It’s a fact of life - in addition to sound clinical judgment, a well-run practice in today’s environment requires the application of sound business practices.

In response to member requests for additional assistance in dealing with today’s challenging practice management environment, the MSV has re-organized its Practice Advocacy section. The result of the reorganization is a new entity - the Management Advocacy Group. Formation of the Management Advocacy Group (MAG) represents a major initiative for the Medical Society of Virginia. The Management Advocacy Group was created with the mission to assist members with the myriad of issues involved in running a medical practice, by providing consulting advice, educational seminars and on-going advocacy efforts.

“Our member physicians have asked for this type of service and now the MSV has delivered,” said Hazel Konerding, MD, president of the MSV.

continued on page 3

The Management Advocacy Group. From left to right: Rose Moore, Jeff Buthe, Tami DeLuca, and Robert Bethke.
Are you certain that you have the best insurance coverage for the best price? Is your insurance coverage designed exclusively for physicians? Are your diverse insurance needs met by one centralized and convenient agent? If you can’t answer “Yes” to all of these questions, then you need to call the Medical Society of Virginia Insurance Center.

We’re your insurance specialists. We work exclusively with Virginia physicians, offering plans tailor-made to cover all of your insurance needs, from group health, dental and disability, to malpractice, to business owners policy insurance. A Board of Directors composed of physicians and practice managers oversees our operations. And as a wholly-owned, for-profit subsidiary of the Medical Society of Virginia, we return MSVIC’s profits back to the MSV.
Management Advocacy Group

continued from front page

MSV. “This will truly benefit our members in an area of their practice where they need it most.”

The MSV went in search of additional personnel that would complement current staff and provide a solid foundation on which to build the Management Advocacy Group. “We have brought staff on board that has a wide range of experiences,” said Mike Jurgensen, Director of Health Policy and Medical Economics at the MSV. “This will allow us to expand the services we can provide to our membership.”

Much of the daily activity by MAG and MSV staff involves intervening on behalf of physicians on a variety of issues - Hassle Factor Logs, HIPAA, and legislative policy issues.

For some time, MSV members have asked that additional management resources be made available to them. The Management Advocacy Group responds to these requests and is available to provide assistance through consulting engagements, seminars and ongoing advocacy activities. Priced at competitive rates, the MAG is prepared to assist practices with consulting activities ranging from practice start-ups, documentation and coding assessments, accounts receivable analysis, policy and procedure manuals to a complete practice assessment. Consulting services are offered exclusively to individual members and multi-physician practices with 50% or greater MSV membership.

The Management Advocacy Group will produce seminars intended to educate physicians and their staff members on topics they can use to improve the day-to-day operations of their practices. Seminars are being scheduled around the state on topics such as Certified Medical Office Manager, Coding and Billing 101 and 102, Front Desk Operations, Practice Management 101, HIPAA Updates and Managed Care Contracting.

In addition to the consulting and seminars, the MAG will continue its advocacy efforts on behalf its membership. Much of the daily activity by MAG and MSV staff involves intervening on behalf of physicians on a variety of issues - Hassle Factor Logs, HIPAA, and legislative policy issues. “We have established relationships and long-standing dialogues with every major payer in Virginia” says Rose Moore, Physician Practice Advocate. “We want to hear from our members when they have issues with payers. We are often times able to get the payer to act in situations where the practice has been unsuccessful.”

A case in point, recently Tami DeLuca was asked to help a family practice with a problem it was having with a major carrier in Virginia. Within 48 hours, DeLuca had intervened and helped to resolve the problem. “Because of Tami’s diligence and sincere interest in my problem, I am glad to report that on August 11, 2003, I received the long overdue check,” wrote the practice manager of the family practice.

If interested in speaking with a member of the Management Advocacy Group or learning more about how the MAG can benefit your practice, you may contact them at 804-377-1060 or e-mail them at MAG@msv.org.

The Management Advocacy Group (MAG) Staff (pictured on front cover):

Rose Moore is a well-known member of the MSV staff. Her extensive experience in practice operations has positioned her well as someone uniquely qualified to conduct seminars on a wide range of office topics. She holds several certifications including Professional Coder, Compliance Professional, Medical Office Manager, and Medical Insurance Specialist.

Jeff Buthe has been a health policy analyst with MSV for the past three years. Buthe is the resident expert on HIPAA and an integral member of the MSV policy team. Jeff’s technical knowledge of HIPAA and familiarity with Virginia law as it pertains to physician practices has made him a sought out member of the MAG.

Tami DeLuca joined the MSV in April. DeLuca comes to the MAG with a background in coding. She has held positions with Virginia Cardiovascular Specialists, HCA Healthcare and Bon Secures. Tami is both a Certified Professional Coder and a Certified Coding Specialist - Physician. She has been active in Hassle Factor logs, coding questions, documentation and coding assessments, and speaking to groups about coding and reimbursement issues.

Robert Bethke came to the MSV from the University of Virginia where he managed a network of primary care practices. His background is in practice operations and finance and he holds a Masters in Health Administration.

“We want to hear from our members when they have issues with payers. We are often times able to get the payer to act in situations where the practice has been unsuccessful.”

– Rose Moore, Physician Practice Advocate
These are tough times for Physicians. The economy is struggling. Your earnings are being battered by declining reimbursements, rising practice costs and a weak economy. Now, you face higher medical malpractice premiums or, worse yet, insurance availability problems.

That’s why you should depend on Professionals Advocate (ProAd). As a company founded by one of the oldest and most respected Physician-owned and directed insurers in the country, we’re here for the long haul to fight your battles. We have the stability, financial strength and commitment to do it. In fact, as other insurers have withdrawn from the state, we are continuing our efforts to serve the Virginia Physician community. And we’re rated "A-" (Excellent) by A.M. Best, the nation’s leading rating agency.

We all face the consequences of the nationwide trend toward increasingly severe malpractice claims. But, you can be confident ProAd will be there with you, serving as a dependable ally, aggressive defender and tireless advocate.

Learn more about the ProAd Advantage. Call for a no-obligation quotation from a ProAd representative conveniently located near you.
Later this month the Medical Society of Virginia will hold its 156th Annual Meeting which is entitled: “Tort Reform: The Only Answer?”

This year’s Annual Meeting will take place at the Norfolk Waterside Marriott on October 23-26 and will include the installation of Mitchell Miller, MD, as MSV President, as well as the Second Annual Gala to benefit the MSV Foundation and its health improvement and health access initiatives.

For Saturday morning’s educational session, speakers participating include: Gerald Hickson, MD, of Vanderbilt University, speaking to the relationship between patients’ complaints and malpractice risk; Nancy Udell, of Common Good, advocating a new system of medical justice; and John McCammon, of the McCammon Group in Richmond, addressing mediation issues. In addition to Saturday’s session, there also will be an additional educational seminar on Thursday afternoon entitled: “Practice Assets and Estate Planning: Myths and Realities.”

The MSV Women Physicians’ Section also will host a luncheon and speaker as a complimentary program entitled: “How to Manage Your Practice and Stay Out of the Courtroom.” The program will be presented by Joan Roediger, JD, LLM, who practices in Philadelphia, PA with the firm of Obermayer, Rebmann, Maxwell & Hippel, LLP and specifically works in their Business and Finance Department and Health Care Practice Group.

All members of the MSV are invited to attend this gathering. It’s a great way to discuss medical matters of importance with your colleagues from across Virginia and an opportunity to voice your opinion on various political matters concerning the practice of medicine. You may want to think about bringing your entire family as there is much to do in the Norfolk/Tidewater area such as world-class shopping, fabulous museums and exquisite dining on local seafood delicacies.

Be sure to check out the MSV website (www.msv.org) for more detailed information on the Annual Meeting.

All members of the MSV are invited to attend this gathering.

It’s a great way to discuss medical matters of importance with your colleagues from across Virginia and an opportunity to voice your opinion on various political matters concerning the practice of medicine.
The Commonwealth of Virginia is one of only two states that will hold state elections in 2003 (NJ is the other). And while the races this year should prove interesting, they pale in comparison to the historic magnitude of the 1999 installment where the majority control of the Virginia Senate and House of Delegates hung in the balance. Despite the relative ho-humness of 2003’s races, there are a couple of hot races to keep your eye on.

Let’s start with open seat contests. There are a total of fifteen open seats this year due to two main reasons - retirements and redistricting. The General Assembly lost some of its longest serving members this past year, including Chip Woodrum (D-Roanoke), Vic Thomas (D-Roanoke), Dr. George Broman (Culpepper), Jeannemarie Devolites (R-Fairfax; running for Senate), Jim Almand (D-Arlington), Karen Darner (D-Arlington), Winsome Sears (R-Norfolk), Mary Christian (D-Hampton), Flora Crittenden (D-Newport News), Bob Bloxom (R-Accomack), Henry Maxwell (D-Newport News), Bo Trumbo (R-Fincastle), Kevin Miller (R-Harrisonburg) and Leslie Byrne (D-Falls Church).

Twelve of the open seat contests feature two major party candidates and two races have at least three candidates. In the 92nd House District, Dr. Alvin Bryant (R), a Hampton surgeon, is vying for the second time to represent his constituents and his profession in the Assembly. Dr. Bryant lost a hard-fought contest two years ago to incumbent Mary Christian, who has since retired. Dr. Bryant’s campaign is well organized and poised to emerge from the fray on Election Day. In the 2nd Senatorial District (Newport News), three people are angling for the seat held by retiring Senator Henry Maxwell. Mamie Locke (D), Phil Bomersheim (R) and Joyce Hobson (I) will duke it out in an interesting Tidewater contest.

Only sixty of the 140 November 4th races have two candidates competing. While the state is nearly balanced politically, legislators here, like others across the U.S., have redistricted the
Commonwealth into “safe” Democratic and Republican voting areas. In some instances, only token opposition will be offered. By most estimates, as few as eight to twelve of the fall elections will be party-competitive. Despite this, medicine’s votes could have a sizable impact on several key contests. Even more important, we need to vote for supportive legislators and send the others a message.

One of the two-party, competitive races to keep your eye on throughout the fall into November is found in the Senate’s 7th District. Former State Senator and family physician Clarence A. “Clancy” Holland is making a comeback against incumbent Frank Wagner (R), vying for the seat he once held in Virginia Beach.

When all is said and done and the dust settles on November 5th, no matter who is elected to office, medicine must continue to forcefully but effectively lobby for our patients, our profession and our future. Anything less is a disservice to the Commonwealth as a whole. REMEMBER TO VOTE ON NOVEMBER 4th!

To view a full list of candidates, visit the State Board of Election’s website: 
http://www.sbe.state.va.us/Election/Candidates/Lists/

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**Politics 101**

**Hosting a “Meet & Greet” for Candidates**

With all 140 seats of the General Assembly up for election this November and a number of faces new to the political landscape, one thing you can count on is they all want to get out and meet as many voters as possible. This political fact of life lends itself nicely to the old adage - KISS or Keep It Simple Stupid! Remember, an incumbent legislator’s top job is to get re-elected! And for folks running for office for the first time, making connections with as many voters as possible is the name of the game. To that end, a very productive and cost-effective way to accomplish this is by hosting an informal “Meet and Greet” in your home. This style of event is not as labor intensive as hosting a fundraiser in your home or putting together a local legislative event, but just as beneficial.

Start by contacting the legislator or candidate of your choice in your district and offer to host the “Meet and Greet” in your home or wherever the candidate feels comfortable. Invite friends and neighbors for coffee & dessert and to “Meet the Candidate.” This is a great opportunity to hear where they stand on issues related to medicine, but also their views on issues such as taxes, the environment, public education and so on. By crystallizing a relationship with the candidate in this manner, it is quite likely that you will be remembered and called upon in the future. In essence, you will have the candidate’s ear on future events.

If you are interested in hosting one of these events, please contact the Legislative Department at MSV and they will be happy to provide assistance.

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**VAMPAC and AMPAC Online**

You can now pay your AMPAC and VAMPAC dues online. Through this user-friendly website, Virginia physicians can now use www.ampaconline.com to contribute to VAMPAC. Just click on www.ampaconline.com to help further medicine’s political voice.

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**VAMPAC Today!**

As January 14, 2004 looms ever closer, the Medical Society of Virginia and VAMPAC are preparing to battle for Virginia’s physicians at the 2004 General Assembly. But VAMPAC needs your assistance. In order to continue to be effective and advocate for the patients and physicians of Virginia, we need your contribution today. We need it to replenish our well expended funds to ensure VAMPAC will continue to be a defining factor in the legislative and regulatory arenas that affect your practice — at the business and clinical levels — every day of the year.

Please complete the form below and return it TODAY. Your corporate or personal contribution of $150, $250, $500 or $1,000 will go a long way in continuing the fight for all of Virginia’s physicians.

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**VAMPAC Membership Form**

**Annual Contribution Categories**

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Your donation may be corporate or personal. Make your check payable to VAMPAC.

Amount enclosed $ __________

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Card Number: ____________________________

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VAMPAC is a segregated fund established by the Medical Society of Virginia. Voluntary political contributions by individuals may be personal or corporate. Contributions are not linked to the suggested amount. Neither VAMPAC nor its AMA affiliate, AMPAC, will favor or disfavor anyone based upon the amount of or failure to make, any contribution. A portion of your contribution will be forwarded to AMPAC to support candidates in federal elections. Contributions to VAMPAC and AMPAC are not deductible as charitable contributions for federal tax purposes.

VAMPAC
4205 Dover Road
Richmond, Virginia 23221
800-746-6768 • (804) 353-2721
Fax: (804) 355-6189
www.msv.org
2005 Statewide Preview - Two Years Away, But Right Around the Corner

Governor

The 2005 gubernatorial race is already fully engaged. Favorites for their parties’ nominations are Democratic Lieutenant Governor Tim Kaine and Republican Attorney General Jerry Kilgore. Others may emerge, but Kilgore and Kaine are veritable shoo-ins for their parties’ nod.

Lieutenant Governor

Republican State Senator Bill Bolling (Hanover) is a serious contender who has been traveling statewide for over a year to drum up support. Delegate Jeannemarie DeVolites (Fairfax) is also rumored to be considering a bid. Democratic State Senators Creigh Deeds (Bath) and Phil Puckett (Tazewell) are often mentioned as likely candidates. Delegate Viola Baskerville (Richmond) is also rumored to be considering a candidacy. Willy Smith, a highway contractor and Democratic activist, is reportedly considering a bid.

Attorney General

The GOP short list includes Delegates Bob McDonnell (Virginia Beach) and Dick Black (Loudon), and Richmond attorney Steve Baril, son-in-law of the late Gov. John Dalton.

Roanoke Senator John Edwards is making a second try for the Democratic nomination and Delegate Brian Moran of Alexandria is often mentioned as a strong contender.

Commonwealth Political News Bits

Republican Party of Virginia Chairman Gary Thompson pleaded guilty to a misdemeanor in federal court on August 12th for his role in the GOP eavesdropping scandal that had already claimed former executive director Ed Metcalf. Under a plea agreement reached with federal prosecutors, Thomson was fined $2000, put on supervised probation for two years and resigned his post as Chairman. Michael E. Thomas will serve as acting party Chairman until the state Central Committee meets to choose a successor.

Democratic Party of Virginia Chairman Lawrence H. Frame III has appointed Lindsey Reynolds as the party’s executive director. She has been acting executive director since June. Reynolds began her career in Virginia Democratic Party politics in 1998, when she was legislative assistant to Stanley C. Walker of Norfolk, then President pro tempore of the Virginia Senate. In 2000, she became the finance director for the Joint Democratic Caucus and in March 2002 became the finance director for the state party. In addition to her duties as executive director, Reynolds will continue as finance director and the fundraiser for the joint Democratic Caucus through the November elections. She is a 1998 graduate of Virginia Wesleyan College, where she received a Bachelor of Arts in political science.

The Doctors Company

Can a malpractice insurance company be this protective?

In a world where insurance companies often choose settlements instead of aggressive defense, The Doctors Company prides itself on vigorously putting your reputation first. That’s why, when plaintiffs filed over 1,000 breast implant claims against physicians covered by The Doctors Company, none resulted in verdicts against the doctors. Protection both comforting and ferocious—what else would you expect from a medical malpractice insurance company called The Doctors Company? To learn more, visit us on the Web at www.thedoctors.com or call us at (800) 862-0375.
The Virginia Medical News publishes medical news from around Virginia. If you have any information you would like to contribute, please contact Christy Jenkins at (804) 353-2721 ext. 1025, fax (804) 355-6189 or e-mail at cjenkins@msv.org. The deadline for December submissions is October 25, 2003.

**HIPAA Deadline Nears**

The compliance deadline for HIPAA’s electronic transaction and code set standards is October 16, 2003. On that date, electronic claims and other electronic healthcare transactions must be conducted in a standard format established by HIPAA. It is important that physician practices determine the readiness level of their clearinghouses, software vendors, health plans and others that play a role in electronic healthcare transactions.

The process of becoming HIPAA compliant involves detailed modifications to computer systems and thorough testing between trading partners. If your clearinghouse is not adequately modifying its system and testing with the health plans that pay your claims, then you are at risk of disrupted cash flow on and after October 16 deadline. Many trading partners have not yet initiated contact with each other to begin the testing process. For this reason, the Centers for Medicare and Medicaid Services (CMS) has issued guidance stating that it will initially use a flexible enforcement approach.

In essence, this CMS guidance allows covered entities some flexibility in their initial application of the standards. For example, some health plans will continue to accept electronic claims that are not HIPAA compliant for a period following the October 16. Some health plans will allow practices to submit paper claims if they are not able to send HIPAA compliant electronic claims. Practices should identify the potential risk of disrupted cash flow for each major payor and may need to obtain a line of credit as an insurance measure.

For more information contact Jeff Buthe at (804) 377-1035 or jbuthe@msv.org. For information from CMS, including a checklist of questions to ask clearinghouses, software vendors, and other trading partners, please visit the following website: http://www.cms.gov/hipaa/hipaa2/default.asp

**Blanchard Joins Foundation Board**

Former MSV President Lawrence Blanchard, MD, has agreed to serve on the Medical Society of Virginia Foundation’s Board.

Blanchard, former president of the Richmond Academy of Medicine, also currently serves on the Board of the Medical Society of Virginia Insurance Center.

He is a Richmond dermatologist and will serve a three-year term on the Foundation’s Board.

**Legislative Reception Date Change**

Due to prior commitments by state legislators it has become increasingly more difficult for them to make it to the MSV Legislative Reception on the Tuesday night BEFORE the session convenes. The Medical Society has decided in order to entertain more state lawmakers it would be worthwhile to switch the date to the first Monday AFTER session starts. Mark your calendars now, the 2004 Legislative Reception at the Virginia Historical Society will be held Monday, Jan. 19, 2004.

**MSV Foundation Welcomes New Staff**

The MSV Foundation is pleased to announce the promotion of Alyssa Georgelas to the position of Tar Wars Virginia State Coordinator, and the addition of Robin Clair as Assistant State Coordinator. Alyssa has been with the Tar Wars tobacco-free education program since last fall, and is largely responsible for its remarkable achievements in recruiting volunteer providers and participating schools in the East, North East, and North Central regions of the state. She will be assisted in her efforts this year by Robin Clair, a 2003 graduate of James Madison University with a Bachelor of Science in Health Services Administration. Robin is formerly an intern with the MSV policy department, and has had experience working in private practice and a community hospital. Both Alyssa and Robin are excited about the 2003-2004 school year and look forward to working with volunteers from the medical community to educate students about choosing healthy and tobacco-free lifestyles!

The Foundation also is pleased to announce that it has hired Melissa King to serve as its part-time Director of Programs. A graduate of the College of William and Mary’s Master in Public Policy program, Melissa brings with her consid-
erable health policy experience, having worked for the Virginia General Assembly’s Joint Legislative Audit and Review Commission and the Virginia Health Care Foundation. She will oversee the Foundation’s Free Clinic Medical Directors’ initiative, Antibiotic Resistance Awareness Campaign, and its small grants program.

**Dr. Hofford Appointed Residency Director**

Roger A. Hofford, M.D., appointed residency director of the Carington Family Medicine Residency in Roanoke, Virginia, as of October 1, 2003. Dr. Hofford is a past president of Virginia Academy of Family Physicians and served as a delegate to the Medical Society of Virginia. He replaces Dr. Aubrey Knight who accepted the position of Chair of Geriatrics at Edward Via Virginia College of Osteopathic Medicine starting October 1, 2003.

**DRchip Receives International Recognition**

The Dan River Region Cardiovascular Health Initiative Program (DRchip) has been selected as the 2003 recipient of the International Society of Hypertension in Black’s (ISHIB) Outstanding Community Service Award. The Award was based on DRchip’s community work to bridge the gap of health disparities among ethnic minority populations.

ISHIB is an international, non-profit, professional, medical membership society devoted to improving the health and life expectancy of ethnic populations. ISHIB’s focus includes hypertension, diabetes, stroke, lipid disorders, renal disease, and other related cardiovascular diseases.

The 2003 ISHIB Outstanding Community Service Award will be formally presented during its annual international interdisciplinary conference, which will be held in Ghana in December.

**Spotlight on Benefits MedJet Assistance**

Emergency medical transport from anywhere in the world, MedJet Assistance is a membership program for people who travel for business or pleasure, in the United States or abroad.

As a MedJet member, if you become ill or are injured and are hospitalized anywhere in the world, MedJet will fly you to your home hospital (or to the hospital of your choice) in a medically equipped and staffed jet. No travel insurance program or platinum card benefit guarantees this level of service. Enroll now by calling 1-800-9-MedJet or log onto www.medjetassistance.com to inquire the service offered to you. As a member of the MSV you will receive a discount off their published rates.
Does your practice have credit balances on your patients’ accounts that are six months, one year or even older? Don’t worry; your practice is not alone. A very common occurrence in almost every medical practice today is to continue to have credit balances on patient accounts that are over a year old. But, what are these practices to do? Typically, the practices have continually tried contacting and returning their overpaid fees to either the patients themselves or even the patients’ insurance companies. However, apparently, these other parties don’t recognize or realize that they are actually due a refund from their practitioner. This accounting dilemma respectively yields to the question of “How long should a medical practice continue to keep their patient’s credit balances (refunds) on record in their financial statements?”

Well, the answer isn’t as easy as one may want it to be. According to the Virginia Department of Treasury, any refund or credit balances due to any patient that has not been successfully returned may be considered “Unclaimed Property.” Therefore, these payments may instead, by law, be payable and reportable to the State of Virginia as addressed in accordance with the Uniform Disposition of Unclaimed Property Act, Title 55, Chapter 11.1 Sections 55-210.1 - 55.210.30 of the Code of Virginia.

The Virginia Code states that Unclaimed Property can include: savings and checking accounts, wages or commissions, underlying shares, dividends, customer deposits, credit balances, gift certificates, credit memos, refunds, etc. It also states that this property becomes unclaimed when the holder (i.e. a medical practice) has not had contact with the owner (i.e. the patient or their insurance company) for a specified period of time according to the state’s charts. After this specified period of time (which varies by property type) the holder is then required to report and remit the unclaimed property to the State of Virginia on Form AP-1 and Form AP-2.

However, before any property is reported to the state by the holder, due diligence is required when the property as a value of $100 or more. This means that they must mail a first-class mailing to the owner’s last known address informing them of the dormant status of the property (Section 55-210.12(e)). The state is then required (Section 55-210.13) to publish the owner’s names in the newspaper annually.

Finally, it is very important to note that the annual submission reports that a business/medical practice (not including insurance corporation type businesses) is required to file relating to Unclaimed Property are actually due on or before November 1st of each year and not December 31st. These November 1st filings report the balances of the business from the previous June 30th time frame. Also note that if a holder fails to report or remit these balances on the required forms by the statutory due date, the holder shall pay interest and a civil penalty up to $1,000 for each day the report and remittance is withheld up to a maximum of the lesser of $50,000 or 100 percent of the value of the property.

It can be very confusing and even frustrating for a practice manager or owner to understand all of the above Code Sections and applicable rules. However, these rules are very important to understand before a practice can eliminate any patient credit balances from their financial statements. Therefore, if a practice is uncertain as to whether or not the above Act applies to them, they can contact the Virginia Department of Treasury - Division of Unclaimed Property at (804) 371-6244 or visit their website at www.trs.state.va.us/frames/ucp_index.htm. Or call Steven Piascik at (804) 527-1817.

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**Keep Medicine Strong**

Be on the lookout for your 2004 invoice to renew your MSV and AMA membership.

The MSV will be mailing them out to member physicians soon!
Q: Lately, I have heard horror stories of employees who have been caught embezzling or stealing from their practices. How can I prevent this from happening in my practice?

A: Cash transactions can be very tempting. Don’t give anybody complete control over cash transactions. Give only key employees access to cash. Segregate financial transactions so employees who keep practice accounting records don’t handle receipts or disburse cash. If this is impractical, review all work at least quarterly.

Consider requiring business office employees to be bonded. Hire an outside accounting agency to perform periodic financial audits. Check references and perform background checks before hiring and employee. Embezzlement controls should extend to policies for writing checks and handling bank statements, incoming checks, and payroll.

Q: Can a practice use symbols or shorthand in their documentation?

A: Yes. Be sure to have a legend of the symbols or shorthand. Always send a copy of the legend along with any request from insurance carriers for documentation.

For more information on Management Advocacy Group (MAG) Services, call (804) 353-2721 ext. 1060 or email us at MAG@msv.org.