

CLIENT PROFILES

We like to print profiles of our clients as we feel that others in the same profession often have an interest in what their fellow practitioners are doing. If you would like to be profiled or have a story that would be appropriate for the interests of our readers, just give us a call.

The City of Leominster Ambulance Service

A 10-year MBM client

Since 1995 MBM has been providing billing and collection services for Leominster's Fire Services Ambulance operations. The Leominster EMTs provide much-needed Basic Life Support and Advanced Life Support to the people of this stately old industrial city of 41,000.

The Leominster Fire Department and the City of Leominster provide emergency medical technicians and ambulances to the residents of and visitors to the City as a critically needed service.

The teamwork necessary to accurately bill and collect for these critical services is provided by the Leominster Fire Department, the City Treasurer's Office, and MBM. Pictured below are some of the team members who coordinate the ambulance runs and the billing and collection process for the ambulance service.

Leominster is 50 miles west of Boston and 20 miles north of Worcester. It is the birthplace of the plastics industry in the U.S. and the Foster Grant Company, along with many other industrial firms, are among its success stories.



From left to right: City of Leominster Treasurer and Collector, David Laplante, June Courtemanche, Joan Judy, Linda Celona, MBM Sales Director George Urban, and Cheryl Erickson

From left to right are: Gail Studulski, Leominster Fire Chief Ron Pierce, MBM's Ambulance Department Manager Mary Tower, MBM Sales Director George Urban, Teresa Mellow, and MBM's Billing Specialist Lori Preisinger.



Essex Pulmonary Assocs. + MBM = Excellent Results

An effective business relationship

Dr. Jeffrey Newton, Board Certified Pulmonologist, practicing as Essex Pulmonary Associates in Peabody, MA has been in practice since 1977. In 2005 he was joined by Dr. Adam Strozier, also Board Certified in Pulmonology and Critical Care Medicine as the practice grew. They treat patients primarily on the North Shore for various pulmonary diseases: asthma, chronic obstructive pulmonary disease, and lung cancer as well as other lung conditions. They are on staff at Addison Gilbert Hospital in Gloucester and Beverly Hospital as consultants where they perform bronchoscopies, thoracentesis, and manage critically ill patients. They also interpret pulmonary function studies and are involved with sleep medicine. Drs. Newton and Strozier see patients at their offices in Peabody offices and at Addison Gilbert Hospital in Gloucester.



Pictured above are the Essex Pulmonary Associates and MBM teams, together for pizza November 9th. From right to left are Dr. Newton, Dr. Strozier, Helen Langlois, MBM's Muriel Sacramone, Adele Raskin, MBM's Carrie Connolly, Pat Gauvain, Susan Morneau, Joanne Dowling and MBM's Curt Anderson. Missing from the picture is Phyllis Allen.

By working together carefully, the Essex Pulmonary team and the MBM team have been able to achieve extraordinary results: whereas the average medical practice in the U.S. has 18.3% of its receivables in the Over-120-Days category (according to the Medical Group Management Association 2005 Survey), Essex has only 7.4% of its receivables in the 120+ category. This result provides optimal cash flow for the practice. These excellent results are produced by the efforts of both the MBM and Essex teams to collect co-pays on the date of service, to capture consistently any changes in patient insurances, to submit clean claims promptly and to assertively execute denial management on claims denied.

MBM NEWSLETTER

A newsletter for the clients and friends of Medical Billing Management

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Ask Your Senators to Postpone the Proposed January 1st Medicare Reimbursement Reduction of 10.1%

This has become an annual rite, truly ill-considered — the December scheduled reduction of Medicare reimbursement levels. According to the Nov. 19, 2007 edition of *amednews.com*, "... physicians are again fighting to prevent a reduction in Medicare payments. This time, however, the cut is in the double digits and is the largest ever." Certainly in the Northeast (and probably the rest of the country), further across-the-board cuts in Medicare reimbursements are not good for medical practices and, therefore, for patients. As American Medical Association Board of Trustees Chair Edward L. Langston, MD said this fall, "Next year's 10.1% physician payment cut is bad news for America's seniors as 60% of physicians say the cut will force them to limit the number of new Medicare patients they can treat."



Dr. Edward L. Langston, AMA Board Chairman

Dr. Langston suggested utilizing a portion of the excess payments to Medicare Advantage Plans to eliminate the need for the 2008 reimbursement cuts. For further details, log on to this web site: <http://www.ama-assn.org/amednews/2007/11/19/gvl11119.htm>.

All physicians and their staffs should consider contacting their U.S. Senators and Congressmen/Congresswomen to ask that the January 1, 2008 cuts be eliminated.

Internet-based communication to the legislators is most effective. Postal mail is delayed by up to three weeks in screening procedures against anthrax and other threats. Fax is also effective.

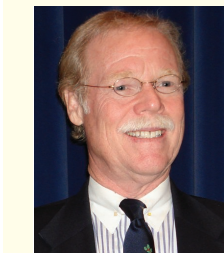
You can quickly log on to <http://www.visi.com/juan/congress/> and send a communication to your Senators and your Congressman/Congresswoman. Fax numbers are also listed. It is recommended that we make each letter brief, respectful, and customized.

We are all in this together. Please ask your staffs and your family members to take a moment and communicate to Congress now. Further cuts in Medicare reimbursements are unacceptable and potentially limit patient care for individuals covered by Medicare.

A letter from the CEO:

Fighting the Good Fight

Season's Greetings to all of our Clients and Friends! All of us at Medical Billing Management wish for you, your families, and your associates a wonderful holiday season and a new year that brings continued health and prosperity.



This past year has brought new clients and new associates to MBM and many new opportunities for growth in 2008. We are very grateful for our good fortune.

Two messages in this issue of our newsletter are paramount. The first is from AMA Chair Dr. Edward Langston who cautions that further cuts in Medicare reimbursements may endanger physicians' capacities to handle additional Medicare patients. The wave of baby boomers coming under Medicare coverage is on a collision course with this proposed January 1, 2008 Medicare cut. All of us need to heed his warning send a message to our representatives to warn them about the dangers of this reimbursement cut.

A second message pervades our newsletter: we take good care of our clients and fight hard to keep their collectibles low. As you can see, Essex Pulmonary, Dr. Dow, and The City of Leominster Fire Department Ambulance Service all illustrate this fact.

We take pride in fighting for the funds that our clients earn and deserve.

Happy New Year to all!

Sincerely,

Curt

Curt Anderson

MBM

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MBM Successfully Tests EMR System with Oncology Practice

Is there substantial interest around the world in electronic medical records (EMR) systems? Google statistics from October, 2007 are revealing: EMR queries = 354,000; Electronic Medical Records queries = 1,030,000; Electronic Health Records queries = 797,000.

Outside the United States, electronic medical records systems are being adopted much more quickly than in the U.S., because various governmental agencies in much of the world purchase the EMRs where medicine is funded entirely by the government. In this country, physician groups have to purchase the EMR systems from operating funds.

For instance, whereas only 28% of primary care practices in the U.S. had purchased EMR systems by 2006, in the Netherlands, New Zealand, and the United Kingdom EMR penetration of primary care was 98%, 92%, and 89% respectively, as of 2006.

One of our clients, oncologist Dr. Edward Dow, took the plunge in 2006 and adopted the EMR system ASP.MD (www.asp.md). The scheduling and patient encounters are captured electronically and stored on the ASP.MD servers at their company's hosting facility in Somerville, MA. Thus, the physician is saved the inconvenience and expense of hosting his or her own EMR software system and data.

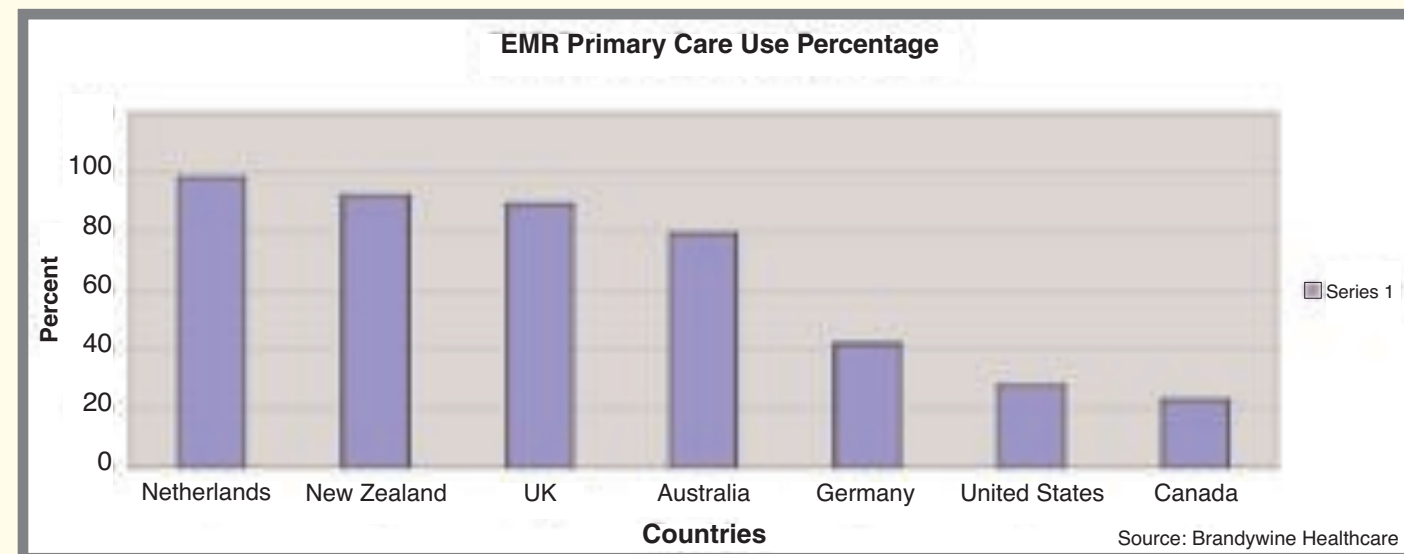
At the end of each day, the superbills are

e-mailed to MBM for electronic billing the next day. These charge capture and billing protocols are fast, accurate, and paperless.

Together, Dr. Dow's office team and the MBM team have been processing the patient encounters and billing them to the various payers since April. For Dr. Dow's practice, this has been an efficient, effective rollout of the EMR capability, giving Dr. Dow the ability to log on to a patient's record from anywhere, with a low total cost of ownership (TCO) due to the extremely competitive monthly cost of his system and no installation investment requirement.

Though there are more than 400 EMR vendors in the marketplace today, only 55+ are CCHIT Certified (Certification Commission for Health Information Technology). Each physician practice should look at the cost of the system per visit, the format (Does it match how the physicians work?), ease-of-use, compatibility (easy to import patient data into and export data from the system), references from other practices/users, and other considerations. Guidelines abound, like the less-than-\$1.00 per visit system cost; paper charts can cost as little as five cents per visit.

We would be glad to share with our clients and friends our experience and knowledge thus far with various EMR systems. Call us, any time. We are at your service!



Dr. Edward Dow: Cash Flow Up 13%

Dr. Edward C. Dow practices in hematology and oncology from his office in the New England Baptist Hospital in Boston. He is one of only 44 Board-Certified Hematologist-Oncologist providers in Massachusetts.

MBM began providing its billing and collections services to Dr. Dow's team in April of 2007. In June, July, and August the cash collections were up 36%, 34% and 8% respectively over the average monthly collections in 2006. Since we began working for Dr. Dow's practice, monthly cash flow is up 13% over the 2006 monthly average. No significant other changes have taken place in Dr. Dow's practice.

Dr. Dow's Practice Manager Mrs. Lena Matthew and our MBM team are all pleased as punch with our collective results to date. The results are largely the result of better, faster charge capture, more prompt filing of claims, denial management, and the collection of receivables more than 120 days past due. Once again, teamwork among the professionals at Dr. Dow's practice and at MBM is the key to improving results.



Dr. Dow and Mrs. Lena Matthew made a house call on MBM. Dr. Dow is 5th from the left and Lena is 4th from the right. With our clients are our MBM team members, from left: Muriel Sacramone, Mary Tower, Tina Morin, Barbara Cornell, Linda Stephens, Carrie Connolly, Sabrina Jemery, Paula Viator and Nancy Moglia.

Celebrating MBM's 18th Year in Business!

Our team has grown since its inception in 1990, and we proudly serve physicians and ambulance companies in Massachusetts, Rhode Island, and New York. We are growing again, so call us if one of your fellow specialists or referral partners might be interested in our services. We will credit your account with one month of our services for each referral that results in a client, along with our thanks!



"Refer your associates to us and receive one month of credit or cash (your choice) equivalent to one month's average MBM revenue from that practice."

MBM Attends Fall HBMA Conference

The Healthcare Billing and Management Association (HBMA) is the dominant industry association for medical billing companies like ours. Of the roughly 2,000 medical billing companies across the United States, 600 of these companies belong to the HBMA, headquartered in Laguna Beach, California.

The Fall Conference for Owners and Managers October 26-28 featured instruction and discussion about industry trends, staffing ratios, industry benchmarks, EMR (electronic medical records) systems, and practice management/billing systems. The three-day session included an important presentation by Bill Finerfrock, the HBMA's Legislative Consultant/National Lobbyist in Washington, D.C. Mr. Finerfrock updated the 57 HBMA members in attendance on potential effects of legislation working its way through the Congress.

Most important on the legislative front at this time is the potential effect that the Deficit Reduction Act of 2005 will have on 2008 Medicare reimbursement levels. Mr. Finerfrock is working hard over the next few weeks to insure that the planned 10.1% reduction in Medicare reimbursements scheduled for January 2008 is canceled. (See related article on front page.)

Pictured below are two of the three speakers at the HBMA Fall Conference, Robert Burleigh, left, and David Jackiolo, right, both of whom are former presidents of the HBMA. In the center is MBM's CEO, Curt Anderson.

