2021 Spring Newsletter

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Outgoing President Message

Wow, what a term it has been for me! The first year of my Presidency was looking so great and I was excited to implement a few projects and keep MAMSS moving in the right direction. Then BAM! 2020 and COVID hit, and the world was turned upside down. I hope I delivered in my goal of trying to keep the MAMSS community updated during the difficult COVID times and if nothing else, let you know you were not alone in this crazy time. MSPs played an important part in controlling this pandemic by getting providers on staff fast, and inevitably saved lives. Thank you!

In just a few short months away from ending my term as President of MAMSS and I am so grateful for this opportunity. Thank you for your trust in moving this great organization forward. I have gained so much from this experience – grown my leadership skills, been forced outside my comfort zone, learned a lot more about credentialing, and most importantly gained an entire network of MSPs who I can look to for continued guidance and support, even after my MAMSS Board term is over. I'd like to take this time to highlight some of the great things MAMSS has done in the last 2 years:

- Creation of MAMSS Moments to keep members informed of important updates
- Organized a Credentialing Basics course in the fall of 2019
- Three MAMSS Board members attended a MN Board of Medical Practice meeting in May 2019 to bring awareness to MAMSS
- Organized three Virtual Lunch N Learns in Quarter 4 2020
- Added the MSO Directory link to our website under resource links. Click <u>here</u>. This database help you find contact information to send verification letters.
- Added the Referral Program to policies and procedures

In July, Michaela Jackson will take over as President of MAMSS. I have no doubt in her ability to take MAMSS to new heights. She has already endured so much with the canceling and rescheduling two annual conferences! She has the grit and grace to be a great leader!

Once again, thank you for allowing me to be your MAMSS President – Stefanie Frank

Referral Program

Refer a friend, co-worker or supervisor and received a \$10 Gift Card to Target, Amazon or BestBuy for EACH new member referral.







2021 MAMSS Spring Virtual Conference – We Survived

Disaster Credentialing!

Wednesday, April 21, 2021 12:00pm – 4:00pm Thursday, April 22, 2021 12:00pm – 4:30pm Friday, April 23, 2021 8:00am – 12:45pm



Please join us April 21st, 22nd, and 23rd, 2021 for the first ever virtual conference of the Minnesota Association of Medical Staff Services! As the healthcare industry has shown us over the past year how it is an ever-changing industry, it's essential that Medical Staff Professionals continue to receive up-to-date information that impacts their profession. You will not want to miss this conference which is packed with both personal and educational sessions, a great networking opportunity and receive CEUs! We will be applying for NAMSS- approved CEUs and each full-conference attendee will receive educational units towards CPCS and/or CPMSM certifications.

The 2021 MAMSS Conference is designed for Medical Staff Professionals, Managed Care Professionals, Centralized Verification Organization Professionals and Credentialing Specialists from across Minnesota and surrounding states. This event is open to MAMSS members and non-members.

So, grab your computer/laptop, a comfy chair, and join us! We hope to "see" you at the conference!

Website Updates

Upcoming Regional Meetings

Central Region: TBD (Time and place TBD)

"Our last Central Regional meeting was November 11th. We had open network conversation. I will encourage everyone to attend the MAMSS Annual Conference in April. I plan to schedule a Regional meeting in June 2021.

Metro Region: TBD (Time and place TBD)

"Where does the time go!? We last met in October 2020. We had a great turnout and discussed various topics such as the updates on the PA Delegation Agreement, various privilege forms, remote working, and payer credentialing. Our meeting in December was canceled due to the holiday's. Our next meeting will be in May to allow you all time to attend the Annual MAMSS Conference. More information to come on the May agenda. In the mean time if you have anything you'd like to discuss in the May meeting let me know. Thanks and Happy Spring! Kathy"

Northern Region: TBD (Time and place TBD)

"We are holding our Winter Northern Regional MAMSS meeting on Friday February 26, 2021. This will be a virtual roundtable discussion covering a variety of topics. I encourage everyone to register for the upcoming Spring conference. I hopeful that our Summer Regional Meeting will be able to be held in person, fingers crossed!."

Southern Region: TBD (Time and place TBD)

"The Southern Region met on November 5th. We had lively round table discussions on a variety of topics including: PA agreements, scanning of historical files, background studies, working from home, border state telemedicine, etc. The next region meeting will be in early summer. I encourage everyone to attend the MAMSS Annual Conference."

Website Updates Continued...

MAMSS Board Meeting

Friday, June 25, 2021 from 9 AM – 11 AM via Web-ex

NAMSS 45th Educational Virtual Conference & Exhibition October 18, 2021 – October 21, 2021 MAMSS Virtual Conference Information Coming Soon.

Career Opportunities posted within the last 2 months:

- Credentialing Specialist, Midwest Radiology February 2021
- Medical Staff Coordinator, North Memorial Health March 2021
- Credentialing Specialist, Dept of Heath and Human Services April 2021
- Credentialing Coordinator, Allina Health April 2021

Discussion Forum Questions posted within the last month:

- Provisional Privileges
- Immunizations for non-employed providers

Certification

Congratulations to our Certification Scholarship winners! Best wishes to you as you take the next step in your credentialing career!

LaRae Anderson, Supervisor, Hospital Credentialing, HealthPartners Credentialing Services Bureau

Becky Kessler, Credentialing Specialist, Mayo Clinic

Thinking about becoming certified?

- CPCS: The Certified Provider Credentialing Specialist (CPCS) is typically
 employed or contracted by a healthcare organization including, but not
 limited to, hospitals (health systems), health plans, ambulatory care settings,
 group practices, and credentialing verification organizations.
- CPMSM: The Certified Professional Medical Services Management (CPMSM)
 is typically employed or contracted by a healthcare organization including,
 but not limited to, hospitals (health systems), health plans, ambulatory care
 settings, group practices, or credentialing verification organizations.

Testing Period:

- Summer Testing Period
 Application Deadline Friday, April 30, 2021
 Final Application Deadline (with late fee) Friday, May 20, 2021
 Testing Period Saturday, June 26 through Saturday, July 17, 2021
- Fall Testing Period
 Application Deadline Friday, August 27, 2021

 Final Application Deadline (with late fee) Friday, September 17, 2021
 Testing Period Saturday, October 23 through Saturday, November 13, 2021

SOMETIMES
YOU FORGET
YOU'RE AWESOME
SO THIS IS YOUR
REMINDER





Negligent Credentialing Suit in Iowa Could Affect Hospitals Everywhere by Jennifer Henderson

On Tuesday, Iowa's highest court will hear oral arguments in a negligent credentialing case brought against a hospital in Cedar Rapids. The suit has garnered the attention of the American Medical Association (AMA) due to its potential impact on other providers.

The negligence suit was originally filed in 2016 by Roxanne Rieder and her husband, Tony. The Rieders detail in court documents that Roxanne experienced permanent impairment and severe pain following spine surgery performed at Mercy Medical Center by a credentialed physician there in 2015. Though the Rieders resolved and dismissed their claims against the physician, David Segal, MD, and other defendants in the case in 2018, they continue to pursue a negligent credentialing claim against Mercy.

Should the Iowa Supreme Court recognize that there is a tort claim for negligent credentialing, it could spell increased accountability and liability for hospitals. Legal counsel for the Rieders say this recognition is critical to protecting patients. But the AMA's Litigation Center wrote in an amicus brief that such a ruling would in fact have the opposite effect.

"The court has never formally recognized this, but it has stated in prior opinions that it assumes that this is a recognized theory," said the Rieders' lawyer, Bruce Braley of Denver's Leventhal Puga Braley, regarding a tort claim for negligent credentialing.

The average patient who goes to a hospital for surgery assumes that the physician performing the procedure is competent, qualified, and not a risk to their safety, Braley told *MedPage Today*. The Rieders' case is important because hospitals "are in a much better position" to be able to protect patients than patients are themselves.

The Rieders have stayed the course, appealing a district court's order granting summary judgment in favor of Mercy. In September, the Court of Appeals of Iowa <u>reversed</u> the district court's summary judgment rulings. Now, Iowa's Supreme Court will hear arguments. Braley and his clients are seeking the opportunity for a jury to hear the case.

Just last week, the AMA noted that its Litigation Center had <u>filed an amicus brief</u> in the case, along with the Iowa Hospital Association and Iowa Medical Society.

"From a public perspective, these amici believe recognizing breach of such a duty as a viable independent, actionable tort for 'negligent credentialing' would impede the free flow of information critical to quality assurance activities and decrease the willingness of physicians to participate in peer review activities, including service on credentialing committees (as well as participation in other peer review and quality assurance activities)," the AMA and state associations wrote in the brief.

They further noted that the recognition of negligent credentialing would result in physicians becoming less willing to speak openly and honestly in quality assurance activities out of fear that their discussions may later become the focus of a lawsuit.

Additionally, the AMA and state associations noted that lowa has primary healthcare shortages in nearly 60 of its 99 counties. However, they wrote, plaintiffs are asking the court to potentially remove some 10% of the practicing physicians in the state from practice each year "just because a complaint is filed or investigation initiated or a hospital otherwise receives notice of a complaint or investigation." In 2018, only about 5% of investigations resulted in a physician being disciplined.

Article Continued...

A spokesman for the AMA noted that the Iowa case is not the first the Litigation Center has been involved with that examines recognition of a negligent credentialing claim. It previously filed amicus briefs with the Minnesota Court of Appeals and Minnesota Supreme Court in Larson v. Wasemiller, which dates back to 2007, he said in an email. The briefs opposed the recognition of a cause of action for negligent credentialing; however, the Minnesota Supreme Court affirmed a cause of action for negligent credentialing, the spokesman said.

He said that the AMA is unable to speculate on whether the lowa case will have an impact outside of patients and physicians in that state.

John Lyddane, a partner at Dorf & Nelson in New York City, told *MedPage Today* that, generally, questions of negligent credentialing don't arise if a physician has enough medical malpractice insurance to cover an injury.

Very few injuries reach financially catastrophic proportions, such as a 40-year-old making \$1 million a year becoming permanently disabled, Lyddane said. Most physicians have insurance to cover a couple million dollars, but not \$40 million or \$50 million, he said.

Lyddane added, however, that the complexity of medicine from a legal perspective is becoming greater by the day.

Recently, he <u>wrote about negligent credentialing</u>, as well as other forms of potential liability, in a December piece for *Law.com* and the *New York Law Journal*.

"Medical services are increasingly provided in complex arrangements involving corporate entities," Lyddane wrote. "Where there is a claim that injury has resulted from the act or omission of a single individual, there may be ramifications for other parties whose liability derives from the acts of that person," he added.

Legal counsel for Mercy declined to comment on the pending litigation in Iowa, as did the hospital.

Trial lawyer Guy Cook, who has represented Segal, said in an email that in 2016 Segal "voluntarily stopped performing surgeries, in an abundance of caution, due to some health issues." Segal continues to provide non-surgical medical services, he said.

"Dr. Segal denies any wrongdoing in the Rieder matter," Cook added. "An unrelated complaint or investigation by the medical board is proof of nothing. Dr. Segal resolved the matter with the medical board and successfully passed a competency review at the Center for Advancing Professional Excellence at the University of Colorado."

As for the Rieders, Braley said, "My clients, their ultimate goal is to make sure that this doesn't happen to anybody else."

We're on the Web!

http://www.namss.org/About /StateAssociationWebsites/ MinnesotaAssociationMedic alStaffServices.aspx

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