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**Utilization Solutions**  
in Healthcare  
Solving the practice puzzle.

February 2013

## **Putting your Practice Puzzle Together**

*A Monthly E-Zine for Utilization Solutions in Healthcare, Inc.*



### **State & Federal Watch**

#### **More News on Medicaid PA Provider Credentialing in NC**

In both the December and February Medicaid Bulletins, DMA announced all Medicaid prescribers must be direct enrolled or their prescriptions would be rejected, effective April 1, 2013. DMA is under pressure to implement a related federal requirement that all Medicaid prescribers be enrolled by April 1. The Division of Medical Assistance (DMA) has since changed their ruling. **The Medicaid prescriber enrollment deadline of April 1 has been rescinded.** No new deadline has been established.

The North Carolina Academy of Physician Assistants (NCAPA) has continued its discussions with the Division of Medical Assistance (DMA) regarding Medicaid enrollment applications for physician assistants (PAs). Meetings also continue with health policy advisors for the NC House of Representatives. The DMA has not established a new deadline specifically requiring PAs to direct enroll. However, **it is NCAPA's recommendation that PAs begin the enrollment process.**

Read more here:

<http://ncapa.org/?newsarticle=ncapa-recommends-medicaid-enrollment>



### **Gimme The \$\$\$**

Patients often disregard cost when choosing tests for their own health care.

Dr. Chen has an interesting blog this month in the NY Times discussing research done at the University of Michigan in Ann Arbor. Most patients in the cohort did not want their doctors to take expenditures into account, and many made it clear that they would ask for the significantly more expensive medications, procedures or diagnostic studies, even if those options were only slightly better clinically than the cheaper alternatives.

This work illustrates the challenges of educating patients and implementing cost saving measures if patients do not accept them.

Read more here:

<http://well.blogs.nytimes.com/2013/02/21/getting-patients-to-think-about-costs/?ref=health>



### **Solve the Clinical Puzzle**

Calcium Supplementation May Lead to Cardiovascular Events

High intake of supplemental calcium may increase the risk for cardiovascular disease (CVD). The highest intakes of calcium (>1400 mg/day) were associated with higher all-cause risk for death (after adjustment for age, total energy, vitamin D, and calcium supplement intake, as well as other dietary, physical, and demographic factors) as compared with intakes of 600 to 1000 mg/day .

Disease-specific mortality risks were elevated for CVD at daily calcium intakes above 1400 mg. At calcium intakes less than 600 mg/day, these same mortality risks were also elevated. None of these patterns was apparent for mortality from stroke.

Women with the highest intake of calcium (>1400 mg/day) and who used supplement tablets had an all-cause risk for death 2.5 times higher than women who had similar total intakes but were not taking a supplement.

Read more:

<http://www.virtualmedicalcentre.com/news/high-calcium-supplementation-linked-to-heart-disease-death-risk/18366>

## Your 2 cents - Are your PAs credentialed with Medicaid/DMA?

Participate in this months industry poll by simply [clicking here!](#)



## Our Solution for You

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[Click here](#) to view the PA/NP Integration Package

## MEDIA

Our blog is live at CompHealth - Check our contributions out here!

<http://www.comphealth.com/blog/post/180/How-PAs-and-NPs-help-patient-visit-growth-goals>

Kind regards,

*Lisa*



Lisa Shock is a Duke University Physician Assistant graduate and has greater than 10 years of clinical experience in a variety of healthcare settings. In addition to previously owning and running a rural primary care clinic, she is the current president and CEO of Utilization Solutions in Healthcare, a company she created in response to the many questions she has received over the years about Physician Assistant utilization.

Lisa is a past president of the North Carolina Academy of Physician Assistants. She also contributed to the Physician Assistant profession by serving on the PA Advisory Council of the North Carolina Medical Board as well as the Quality Improvement and Health Information Technology Committee of the North Carolina Medical Society, and she remains a state PA expert in reimbursement and legislative issues. She enjoys part time clinical primary care practice and enjoys teaching geriatric medicine and long term care as a Duke PA Program faculty member.

Lisa was recently interviewed on Blog Talk Radio - [listen here!](#)

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