

2016 MAG House of Delegates

Appendix II of the Consent Calendar  
MAG Policies for Sunset  
As adopted by the House of Delegates

280.993 Physicians and Long-Term Care Patients -- HD 5/1/1995

MAG encourages physicians to continue treating their patients in long-term care facilities. (Reaffirmed 9/30/2006; 10/16/2011)

290.987 Physician Assistant Medicaid Billing -- EC 5/1/1997

MAG strongly opposes the billing of Medicaid for physician assistant services using the two highest complex level physician office visit codes. (Reaffirmed 9/30/2006; 10/16/2011)

450.999 GHA CARE Program Participation -- HD 4/1/1993

MAG urges hospital medical staffs and county medical societies to actively participate in the evaluation of the Georgia Hospital Association CARE Program, including participating in the selection, measurement and use of quality indicators and outcome measures, particularly regarding economic credentialing. MAG affirms that the medical staff is an integral component of any medical quality of care activity, including Continuous Quality Improvement (CQI) and/or Total Quality Management (TQM) systems; MAG asks medical staffs to incorporate CQI/TQM activities into the peer review sections of their medical bylaws; MAG recognizes that serious concerns, including the validity of the data and confidentiality, remain about the implementation of CQI/TQM as it relates to medical practice; MAG works with county medical societies and medical staffs to facilitate physicians' understanding and education in CQI/TQM activities; and MAG will continue to communicate to medical staffs involved in the GHA's CARE pilot programs concerning their position and educational opportunities for physician-directed performance assessment monitoring systems. (Reaffirmed 05/2000; 05/2001; 09/30/2006; 10/16/2011)

450.993 GHA Partnership for Health and Accountability(PHA) -- EC 8/3/2001

MAG's participation in the Partnership for Health and Accountability does not constitute an endorsement of the partnership. (Reaffirmed 9/30/2006; 10/16/2011)

530.884 Third Party Payer Services -- EC 07/24/2011

MAG shall follow the following guidelines for MAG/Specialty Society Third Party Payer Services: 1) Each participating specialty society will pay MAG a fee of \$2,500 per year; 2) MAG will charge a recovery fee of 10 percent for MAG/Specialty Society members and 25 percent for non-members; 3) If a practice that includes non-MAG/Specialty Society members submits claims for assistance, the individual physician's claims will serve as the basis for the recovery fee (e.g., if Physician A is a member and Physician B is a non-member, the recovery fee for Physician A would be 10 percent while the recovery fee for Physician B would be 25 percent); 4) Practices must exhaust every contractual remedy and appeal before submitting a claim to MAG; 5) Claims information submitted to MAG must be in an electronic format and must include i) a record of every attempt to collect the unpaid claims ii) a brief synopsis of the issue and iii) all supporting documentation; 6) Practices must execute business associate agreements and other applicable legal documentation as required by the state and federal government to ensure the privacy rights of patients; 7) MAG will not collect money from patients. MAG will only collect money from public and private payers; 8) MAG does not offer legal advice or practice management training; 9) MAG will provide members with up to one hour of claims recovery staff support at no charge; MAG will refer practices to an outside attorney for consultations that require more than one hour of staff time, and the practice will be responsible for any fees that are required by the referral attorney. MAG will not collect a fee for this referral.