

October 1, 2015

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## News Briefs

### MAG battles for patients and physicians during first of three state insurance reform hearings

The Medical Association of Georgia (MAG) was a strong advocate for physicians and their patients during the first Georgia Consumer and Provider Protection Act Study Committee meeting, which took place in Atlanta on September 16.

The committee is addressing a number of important health insurance issues, and it will develop recommendations for the General Assembly to consider during the legislative session in 2016.

“The first meeting focused on rental networks and silent PPOs,” says MAG Government Relations Director Marcus Downs, who stressed the need for physicians to be an equal and informed party during contract negotiations during his testimony. “One of MAG’s primary messages is that it is unfair for physicians and practices to be subjected to the contractual terms of a rental network, including pay, when they haven’t had a chance to evaluate the economic implications.”

Downs testified that, “While physicians might technically have the ability to opt out of a contract that has been amended, they rarely do because they want to continue to care for their patients and they don’t want to see their patients’ care disrupted.”

He stresses that, “MAG’s priorities include ensuring that Georgians have access to the medical care they need and eliminating some of the penalties that effectively coerce physicians to participate in these networks.”

The health insurance industry was also on hand for the meeting, and Downs says that he was pleased to hear that, “A representative for America’s Health Insurance Plans agreed that health insurers need to take steps to address patient and physician concerns in key areas, including rental networks and narrow networks.”

He also notes that a spokesman for the Georgia Dental Association supported MAG’s contention that third party payers now have too much influence over patients in the decision making process.

“The committee did appear to find some common ground,” says Downs. “They appeared to reach a consensus about the need to require insurers to register every network in the state with the Department of Insurance and that there needs to be greater transparency when it comes to knowing who can rent a health insurance network.”

The committee will meet from 2 p.m. to 5 p.m. on Monday, October 26 at the

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Tifton-Tift Regional Health Systems Office in Tifton and from 9 a.m. to 12 p.m. on Monday, November 9 at the State Capitol in Atlanta. It will address all-products clauses and the Provider Stability Act during the meeting on October 26.

MAG President Manoj H. Shah, M.D., is a member of the committee, and he is encouraging physicians and practice staff to attend the meetings; physicians who are interested in testifying should contact Downs at [mdownloads@mag.org](mailto:mdownloads@mag.org).

A bill (S.B. 158) that was introduced during the 2015 state legislative session evolved into the resolution (S.R. 561) that led to the formation of the committee.

[Click for MAG testimony](#)

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**“Health Insurance Deductibles Outpacing Wage Increases, Study Finds,” *The New York Times*, September 22**



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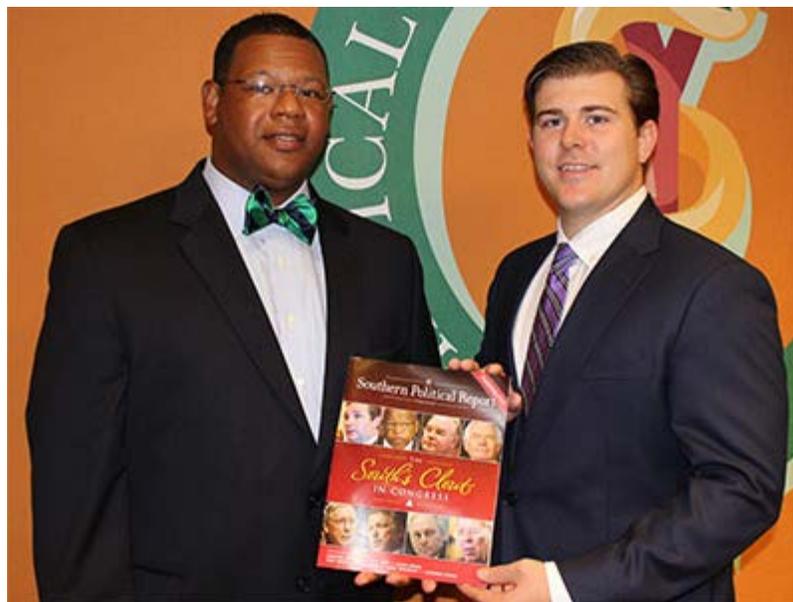
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News Briefs

## MAG honored as one of top associations in Georgia



The Medical Association of Georgia (MAG) was honored as one of the top five associations in the state in the Summer 2015 edition of *Southern Political Report Magazine*. It is the first time that MAG has made the list, which is based on a survey of lawyers and government affairs specialists. MAG was just one of three state medical associations in the 13-state region to receive the honor. Pictured with the magazine are MAG Government Relations Director Marcus Downs (on left) and GAMPAC Manager and Legislative Associate Ryan Larosa.

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The Medical Association of Georgia (MAG) is encouraging applicable physicians in the state to complete a brief survey to weigh in on their experience with Aetna, Inc. (Aetna) and Humana Employers Health Plan of Georgia, Inc. (Humana) – keeping in mind that Aetna is acquiring Humana.

Aetna says that "the combined organization will be better positioned to offer a broad choice of affordable, consumer-centric health care products by improving health outcomes, constraining costs, and promoting wellness." It also claims that "the [merger] will improve [its] ability to work with providers and create payment agreements that result in better care to consumers."

MAG is concerned about how the merger will affect patients and physicians in the state given the further consolidation of the health insurance market. MAG will use the survey results in its advocacy efforts with the Georgia Office of Insurance.

The survey should only take about five minutes to complete. Physicians are encouraged to complete the survey by the end of the day on Friday, October 16. Contact Trish Yeatts at [pyeatts@mag.org](mailto:pyeatts@mag.org) or 678.303.9274 with questions.

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## MAG calling for Aetna out-of-network issues feedback for Consumer & Provider Protection Act Study Committee

The Medical Association of Georgia (MAG) is encouraging physicians and medical practice staff in the state who have experienced out-of-network billing problems with Aetna, Inc. to send a brief summary to MAG Director of Health Policy and Third Party Payer Advocacy Susan Moore at [smoore@mag.org](mailto:smoore@mag.org).

"It is especially important for physicians and practices to weigh in on the issue of out-of-network billing in light of the fact that Aetna is in the process of acquiring Humana," says MAG Executive Director Donald J. Palmisano Jr. "Representatives for Aetna have gone on record saying that the fundamental issue is greed on the part of certain out-of-network hospital-based physicians. It seems they think the real problem with out-of-network billing is that not enough physicians have signed contracts with Aetna, and the ideal solution is to have every physician under contract on their terms."

An August 31 article by *HealthLeaders Media* points out that, "One of the most contentious clashes between providers and payers is over billing for out-of-network medical services. This year, legislatures in at least seven states have considered creating laws to set firm ground rules for how much money physicians and hospitals can charge when they are not included in a payer's provider network. Charges above the in-network rate are called balance billing."

MAG will use the feedback that it receives from physicians and practice staff to raise awareness with the members of the Georgia Consumer and Provider Protection Act Study Committee, which is addressing a number of important health insurance issues, including network adequacy, rental networks, insurer directories, and all-products clauses.

A bill (S.B. 158) that was introduced during the 2015 state legislative session evolved into a study resolution (S.R. 561) that led to the formation of the committee, which will develop recommendations for the General Assembly's consideration in 2016. MAG President Manoj H. Shah, M.D., is a member of the committee.

Physicians who have an interest in testifying at one of the meetings should contact MAG Government Relations Director Marcus Downs at [mardowns@mag.org](mailto:mardowns@mag.org).

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## HOD news, notes & reminders



The Medical Association of Georgia's (MAG) 2015 House of Delegates (HOD) meeting will take place at the Hyatt Regency Savannah on Saturday, October 17 and Sunday, October 18 – while MAG's Board of Directors will meet at the Hyatt Regency Savannah on Friday, October 16.

### Lodging

The Hyatt Regency Savannah is sold out — though attendees are encouraged to contact their county medical society (if applicable) to determine if a room has already been reserved for them. Attendees who would like to be added to the Hyatt waitlist should contact Anita Amin at [anita@jlh-consulting.com](mailto:anita@jlh-consulting.com) or 404.299.7700. Any waitlisted rooms that become available will be awarded on a first-come, first-served basis. [Click here](#) for a list of other nearby lodging options.

### Elections

MAG members who are interested in running for MAG office for 2015-2016 should contact Donna Glass at [dglass@mag.org](mailto:dglass@mag.org) or 678.303.9251. The elections will take place during the HOD meeting. The only requirement to run for office is that a candidate be an active, dues paying MAG member for the last two years.

The following is the latest list of candidates who are running for MAG office for 2015-2016...

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President (automatic succession): John S. Harvey, M.D.

President-elect: Steven M. Walsh, M.D.

First Vice President (automatic succession): Madalyn N. Davidoff, M.D.

Second Vice President: Steven M. Huffman, M.D.

Secretary: Andrew B. Reisman, M.D.

Treasurer: Thomas E. Emerson, M.D.

AMA Delegate (for re-election): S. William Clark III, M.D.

AMA Delegate (for re-election): Michael E. Greene, M.D.

AMA Delegate (for re-election): Thomas E. Price, M.D.

AMA Delegate (for re-election): Sandra B. Reed, M.D.

AMA Alternate Delegate (for re-election): Billie Luke Jackson, M.D.

AMA Alternate Delegate: Alan L. Plummer, M.D. (for re-election) and John A. Goldman, M.D.

AMA Alternate Delegate (for position held by E. Dan DeLoach, M.D.): Gary C. Richter, M.D., and ~~M. Todd Williamson, M.D.~~ (withdrawn)

### New Delegate Orientation Webinar

MAG Speaker Frank McDonald Jr., M.D., will host a webinar for new delegates at 6:30 p.m. on Monday, October 5. Contact Arianna Afshari at [aafshari@mag.org](mailto:aafshari@mag.org) or 678.303.9262 for details.

### HOD Handbook & MAG Policy Compendium

The HOD handbook and MAG's policy compendium and other key HOD resources are posted at [www.mag.org/about-us/house-of-delegates](http://www.mag.org/about-us/house-of-delegates) – and delegates and alternate delegates are encouraged to download this information to their laptop computers or devices before the meeting.

### Golf Tournament

MAG will host a golf tournament at The Club at Savannah Harbor – which is across the river from the Hyatt and close to the Westin Savannah Harbor Golf Resort and Spa – that will begin at 12:30 p.m. on Friday, October 16. The cost is \$118 per player, which includes a box lunch. Participants can either take the free river ferry or drive to the course. Complete the HOD [registration form](#) to sign up for the golf tournament, which will feature a number of prizes. Contact Arianna Afshari at [aafshari@mag.org](mailto:aafshari@mag.org) or 678.303.9262 with questions.

### Pre-Purchase Dinner Tickets & Save \$50

MAG is reminding HOD meeting attendees to purchase their tickets for the awards dinner that will take place on Saturday, October 17 as soon as possible. The tickets can be purchased for \$50 per person in advance, though the price will increase to \$100 per person at the door – assuming there are still seats available. Complete the HOD [registration form](#) to purchase awards dinner tickets. Contact Arianna Afshari at [aafshari@mag.org](mailto:aafshari@mag.org) or 678.303.9262 with questions.

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## GAMPAC

GAMPAC Chair James Barber, M.D., has announced that every active GAMPAC member who attends the HOD meeting will be able to get a professional headshot photograph taken for free.

GAMPAC members will be able to have their photo taken at their convenience by Chris Savas ([www.chrissavas.com](http://www.chrissavas.com)) from 8 a.m. to 12 p.m. on Saturday, October 17 or from 8 a.m. to 12 p.m. on Sunday, October 18 at a studio that will be set up next to the GAMPAC exhibit and near the main HOD meeting room.

As an added bonus, Dr. Barber says that GAMPAC will host a free and exclusive luncheon for its members at the Hyatt Regency Savannah at 12:30 p.m. on Sunday, October 18 that will feature a talk by U.S. Sen. David Perdue.

Dr. Barber believes that, “GAMPAC is an easy and effective way for physicians to support candidates for political office in the state who want to enhance the practice environment in Georgia and who want to protect the patient-physician relationship.”

And Dr. Barber notes that, “You can join GAMPAC at the membership level that suits your needs – whether that’s the Chairman’s Circle at \$2,500 or the Capitol Club at \$1,000 or the general membership level at \$250.”

Contact Ryan Larosa at 678.303.9273 or [rlarosa@mag.org](mailto:rlarosa@mag.org) or go to [www.mag.org/organizations/gampac](http://www.mag.org/organizations/gampac) to join GAMPAC.

### MCG Alumni Reception & Low Country Boil

The Medical College of Georgia Alumni Association is inviting all MAG Board of Directors members to attend a reception and low country boil that will take place at the home of Melvin Haysman, M.D., and Roberta Kamine-Haysman, in Savannah on Thursday, October 15. The reception will begin at 6:30 p.m. The address is 9926 Whitefield Avenue. The dress code is casual. Call 706.723.0140 or email [mcgalumni@gru.edu](mailto:mcgalumni@gru.edu) to RSVP by October 12.

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## MAG reminding HOD attendees to download app

The Medical Association of Georgia (MAG) is reminding House of Delegates (HOD) meeting attendees that they can get the latest information for this year's HOD by downloading MAG's "app" on their handheld devices and tablets. MAG's 2015 HOD meeting will take place at the Hyatt Regency in Savannah on Saturday, October 17 and Sunday, October 18.

MAG's app contains an abbreviated version of the HOD pocket program – including details on meeting times and locations and directions to the hotel – as well as a member physician search function.

MAG members can download the app in a matter of moments by...

- 1) Typing [m.mag.org](http://m.mag.org) into their internet browser's web address field and pressing enter
- 2) Clicking the arrow that appears over a box at the top or the bottom of the page (depending on the device)
- 3) Clicking "Add to Home Screen"

Go to [www.mag.org/about-us/house-of-delegates](http://www.mag.org/about-us/house-of-delegates) or contact Arianna Afshari at [aafshari@mag.org](mailto:aafshari@mag.org) or 678.303.9262 for additional information or questions related to the HOD meeting.

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News Briefs

## MAG town hall, 'Top Docs' show on ICD-10 now online



A recording of a 30-minute town hall conference call that the Medical Association of Georgia (MAG) hosted on September 8 that addressed the ICD-10 transition is now available online.

The call featured James Dunnick, M.D., who is a nationally-renowned ICD-10 expert. He discussed what practices can expect when the transition goes into effect on October 1, how a practice can protect and preserve its cash flow, and what steps a practice that isn't prepared for the ICD-10 transition can take to minimize its risk and mitigate any negative effects.

The forum was offered at no cost with a grant from Health Care Research, a subsidiary of Alliant Health Solutions.

Meanwhile, a recording of a MAG 'Top Docs Radio' show that featured Dr. Dunnick on September 8 is also now available online.

[Click for MAG town hall recording](#)

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News Briefs

## Leading attorney to discuss telemedicine on 'Top Docs' show on October 13

Sidney S. Welch, J.D., M.P.H., will discuss the latest developments in telemedicine in Georgia when she appears on the Medical Association of Georgia's (MAG) monthly 'Top Docs Radio' program on the Business Radio-X Network at 2:30 p.m. on Tuesday, October 13.

Welch is a partner with the Healthcare, Life Sciences & Technology Practice at Kilpatrick Townsend & Stockton LLP.

Welch has written legal articles for the *Journal of the Medical Association of Georgia* since 2008.

Contact Welch at 404.815.6036 or [swelch@kilpatricktownsend.com](mailto:swelch@kilpatricktownsend.com).

MAG sponsors the 'Top Docs' program at 2:30 p.m. on the second Tuesday of every month.

[Click to listen to 'Top Docs Radio'](#)

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## Waycross area physicians invited to Rx drug disposal box dedication on October 6

The MAG Foundation is encouraging physicians in southeast Georgia to attend a ribbon-cutting ceremony that will take place at 5:30 p.m. on Tuesday, October 6 – when the Okefenokee Medical Society will donate a prescription drug disposal box to the Waycross Police Department, which is located at 512 Oak Street. The donation is being made in conjunction with the MAG Foundation's 'Think About It' campaign to reduce prescription drug abuse in the state.

"The MAG Foundation thanks the Waycross Police Department for its vision and leadership, and we applaud the Okefenokee Medical Society for its incredible generosity," says MAG Foundation President Jack M. Chapman Jr., M.D. "The people who live in this community are consequently going to have some additional peace of mind."

The ceremony will feature a number of dignitaries, including Waycross Police Chief Tony Tanner, Medical Association of Georgia (MAG) President Manoj H. Shah, M.D., Okefenokee Medical Society President McGregor Lott, M.D., MAG Past President William Clark, M.D., and MAG Executive Director Donald J. Palmisano Jr.

Go to [www.rxdrugabuse.org](http://www.rxdrugabuse.org) or contact Lori Cassity Murphy at 678.303.9282 or [lmurphy@mag.org](mailto:lmurphy@mag.org) for additional information or to support the 'Think About It' campaign with a donation.

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## News Briefs

## MAG recruiting 'Doctor of the Day' volunteers for 2016

The Medical Association of Georgia (MAG) is recruiting physicians to serve as a MAG 'Doctor of the Day' volunteer during the 2016 legislative session, which will run from January 11 to the middle of April. Doctor of the Day volunteers work in the Medical Aid Station at the State Capitol, where they provide free minor medical care to legislators and their staff members.

The Doctor of the Day is introduced in the House and Senate at the beginning of each legislative day.

Physicians who are interested in serving as a Doctor of the Day volunteer can [click here](#) to complete an application form or they can contact Liz Bullock at [ebullock@mag.org](mailto:ebullock@mag.org) or 678.303.9271.

[Click here](#) for additional information on the MAG Doctor of the Day program.

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## MAG reminding physicians to promote Georgia Drug Card

The Medical Association of Georgia (MAG) is reminding physicians to promote the Georgia Drug Card, which is a prescription drug assistance program.

The Georgia Drug Card is free, and it can be used by used by Georgia residents who don't have prescription drug insurance or who have high deductibles or who take medications that aren't covered by insurance.

The Georgia Drug Card can be used to obtain savings of up to 75 percent on prescription drugs at most retail pharmacies. The program is completely confidential, there are no membership restrictions or income requirements or age limitations, and there are no applications to complete. It is funded by pharmacy companies.

Patients can print a free Georgia Drug Card at [www.georgiadrugcard.com](http://www.georgiadrugcard.com). They can also secure the discount by simply walking into any CVS/pharmacy in the state and asking for the Georgia Drug Card discount – even if they don't have a physical card. Finally, they can obtain a more durable version of the card for free by contacting either John Cenerazzo at 404.630.4500 or [johnc@georgiadrugcard.com](mailto:johnc@georgiadrugcard.com) or Carmen Konert at 404.432.8545 or [carmenk@georgiadrugcard.com](mailto:carmenk@georgiadrugcard.com).

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News Briefs

## Enroll America promoting resources for uninsured

Enroll America is promoting its 'Get Covered America' program, which is designed to 1) help patients obtain and retain health insurance at the local/community level and 2) increase health insurance literacy.

The organization says that its 'Get Covered Connector' enables English and Spanish-speaking patients to find free health insurance application help at the local level by zip code – adding that patients can also use the tool to schedule in-person assistance appointments.

Enroll America also says that the Get Covered program “helps consumers understand the lowest and highest possible annual out-of-pocket costs for every marketplace plan available in a given area; obtain a more personalized cost estimate based on optional inputs such as health status and expected annual use of health care services; sort and filter plans based on different criteria, including premiums, maximum annual cost, annual deductible, personalized cost estimate, etc.; and determine whether plans cover their providers and prescription drugs.”

And Enroll America stresses that “most of the assister schedules/appointments in the state will go live in the middle of October as the start of the open enrollment period nears.”

Contact Riley Wells at [Rwells@enrollamerica.org](mailto:Rwells@enrollamerica.org) or 404.330.4015 with questions.

[Click for 'Get Covered Connector'](#)

[Click for 'Get Covered Calculator' \(i.e., to determine eligibility\)](#)

Enroll America reports that it is the nation's leading health care enrollment coalition. It is an independent nonprofit, nonpartisan, 501c3 organization.

*Editor's note: Enroll America has provided MAG with a statement that says that its data will not be used for partisan political purposes (e.g., voter registration).*

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Medical Association of Georgia (MAG) members who order 40 or more tamper-resistant prescription pads or 2,000 or more sheets of EMR printer paper from Rx Security will receive free shipping through October 31.

The free shipping is in addition to the normal 15 percent discount that is available for MAG members. Physicians can also add multiple providers and addresses to the prescription pads/EMR printer paper at no additional charge.

Go to [www.rxsecurity.com/mag-order](http://www.rxsecurity.com/mag-order) or call 800.667.9723 and use promo code "MAG103115" to order prescription pads/EMR printer paper from Rx Security, which is one of MAG's endorsed product vendors.

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MAG welcomed the following new members during September...

Woodrow Wilson Gray Jr., M.D., Macon  
Christopher A. Ibikunle, M.D., Loganville  
Angelina Postoev, M.D., Loganville  
Corazon Cabrera Tan, M.D., Atlanta

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## News Briefs

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### AMA flags key steps for ICD-10 transition

The American Medical Association (AMA) is flagging some important steps for physicians and medical practices to take if they experience any problems during the ICD-10 transition.

First, AMA has created a Medicare ICD-10 complaint form, which will be "forwarded to the Centers for Medicare & Medicaid Services (CMS). [However, AMA] will not provide individual responses to each complaint."

AMA says that physicians and practices can contact their Medicare Administrative Contractor (MAC) or monitor their MAC's website for ICD-10 developments. They can also contact the CMS ICD-10 ombudsman William Rodgers, M.D., at [ICD10\\_Ombudsman@cms.hhs.gov](mailto:ICD10_Ombudsman@cms.hhs.gov).

AMA suggests checking "the state Medicaid website for information about ICD-10 implementation and a method of contact for issues."

And AMA says to "check [commercial payer websites] for information about ICD-10 implementation and a method of contact for issues." The email address for ICD-10 inquiries for UnitedHealth Group is [ICD10questions@uhc.com](mailto:ICD10questions@uhc.com), while Humana's email address is [ICD10Inquiries@humana.com](mailto:ICD10Inquiries@humana.com).

AMA also notes that, "Any issues with practice management systems, electronic health records (EHR), billing vendors, or clearinghouses, should be directed to the company."

AMA suggests that physicians and practices "also contact their state or specialty medical society for advice on handling problems and to find out if other practices are experiencing similar issue." MAG members can contact Susan Moore at [smoore@mag.org](mailto:smoore@mag.org).

It is also worth noting that CMS has announced that its' ICD-10 Coordination Center and claims processing system will continue to operate "even if there is a government shutdown due to the budget."

AMA says that, "CMS has announced that MACs will issue advanced payments in situations where the MAC is unable to process claims within established time limits because of administrative problems, such as contractor system malfunction or implementation problems. An advanced payment is a conditional partial payment and will require repayment."

Finally, AMA stresses that, "To apply for an advance payment, the physician will be required to submit the request to their appropriate MAC. Should there be Medicare systems issues that interfere with claims processing, CMS and

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the MACs will post information on how to access advance payments. CMS does not have the authority to make advance payments in the case where a physician is unable to submit a valid claim for services rendered.”

[Click for AMA ICD-10 complaint form](#)

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### CMS releases 2016 PQRS payment adjustment fact sheet

The Centers for Medicare & Medicaid Services has released a fact sheet that addresses the "2016 Physician Quality Reporting System (PQRS) Payment Adjustment."

[Click for CMS 2016 PQRS payment adjustment fact sheet](#)

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### CMS releases 2014 QRUR, PQRS feedback reports

The American Medical Association (AMA) reports that the Centers for Medicare & Medicaid Services has released the 2014 Quality and Resource Use Reports (QRUR) and 2014 Physician Quality Reporting System (PQRS) feedback reports.

AMA says, "The 2016 PQRS and Value Modifier (VM) payment adjustments are based on 2014 reporting. For groups with 10 or more PQRS-eligible professionals (EP) that are subject to the 2016 Value Modifier, the QRUR shows how the VM will affect Medicare's 2016 payments to physicians. VM cost and quality scores will also be provided in the QRUR for other practices even though they are not yet subject to the VM."

AMA also notes that if physicians or group practices believe that an incentive payment or penalty was performed in error, they must file an Informal Review by November 9, 2015.

According to AMA, "CMS [has] discovered various errors with the 2014 PQRS data submitted by vendors on behalf of EP and group practices that reported via electronic health records (EHR) and qualified clinical data registries (QCDR). CMS has stated there will be no need for physicians or group practices to submit a PQRS Informal Review request."

And AMA explains that, "Because of the errors, the EHR and some of the QCDR data is inconsistent. Due to these errors, CMS will not post PQRS performance data for the affected practices on Physician Compare. However, determination of PQRS and Meaningful Use payment will not be affected because they are based solely on whether the practice successfully reported rather than on their actual performance; simply receiving the data will allow CMS to deem a physician or group practice as successful for purposes of avoiding a payment adjustment in 2016 or for receiving a 2014 incentive."

AMA says that, "For the value modifier, which involves calculating actual quality scores in addition to determining whether quality measures were reported, CMS has acknowledged the vendor data errors may create problems. Specifically, CMS will not be able to accurately calculate the PQRS portion of the Quality Composite Score. Instead, the quality score will be based solely on the claims-based outcomes measures and the Consumer Assessment of Healthcare Providers and Systems Survey, if applicable."

AMA also reports that it is "aware of instances in 2014 where physicians and practices mistakenly registered for the PQRS group practice reporting option

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(GPRO) submission mechanism and/or at the last minute their EHR vendor would not support their preferred submission mechanism. These groups or individuals, will have to file an Informal Review by November 9, 2015. We have been told this only affects a very small percentage of EPs and practices.”

An EIDM account is required to access the portal to review reports and/or file an Informal Review, and CMS transitioned the portal from the Individual Access to CMS Computer Services (IACS) to the Enterprise Identity Management System (EIDM) on July 13, 2015.

According to AMA, “The IACS system is now retired, but current PQRS and VM IACS users, their data, and roles have moved to EIDM, which is accessible from the portion of the CMS Enterprise Portal at <http://portal.cms.gov>. The EIDM system provides a way for business partners to apply for, obtain approval for, and receive a single user ID for accessing multiple CMS applications.”

[Click for 'How to obtain QRUR' web page](#)

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### CMS distributes letters addressing 2016 PQRS payments

*The Centers for Medicare & Medicaid Services distributed the following alert on September 11...*

On September 11, 2015, CMS began distributing letters to Physician Quality Reporting System (PQRS) individual eligible professionals (EPs), EPs providing services at a Critical Access Hospital (CAH) billing under method II, and group practices regarding the 2016 PQRS negative payment adjustment. The letter indicates that either an individual EP, EPs providing services at a CAH billing under method II, or the group practices that registered for the 2014 PQRS group practice reporting option (GPRO) did not satisfactorily report 2014 PQRS quality measures in order to avoid the 2016 negative PQRS payment adjustment and, therefore, all of their 2016 Medicare Part B Physician Fee Schedule (MPFS) payment will be subject to a 2.0% reduction.

The 2016 PQRS payment adjustment letter sent to individual EPs includes a Tax Identification Number (TIN)/National Provider Identifier (NPI) combination; the adjustment applies only to the individual EP associated with the TIN/NPI noted within the letter and not the clinic or facility. The 2016 PQRS payment adjustment letters sent to PQRS group practices includes a TIN only and applies to all EPs who have reassigned their billing rights to the TIN. Please check your letter in the upper left hand corner to determine if it contains your TIN or TIN/NPI.

In sum, all individual EPs, EPs providing services at a CAH billing under method II, and group practices that billed services under the MPFS for Medicare Part B beneficiaries in 2014 must have satisfactorily reported to the PQRS in order to avoid the 2016 negative PQRS payment adjustment.

What were the reporting criteria for 2014 (to avoid the 2016 Payment Adjustment)?

As stated in the 2014 PQRS List of Eligible Professionals, PQRS covered professional services are those that are paid under or based on the MPFS. To the extent that individual EPs, EPs providing services at a CAH billing under method II, or group practices are providing services which get paid under or based on the MPFS, those services are eligible for PQRS incentive payments and/or payment adjustments. Services payable under fee schedules or payment systems other than the MPFS are not included in PQRS. Therefore, if an EP or PQRS group practice rendered services under the MPFS in 2014 and did not meet the 2014 PQRS satisfactory reporting requirements, they were sent this letter to indicate that they will be subject to the 2016 PQRS payment adjustment.

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“Health Insurance Deductibles Outpacing Wage Increases, Study Finds,” *The New York Times*, September 22

If I've received the payment adjustment letter, what are my options?

CMS would also like to remind individual EPs, EPs providing services at a CAH billing under method II, and group practices that there are no hardship exemptions for the PQRS payment adjustment. If you believe that the 2016 negative PQRS payment adjustment is being applied in error, you can submit an informal review request. All informal review requests must be submitted via a web-based tool, the Quality Reporting Communication Support Page (Communication Support Page), during the informal review period. Please note: Informal review is happening now and available for a limited time! Informal review is the process in which CMS will investigate whether an EP met the criteria for satisfactorily reporting under PQRS. The deadline to request an informal review is 60 days from the release of PQRS Feedback reports. More information and instructions for requesting an informal review are also included in the toolkit available at the PQRS website.

Individual EPs and PQRS group practices that participated in GPRO may access their 2014 Quality and Resource Use Reports (QRURs) from the CMS Enterprise Portal. To access QRURs, an Enterprise Identity Management (EIDM) account is required. See the Quick Reference and User Guides for assistance.

Please note that the PQRS payment adjustment is separate from any additional adjustment that may be applied to individual EPs who are physicians under the Medicare Electronic Health Record (EHR) Incentive Program, and the Physician Value-Based Payment Modifier (Value Modifier) program in 2016. Individual EPs and PQRS group practices, as identified by their TIN, can access the TIN's 2014 Annual Quality and Resource Use Report (QRUR) on the CMS Enterprise Portal at <https://portal.cms.gov> to determine whether the TIN will be subject to an upward, neutral, or downward adjustment under the Value Modifier in 2016. To access a QRUR, an Enterprise Identity Management (EIDM) account with the correct role is required. See the How to Obtain a QRUR Page for instructions on how to set up an EIDM account and access the QRURs. Information about the QRURs is available on the 2014 QRUR website.

### Additional Resources

- For details regarding the 2016 PQRS payment adjustment, please see the Payment Adjustment Information page of the PQRS website and click on the payment adjustment toolkit..
- For information regarding other Medicare physician quality programs that apply payment adjustments, please see the Value-Based Payment Modifier website and/or the EHR Incentive Program website.
- For additional questions, please contact the QualityNet Help Desk at 866.288.8912 (TTY 877.715.6222) or via [qnetssupport@hcqis.org](mailto:qnetssupport@hcqis.org). They are available from 7:00 a.m. to 7:00 p.m. Central Time Monday through Friday.

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### MEDPAC weighs in on proposed 2016 Medicare payment rule

The Medicare Payment Advisory Commission recently submitted a letter to the Centers for Medicare & Medicaid Services (CMS) to address its proposed "Medicare Program; Revisions to Payment Policies under the Physician Fee Schedule and Other Revisions to Part B for CY 2016" rule.

[Click for MEDPAC letter](#)

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### GAO issues report on Medicare D RAC program

The Government Accountability Office (GAO) has issued a report that addresses the Medicare Part D Recovery Audit Contractor (RAC) program.

The report examines 1) how the Centers for Medicare and Medicaid Services (CMS) has implemented the RAC program, which is required by the Affordable Care Act (ACA) and 2) the challenges that CMS has faced during its implementation and 3) the extent to which CMS has overseen RAC audits and 4) the results of the RAC program to date and any challenges that CMS and the RAC program have faced in identifying and collecting improper payments.

GAO is recommending that CMS 1) set clearer expectations in RAC contracts and 2) conduct more diligent oversight of the RAC program (e.g., conducting annual RAC performance) and 3) improve the process for approving new audit topics to maximize improper payment recovery. CMS concurred with GAO's recommendations.

The report was requested by House Ways and Means Health Subcommittee Chairman Kevin Brady (R-TX).

[Click for GAO report](#)

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### CMS addresses PQRS 2016 Informal Review process

*The Centers for Medicare & Medicaid Services distributed the following alert on September 11...*

In 2016, CMS will apply a negative payment adjustment to individual eligible professionals (EPs), Comprehensive Primary Care (CPC) practice sites, and group practices participating in the Physician Quality Reporting System (PQRS) group practice reporting option (GPRO) (including Accountable Care Organizations [ACOs]) that did not satisfactorily report PQRS in 2014. Individuals and groups that receive the 2016 negative payment adjustment will not receive a 2014 PQRS incentive payment.

EPs, CPC practice sites, PQRS group practices, and ACOs that believe they have been incorrectly assessed the 2016 PQRS negative payment adjustment may submit an informal review between September 9, 2015 and November 9, 2015 requesting CMS investigate incentive eligibility and/or payment adjustment determination. All informal review requestors will be contacted via email of a final decision by CMS within 90 days of the original request for an informal review. All decisions will be final and there will be no further review.

All informal review requests must be submitted electronically via the Quality Reporting Communication Support Page (CSP) which will be available September 9, 2015 through November 9, 2015 at 11:59 p.m. Eastern Time.

Please see 2014 Physician Quality Reporting System (PQRS): Incentive Eligibility & 2016 Negative Payment Adjustment - Informal Review Made Simple (available on the Analysis and Payment section of the PQRS website) for more information.

For additional questions regarding the informal review process, contact the QualityNet Help Desk at 866.288.8912 (TTY 877.715.6222) or [Qnetsupport@hcqis.org](mailto:Qnetsupport@hcqis.org) Monday-Friday from 7:00 a.m. to 7:00 p.m. Central Time. To avoid security violations, do not include personal identifying information, such as Social Security Number or Taxpayer Identification Number (TIN), in e-mail inquiries to the QualityNet Help Desk.

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### CMS unveils EHR programs requirements web page

The Centers for Medicare & Medicaid Services has created a new web page that "contains all the program requirements and resources for previous years of the EHR Incentive Programs."

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### CMS recruiting practices for heart health test program

The Centers for Medicare & Medicaid Services (CMS) is encouraging practices to sign up for the Million Hearts<sup>®</sup> Cardiovascular Disease Risk Reduction Model Test, which is an important part of the Million Hearts<sup>®</sup> program that is designed to prevent one million heart attacks by 2017.

CMS hopes to recruit hundreds of practices for the test that will use "randomized-controlled design to identify and test scalable models of care delivery that reduce cardiovascular risk."

CMS stresses that, "It's easy to apply — two steps online, 30 minutes total." It also notes that "the model offers financial incentives to providers who participate."

The deadline to enroll is October 8.

Call 703.894.4399 or email [mhmodel@cms.hhs.gov](mailto:mhmodel@cms.hhs.gov) with questions.

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### Alliant offering programs/resources to address depression/alcohol and adult immunizations

Alliant Quality is encouraging primary care physicians in Georgia to become familiar with two new resources, including an 'Improving Identification of Depression and Alcohol Use Disorder in Primary Care' summary and an 'Improving Immunizations for Medicare Beneficiaries' summary.

Alliant Quality says that, "We are recruiting primary care practitioners to Improve Identification of Depression and Alcohol Use Disorder...we aim to increase the annual screening rate for the identification of depression (G0444) and alcohol use disorders (G0442) in Medicare beneficiaries."

And Alliant Quality explains that, "Our goal is to move Georgia to the Healthy People 2020 goal in adult immunizations of influenza, pneumonia and zoster and reduce racial disparities."

Alliant Quality is the Quality Innovation Network-Quality Improvement Organization (QIN-QIO) for Medicare for Georgia and North Carolina.

[Click for 'Improving Identification of Depression and Alcohol Use Disorder in Primary Care' summary](#)

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**“Forty percent of people with private health insurance whose deductible equaled 5 percent or more of their income said they had decided not to go to the doctor when they were sick...”**

**“Health Insurance Deductibles Outpacing Wage Increases, Study Finds,” *The New York Times*, September 22**



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October 1, 2015

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### GRMC invests in Columbia County surgery center

*The Georgia Regents Medical Center distributed the following press release on September 25...*

Georgia Regents Medical Center (GRMC) has purchased a 30-percent ownership in the Surgery Center of Columbia County. This 21,000-square-foot outpatient day surgery facility in Evans opened in 2007 as a joint venture between University Health Resources, Inc., the for-profit corporation of University Health Care System, and more than a dozen board-certified physicians and podiatrists.

"We are pleased to be able to partner with Georgia Regents Medical Center in an effort to help them increase their outpatient surgery capacity and better serve their patients in need of surgery," explained James Davis, President/CEO of University Health Care System. "It makes sense for both parties to maximize the use of existing facilities."

Recent advancements in technology, particularly in minimally invasive surgery, have increased the demand for outpatient surgical care, because it can benefit patients through shorter operations, fewer complications and quicker recoveries, according to industry reports.

Located on University's longstanding Evans Campus on North Belair Road, the Joint Commission-accredited Surgery Center of Columbia County offers a broad array of outpatient procedures performed by highly skilled and compassionate physicians and staff in four spacious surgical suites using state-of-the-art technology. Some of the surgical services offered at the center include general, colorectal, ENT, and GI surgeries.

"We're excited about this new collaboration with University Hospital," said Charles G. Howell, M.D., Chairman of the Department of Surgery at GRMC and Professor of Surgery and Pediatrics at Georgia Regents University's Medical College of Georgia. "We have highly qualified surgeons performing some very complex and lengthy operations in our hospital operating rooms, and that doesn't always mix well with ambulatory surgical care. Moving more outpatient surgeries to Columbia County will help us alleviate some of the space concerns we're experiencing so that we can meet the needs of our patients and families more quickly and efficiently at both locations. Additionally, this partnership is another great opportunity for us to work with University Hospital to make Augusta a medical destination."

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