

MEDICARE

Briefly

Heeding the Calls

Meet the Customer Service Department

Medicare Part B customer service representatives are vital “banks” of information. They are fast, friendly and committed to answering all of your inquiries in a professional, accurate and timely manner.

We interviewed Peggy Stephenson Aun, the manager who leads this team in its dual duties of responding to approximately 480 written and telephone inquiries each day. Peggy, who will mark her 11th year at Palmetto GBA this September, says it takes a specific type of person to succeed as a customer service representative (CSR). “I look for a person with a very extroverted personality, someone who has excellent verbal and written communication skills—someone who is analytical. The information they provide every day can’t be found in one place. They have to listen and put it all together to respond. Communication is a big aspect of this job.”



The department is comprised of 16 representatives and one project specialist, Annette Scott, who does a little of everything, according to Peggy.

When calls come in, they are routed to one of four teams—each consisting of four CSRs—divided by specialty.

- *Focused Coverage*: Kerrie Copeland, Rosemary Stover, Alicia Cornelius and Shondra Smith
- *Surgery*: Gladys Akahori, Elizabeth Kelly, Lori Rodabaugh and Donna Davis
- *Primary Care*: Lynn Horne, Mark Austin, Teresa Lancaster and Anna Yarborough
- *Non-surgery*: Lavetta Green, Daniel Jacobs, Wilson Lancaster and Regina Zanders
- *CSR Over-staff*: Thomas Black

Q: How do customers reach the right representative every time?

A: When a customer dials in, they will immediately get our VRU (Voice Recognition Unit) where they hear our welcome message. Here they will have to enter their provider number. Once in, they can go through this system for almost anything. If they prefer to talk to a representative, the VRU will send the call to a CSR. At this point, we have a system called ‘call path’ that allows information about the provider to pop up on the screen. Then they speak with a CSR who logs everything. If they are happy, they won’t need additional help.

Q: What duties might a CSR face above and beyond his or her job title?

A: Occasionally, we are called upon to do tasks beyond the basic job description. For example, if an edit was entered incorrectly, a large volume of claims may have to be adjusted. In this case, we will go back and adjust the claims. Essentially, we do a lot beyond the basic job description, because anything else that providers inquire about will fall back to the representatives.

Q: How do you recognize when a representative has been doing a great job?

A: I recognize this through direct customer feedback, or the lack of. If I don't hear from providers about a representative, I can sometimes tell that they're handling the job well. Customers will mention that they love talking to so-and-so and doctors offices talk to each other too. There are other outlets as well. We have a whole department — Q&A — that schedules specific times to listen in on CSR calls both in the morning and afternoon. That gives the representative the benefit of the doubt. Some people are better on the phones in the morning versus the afternoon. The same process occurs for written inquiries.

Q: What has changed in customer service in the past few years?

A: We had a large turnover in early 1998 and, by the end of that year, we had lost over 60% of staff through promotions, people returning to school, etc. But we also have a department where there is longevity, too; two people are at 15 years and one person is at 10. The rest of the staff ranges from four months to three years tenure — so we have a young staff.

Training is our biggest challenge. Other significant changes in the last five years have been the inception of the Primary Care team, which started in 1997; implementing Process Improvement; and receiving new PCs in the last year. The PCs are working out wonderfully.

Q: What methods can providers use to contact the customer service department?

A: Providers can call 803-788-5568 or write to:
Medicare Part B Customer Service, AG-675
Palmetto GBA
P.O. Box 100190
Columbia, SC 29202-3190

The Medicare Part B Provider Customer Service Center is open from 9 a.m. until 4 p.m., Monday through Friday. The Voice Response Unit is available Monday through Friday, 7:30 a.m. until 10 p.m., plus limited hours on Saturday.



Welcome
to the
Neighborhood

*Please welcome Medicare Part B
Education's two new associates.*



Maureen Coler is our new publications coordinator. She has four years of newspaper and magazine journalism experience. Most recently, Maureen worked for Crimson & Brown Associates in Cambridge, Massachusetts. She holds a master's in mass communication from Boston University.

Thomas Hagan joined the team in November 1999 as an education consultant for non-surgery specialties. He comes to Medicare from American Information Services, where he was a sales manager. Previously, he worked for Best Doctors of South Carolina, and was a teacher and coach at the high-school level for eight years prior. Thomas earned a bachelor's degree in political science from the University of South Carolina.

Fraud and Abuse:

Exemplary Provider Award Program

Providers seeking ways to prevent fraud and abuse in their organization are encouraged to enroll in the *Exemplary Provider Award Program*. This initiative is a measured Continuous Quality Improvement program that combines healthcare delivery and compliance standards, on-site evaluations and outcomes tracking, and acts as an accreditation alternative to the Joint Commission for the Accreditation of Health Care Organizations (JCAHO).

For more information, call (215) 654-9110 or log on to www.complianceteam.com for further details.

What You Say

About the Web Site: [www.PalmettoGBA.com Survey Results Tallied]

Palmetto GBA's Web site — www.PalmettoGBA.com (formerly www.pgba.com) — debuted in May 1998. We decided to ask *Medicare Briefly* readers directly, in a survey, whether you have found the site to be useful, informative, accurate and up-to-date. Thank you to all participants! Your answers to this survey, and continued comments and suggestions for improvement, are welcomed. Here are the questions and results:*

1. Do you have access to the Internet?

YES — **92.85%** of respondents have Web access in the workplace.

NO — **7.14%** do not.

2. Have you visited Palmetto GBA's Web site (www.PalmettoGBA.com)?

YES — **85.71%** of respondents visited www.pgba.com.

NO — **14.28%** had not yet logged onto the site.

3. Is the site easy to navigate?

YES — **71.42%** of respondents classified the site as easy to navigate.

NO — **21.42%** did not agree that the site is easily navigable.

No response—**7.14%** did not respond to the question.

4. Have you registered to get "pushed" messages (e-mail notices of new Web additions)?

YES — **42.85%** of respondents are registered to receive pushed e-mail messages containing new information posted on the site.

NO — **42.85%** had not yet registered to receive the e-mails.

No response—**14.28%** did not respond to the question.

5. Have you participated in a newsgroup?

YES — **7.14%** of respondents joined in one or more newsgroup sessions.

NO — **92.85%** had not yet read or posted to one or more of the site's newsgroups.

6. Do you find the information on our site accurate?

YES — **78.57%** of respondents classified the information on the site as accurate.

NO — **0%** of respondents stated that the site's contents are inaccurate.

No response—**21.42%** did not respond to the question.



7. Is the information on our site up to date?

YES — **71.42%** of respondents stated that the site's content is current.

NO — **7.14%** stated that the information on the site is not up-to-date.

No response — **21.42%** did not respond to the question.

8. Would you prefer to receive your Medicare Advisory through the Web?

YES — **7.14%** of respondents stated they would prefer to log on to the site to access *Medicare Advisories*.

NO — **85.71%** would not prefer to receive copies of the *Advisory* via the Web site only.

No response—**7.14%** did not answer the question.

* Approximately 5,000 questionnaires were distributed to providers in Fall 1999. Fourteen responses were tallied — a .28% rate of return.

News is spreading about the accessibility and accuracy of Palmetto GBA's Web site—www.PalmettoGBA.com. Log on and register to design your personal view settings and specify the information you wish to receive.

Provider Spotlight

Lovelace Family Medicine, P. A. — Prosperity, SC

Does your office take advantage of the workshops offered by our Medicare education consultants? Billing experts **Beth Gordon** and **Belinda Trammell** at Lovelace Family Medicine are known for consistently seeking out the most up-to-date information for the patients of their practice. Congratulations to Belinda, Beth and the rest of the hardworking staff at Lovelace Family Medicine for being in our Provider Spotlight this quarter.



Belinda says, “We try to attend all of the workshops that apply to our practice. They’re good in providing updates and changes Medicare has made. We also like being able to have our questions answered and to hear questions other practices have which could be helpful. Sometimes it is good to know other practices are having the same or similar instances.” Beth says the information they have received at workshops has been especially helpful in explaining to patients why certain claims have been denied. “It helps to show them the reasons, in writing, from Medicare,” she adds.

In addition to regularly attending the workshops, Belinda and Beth stay apprised of new information by reading each *Medicare Advisory*, *Medicare Review* and *Medicare Briefly* that comes their way. They even go one step beyond in helping the patients of Lovelace Family Medicine: “We made ‘Medicare books’ for all employees and doctors, which include information from the *Advisories* and any Medicare updates,” says Belinda.

Lovelace Family Medicine consists of 30 regular staff members, six doctors, two nurse practitioners and 17 part-time high school and college students. Keep up the good work!

Surpassing Expectations

The Health Care Financing Administration (HCFA) sets the standard for our performance in processing claims. How are we stacking up? Check out the numbers below for the fiscal year 1999:

HCFA Standard	Our Performance in 1999
95% clean EMC claims processed in less than or equal to 30 days	99.9% paid in 14 days
95% clean hard copy claims processed in less than or equal to 30 days	99.5% paid in 27 days

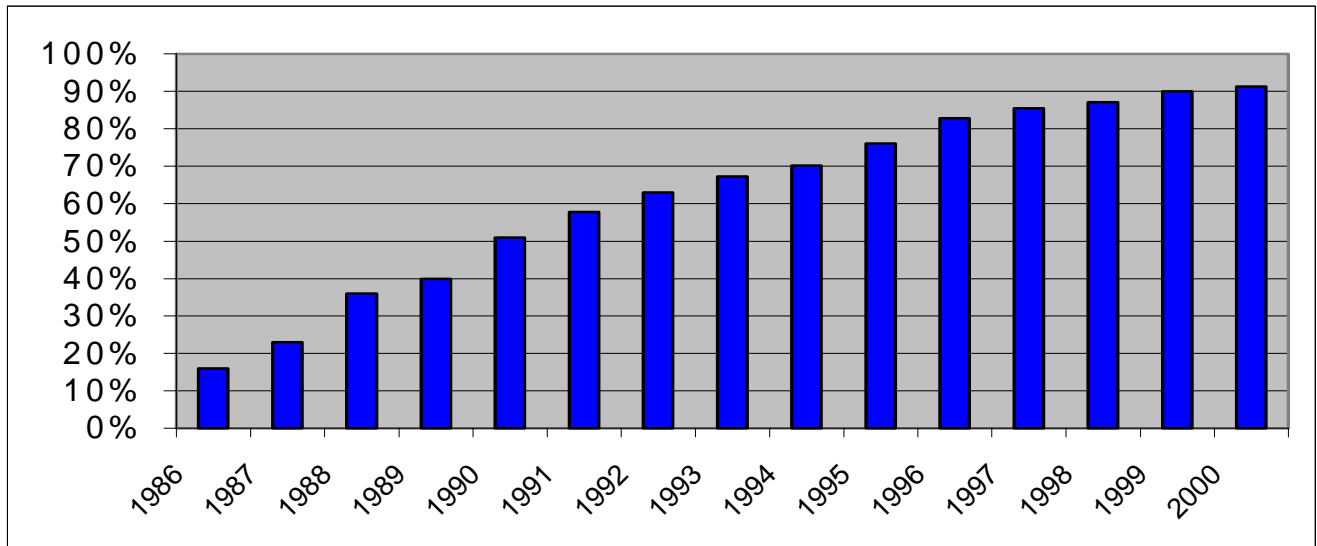
General

Medicare Part B employees (of 225 total):	150	Physicians/practitioners/suppliers:	9,500
Number of claims processed (total):	10,300,000	South Carolina Medicare beneficiaries:	550,000
Benefits paid out:	\$570 million	Medicare Part B inquiries (of 545,000 total):	375,000

Medicare 2000 Physician Participation Rate

The South Carolina Medicare physician participation rate continues to rise! This year we achieved a participation rate of 91.4%, marking an increase of 1.1% over 1999.

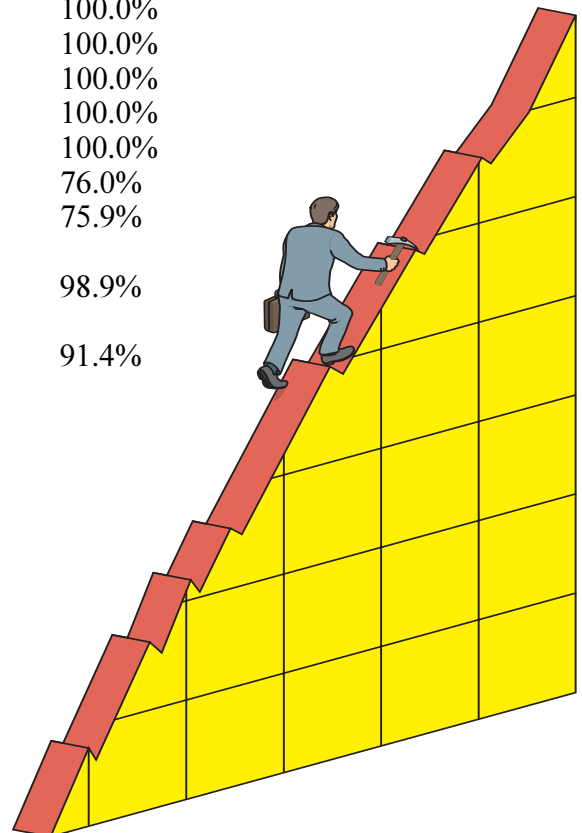
The most notable change is attributed to one specialty — 38 chiropractors chose to participate this year. This number accounts for nearly 35% of all new participants in Medicare and is an unprecedented increase for this specialty. Within the chiropractic specialty group alone, the participation rate increased from 37.1% (1999) to 45.7% (2000).



The following chart shows 2000 Medicare physician participation rates by specialty.

Specialty Description	No. Physicians	No. PAR Physicians	PAR Percent
Osteopathic Therapy	2	2	100.0%
Neurosurgery	58	58	100.0%
Pathology	156	156	100.0%
Colorectal Surgery	16	16	100.0%
Pulmonary Disease	86	86	100.0%
Thoracic Surgery	35	35	100.0%
Nuclear Medicine	9	9	100.0%
Geriatric Medicine	8	8	100.0%
Nephrology	69	69	100.0%
Hand Surgery	5	5	100.0%
Infectious Diseases	31	31	100.0%
Vascular Surgery	22	22	100.0%
Addiction Medicine	2	2	100.0%
Critical Care	4	4	100.0%
Hematology	1	1	100.0%
Hematology/Oncology	66	66	100.0%
Medical Oncology	20	20	100.0%
Radiation Oncology	43	43	100.0%
Interventional Radiology	15	15	100.0%
Gynecological Oncology	6	6	100.0%
Cardiology	253	252	99.6%
Anesthesiology	384	382	99.5%

Urology	149	148	99.3%
Orthopedic Surgery	296	294	99.3%
Gastroenterology	126	125	99.2%
General Surgery	361	355	98.3%
Otolaryngology	115	113	98.3%
Emergency Medicine	473	463	97.9%
Rheumatology	41	40	97.6%
Dermatology	109	106	97.2%
Diagnostic Radiology	364	352	96.7%
Physical Medicine	51	49	96.1%
Neurology	120	115	95.8%
Podiatry	86	82	95.3%
Internal Medicine	843	803	95.3%
Cardiac Surgery	21	20	95.2%
Plastic Surgery	59	56	94.9%
Allergy/Immunology	46	43	93.5%
Ophthalmology	234	218	93.2%
Pediatric Medicine	194	180	92.8%
Obstetrics/Gynecology	452	412	91.2%
Family Practice	1,204	1,085	90.1%
Maxillifacial Surgery	9	8	88.9%
Endocrinology	35	31	88.6%
Psychiatry	458	401	87.6%
General Practice	201	168	83.6%
Preventive Medicine	10	8	80.0%
Optometrist	294	227	77.2%
Surgical Oncology	2	1	50.0%
Oral Surgery	107	50	46.7%
Chiropractor	532	243	45.7%
Nurse Midwife	26	26	100.0%
Nurse Anesthetist	537	537	100.0%
Nurse Practitioner	254	254	100.0%
Occupational Therapist	8	8	100.0%
Clinical Psychologist	61	61	100.0%
Social Worker	159	159	100.0%
Clinical Nurse Specialist	18	18	100.0%
Physician Assistant	24	24	100.0%
Audiologist	25	19	76.0%
Physician Therapist	29	22	75.9%
Subtotal LLPs	1,141	1,128	98.9%
Total Physicians & LLPs	9,424	8,612	91.4%



Here's How to Reach Medicare Part B

Voice Response Unit (VRU) —
(803) 788-5568

This service is available Monday through Friday, 7:30 a.m. until 10 p.m., plus limited hours on Saturday. *Please have your Medicare Provider Identification Number (four-digit group number or 10-digit individual number) ready when you call to ensure faster service.*

Helpful hint: You can enter your menu selections without listening to the entire menu.

Medicare Part B Customer Service —
(803) 788-5568

Monday through Friday from 9 a.m. until 4 p.m. We have expanded our hours to serve you better!

Anti-Fraud Hotline — (803) 788-5414

Electronic Data Interchange
(EDI) Help Desk — (803) 788-9751

For information concerning electronic media claims (EMC) transmission, electronic remittance notices (ERNs), electronic funds transfer (EFT), Claims Status Inquiry (CSI) or the Medicare bulletin board system. *Please have your provider identification number ready when you call to ensure faster service.*

Written Inquiries:

Medicare Part B Customer Service, AG-675
Palmetto GBA
P.O. Box 100190
Columbia, SC 29202-3190

On the Web:

www.PalmettoGBA.com
www.hcfa.gov



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