

Healthcare delivery challenges for the nurse practitioner

The third party payer

Changes in health care delivery systems are challenging nurse practitioners on every level of the health care provision continuum. In addition to staying current with advances in nursing research and technology, nurse practitioners (NPs) are being called upon to become proficient in billing and coding language. For practices to survive and NP positions to endure, maximum reimbursement must be obtained for services provided. For this reason, it is critical to have an understanding of 1) the categories of third party payers and their NP reimbursement policies; 2) the factors to consider when selecting an appropriate evaluation and management code; and 3) principles of documentation.

In this first installment, the categories of third party payers and NP reimbursement policies are briefly explained. For more comprehensive information regarding this and the two other topics noted above, please visit www.umassmed.edu/gsn

Every encounter between an NP and a patient has a third party participant, unless the patient is paying out of pocket. Therefore it is important for NPs to be familiar with the five major categories of third party payers, their reimbursement policies and their fee schedules. Each payer includes agencies or companies that reimburse NPs for their services but not every company may reimburse every NP for every service. Reimbursement is contingent on many variables such as geographic area and the availability of similar providers in that area.

Medicare

Medicare is a federal program administered nationally by the Centers for Medicare and Medicaid Services (CMS) (formerly the Health Care Finance Administration) that covers patients 65 and older and individuals with disabilities who qualify for social security benefits. Reimbursement for NP services may be provided in

one of two ways: fee-for-service or through capitated programs.

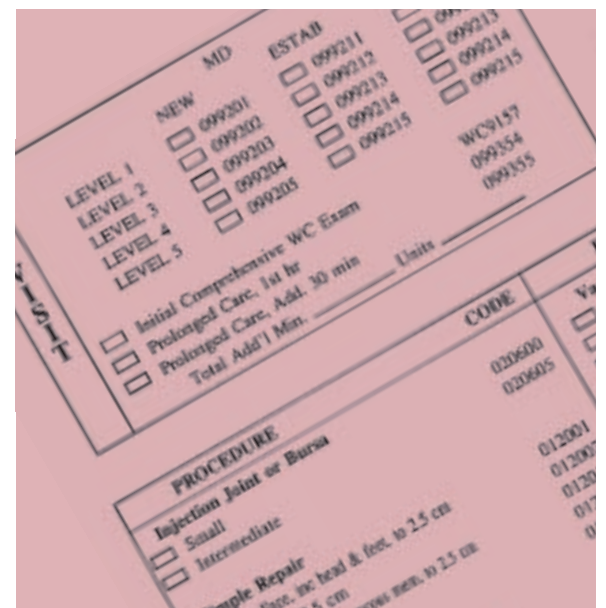
Payment for specific health care services, such as office visits or suture removals, are made under a fee schedule, with fees based upon a number of factors ranging from the type of treatment provided to the expertise of the health care provider. In order for an NP to participate in and bill the Medicare Program, he or she must apply for a Medicare number through the local carrier, a process that can take from three to four months. The NP must use the CMS 1500 claim form to bill Medicare for the services that were provided to receive reimbursement.

Capitated Medicare

In a "Capitated" Medicare program, a Health Maintenance Organization (HMO) or Managed Care Organization (MCO) serves as an intermediary between the patient and Medicare. Medicare pays a lump sum for the health care services of the beneficiary to the HMO or MCO and the organization then pays the provider a certain fee per member per month, regardless of how many times the patient is seen. The fee, which is contractually agreed upon, is based on the patient's age and gender.

Medicaid

Medicaid is a federal program, administered by states, which provides for the health care needs of mothers and children or for adults with a short-term disability who qualify on the basis of poverty. In order for NPs to receive reimbursement from Medicaid, they must apply for and obtain Medicaid provider status, or be a contracted provider with a managed care organization. Massachusetts NPs are currently allowed to become primary care clinicians in the Medicaid program and receive reimbursement according to Medicaid fee schedules.



Indemnity insurance companies

An indemnity insurer is a company that pays for the medical care of its beneficiaries but does not deliver care directly (example, Blue Cross Blue Shield). Claims are paid on a per-visit-per-procedure basis.

Managed Care Organizations (MCOs)

An MCO is an insurer that agrees to provide services to beneficiaries of the plan for a fixed payment per person over a defined time period. The beneficiaries are limited to providers who are employed by or under contract with the plan and are reimbursed on a fee-for-service basis, a capitated basis or a combination of both. ●

The Massachusetts Coalition of Nurse Practitioners (MCNP) has prepared a reimbursement grid that summarizes the reimbursement policies of all major third party payers in Massachusetts. It can be downloaded from the MCNP Web page at www.mcnpweb.org.

New Faculty

Welcome to the following new faculty, who have joined the GSN within the last year:

- **Alice Bonner, RN, GNP**, has been a clinical instructor since August. She received a bachelor's degree from Cornell University in 1979, a bachelor's of nursing degree from Columbia University in 1981, and a master's in nursing from the University of Massachusetts-Lowell in 1989. Prior to joining the GSN, Bonner was clinical director of long-term care and geriatrics at the Fallon Clinic for six years. She has been responsible for coordinating teams of physicians and nurse practitioners in long-term care and has published on interdisciplinary models of care for the elderly. Bonner currently sees patients from the Masonic Home in Charlton and is involved in research on falls and fracture prevention in the elderly.

- **Marianne LaPorte Matzo, PhD, APRN, GNP, BC, FAAN**, was appointed an associate professor in August. Prior to joining the GSN, she served as a professor of nursing at New Hampshire Community Technical College, a member of the graduate faculty at the Union Institute and University and as a Soros Scholar for the Project on Death in America. Recently inducted into the FAAN, Dr. Matzo received her doctoral degree in gerontology from the University of Massachusetts-Boston and a master's degree in nursing from the Gerontological Nurse Practitioner Program at the University of Massachusetts-Lowell. Her work for the Project on Death in America has included undergraduate curriculum development on the care of dying

patients and their families, work as a Hospice nurse, continuing education programs related to death, dying and bereavement, and co-authorship of the first Palliative Care Nursing textbook.

- **Lynne Busam Markinac, APRN, BC**, was named a clinical instructor in September. She received her master's of science degree from Boston University in 1981 and her nursing degree from the University of Cincinnati in 1976. Prior to joining the GSN, Markinac worked for 20 years in a collaborative practice as an adult nurse practitioner at Harvard Vanguard Medical Associates, where she developed specialties in asthma, diabetes and patient education.

- **Abraham Ndiwane, EdD, RN**, was appointed an assistant professor in September. Dr. Ndiwane received his EdD from Boston University and his master's degree from Northeastern University. He also received a bachelor of arts degree and a bachelor of science degree from Boston University. His research interests include developing, integrating and implementing cultural competency (assessments/skills) with diverse populations and work force issues. His most recent research investigated the effects of practice location and setting on the job satisfaction of nurses.

- **Susan Sullivan-Bolyai, DNSc, CNS, RN**, was named an assistant professor in August. She received her DNSc from Yale University School of Nursing in 1999 and recently completed a three-year postdoctoral fellowship where she developed and implemented a course for parents of young children newly diagnosed with type 1 diabetes. In addition to juvenile diabetes, Dr. Sullivan-Bolyai's research interests include the day-to-day management of families caring for young children with a variety of chronic conditions. She is also interested in the continuity of care and case management needs of these families from an interdisciplinary perspective.

- Already a UMMS professor of medicine, **Jane G. Zapka, ScD**, was appointed to the GSN faculty in February. Dr. Zapka received her doctoral degree from the Harvard School of Public Health, her master's from the University of Massachusetts School of Public Health-Amherst and her bachelor's degree in biology from Skidmore College. Her research includes program evaluation, effectiveness research and quality improvement, notably as these apply to community and health services prevention programs. She has worked extensively in the areas of breast, cervical and colorectal cancer screening, tobacco policy and services, and, most recently, in issues related to end-of-life care and health.

Contributors to the Graduate School of Nursing

July 1, 2000 through June 30, 2002

Dean's Circle Gold Level (\$25,000 - \$100,000)

Fairlawn Foundation
W. K. Kellogg Foundation

Dean's Circle Silver Level (\$10,000 - \$24,999)

Central Massachusetts Area Health Education Center
Lillian R. Goodman, EdD, RN
Mr. and Mrs. Theodore G. Kinnear

Dean's Circle Bronze Level (\$5,000 - \$9,999)

Anne Bourgeois, EdD
Barbara and Nathan Greenberg

Dean's Circle (\$1,000-\$4,999)

Community-Campus Partnerships for Health
Grafton Community Nursing Association
Dr. Mary Jo Nugent Breast Cancer Foundation
Rhode Island Hospital-Nurses' Alumni Association

1985 Society (\$500-\$999)

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Although the greatest possible care has been taken in the preparation of this record, we recognize the possibility of omissions or inaccuracies. If any are noted, please accept our apologies and advise us of any corrections to be made.

Alumni Profile

Advocacy + Expert Care = Donna Benedict MS, RNCS, ANP



In 1985, Donna Benedict moved East with her family to the Fitchburg area to pursue her career as a nurse-midwife. However, seeing the HIV epidemic emerge in her community, she felt compelled to become involved. Deciding that becoming a nurse practitioner with an HIV specialty would help her achieve this goal, she enrolled in the GSN, graduating in 1997.

Currently, Donna is an HIV nurse practitioner at the Community Health Center in Fitchburg, a site funded through the Massachusetts Department of Public Health, with support from the UMMS Department of Medicine's Division of Infectious Diseases. She is a dedicated and relentless provider of care for all of her patients and her work is a benchmark in the treatment provided to homeless and at-risk populations. Her ultimate goal, after living in northern Worcester County, is to give HIV-positive patients access to health care close to their homes.

Describe your practice and what a typical day is like for you?

"I love my practice. I am here for the patients. I feel very privileged to be able to care for them. Many of them do not have transportation or phones; in fact 15 percent of my patients are homeless. When a patient walks two miles so that you can take care of him or her, that says a lot. It is very special and they are very special. I feel I have a unique outlook on their care as I have been a patient and know that the caregiver has a tremendous affect on the patient's outlook. They deserve respect and I intend to give that to them. So I see my patients when they get here and I do not judge them. It is very gratifying."

How do you connect with the homeless population?

"I do some outreach at the Gardener VA Drop-In Center. Actually, I am more of a 'regular' there; I am familiar to patients and I come to them. I visit often and have been a speaker. I've also been known to carry

flu shots in my pocket and go to 'Tent City' on the tracks, a homeless campsite. These people need the prevention. They are at risk."

What is your vision for this population in the future?

"Better access to health care. National health care reform is long overdue. We're not doing enough."

How do you think UMass Worcester prepared you for your role?

"Without a doubt it gave me the support I needed to achieve success. When I interviewed with Mary K. Alexander, EdD, she asked me directly why I wanted to be a nurse practitioner, given that I had already been a nurse-midwife for 13 years. I shared with her my goal of obtaining funding and opening a clinic for HIV care in Fitchburg. I knew it would be a lot of work, but that the support and tools I obtained while in school would be an instrumental piece in making the clinic a reality." ●

Nursing Summer Enrichment

(continued from page 1)

and career paths available to them as nurses.

The instructive portion of the program included OSHA-mandated programs on hand washing, infection control, blood-borne pathogens and fire safety. Fairlawn Nurse Scholars from each of the WNPC schools assisted throughout the week by providing student supervision, teaching and CPR instruction. Guest speakers presented neonatal nursing, the experiences of nurses working in New York City following the Sept. 11 terrorist attacks, end-of-life care and pediatric trauma

prevention. PowerPoint instruction was also included at the end of each day to allow students to create materials about their experience that they could share with family and friends during the closing ceremony and celebration.

At the program's end, all students wanted to pursue a health career, and over half stated they wanted to pursue a career in nursing. Additionally, all of the students stated the program either positively changed their perception of nursing or that the experience reinforced the important role nurses play in providing quality health care for patients and their families. ●



Fairlawn Scholar Karin Ciance (right) supervising Nursing Summer Enrichment students as they learn CPR.

Dean's message

(continued from page 1)

years, the GSN portfolio has been supported through funding from the National Institute of Nursing Research, Health Resources Services Administration, U.S. Department of Health and Human Services, the Susan B. Komen Foundation, The Fairlawn Foundation, UMMS Commonwealth Medicine, Friends of the National Institute of Nursing Research, The W. K. Kellogg Foundation, the Massachusetts Department of Public Health and the statewide Massachusetts Area Health Education Center. In addition, scholarship support for our students grew through the support of such foundations and private donors.

In this edition of *Focus on the GSN*, we welcome and introduce six new outstanding faculty members whose clinical, research and teaching expertise are well matched to our GSN vision and

programs. Our graduate student body has continued to grow by 30 percent annually since 2000, despite decreasing graduate nursing enrollments nationwide, and the work of our students is embedded in their support for community outreach and their mentorship of the nurses of tomorrow. Two of our alumnae are featured for their prominent work in developing clinical services for underserved populations and advancing ANP reimbursement policy.

And, the names of the alumnae, friends and faculty who have generously donated to the GSN over the last year – bringing us to our highest level of philanthropic support in the GSN's 16-year history – are featured in this issue. I commend you and offer my sincere appreciation for this support. Our UMass Worcester nursing community and its friends continue to be our strongest asset. And we've only just begun...

I hope you will take pride in our accomplishments and that you will continue to reinvest in the future and progress of the GSN. Support our nursing leaders and mentors whose innovations in research, service and education influence nursing and health care for the Commonwealth and beyond. My best wishes for a safe and healthy 2003. ●

Save the Date

For information on the Sigma Theta Tau listings, contact Nancy Kowal at 508-856-1004 or kowaln@ummhc.org; for all other inquiries, contact Elizabeth Flodin at 508-856-5801.

January 2003

- 14 Dean's Clinical Scholars Colloquium
- 15 Open House/Information Session for Prospective Students 5:30 – 7 p.m.
- 23 Semester III Registration

February 2003

- 14 Sigma Theta Tau Iota Phi Theater of Innovation — Research to Practice 6 p.m., Worcester campus

March 2003

- 1 Abstracts due for Excellence in Nursing Conference
- 15 PhD application deadline for Fall 2003
- 19 Open House/Information Session for Prospective Students 5:30 – 7 p.m.

Publication of the next *Focus on the GSN* newsletter

April 2003

- 1 Application deadline for Post Master's Candidates
- 17 PhD registration for Fall 2003
- 17 Sigma Theta Tau Iota Phi Chapter-at-Large Induction 7 p.m., Anna Maria College Auditorium
- 29 Excellence in Nursing Conference

May 2003

- 1 Application deadline for Master's Program
- 5-11 National Nurses Week
- 6 Dean's Clinical Scholars Colloquium
- 21 Sigma Theta Tau Iota Phi Meeting for Leadership Excellence 6 p.m., Beechwood Hotel, Worcester
- 24 PhD Commencement on the Amherst Campus
- 30 13th Annual Alumni Breakfast

June 2003

- 1 Commencement

August 2003

Publication of the next *Focus on the GSN* newsletter

focus

Graduate School
of Nursing

Produced by the UMMS Office of Public Affairs and Publications for the Graduate School of Nursing

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On the Graduate School of Nursing

"...where research, practice and service are the keystones of education."

Message from the Dean

The year 2002 has been significant in the growth and development of the Graduate School of Nursing. We've built upon our leadership capacity in the areas of research and service to invigorate our graduate nursing education programs and, with the continued expansion and nationally recognized efforts of our faculty, alumni and students, have affirmed our leadership in the development of tomorrow's nursing workforce. Let me share a few of the accomplishments that have made this a banner year in the GSN:

- The Worcester Nursing Pipeline Consortium was established to address the nursing workforce shortage through collaboration among nursing programs at all degree levels, health care systems, schools and community organizations in Central Massachusetts.
- GSN faculty and students provided more than 2,000 service-learning hours to medically underserved communities in the region.



Dean Doreen Harper, PhD, CS, ANP, FAAN

- Our GSN offices were moved and centralized into attractive, renovated space.
- The number of grants received by the GSN more than doubled between 2000 and 2002.
- A Center for Nursing Excellence was established with our clinical partner, UMass Memorial Health Care.
- A three-year federal training grant

was awarded to enhance the geriatric clinical specialty for nurse practitioners.

- Faculty published more than 18 peer-reviewed articles, two books, 10 book chapters and five policy reports and/or monographs.
- Two faculty members were awarded prestigious national awards for research and leadership and two were awarded postdoctoral fellowship opportunities.
- Four doctoral students received funded research assistantships and/or nursing scholarships.
- A partnership was initiated with the Department of Family Medicine & Community Health and the UMMS Commonwealth Medicine program to provide nursing leadership and education for health service delivery in the Massachusetts Department of Correction.

As we have expanded our research and service efforts over the past two

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Alumni Message

The response to our Oct. 17 alumni meeting and CEU program was very positive. We'd particularly like to thank keynote speaker Constance Jordan for traveling from Maine to share practical information and scenarios from her extensive experience in the treatment of anxiety and depression across practice settings.

In addition to Constance's speech, Dean Harper addressed the group, explaining how the collaboration between the Alumni Association and school encourages the growth of each and highlighting the stellar achievements of former students and current faculty.

We then turned to the "business of the meeting" and reviewed our alumni goals, which include:

1. **Enhancing collegial support** through invitations to such events as the Alumni Breakfast, Alumni Awards Ceremony, Dean's Lectureship and meetings and CEU programs, as well as the publication of this newsletter and the Alumni Directory;
2. **Promoting political advocacy**, which was challenged by many alumni who felt that the MCNP fills the political action role effectively. Promotion of some type of community service or outreach may be more appropriate for the association; and
3. **Assisting in GSN academic endeavors**, including funding scholarly presentations and offering scholarships.

Many participants offered to help review these goals; assist with the newsletter and the breakfast; act as a liaison between the school and development office; and help with establishing a phone/e-mail system. Join the excitement and your colleagues and contact us by e-mail with your thoughts and opinions.

Take care and Happy Holidays!

Jill Diana

Nursing Summer Enrichment Program for high school students

Leadership solutions for the nursing shortage

"[This] nursing program has really allowed me to see the care, power and hard work nurses go through each day of their lives to make a difference in the world. Even though doctors are key players; nurses are the most important." – Nursing Summer Enrichment Program high school student participant

The nursing shortage has been identified as a crisis in the nation's health care system. As the predictions for developing the nursing workforce worsen, the GSN has initiated leadership solutions for the recruitment, retention and preparation of the next generation of nurses.

Through the generous support of the Fairlawn Foundation, the first Nursing Summer Enrichment Program was offered last summer. A group of 15 Worcester teens were exposed to the challenges and triumphs faced daily by today's nurses as part of this inaugural course. Including clinical rotations and didactic sessions, the program was offered in partnership with UMass Memorial Health Care Nursing Service



Nursing Summer Enrichment students practicing in the nursing skills lab. From left to right, Sam Adu, Jessica Kunar and Patricia Randolph

and the Worcester Nursing Pipeline Consortium (WNPC), a collaborative effort among the GSN, Worcester State and Quinsigamond Community College to promote the recruitment, retention and advancement of professional nurses in the Worcester area.

As part of the students' exposure to nursing and the clinical experience, rotations were offered in surgical, oncology, cardiac and emergency/trau-

ma nursing. Each rotation provided learning opportunities in four different settings within each specialty, exposing program participants to an in-depth view of the continuum and complexity of the care provided. These rotations also afforded students the opportunity to observe and speak with nurses and faculty regarding their multiple roles, as well as the educational opportunities

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