

Full Services Medical Management Solutions helping Practices Meet Regulatory Requirements and Back Office Needs



Tim Annable, CMPE, MCSE
Chief Executive Officer

Encompass Medical Partners
www.encompassmedical.com

Contact:
Tim Annable, CMPE, CISSP, MCSE
Chief Executive Officer
970-488-1668
tannable@encompassmedical.com

Interview conducted by:
Lynn Fosse, Senior Editor
CEOCFO Magazine

“Encompass Medical Partners allows our clients to focus on what they do best, which is the practice of medicine. We take care of all of the back office details, so our clients can take care of their patients.”
- Tim Annable, CMPE, MCSE

CEOCFO: *Mr. Annable, what is the focus for Encompass Medical Partners today?*

Mr. Annable: Encompass Medical Partners is a practice management company. We take care of all of the back-office business needs of medical practices. We focus on areas where there is the most complexity. In particular, providers are struggling the most in the areas of clinical quality with all of the new regulations that have come out since the Affordable Care Act (ACA) and the Medicare Access and CHIP Reauthorization Act (MACRA). We have systems in place to assist practices and medical professionals in staying ahead of the MACRA curve and improving quality of care.

CEOCFO: *Was that the original idea to deal with the harder situations or did that concept develop over time?*

Mr. Annable: It developed over time. We started with medical billing and credentialing management. Over time, our providers had more complex and different needs. As a company, we evolved and quickly realized that we were successfully meeting their new demands, such as with quality and HIPAA-compliant IT services. We saw that other practice management firms were not able to meet these type of demands. So, we developed a market where we can focus in on some of these harder-to-meet requirements.

CEOCFO: *Would you give us an example of what might be a complication that you are able to work through?*

Mr. Annable: In the clinical quality world, one of the requirements for medical professionals was participation in a system called the Physician Quality Reporting System (PQRS). Over time, with the passing of MACRA, PQRS morphed into a new system called the Merit-based Incentive Payment System (MIPS). Physician groups and medical professionals are now required to report quality data, whereas in the past it was optional. Some groups are hospital-based and do not have their own electronic medical record system, while some work inside surgery centers or other medical facilities, and they do not have the ability or staff support to collect data, meet requirements, and report to the Centers for Medicare and Medicaid Services (CMS). Encompass Medical Partners has partnered with software companies and has had a hand in developing applications that our clients can use across a spectrum of unique needs. Once data is collected, we analyze it for our clients before it actually gets sent over to CMS.

CEOCFO: *Most people, when they are putting in a new system, are reasonably nervous that it will work well and that nothing will be lost. How do you help ease the implementation and also reassure a new practice that it will be smooth or that you will be right on top of anything that it is not?*

Mr. Annable: We have two to three practices that have been managed in full, long-term by Encompass. We work with them to develop solutions that meet their needs and use them as a beta tester for new systems. Once we have the

system working in the real world, we then market it to other clients and new groups. This ensures that we have a process developed to where we know it will work. When working with a new client, we analyze their unique situation. New clients will usually send over their data or their case mixes and we sometimes go visit with them onsite to observe their work processes. This allows us to answer the question: "Okay, how does the system we have built for our other clients work for you?" and we will modify and customize as needed. We try to get things as standardized as possible, while also meeting our clients' unique needs, with the goal of getting them into our fold as close as we can.

CEOCFO: *Encompass offers a number of different products and services. Do many practices start with one area? Is it more typical to have you come in and take over everything? What is the range?*

Mr. Annable: Most Encompass clients contract with us on one or two service lines, which is typical of practice management firms. We are seeing the most growth in clinical quality management because that is where there is a large client need in meeting the new reporting requirements. There are many physician groups that do not know how to meet the new requirements or have the staff available to do so on their own.

Another growing area is in credentialing management. It is a large task for groups to have their privileges and licenses maintained and kept current. A medical practice with multiple providers, working in multiple facilities will likely have hundreds of documents that need to be managed and maintained and if any of these documents are allowed to expire then they are unable to provide certain services or work inside the facilities.

Encompass also provides HIPAA-compliant healthcare IT services. We just launched DataRx, which provides HIPAA-compliant maintenance, updates and security solutions. Simply put, clients most often come in on one service line and will cross over and sign with another services line after we work with them for a bit. It is fairly rare for us to take a client on and just do everything for them right off the bat. Usually, they have got some things in place to where they do not need everything. The only exception to that is if we sign a new practice where we are helping a practice from the ground up and we are hired to help build their management for them.

CEOCFO: *How do you integrate with other products that are already in place?*

Mr. Annable: The Encompass billing team has a software interface engine that runs healthcare data in standard formats. Since it is standardized, as long as a client has some sort of a data system and IT support, then we can easily work with them to fulfill their billing needs. And, if they do not have the IT support in place, we can provide the IT help that is needed.

When it comes to quality it is a little more complex and that is where our DataRx service line comes in to play by offering data transformation services. Our team takes the data in whatever format that a client is able to give to us, including XML and Excel. We then analyze the data and may recommend that it get captured in a more standard way. Or, our team can provide data transformation services where we are able to take it through our engines and manipulate it to where it becomes a standard format and we can move it on to either the billing system or directly into a national quality registry.

CEOCFO: *Where does the Affordable Care Act and the changes that are likely to happen after election come into play for you? How do you prepare for the unknown?*

Mr. Annable: That is a great question. Whenever a change is proposed at the Federal level, a proposed rule is first made public for anywhere from six months to two years before it becomes a final rule and becomes implemented as regulation. During that proposed rule timeframe, we are able to work toward possible implementations the final regulation. Encompass is very involved, especially in regard to anesthesia management, at the national level in helping develop quality registry measures and reporting requirements. Our clinical quality management team is led by our full-time Chief Quality Officer Dr. Emily Richardson. She is an experienced physician with nationally-recognized expertise in the field of anesthesia quality reporting and serves as Chair of the Anesthesia Quality Institute's Practice Quality Improvement Committee and Co-Chair of the Physician Consortium for Performance Improvement's (PCPI) National Quality Registry Network QCDR Committee, and more. She is actually helping to create the quality capture requirements for particular quality reporting measures. With that level of involvement and exposure to what is going on at the high level we are able to see in advance where the market is going.

CEOCFO: *How are you able to help with security issues?*

Mr. Annable: For information security issues we have a product with our DataRX package where we will do risk assessments, which is a requirement under HIPAA for anyone that bills Medicare. Encompass performs these assessments and provides detailed suggested actions and a change list, which is all of the things where a group is either

not compliant or not sufficiently compliant. Our IT staff can then provide the service, if needed, to implement necessary changes.

CEOCFO: *Are medical practices, by and large, concerned with security over and above what they are required to do?*

Mr. Annable: We find that it is typically dependent on the size of the practice. Larger practices of 100 or more clinicians are very concerned with security and they will sometimes take it beyond what is required. Small practices tend to struggle to understand what the requirements are and where they fit in to meeting those regulations. It is not that they do not care about security, they just do not know what steps to take and have the resources and staff available to implement – and that is where Encompass will walk them through it.

CEOCFO: *Many IT systems are hard to navigate. How do you focus on the user-friendliness for whatever needs to be done on the client end?*

Mr. Annable: Encompass develops systems unique to the client's needs and actively assists and participates in client software selection. We assist our clients in developing a requirements list that answers questions such as "What do you need the software to do?", "What are the must-haves?", "What are the would-like-to-haves?", "What are the end goals that the system is trying to achieve?", "Are the goals realistic?", "What is the budget?", and more.

We will then take the client's requirements and, essentially, go shopping for them -- whether we are shopping for a developer to make the software to use in-house or shopping for an off-the-shelf product. Then, we actually shadow the users of the product. Whether they are physicians in the operating room or office staff, we know how the product works for each user. We then involve those users in the design process so that they are part of the system build. We approach the final build both as a top-down and bottom-up approach, so that government requirements are being met while also meeting the needs of the end-user.

CEOCFO: *What is your geographic range for your clients?*

Mr. Annable: Right now about seventy percent of our clients are in Colorado and we are starting to expand nationwide.

CEOCFO: *Why now for the expansion?*

Mr. Annable: We have seen for some time now that there are needs in the market that are just not being met. When we first started out we operated as a "boots on the ground" practice management firm. It used to involve staff driving around, picking up medical records from clients, scanning them in and things like that. As technology, requirements and regulations have evolved, we have seen a growing need for credentialing, clinical quality, and IT security management. These are things that lend themselves well to being done remotely and there are huge gaps in the marketplace where there are not enough companies that can do these things or services. Therefore, it was a natural fit to market ourselves nationwide to fill those gaps.

CEOCFO: *Are there state requirements, for example, in credentialing that you need to be cognizant of?*

Mr. Annable: Yes, there are many! Each state has its own licensing requirements as far as the physician and provider licensure. Additionally, each state currently runs their own Medicaid program. So, in the enrollment side, which is another component of credentialing, it involves making sure your providers are enrolled and the practice is enrolled with each insurance carrier, including Medicaid. Therefore, each state has different regulations as to how they have implemented Medicaid and who processes their Medicaid claims. So there is a lot of State-specific knowledge there.

CEOCFO: *I would imagine medical practices are relieved to have Encompass help facilitate the non-patient challenges?*

Mr. Annable: Smaller medical practices have only a few options as they are starting to face a more complex environment and as larger health-systems are acquiring more and more practices. One option would be to merge with a larger healthcare system so that a medical provider practices medicine underneath the banner of the hospital system where they work. Another choice is to merge into larger groups, as larger practices can afford bigger infrastructure. Then, the third option, which is where Encompass comes in, is for smaller groups that would rather have the autonomy to be on their own. These are the groups that want to remain relatively small, where they have less than 100 providers. They need outsourced help from Encompass to help them take care of their needs.

CEOCFO: *What services are not getting the traction that you expect? What are people missing?*

Mr. Annable: In the practice management world, the medical billing marketplace is saturated. It's not that it does not have traction, rather medical billing has been around forever. Subsequently, while not growing as fast as our new divisions, our

proven history and track record with medical billing means we are a great asset to our clients. Our newest service lines -- credentialing, DataRX IT services, and clinical quality management -- are gaining traction because, not only do we have the expertise in these areas, but we are also one of the first in the market for these areas.

CEO/COO: Why choose Encompass Medical Partners?

Mr. Annable: If you are an independent medical practice and that wants to maintain independence and autonomy and are disinterested in being acquired by a larger practice or merging into a larger healthcare system, Encompass will provide the expertise to take care of all of the details. If you do not participate or fail to adequately participate in clinical quality requirements and regulations, then CMS can penalize upwards of six percent this year of your receipts from Medicare and Medicaid and those penalties will continue to grow each year. Failure to adequately manage your IT security systems can make you a front page story on the news in having a data breach and can bankrupt your practice. Without a robust and detail-oriented credentialing and billing department, you will be unable to bring in the revenue to support your practice. Encompass Medical Partners allows our clients to focus on what they do best, which is the practice of medicine. We take care of all of the back office details, so our clients can take care of their patients.



encompass
MEDICAL PARTNERS

Building **healthy** practices.