



# **June 8th, 2020 webinar** Hosted by Cindy Pezza, PMAC



WELCOME TO WEEK 13 OF OUR COPING WITH COVID-19 DISCUSSIONS

- Many of you have started to implement positive changes and taking steps towards a brighter future
- Virtual/Dedicated Distant Assistants and Scribes
- New Patient Coordinators
- More streamlined ways of managing practices

# REOPENING CONTINUES AND THE NEW NORMAL IS UPON US



## IN CASE YOU MISSED IT THIS MORNING

- Loan recipients are now only required to spend 60 % on maintaining payroll, rather than the previous 75 % rule
- The money that can be spent on operating costs like rent and utilities increased to 40 % from 25 %
- Extended the timeline for businesses to spend the money from two months to 24 weeks. However, if businesses choose to get the loan forgiven after eight weeks, they are still able to do so. \*\*
- Gives businesses until Dec. 31 to rehire workers in order for their salaries to count toward forgiveness; previously, they had until June 30
- ► The employee salary eligible for forgiveness is still capped at \$100,000.
- The law also eased rehiring requirements for businesses. For instance, if a small business owner is unable to rehire an individual who was an employee on or before Feb. 15, or is able to prove they were unable to hire a similarly qualified candidate, their loan may still be eligible for forgiveness.
- If the loans are not forgiven, a business will have five years at 1 percent interest to repay the loan, rather than the initial two years.

## CHANGES TO PPP LOAN FORGIVENESS INCLUDE:

## LET'S KEEP MOVING FORWARD AND EXPLORE ANOTHER "OUTSIDE THE BOX

"CONCEPT (THAT SO MANY DOCTORS HAVE CONSIDERED WITHOUT KNOWING WHERE TO START)

**NEW PATIENT INFO** 

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The Agony of Da-Feet



**OUR GUEST SPEAKER:** DR. RICHARD COWIN

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## HOW TO THRIVE, NOT SURVIVE, IN PODIATRY

Richard M. Cowin, DPM, JD

Cindy Pezza, PMAC President and CEO Pinnacle Practice Achievement, LLC

## MY SINCERE THANKS:

- > 1980: Graduate of Illinois College of Podiatric Medicine
- ► 1980-81: Trained in MIS and Traditional Foot Surgery in Chicago and met my lovely wife ☺
- > 1981: Opened my first podiatry practice in Skokie, IL
- 1983: Diplomate, American Board of Ambulatory Foot Surgery and married Sarai Perez
- 1984: Diplomate, American Board of Podiatric Surgery and moved to larger office in Libertyville, IL
- > 1986: First daughter was born
- > 1988: Second daughter was born

## MY STORY

- 1980-1993: Numerous trips to Orlando, FL
- 1992: "Burnout" and The Dr. Wayne Dyer cassette tape and the trip to Florida that changed my life
- > 1993: Moved to Orlando and Opened 1<sup>st</sup> Florida Office
- > 1999: "The Villages" called and I answered
- > 2004: Opened The Center for Advanced Foot & Ankle Surgery and Advanced Surgery Center
- > 2007: Medicare Changes Their Mind
- > 2008: Enrolled in Florida A & M University College of Law

## MY STORY CONTINUES...

- 2012: "Honey, you're not going to believe this, but I miss doing foot surgery, BUT..."
- Her response: "I knew that!"
- Mediation offers a flexible schedule and a back-up career.
- > However, there are some challenges in re-entering podiatry.

# THE BIG DECISION: MEDICINE OR LAW?

### Have you had enough?

Do you believe that Medicare is like the Hotel California where you can check in, but you can never leave?

TWO GREAT QUESTIONS POSED BY LAWRENCE R. HUNTOON, M.D, PH.D.TO THOSE CONSIDERING OPTING OUT OF MEDICARE

A PARTICIPATING PHYSICIAN is an enrolled physician who signs an agreement with Medicare agreeing to <u>accept assignment</u> on all Medicare patients and who accepts the allowed amount by Medicare as payment in full for medically necessary covered services as defined by Medicare

## WHAT ARE YOUR MEDICARE PAYMENT OPTIONS?

### A NON-PARTICIPATING PHYSICIAN is an enrolled physician who does NOT sign a contract with Medicare who may choose to accept assignment or not accept assignment on a case by case basis for medically necessary and covered services as defined by Medicare. Non-Participating Physicians can charge no more than the limiting charge for covered services provided.

## WHAT ARE YOUR MEDICARE PAYMENT OPTIONS?

- An OPTED OUT PHYSICIAN is an enrolled physician who chooses to <u>Opt Out</u> of Medicare by filing an affidavit with Medicare. Neither <u>physician nor patient</u> can submit a claim to Medicare (except for emergency services) for services provided by the Opt Out Physician during the Opt Out period and Medicare limiting charges do NOT apply.
- Opted Out physicians who have an NPI number can order tests and make referrals to other entities or physicians that are in the Medicare system and Medicare will pay as per Medicare policy.
- In case of an urgent or emergency situation, an Opt Out physician CAN file a claim with Medicare.

# WHAT ARE YOUR MEDICARE PAYMENT OPTIONS?

- Recover Audit Contractors (RAC's): These are private "bounty hunters" who are rewarded with a "cut of the take."
- Zone Program Integrity Contractors (ZPIC's): Looking for crimes
- FBI Health Care Task Force: Jurisdiction over both federal and state insurance programs. FBI has 56 field offices.

PHYSICIANS WHO REMAIN IN THE MEDICARE PROGRAM RISK PROSECUTION, PRISON, AND RUINOUS FINES AND HAVE THE "PLEASURE" OF DEALING WITH:

- Medicare contractors also have their own fraud units and work along with HHS OIG (Office of the Inspector General)
- Bunion surgery fee: 1980 vs. 2020
- ObamaCare Law added 1) increased federal sentencing guidelines by 20% to 50% for crimes over \$1 mil. in losses, 2) increased license checks and site visits for physicians deemed to be high risk for fraud and abuse, 3) CMS implemented advanced, predictive modeling technology to detect fraud, and 4) provided an additional \$350 mil. over 10 years to boost antifraud efforts.

## IF THAT ISN'T ENOUGH...

- If you elect to stay in Medicare, you need to consider the cost of you and your staff keeping up with ever-changing Medicare rules and regulations AND the cost of handling Medicare claims and appeals.
- If you decide to Opt Out, it may be helpful (and in fact I believe it is crucial) to find "niche" services, to become highly knowledgeable and well-credentialed in these services, and to develop a marketing plan to inform patients of the benefits of these services as well as the benefits of seeing an Opt Out Physician.

FINANCIAL CONSIDERATIONS TO REMAINING AS A PAR OR NON-PAR PHYSICIAN

- > The freedom and pleasure of practicing PODIATRY again.
- Positive patient experience and protecting patient privacy.
- No fear of ruinous fines or prison time for inadvertent coding errors or running afoul of some obtuse Medicare law, rule, or regulation.
- Simplification: NO billing staff, NO claims to file, NO collection problems or fees, and NO accounts receivable as you collect 100% of your fees at the time services are provided.
- More time to spend actually treating patients and with family and friends and enjoying your favorite hobbies.

NON-FINANCIAL CONSIDERATIONS TO BECOMING A MEDICARE (AND OTHER) OPT OUT PHYSICIAN There's a certain comfort in dealing With the devil, you know The unknown is uncertain So you embrace the status quo

But those who are brave And principled at heart Will receive FREEDOM as their reward And that's very smart.

## TO STAY OR NOT TO STAY IN MEDICARE: THAT IS THE QUESTION



**Dr. Rich Cowin** 

## THANK YOU AND GOOD LUCK!!

IF YOU ARE INTERESTED IN A VIRTUAL WORKSHOP "OPENING YOUR OWN BOUTIQUE PRACTICE" PLEASE EMAIL: <u>ADMIN@PINNACLEPA.COM</u>



## THANK YOU FOR JOINING!

### Visit:

https://pinnaclepa.com/practic e-engagement-program-pep/

for more information on how to become a PEP member and stay up to date on everything PODIATRY!

