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NEWS FROM THE LEADING VOICE FOR THE MEDICAL PROFESSION IN GEORGIA



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## MAG at forefront of efforts to resolve BCBSGa issues

The Medical Association of Georgia (MAG) continues to take steps to enhance the relationship between health insurer Blue Cross Blue Shield of Georgia, Inc. (BCBSGa) and physicians in the state.

At the end of 2014, Georgia Insurance Commissioner Ralph Hudgens rescinded physician contract amendments that BCBSGa had put into place in Georgia following "numerous complaints from physicians (and their practices)."

MAG Executive Director Donald J. Palmisano Jr. says that, "We have had an ongoing dialogue with Blue Cross since that transpired."

Palmisano also reports that the first MAG/BCBSGa "Physician Advisory Group" meeting took place on February 12. He says, "It will serve as a forum for physicians to express their concerns, it will give Blue Cross the opportunity to disseminate information about new payer initiatives, it will be a venue for improving communications, and it will serve as a mechanism for physicians to weigh in on Blue Cross' clinical policies, operations and contracting practices."

The advisory group consists of four MAG member physicians – including J. Leonard Lichtenfeld, M.D., Andrew Reisman, M.D., Joseph Stubbs, M.D., and Pablo Stolovitzky, M.D. – as well as MAG Health Policy and Third Party Payer Advocacy Department Director Susan Moore and BCBSGa Senior Clinical Officer Mark Kishel, M.D., and BCBSGa Director of Network Management/Georgia Provider Solutions Hayden Mathieson. They will meet a minimum of three times a year.

Finally, Palmisano notes that Georgia House & Human Services Committee Chair Sharon Cooper (R-Marietta) recently asked MAG and other stakeholders to address this and other health insurance issues during her committee hearings.

MAG members are encouraged to contact Moore at [smoore@mag.org](mailto:smoore@mag.org) to report ongoing concerns or feedback for BCBSGa.

[Click for Georgia Health News BCBSGa story](#)

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## MAG well represented at AMA Advocacy Conference



The Medical Association of Georgia (MAG) was well represented at the American Medical Association's National Advocacy Conference that took place in Washington, D.C. on February 23-25. MAG leaders had a chance to weigh in on a number of important issues – including the Medicare SGR and ICD-10 and electronic health records – with a number of key legislators. Pictured in the first photo from the left are MAG Executive Director Donald J. Palmisano Jr., MAG President Manoj H. Shah, M.D., U.S. Rep. Lynn A. Westmoreland, MAG President-elect John S. Harvey, M.D., and AMA Georgia Delegation Chair S. William Clark III, M.D. Pictured in the second photo from the left are Dr. Clark, Dr. Shah, U.S. Rep. David Scott, Dr. Harvey and Palmisano. AMA Georgia Delegation Alternate John S. Antalis, M.D., was also on hand for the event.

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## Recording of MAG "D.C. Issues" town hall now online

A recording of a 45-minute "D.C. Issues Update" conference call that the Medical Association of Georgia (MAG) hosted on February 16 is now available online.

This town hall featured Jeb Shepard, who is the senior government affairs representative for the Medical Group Management Association in Washington, D.C. He provides updates on a number of key issues that affect physicians and their medical practices at the federal level, including the Medicare SGR, the implementation of the Affordable Care Act, the 2015 Medicare physician fee schedule, and the federal quality reporting programs and compliance.

The forum was offered to MAG members and practice staff at no cost with a grant from Health Care Research, a subsidiary of Alliant Health Solutions.

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## Show on MAG's correctional medicine program now online



*Pictured from the left are 'TopDocs Radio' host C.W. Hall, 'TopDocs Radio' Producer Krista Berutti, MAG Director of Correctional Medicine Clyde Maxwell, and MAG Executive Director Donald J. Palmisano Jr.*

A recording of the interview that Medical Association of Georgia (MAG) Executive Director Donald J. Palmisano Jr. and MAG Director of Correctional Medicine Clyde Maxwell recently conducted on the 'TopDocs Radio' program on the Business Radio-X Network to discuss MAG's Correctional Medicine program is now available online.

MAG developed the standards for evaluating health care in jails and prisons in the state as part of a national initiative following the prison riots in Attica, New York, and just before the Georgia State Prison system was placed under the jurisdiction of the federal courts for maintaining health care facilities that violated a constitutional prohibition on cruel and unusual punishment.

MAG currently surveys eight county jails and 33 state prisons.

[Click for 'TopDocs' recording](#)

Go to <http://www.mag.org/organizations/correctional-medicine> or contact Maxwell at [cmaxwell@mag.org](mailto:cmaxwell@mag.org) for additional information.

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## Members can save time and money with MAG 401(k) plan

The Medical Association of Georgia (MAG) is reminding its members – and their practice staff – that they can save time and money and retain employees by participating in the MAG-sponsored 401(k) retirement plan that's available through the Atlanta Capital Group and Transamerica, which has grown to more than \$20 million.

"I have been able to save money and avoid a lot of hassles and spend more time with my patients by taking advantage of MAG's 401(k) plan," says Madalyn N. Davidoff, M.D. "MAG has always been the leading advocate for physicians in Georgia, but this program has really enhanced the MAG membership value proposition."

MAG members can contact Kevin Rainwater with the Atlanta Capital Group at 404.893.4100 or [krainwater@atlantacapitalgroup.com](mailto:krainwater@atlantacapitalgroup.com) for details.

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## Donor to match up to \$10K as MAG CEO, Hall Booth attorney to run 200 miles to fight Rx drug abuse



*'Team Think About It' includes Hall Booth Smith, P.C. legal counsel Trey Reese (on left) and MAG Executive Director Donald J. Palmisano Jr.*

An anonymous donor has significantly bolstered Medical Association of Georgia (MAG) CEO Donald J. Palmisano Jr.'s efforts to raise money for the MAG Foundation's 'Think About It' campaign to reduce prescription drug abuse in the state by offering to match any donations that come in beginning on Tuesday, March 3 up to \$10,000.

Palmisano and Trey Reese with the law firm of Hall Booth Smith, P.C. will each run 100 miles during the Umstead Endurance Run that will take place near Raleigh, North Carolina on March 28-29 to raise money for the campaign. As of March 2, the duo – aka 'Team Think About It' – had raised more than \$18,000.

Palmisano notes that he must complete his 100-mile run to qualify for the matching donation from the anonymous donor.

"The MAG Foundation is honored and grateful that Donald Palmisano and Trey Reese would use this kind of innovative platform to raise money and awareness for the 'Think About It' campaign," says MAG Foundation Chairman Jack M. Chapman Jr., M.D. "We are also thrilled that our anonymous donor would step up in this kind of selfless way – simply to help the people who live in this state."



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"Debt Rx: 7 Ways To Manage Costly Medical Bills," forbes.com, February 17, 2015

Dr. Chapman adds that, "I am also proud to report that we have already had a fantastic response to this fundraiser from a diverse mix of individual and corporate sponsors – from \$25 to \$2,500 per pledge or donation – so every step that we take means we're one step closer to our ultimate objective of eradicating the prescription drug abuse epidemic in Georgia."

Individual and corporate sponsors can go to [www.mag.org](http://www.mag.org) to support 'Team Think About It' with a donation or a per-mile pledge. Palmisano has personally pledged \$1,000, and 100 percent of every donation will go to the 'Think About It' campaign.

The 'Think About It' campaign is designed to reduce prescription drug abuse in Georgia by raising awareness and promoting a comprehensive drug policy. Target audiences include physicians (i.e., prescribers) and the general public (i.e., patients). The MAG Foundation's partners include medical societies, the Georgia Composite Medical Board, Georgia Pharmacy Association, The Council on Alcohol and Drugs, Georgia Bureau of Investigation, and other law enforcement agencies, schools, businesses and community organizations.

Go to [www.rxdrugabuse.org](http://www.rxdrugabuse.org) for information on the 'Think About It' campaign or to support the effort with a donation.

Also contact Lori Cassity Murphy at [lmurphy@mag.org](mailto:lmurphy@mag.org) or 678.303.9282 with questions or to make a donation.

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## Medicare QIO promoting new heart health, HIT & PQRS/VBPM pay initiatives

Alliant GMCF – which is the quality improvement organization (QIO) for Medicare in Georgia – is promoting the availability of three new initiatives for physicians and other health care stakeholders in Georgia. This includes...

*Saving Hearts and Reducing Healthcare Disparities in Georgia – It Takes a Village.* Alliant GMCF is “seeking health care practitioners, medical practices, patients and families, community organizations, Million Hearts® stakeholders (both state and national), to join efforts to improve and measure progress on the ABCS of cardiovascular health: Aspirin as appropriate (and) Blood pressure control (and) Cholesterol management (and) Smoking screening and cessation counseling.”

*Become a Meaningful User of HIT in Georgia.* This effort is designed to “provide physicians with strategies to improve coordination of care for patients living with many chronic medical conditions. Eligible professionals, eligible hospitals, critical access hospitals, along with patients and families, community organizations, and HIT stakeholders are invited to join efforts in a learning and action network (LAN). The goal of the network is to educate providers and increase participation in Medicaid and Medicare EHR Incentive Programs, promote patient empowerment in HIT, and reduce HIT disparities in underserved communities.”

*Free Technical Assistance to Avoid Negative Payment Adjustments in Georgia.* This program is designed to help physicians/practices “avoid negative payment adjustments for PQRS and earn the VBPM incentives. Alliant Quality is recruiting eligible professionals to provide free support in Physician Quality Resource System (PQRS) and Value Based Payment Modifier (VBPM) reporting.”

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## Human trafficking in Georgia: The health care professional's response

By Virginia Jordan Greenbaum, M.D., Stephanie V. Blank Center for Safe and Healthy Children, Children's Healthcare of Atlanta

A 23-year-old woman presents to her gynecologist with pelvic pain and vaginal discharge; she is withdrawn, depressed and reluctant to allow an exam. A 15-year-old boy comes to a teen clinic to obtain testing for sexually transmitted infections; he is a homeless runaway. An 11-year-old girl is brought to her pediatrician by her mother for a sports physical.

What do these scenarios have in common? The health care provider in each is encountering a victim of commercial sexual exploitation/sex trafficking.

Human trafficking may involve forced labor, forced sexual activity, organ removal or slavery.<sup>1</sup> While the true prevalence of trafficking is unknown, the International Labour Organization estimates that 20.9 million adults and children are victims of forced labor worldwide, an estimate that encompasses most forms of human trafficking. It is estimated that about 4.5 million are involved in forced sexual exploitation and 14.2 million are involved in forced labor.<sup>2</sup>

The commercial sexual exploitation of children (CSEC) is closely related to child sex trafficking and involves "crimes of a sexual nature committed against juvenile victims for financial or other economic reasons. These crimes include trafficking for sexual purposes, prostitution, sex tourism, mail-order-bride trade and early marriage, pornography, cyber enticement, stripping, and performing in sexual venues such as peep shows or clubs."<sup>3</sup>

The incidence and prevalence of child sex trafficking and CSEC in the U.S. are unknown but one study estimated that 244,000 children were at risk annually.<sup>4</sup>

Victims of human trafficking may come from foreign countries, but many are American citizens. They may or may not have risk factors (for example, homelessness, poverty, substance addiction, untreated mental health problems). During their period of exploitation they may experience physical and sexual violence, work-related injuries, malnutrition, sexually and non-sexually transmitted infections, HIV/AIDS, complications from pregnancy and unsafe abortions, chronic untreated medical conditions, post-traumatic stress disorder, depression and suicidality, substance addiction and somatic symptoms.<sup>4-6</sup>

Multiple studies have shown that trafficking victims do seek medical care: In one study of CSEC youth in New York City, less than 25 percent reported seeing a medical provider within the last six months<sup>7</sup> while in another study of women and adolescent victims of trafficking 88 percent reported seeking medical care during their period of exploitation.<sup>6</sup>

Medical providers are in a unique position to identify victims of human trafficking and to offer services. However, relatively few providers are familiar with common risk

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factors and possible indicators of human trafficking and commercial sexual exploitation, and many professionals feel inadequately equipped to screen for victimization, interact with suspected victims, provide an appropriate medical evaluation and make necessary referrals.

To assist health care professionals in developing the skills needed to identify and care for suspected child victims, the Stephanie V. Blank Center for Safe and Healthy Children at Children's Healthcare of Atlanta has developed a webinar series on child sex trafficking and commercial sexual exploitation. The six webinars are designed for medical professionals and are offered quarterly (introductory webinar is offered twice per quarter). There is free CME credit (1-1.5 hours per webinar). Alternatively, professionals may receive information via computer-based training (CBT) modules that allow viewers to take the training at any time, at their own pace. These CBT modules also offer CME credit. To learn more about the trainings and to access the CBT modules and the webinar schedule, go to [www.choa.org/csecwebinars](http://www.choa.org/csecwebinars) or call Angela Boy at 404.785.7429.

Contact Dr. Greenbaum at [jordan.greenbaum@choa.org](mailto:jordan.greenbaum@choa.org) or 404.790.0499.

## Resources

[Polaris Project and the National Human Trafficking Resource Center](#)  
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[Polaris manages the National Human Trafficking Resource Center](#)  
[www.Traffickingresourcecenter.org](http://www.Traffickingresourcecenter.org)

[National Hotline for Human Trafficking](#) (for victims and professionals interacting with suspected victims)  
Call 888.373.7888 or Text "HELP" to BeFree (233733)

[National Center for Missing and Exploited Children](#)  
[www.missingkids.com](http://www.missingkids.com) or 800.THE.LOST

[IOM Report on Child Sex Trafficking in America \(2013\)](#)  
[www.iom.edu/reports/2013/confronting-commercial-sexual-exploitation-and-sex-trafficking-of-minors-in-the-united-states.aspx](http://www.iom.edu/reports/2013/confronting-commercial-sexual-exploitation-and-sex-trafficking-of-minors-in-the-united-states.aspx)

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## MAG calls for NGA to emphasize OD prevention & treatment

The Medical Association of Georgia is one of more than 150 state and national organizations that signed a letter that urged the National Governors Association (NGA) to turn "the nation's discussion about prescription drug abuse and diversion into one that places increased emphasis on overdose prevention and treatment."

[Click for letter](#)

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## MAG encouraging M.D./D.O. to take HPV vaccination survey

The Medical Association of Georgia is encouraging physicians in the state to complete a 10-minute survey that was developed by the Georgia Cancer Control Consortium and the Georgia Department of Public Health (DPH) that addresses HPV vaccine stocking and administration and "potential barriers associated with HPV screening and counseling."

DPH says that, "Data about physician knowledge, attitudes, and practices would be extremely valuable to (DPH) as (it seeks) to promote evidence-based interventions and apply for funds to promote these approaches in Georgia."

The deadline to complete the survey is March 31.

[Click to complete DPH HPV vaccination survey](#)

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## New AMA fact sheet addresses virtual credit cards

The American Medical Association (AMA) has created a fact sheet that addresses "The effect of health plan virtual credit card (VCC) payments on physician practices."

According to Medical Association of Georgia Legal Counsel Trish Yeatts, "AMA is encouraging physicians to enroll in Health Insurance Portability and Accountability Act (HIPAA)-standard Automated Clearinghouse (ACH) Electronic Funds Transfer (EFT) and to be aware of payment terms when contracting with health plans and to educate their practice staff on credit card processing."

Yeatts explains that HIPAA and the Affordable Care Act require health plans to make EFT available to physicians on request, but insurers may seek to require other payment methods – such as virtual credit cards in their contracts with physicians in order to avoid using EFT.

And she stresses that, "The interchange fees vary from about two to three percent to as much as five percent of the transaction amount. Plus the VCC payments aren't supported by the current version of the HIPAA standard electronic remittance advice (ERA) transaction – so they have to be manually processed and reconciled, which increases the provider's administrative burden and expenses."

Finally, Yeatts notes that the VCC programs are often rolled out to physicians in an opt-out fashion, which means practices begin receiving the VCC payments without prior notification or consent.

[Click here for AMA VCC fact sheet](#)

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## Georgia Drug Card flags report on patient Rx preferences

The Georgia Drug Card reports that an "Issue 5: Putting a price on positive outcomes" summary that appears on the PricewaterhouseCoopers LLP website states that, "Faced with higher out-of-pocket costs and escalating drug prices, consumers – like other purchasers – are becoming choosier about the medicines they buy. It also notes that, "In 2015, the growing conflict between drug access and affordability will create fresh pressure for data that show these expensive medications work better than others and are worth the premium."

The Georgia Drug Card is consequently reminding physicians in the state that their patients who have high-deductible plans or who do not have prescription coverage or who take prescription drugs that aren't covered by their health insurance plan can use the Georgia Drug Card to obtain savings of up to 75 percent off the retail price for brand and generic FDA-approved medications.

Georgians can print the Georgia Drug Card for free at [www.GeorgiaDrugCard.com](http://www.GeorgiaDrugCard.com), they can request the Georgia Drug Card savings at any CVS/pharmacy in the state, or they can request a hard card by sending an email to John Cenerazzo at [johnc@georgiadrugcard.com](mailto:johnc@georgiadrugcard.com).

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## New MAG members

MAG welcomed the following new members during February...

Paul Matthew Balthrop, M.D., Savannah  
Rohit M. Desai, M.D., Stone Mountain  
Chetan Deshpande, M.D., Savannah  
Sybil Denise Dotson, M.D., Decatur  
Cole Chinedu Ezeoke, M.D., Dalton  
Kristine Ellen Gould, M.D., Lawrenceville  
Virginia Jordan Greenbaum, M.D., Atlanta  
Matthew Jenkins, M.D., Elberton  
Shaun Andre Price, M.D., Columbus  
Vincent Scoglietti, M.D., LaGrange

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### CMS extends 2014 EHR attestation until March 20

The Centers for Medicare & Medicaid Services (CMS) has announced that "eligible professionals now have until 11:59 p.m. on March 20, 2015, to attest to meaningful use for the Medicare Electronic Health Record (EHR) Incentive Program 2014 reporting year."

CMS says the extension "allows eligible professionals, who have not already used their one 'switch,' to switch programs (from Medicare to Medicaid or vice versa) for the 2014 payment year until 11:59 p.m. on March 20, 2015. After that time, eligible professionals will no longer be able to switch programs."

CMS is also urging "providers to begin attesting for 2014 as soon as they can" – adding that Medicare professionals must attest to meaningful use every year to receive an incentive and avoid a payment adjustment.

Providers who successfully attest for the 2014 program year will receive an incentive payment and avoid the Medicare adjustment that will be applied on January 1, 2016, according to CMS.

Finally, CMS stresses that, "The Medicare extension does not affect deadlines for the Medicaid EHR Incentive Program...the EHR reporting option for PQRS has been extended until March 20, 2015."

The phone number for the EHR Information Center is 888.734.6433.

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### CMS issues final rule on ACA payment & provisions

The Centers for Medicare & Medicaid Services (CMS) has issued a final rule that addresses the payment parameters and provisions for the Affordable Care Act's (ACA) risk adjustment, reinsurance and risk corridor programs and cost-sharing parameters and cost-sharing reductions and user fees for federally-facilitated 'Exchanges' for 2016. CMS says the 2016 open enrollment period will run from November 1, 2015 to January 31, 2016.

The rule clarifies that qualified health plans (QHPs) must publish "up-to-date, accurate, and complete list" of all drugs on its formulary – including tiering structure and drug access restrictions – in standard, readable formats to improve transparency for beneficiaries and the general public.

It also requires issuers to use a pharmacy and therapeutic (P&T) when designing formularies, beginning in 2017. The P&T Committee, which must meet certain standards outlined in the final rule, will "design formularies using scientific evidence that will include consideration of safety and efficacy, cover a range of drugs in a broad distribution of therapeutic categories and classes, and provide access to drugs that are included in broadly accepted treatment guidelines."

The rule also provides more detailed procedures for the standard exception process through which an enrollee can request medications not included on the plan's formulary. And it clarifies that cost sharing for drugs obtained through the exceptions process must count toward the annual limitation on cost sharing for health plans subject to the essential health benefit (EHB) requirement.

Finally, the rule establishes additional standards related to essential health benefits, qualified health plans, network adequacy, quality improvement strategies, the Small Business Health Options Program, guaranteed availability, guaranteed renewability, minimum essential coverage, the rate review program, the medical loss ratio program, and other related topics.

Most of the regulations are effective within 60 days of publication in the Federal Register – with the exception of certain amendments that are effective on January 1, 2016.

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### PAI weighs in on Medicare RAC audit reform

The Physicians Advocacy Institute (PAI) recently submitted a letter to a U.S. House of Representatives subcommittee to outline PAI's "key policy goals for reforming the (Medicare) RAC audit program. The letter states that, "There is growing consensus among all stakeholders that the current RAC audit process is fundamentally flawed...(it is) extremely onerous for physician practices, and all too often results in inaccurate audit findings and unnecessary and costly appeals."

The letter also notes, "Based on input from physicians around the country, PAI has identified significant problems with the Medicare RAC program... (and) to address these and related issues, PAI has developed a comprehensive set of principles/policy recommendations for RAC reform as well as legislative language."

Medical Association of Georgia Executive Director Donald J. Palmisano Jr. is a member of PAI's Board of Directors.

Contact Kelly Kenney at [k2strategiesllc@gmail.com](mailto:k2strategiesllc@gmail.com) with questions related to PAI.

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### Avalere issues report on ACA plan drugs

Avalere Health has issued a report that "analyzes cost-sharing for drugs used to treat complex diseases in health plans offered on the Affordable Care Act's Exchanges."

Avalere says that it "found that some insurers place all drugs used to treat complex diseases – such as HIV/AIDS, cancer, and multiple sclerosis – on the highest drug formulary cost-sharing tier."

Avalere also notes that it "analyzed formularies for silver plans participating in eight states, six of which use the federally-facilitated Exchange (Florida, Illinois, Pennsylvania, Texas, Georgia and North Carolina) and California and New York...states represent 60 percent of 2014 enrollment in ACA Exchange plans."

Finally, Avalere reports that it "analyzed 20 drug classes, and (it) found that for five of the classes over one-fourth of silver level plans placed all drugs in a class on the specialty tier in 2015...five classes include drugs used for HIV/AIDS, cancer, and multiple sclerosis."

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### Dalton CME event to address addiction in health care

The Hamilton Medical Center is encouraging physicians to register for an "Addiction Among Healthcare Workers in Georgia: New Promises and Problems" CME event that will take place from 12:30 p.m. to 1:30 p.m. on Thursday, March 5 at the Brown Conference Center at the Hamilton Medical Center in Dalton.

The event will feature Paul H. Earley, M.D., who is the medical director of the Georgia Professionals Health Program, Inc. He will discuss how to "become more familiar with the demographics of substance abusers, learn the most frequent substances abused, recognize how impairment can negatively impact patient safety and [how to learn more about] the Georgia Professionals Health Program."

Hamilton Medical Center is accredited by the Medical Association of Georgia to provide continuing medical education for physicians. Hamilton Medical Center designates this live activity for a maximum of 1 *AMA PRA Category 1 Credit™*. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

Contact Sarah Russell at 706.272.6056 or [srussell@hhcs.org](mailto:srussell@hhcs.org) to register.

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### Payscape Advisors corrects phone number in Journal ad

The telephone number that was noted in the advertisement that Payscape Advisors ran in the most recent edition of the *Journal of the Medical Association of Georgia* was incorrect. The correct number is 404.350.6565, extension 230. Payscape Advisors offers an equipment leasing program for medical professionals.

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