical Necessity WBT " from the list provided.

Upon completion of this course you should be able to:

- ◆ List the items that require a Certificate of Medical Necessity (CMN)
- ◆ Identify the responsibilities of Physicians, Physician Assistants, Nurse Practitioners, or Clinical Nurse Specialists as they relate to the CMN
- ◆ Define medical record documentation
- ◆ Identify the sections of a CMN
- ◆ List CMN common Errors
- ◆ Identify CMN completion resources

Successful completion of this course requires completion of all course lessons, pre-test, course evaluation and a score of 70 percent of higher on the post-test. The Centers for Medicare & Medicaid Services (CMS) is authorized by IACET to offer 0.1 continuing education units (CEUs) for this program.

(continued from page 3)

The Centers for Medicare & Medicaid Services designates this educational Activity for a maximum of 1 AMA PRA Category 1 Credit(s)™. Physicians should only claim credit commensurate with the extent of their participation in the activity.

Credit for this course expires May 4, 2012.

This course and its post test score of 70% or higher, is approved for 1 CEU by the American Academy of Professional Coders (AAPC). Index # CMS06140728A

When submitting a CMS completed web-based training course to AAPC as part of your recertification, please retain a copy of your CMS certificate and a copy of the course description that contains the AAPC index number and number of AAPC CEUs. The AAPC will request copies of these if you are selected for verification of the CEUs listed on your renewal form.

The author has no conflicts of interest to disclose.

This course was developed without any commercial support.

*[Click here to view the biographical Information of the course developers.](#)*



## DHH Medical Director Sends Letter to Louisiana Physicians Regarding Pandemic Flu

Health care providers will play a crucial role during an influenza pandemic. Planning for pandemic influenza is key to assisting the health care system to sustain a successful response. Dr. Jimmy Guidry, DHH Medical Director, sent a letter to Louisiana physicians in an effort to assist in their planning efforts. Please click on the letter to read this important update.



**CLICK HERE TO  
READ LETTER**



Submit to the  
LRHA Update  
We'd love to hear from  
you...  
[arboneaux@lrha.org](mailto:arboneaux@lrha.org)



## Physical Activity in Your Daily Life

### At Home

It's convenient, comfortable and safe to work out at home. It allows your children to see you being active, which sets a good example for them. You can combine exercise with other activities, such as watching TV. If you buy exercise equipment, it's a one-time expense and other family members can use it. It's easy to have short bouts of activity several times a day. Try these tips:

- Do housework yourself instead of hiring someone else to do it.
- Work in the garden or mow the grass. Using a riding mower doesn't count! Rake leaves, prune, dig and pick up trash.
- Go out for a short walk before breakfast, after dinner or both! Start with 5-10 minutes and work up to 30 minutes.
- Walk or bike to the corner store instead of driving.
- When walking, pick up the pace from leisurely to brisk. Choose a hilly route. When watching TV, sit up instead of lying on the sofa. Better yet, spend a few minutes pedaling on your stationary bicycle while watching TV. Throw away your video remote control. Instead of asking someone to bring you a drink, get up off the couch and get it yourself.
- Stand up while talking on the telephone.
- Walk the dog.
- Park farther away at the shopping mall and walk the extra distance. Wear your walking shoes and sneak in an extra lap or two around the mall.
- Stretch to reach items in high places and squat or bend to look at items at floor level.
- Keep exercise equipment repaired and use it!

### At the Office

Most of us have sedentary jobs. Work takes up a significant part of the day. What can you do to increase your physical activity during the work day? Why not...:

- Brainstorm project ideas with a co-worker while taking a walk.
- Stand while talking on the telephone.
- Walk down the hall to speak with someone rather than using the telephone.
- Take the stairs instead of the elevator. Or get off a few floors early and take the stairs the rest of the way.
- Walk while waiting for the plane at the airport.
- Stay at hotels with fitness centers or swimming pools and use them while on business trips.
- Take along a jump rope in your suitcase when you travel. Jump and do calisthenics in your hotel room.
- Participate in or start a recreation league at your company.
- Form a sports team to raise money for charity events.
- Join a fitness center or Y near your job. Work out before or after work to avoid rush-hour traffic, or drop by for a noon workout.
- Schedule exercise time on your business calendar and treat it as any other important appointment.
- Get off the bus a few blocks early and walk the rest of the way to work or home.
- Walk around your building for a break during the work day or during lunch.



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