Dear all:

Please allow this to be an update of MAG’s activities over the last few weeks. As always, please see http://www.mag.org/resources/executive-directors-message for my prior messages and feel free to forward this email to others.

**Blue Cross Blue Shield Meeting**

We are scheduled to meet with Blue Cross Blue Shield of Georgia in the next few weeks regarding the program that started in March 2012 which allows a member a choice in selecting “high quality and cost effective imaging services.” The program is offered through American Imaging Management and more information can be found at [http://www.bcbsga.com/health-insurance/aboutus/pressreleaseldetails/GA/2012/967](http://www.bcbsga.com/health-insurance/aboutus/pressreleaseldetails/GA/2012/967).

Essentially, a representative from AIM will contact a patient after they have been scheduled for imaging by their physician. The patient will be notified of other choices of imaging in their area that are more cost effective. We have received numerous complaints from physicians that they were unaware their patient was sent to another imaging service not approved by the physician or the imaging services were not correct for the patient. We also have significant legal concerns on the potential for medical malpractice claims that may arise against the physician for a number of reasons.

We have brought this to Blue Cross’ attention and have a follow up meeting scheduled with them in the middle of December. Please take this opportunity to let us know how this program has impacted your patients. Emails should be directed to Cam Grayson at cgrayson@mag.org.

**Health Insurance Exchanges**

Over the last week, there has been discussion on whether states will form their own state based health insurance exchanges or whether the states will allow the federal government to run the health insurance exchanges. HHS extended the time frame to notify the federal government until mid December and the letter to the states is attached. Governor Deal has responded that he will not move forward with a state based exchange at this time. I would encourage you to follow our “Breaking News” section on our website as we will keep you informed on the latest news on this and other issues affecting your practice.

**Pain Management Rules**

At the House of Delegates, there were a number of resolutions asking MAG to address the Pain Management Rules adopted by the Georgia Composite Medical Board. Prior to our House of Delegates, the Board released an updated FAQ on the pain management rules, which can be found at [http://medicalboard.georgia.gov/sites/medicalboard.georgia.gov/files/related_files/site_page/Updated%20FAQs%20Pain%20Management%20Rules.pdf](http://medicalboard.georgia.gov/sites/medicalboard.georgia.gov/files/related_files/site_page/Updated%20FAQs%20Pain%20Management%20Rules.pdf). In addition, MAG just completed a piece to further clarify the rules and it can be found at [http://www.mag.org/news/articles/pain-rule-guide](http://www.mag.org/news/articles/pain-rule-guide). Trey Reese of Hall, Booth, Smith drafted the piece at our request.

**Office of Inspector General Opinion (OIG)**

The OIG recently released another opinion approving payment for emergency call coverage for physicians. Even though the proposed arrangement did not fit within the “safe harbors”, the OIG found there would be a low risk of abuse and did not impose sanctions. The OIG “found the following factors particularly significant:

- The per diem rate was supported by an independent valuation (of fair market value and commercial reasonableness) and seemed tailored to reflect the burden on the participating physician, the likelihood that the physician would be required to respond, and the likelihood that uncompensated care (and the extent of same) would be provided;
- The per diem amount was determined annually, in advance, based upon a uniform methodology applied to all physicians in the specialty;
- Even though the physicians were also able to receive separate reimbursement from patients or their insurers for services actually provided, OIG recognized that the participating physicians provided actual and necessary services (e.g., availability to respond in 30 minutes and provide
follow-up care to patients regardless of ability to pay) for which they received no compensation other than the per diem; and

- The hospital offered all physicians on its staff within a particular specialty the opportunity to participate in the arrangement on an equitable basis (same per diem and allocation of on-call days) that did not selectively reward only the highest referring physicians."


Drug Enforcement Agency
Please see the attached letter the DEA sent to Omnicare regarding pharmacies sending refill requests to physicians. The DEA does not deem a pharmacist as an agent of the physician, which means a pharmacist cannot send a pre-printed prescription refill request to a physician.

MarCom Gold Award
Congratulations to Tom Kornegay and his department (Samantha Keyes-Blumer and Angela Boltz) for their receipt of the MarCom Gold Award. The MarCom Awards is an international creative competition that recognizes outstanding achievement by marketing and communications professionals. This is an outstanding achievement and more information can be found at http://www.mag.org/news/articles/marcom.

Georgia Physician Leadership Academy (GPLA)
GPLA is now accepting nominations for its sixth class and the deadline for nominations is January 18, 2013. This is an outstanding program that is focused on developing the future leaders in Georgia medicine. In fact, our current President, W. Scott Bohlke, MD, was a member of the first class. Here is a link to more information about GPLA and how to apply for the sixth class. http://www.mag.org/organizations/mag-foundation/academy.

AMA House of Delegates
Your Georgia Delegation to the American Medical Association House of Delegates returned late last week from the interim meeting. Some high points from the AMA meeting include:

- Completing a multi-year plan by adopting a framework to transition Medicare to a defined contribution program that would allow beneficiaries to either buy coverage of their choice from a wide variety of plans or stay in the traditional Medicare system;
- Adopting the AMA Principles for Physician Employment that should be helpful for young doctors coming out of residency and fellowship with no training on the business side of medicine;
- Voting to “vigorously advocate” with the Centers for Medicare & Medicaid Services to make the delayed implementation of ICD-10 permanent.

MAG House of Delegates
Just as a final note about the 2012 House of Delegates. We have a new page on our website thanking all of our sponsors who participated in Savannah and the page can be found at http://www.mag.org/about-us/house-of-delegates/sponsors-exhibitors. We always appreciate the sponsor participation and look forward to their participation next year.

As always, if you should have any questions, please do not hesitate to call.

Have a Happy Thanksgiving.

Donald

Donald J. Palmisano, Jr.
Executive Director
Medical Association of Georgia