

Dear all:

Please see a summary of MAG activities since my last MAG BOD Update. As always, my previous updates can be found at <http://www.mag.org/resources/executive-directors-message>.

MAG Foundation and “Think About It”/DAN Campaigns

Please see the following article regarding a dangerous drug being sold as Percocet in Bibb County. Various state agencies are working to determine what the drug actually is. The MAG Foundation is supplying Narcan to Bibb County in an effort to reverse the effects. The story can be found at <http://www.macon.com/news/local/article154699369.html>.

Blue Cross Blue Shield of Georgia (Update)

Effective July 1, BCBS will no longer pay for visits to the emergency room that BCBS determines (retrospectively) were not an emergency. Organized medicine is opposing this policy as it presents a danger to patients who lack the clinical background to determine what is and what is not an emergency. Please see <http://www.mag.org/news/article/BCBS-says-it-wont-cover-non-emergency-ER-visits-starting-7-1> for a summary of the issue.

At this point, MAG had a call with the interested stakeholders and we are moving forward with an active opposition to this matter. We had a conference call with BCBS on Monday and submitted the following questions to BCBS:

- Can you provide the list of diagnoses that BCBS – in their retrospective review - will not cover for a patient presenting in the emergency room effective July 1?
- Can you provide the number of emergency room visits between 2012-2017 where patients presented with list of diagnosis that BCBS will not cover effective July 1?
- Between the years 2012-2017, can you provide the number of patients that were repeat users of the emergency room presenting with the list of diagnosis that BCBS will not cover effective July 1?
- Please provide a breakdown of the anticipated percentage of claims by ER code level that BCBS anticipates to be non-covered based on their medical director review.
- Does BCBS plan to expand this policy to other product lines, such as the State Health Benefit Plan, self-funded plans?
- Please explain why exceptions to the BCBS policy do not include weekday nights and Saturdays.
- If BCBS utilizes this policy, what is the average savings on the premium anticipated for policy holders?
- In your review of the patients utilizing the emergency room for the list of diagnoses that BCBS will not cover effective July 1, how many of these policy holders have a primary care physician?
- Given the impact on physician payment from BCBS with this new policy, please provide the contractual basis that BCBS is relying in the physician’s contract and/or provider manual.
- How does the BCBS anticipated application of the prudent layperson standard used for the new policy going into effect July 1 for commercial members compare with the use by Amerigroup for Medicaid participants?

ACTION NEEDED

1. If you have not done so already, please complete the following survey by Friday which should take less than 30 seconds - https://survey.qualtrics.com/jfe/form/SV_3DzV8iH4GBT7ncV
2. Be on the lookout for another ALERT next week that will involve next steps.

GOING FORWARD

1. ACEP has sent a letter to BCBS challenging the legality of their policy. ACEP's response can be found at <http://www.mag.org/news/articles/ACEP-New-BCBS-ER-policy-violates-federal-law>.
2. We are anticipating a number of other large national organizations weighing in on this issue in the next few days.

Surprise Insurance Gap (Update)

As you may recall, legislation (HB 71/SB 8) failed to pass during the General Assembly to address the Surprise Insurance Gap. During the legislative session, organized medicine raised a number of questions on the payment methodology being proposed in a substitute for SB 8. At this time, the Commissioner of Insurance has submitted a data call based on codes that organized medicine provided that were most utilized in the emergency room setting by specialty. The Commissioner of Insurance has requested, from the insurers, the highest contracted rate/lowest contracted rate that is paid for the same in network services. We submitted some additional questions (with the assistance of Representative Mark Newton) that were not used for the data call. We anticipate receiving the response to the data call by September. We will keep you updated as we continue to actively address this matter with the General Assembly and the Commissioner of Insurance.

Senator Kay Kirkpatrick, MD

It is official. Dr. Kirkpatrick is now Georgia State Senator Kirkpatrick. Senator Kirkpatrick was sworn in on Friday. For more information, please go to <http://www.mag.org/news/article/MAG-member-sworn-into-office-as-state-senator>. Congratulations to the latest member of the quickly forming physician caucus – Senators Dean Burke/Ben Watson and Representatives Price/Newton.

Georgia Supreme Court and Tort Reform

MAG filed an amicus brief to prevent a “surprise witness” from being allowed to testify in a medical malpractice case. The Georgia Supreme Court agreed with MAG's position that the “surprise witness” should not be allowed to testify. For more information, please go to <http://www.mag.org/news/articles/Georgia-SC-rules-in-favor-of-MAG-physicians-in-key-case>.

As always, please do not hesitate to me call if you need anything.

Donald

Donald J. Palmisano, Jr. J.D. | Executive Director & Chief Executive Officer
Medical Association of Georgia
1849 The Exchange Suite 200 | Atlanta, Georgia 30339
678-303-9290 (Phone) | 404-312-9030 (Mobile)
dpalmisano@mag.org | www.mag.org

End the Surprise Insurance Gap <https://youtu.be/9euAeOm4b3g> via @YouTube

