

Jan. 12, 2011

AMA/FEDERATION NEWS: National headlines, grassroots news and important AMA announcements for Federation executives and communicators.

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TOP STORIES

1. Medicare participation deadline extended to Feb. 14

The Centers for Medicare & Medicaid Services (CMS) has announced a six-week extension to the annual Medicare participation enrollment period, which was scheduled to conclude Dec. 31. Physicians' Medicare participation elections or withdrawals must be postmarked on or before Feb. 14.

This extension comes as Congress averted a 27 percent cut in physician Medicare payments that was scheduled for Jan. 1, preventing the cut for two months as lawmakers work on a longer-term agreement. Although the two-month patch averted the 27 percent Medicare payment, other changes that were included in the final rule for the 2012 Medicare physician payment schedule will still take effect on Jan. 1.

While participation status changes can be made into February, the effective date for these changes remains Jan. 1. Payment rate and other changes associated with becoming a non-participating physician will be retroactive to Jan. 1.

Physicians can visit

<http://www.elabs10.com/ct.html?rtr=on&s=x8pbgr,uwtn,2ke5,6mfh,5xmi,hckp,f56> to use the AMA's Medicare Participation Kit for assistance evaluating their participation options.

2. New EFT standard could reduce paperwork, save up to \$4.5 billion

The Department of Health and Human Services (HHS) has adopted a new standard for electronic funds transfer (EFT) transactions that reflects many of the AMA's recommendations. According to HHS, this industry-wide standard could save as much as \$4.5 billion in administrative costs over the next decade.

The new standard, which health plans must comply with no later than Jan. 1, 2014, creates a tracking system that will simplify the current manual process of reconciling payments. Health plans will be required to use a trace number that automatically matches EFT payments with the remittance advice that explains the payment—regardless of whether the payment and remittance advice were sent together.

The AMA is reviewing HHS's interim final rule on the EFT standard in detail and plans to issue comments.

Visit <http://www.elabs10.com/ct.html?rtr=on&s=x8pbgr,uwtn,2ke5,dvwp,bg11,hckp,f56> to read more in AMA Wire.

3. New AMA study shows cost burden of U.S. medical liability system

Medical liability insurance premiums in many states remain higher than they were during the height of the last medical liability crisis, according to a new report from the AMA.

The AMA released the report last month as part of its Policy Research Perspective series. Analyzing medical liability insurance premiums from 2004 to 2011 gathered from the Annual Rate Survey Issues of the Medical Liability Monitor, the report found that physicians continue to face the high costs of insuring themselves against medical liability claims.

About 5 percent of premiums increased by 10 percent or more in 2011, the largest proportion of upward premium changes since 2007, when 8 percent of premiums increased by 10 percent or more.

"We all pay the price for our broken medical liability system and the direct effect it has on the cost of medical care," AMA President Peter W. Carmel, MD, said in a news release.

Visit <http://www.elabs10.com/ct.html?rtr=on&s=x8pbgr,uwtn,2ke5,scn,9ff3,hckp,f56> to read more in AMA Wire.

FEDERATION NEWS

4. Texas court prohibits chiropractors from performing complex medical test

A Texas court ruled last month in favor of patient safety, voiding a Texas State Board of Chiropractic Examiners rule that declared vestibular testing—a complex medical test—within chiropractors’ scope of practice.

The court’s decision supported the Texas Medical Association’s (TMA) position that the diagnostic test dealing with the inner ear and the entire nervous system can only fall within the scope of practice for qualified physicians.

“We’re glad the Texas courts protected Texas patients from a complex test that only those who have the skills, training and expertise should provide,” TMA President C. Bruce Malone, MD, said in a news release.

Visit <http://www.elabs10.com/ct.html?rtr=on&s=x8pbgr,uwtn,2ke5,9gc8,foyf,hckp,f56> to read the TMA news release.

5. AAFP offers grants for obesity projects in family medicine residency programs

Nine family medicine residency programs across the country are receiving grants to fund projects that will help reduce childhood obesity in their communities.

The American Academy of Family Physicians’ (AAFP) American In Motion-Healthy Interventions program has partnered with the MetLife Foundation on this initiative to provide \$250,000 in funding.

These grants come at a critical time as childhood obesity rates have reached a new high, with nearly one in three children overweight or obese. By focusing on fitness, the residency projects aim to help children lead active, healthy lifestyles and reduce their risk of developing chronic conditions.

“Obesity is an incredibly difficult condition to treat. These projects will help ensure that family medicine residents are learning the most effective ways to prevent childhood obesity,” AAFP Foundation President Richard G. Roberts, MD, JD, said in a news release.

Visit <http://www.elabs10.com/ct.html?rtr=on&s=x8pbgr,uwtn,2ke5,8dn,19f4,hckp,f56> to read the AAFP news release.

6. GAO recommends formal guidance on mental health needs of children in foster care

A recent Government Accountability Office (GAO) recommendation would establish formal guidance for state welfare agencies regarding best practices in monitoring psychotropic medications for children in foster care.

The proposal uses a position statement by the American Academy of Child and Adolescent Psychiatry (AACAP) on the issue, but the physician organization is calling for studies on other

treatment options as well. The AACAP also emphasizes the importance of evaluating systemic issues that may prevent optimal treatment of these children.

“The use of coordinated community-based services should also be implemented to ensure comprehensive care, resulting in a unique set of services and supports individualized for that child and family,” AACAP President Martin Drell, MD, said in a news release.

According to the AACAP, as many as 85 percent of children in the welfare system meet criteria for a psychiatric diagnosis. The organization underscores the importance of early detection, assessment and treatment for this vulnerable population.

Visit <http://www.elabs10.com/ct.html?rtr=on&s=x8pbgr,uwtn,2ke5,8kyd,2a4f,hckp,f56> to read the AACAP news release.

PUBLIC HEALTH

7. AMA report stresses need for credible ambulatory patient safety research

While evidence suggests that a substantial percentage of patient injuries and deaths occurs in outpatient care, a new AMA report points to a lack of reliable data necessary for improving ambulatory patient safety.

The report reviews research on ambulatory patient safety from 2000 to 2010, examining medication safety, diagnostic errors, office-based surgery and anesthesia, the patient role in care and communication safety. Major gaps were found in the medical profession’s understanding of ambulatory safety, highlighting a need for credible studies that can show how to improve safety in outpatient care.

“The AMA is pleased to add our new report to the discussion on this critical topic, which is especially timely, as ambulatory care will play an increasingly important role in optimizing quality and cost in new health care delivery models,” AMA President Peter W. Carmel, MD, said in a recent article in American Medical News.

Visit <http://www.elabs10.com/ct.html?rtr=on&s=x8pbgr,uwtn,2ke5,2tbq,30v2,hckp,f56> to read more in AMA Wire.

8. Unmet social needs worsen health

A recent survey by the Robert Wood Johnson Foundation found that 82 percent of physicians said patients frequently express health concerns caused by unmet social needs that are beyond their control as physicians, according to an article in American Medical News this week.

The survey also found that 74 percent of doctors report that these unmet needs often prevent them from providing quality medical care, American Medical News reports.

Social factors that doctors said have the most negative impact on their patients' health include a lack of education about how to make health decisions and a lack of motivation to follow through with the needed lifestyle changes, as well as inadequate access to mental health services and low household income, American Medical News reports.

Visit <http://www.elabs10.com/ct.html?rtr=on&s=x8pbgr,uwtn,2ke5,54dh,c29j,hckp,f56> to read the full article in American Medical News.

ANNOUNCEMENTS

9. New online forum lets AMA members discuss key topics, find advocacy resources

As Congress prepares to resume its debate about Medicare physician payment, AMA members can access talking points on repealing the Medicare sustainable growth rate (SGR) formula and learn more about the AMA's advocacy efforts toward this end by participating in the new Advocacy Forum.

Open to AMA members only, this online forum gives AMA physician and student members an opportunity to comment in a secure environment on Medicare physician payment reform and other pending federal legislation that will impact the practice of medicine.

AMA members can play an active role in AMA advocacy by using the newly posted SGR talking points, which explain the costs of maintaining the SGR, possible funding for repeal and the implications of one- and two-year patches. In addition, forum participants can access links to news about Medicare physician payment and other topics of interest to physicians.

AMA members can visit

<http://www.elabs10.com/ct.html?rtr=on&s=x8pbgr,uwtn,2ke5,8h4r,90xv,hckp,f56> to join the forum, where they will be asked to use their AMA login account. AMA members who do not have a login account can create one.

10. Brochure helps patients understand their Medicare wellness benefits

A new brochure from the AMA and AARP helps physicians encourage their Medicare patients to take full advantage of the preventive and wellness services available to them.

The "Team Up to Stay Healthy" brochure, produced in collaboration with the Centers for Disease Control and Prevention, helps physicians clearly communicate with their patients about how and when to receive preventive services, what is covered and charged, and the overall importance of preventive services.

The AMA also offers a separate brochure for physicians that outlines preventive care recommendations, lists all Medicare preventive services with cost-sharing waived and provides the related CPT codes.

Visit <http://www.elabs10.com/ct.html?rtr=on&s=x8pbgr,uwtn,2ke5,5vc4,9x3i,hckp,f56> to read more in AMA Wire.