Colorado Physicians Wrestle with Future of Health Care

Denver Medical Society delegates to the statewide House of Delegates traveled to Vail September 10-12 to represent their Denver physician colleagues in the annual educational and policy-setting meeting of the Colorado Medical Society House of Delegates for 2010. The meeting gathered nearly 200 physicians from across the state for education, policy development for the upcoming year, and collegiality.

Educational components of the event included a presentation on the current landscape regarding physician transitions to health information technology and the efforts of the Colorado Regional Health Information Organization (CORHIO) to work with local communities to develop a statewide health information exchange network that would facilitate the secure exchange of information among health care providers across the state. Another session focused on efforts underway to bring about physician payment reform as a move toward value-based payments for health care services. Jay Want, MD, Chairman and Phil Kalin, CEO, of the Colorado Center for Improving Value in Health Care (CIVHC) discussed efforts currently underway in pilot programs across the country as well as the impact of new health care reform legislation which provides funding for extensive testing of new payment methodologies. CIVHC is a public-private entity created by Governor Ritter to identify and advance Colorado-based initiatives to improve the health of Coloradans by creating an efficient, high quality, transparent health care system. Dr. Pramenko presented the Practice Evolution Reality Check (PERC), a web-based tool that will offer physicians an “environmental scan” of the forces propelling health care system changes and will include resources to help physicians navigate the issues that will be facing them.

Delegates also heard from Colorado Senate Candidate Ken Buck and Gubernatorial Candidate John Hickenlooper. Other candidates had been invited but were unable to participate.

The Denver Medical Society was the recipient of the 2010 CMS Small Donor Committee Challenge for having achieved the largest percentage of member physicians who contributed to the Small Donor Fund during the year. Contributions to the fund are used to support Colorado political candidates in the interest of preserving access to care and advances in patient safety efforts.

Delegates also participated in an open forum to discuss the impact of health care reform legislation and expressed opinions on how Colorado organized medicine can best support the interests of physicians and patients during these tumultuous times. A variety of
opinions were expressed, and it was apparent that there is a great deal of uncertainty among physicians about what various reform elements will mean to the delivery of health care and the ways and environments in which physicians will be practicing in future years. While continuing to advocate for legislative and regulatory actions that will best serve the interests of high quality health care delivery, delegates also expressed the belief that organized medicine should help physicians to identify the tools and resources necessary to successfully respond to the initiatives now in place.

At the Saturday evening gala Michael J. Pramenko, MD, a family medicine physician in private practice in Montrose was inaugurated as the new CMS President.

**Governor Proposes Anesthesia Opt-Out**

One of the most significant issues discussed by the delegates was the recent action of Governor Ritter asking the Boards of Medicine and Nursing for opinions on whether he should request an “opt-out” from federal Medicare rules requiring physician supervision of anesthesia services. Under Medicare rules, physician supervision is required, but each state has the authority to request an “opt-out” if such action is consistent with their own state law. As proposed, the “opt-out” request would apply to 29 critical access hospitals throughout Colorado. Governor Ritter asked each Board to determine whether an “opt-out” would be consistent with Colorado law and whether it would be in the best interest of Colorado residents. In August, both Boards voted in the affirmative on each of these issues, thus supporting the Governor’s consideration of an “opt-out”.

This action is strongly opposed by the Colorado Society of Anesthesiologists and the American Society of Anesthesiologists who had approached CMS for support on this issue. The Colorado Medical Society has existing policy supporting physician supervision of anesthesia services, as does the AMA. CMS counsel testified in opposition to the “opt-out” at the Board of Medicine hearing on August 19 based on existing policy and noting that under Colorado law the provision of anesthesia services is a medical function, or when performed by a CRNA, a delegated medical function, and thus subject to physician supervision. Additionally, Colorado case law has firmly established under the “Captain of the ship” legal doctrine that the surgeon is clearly responsible for all actions in an operating room and that this accountability would not be altered even if the “opt-out” was exercised.

Although some hospitals have pushed for the “opt-out” as a way to increase access in underserved communities, many physicians voiced the opinion that it would be more difficult to recruit physicians to these facilities if under an “opt-out” scenario they would be legally liable for actions over which they would have no supervisory authority. Delegates voted to support the CMS Board of Directors recommendation to join with the CSA and ASA in a lawsuit to oppose the “opt-out” if Governor Ritter chose to go that direction. Since the meeting, CSA and CMS have been collaborating to encourage the Governor to delay a decision until further discussion can occur among the parties and alternative solutions to access problems can be considered. On September 22, the CMS delivered to the Governor a letter requesting that he consider convening a meeting of stakeholders, specifically citing discussions at the Annual Meeting. Despite these efforts, on September 27, Gov. Ritter signed the request to opt-out of Medicare oversight requirements.

**Crafting Policy for the Issues Ahead**

Delegates considered proposed resolutions on a number of policy matters. A DMS proposal, originally brought forward by Robert McCartney, MD, to support legislative action under the Colorado Medicaid drug benefits to remove the current exemption from generic substitution for medications to treat biologically based mental illness, cancer, epilepsy and HIV was adopted. Delegates also supported a proposal that CMS bring to the AMA at its Interim Meeting in November a resolution that would support an SGR fix that would use savings derived from the implementation of comparative effectiveness research to offset the costs of altering the SGR

(Continued on page 6)
Denver Medical Society 140th Annual Meeting

Celebrating the Art and Science of Medicine

With the Installation of

Naomi M. Fieman, MD, as President

Our 50 Year Physician Recognitions of

Anthony L. Angello, MD
Marvin P. Burnett, MD
Michael Cherington, MD
Stanley H. Ginsburg, MD
John F. Yost, MD

and Lamont School of Music String Trio

Friday, November 12, 2010
Cocktails—6:00 p.m.
Dinner—7:00 p.m.

Palettes
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Denver Medical Society Annual Meeting Registration

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Friday, Oct. 15, 2010—12:00-12:30 pm

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**ARCHIVED WEBINAR**
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Becky Rudolph with Healthcare Management Partners discusses the impact of the economy and the trend toward High Deductible Health Plans on physician offices and patient debt. Becky will review the process of estimating the patient financial responsibility and tools available to determine the amounts to collect from patients at the point of service.

View it online at the Practice Management resource group by selecting Webinars. View other archived webinars at your convenience as well!

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**Whose Talking About You And What Are They Saying?**

**How to Setup a Google Alert**

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Centers for Medicare and Medicaid Services Makes Information About Fee Schedule Rates More Accessible

The Physician Fee Schedule Lookup Tool was designed to provide information on the payment rate for services by physicians and non-physician practitioners under the Medicare Physician Fee Schedule (MPFS). The Fee Schedule Lookup includes more than 10,000 physician services, the associated relative value units, a fee schedule status indicator, and various payment policy indicators needed for payment adjustment. With the Fee Schedule Lookup, the user can find not only the national unadjusted payment rate for each service, determined by multiplying the total relative value units assigned to the service by the appropriate conversion factor, but also the geographically adjusted payment rates for each payment locality.

CMS has now updated and enhanced the Fee Schedule Lookup to allow the user to:

- Download search results into a CSV file.
- Modify search criteria without starting over.
- Search on all available types of information at the same time (Pricing Information, Payment Policy Indicators, Relative Value Units and Geographical Practice Cost Index).

Medicare Participation Guide: Know Your Options

From mid-November through December 31, physicians will have their annual opportunity to review and perhaps change their participation status with the Medicare program. Given the severe Medicare payment disruptions caused this year as Congress established, and then missed, multiple deadlines to stop payment cuts caused by the sustainable growth rate (SGR) formula, physicians are encouraged to prepare for this opportunity and review their options carefully. To help them choose the direction that is right for their practices, the AMA has developed the “Know your options: Medicare participation guide.” This kit contains a detailed explanation of the three available options: participation (PAR), non-participation (non-PAR), and private contracting. It also includes a helpful revenue calculator and various sample materials to help physicians share information with current, new, and prospective patients.

The Medicare options kit is accessible to all physicians online at www.ama-assn.org/go/medicareoptions.

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Our clinical consulting team is led by Dr. Rick May, Past-President of the Colorado Medical Society. Call him at 303-919-2242 for more details.
CMS Annual Meeting Report
(Continued from page 2)

formula and that would provide specific liability protection for physicians who relied upon comparative effectiveness research for treatment decisions. The House of Delegates also ratified a recommendation from the Council on Legislation that the CMS oppose Amendment 62 on the ballot in Colorado in November. The so-called "personhood" amendment was seen as inappropriate interference in medical decision making and the patient/physician relationship and has potential implications for numerous medical conditions and treatments. Referred for further study was a DMS resolution originated by Stephen Sherick, MD, that would encourage legislation or regulation requiring health care providers, facilities, and insurance and pharmaceutical companies to provide price transparency through good faith price-of-services estimates that would be openly posted as a list of services available in non-emergency situations. Also referred for further study was a proposal to support legislation to require a parent asserting a personal belief exemption for childhood vaccinations complete a notarized letter of explanation. CMS adopted a resolution to support current AMA policies regarding the rights of physicians to privately contract with Medicare patients and endorsed the Joint Principles of the Patient Centered Medical Home.

Commitment of DMS Delegates Appreciated

DMS would like to express its appreciation to those physicians who took time to participate in the Annual Meeting as delegates: Doctors Mitchell Achee, Lee Anneberg, Elinor Christiansen, David Claassen, Ted Clarke, David Downs, Donald Eckhoff, Naomi Fieman, Glenn Foust, Curtis Hagedorn, Harrison Hayes, Herbert Jacobs, Michael Keller, Michael Lepore, Lucy Loomis, Bruce Madison, Rick May, Lee Morgan, Nora Morgenstern, Ray Painter, Girish Paranjape, Debra Parsons, Gerald Rainer, David Schnur, Stephen Sherick, Russell Simpson, Patricia VanDevander, Kim Warner, and Rocky White. Our thanks also go to the DMS representatives to the CMS Board of Directors who attended—Drs. Randy Clark and Johnny Johnson.

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OFFICE MANAGERS LUNCH MEETING

Is your head ready to burst whenever you hear about HIE, HIT, EHR, EMR and “meaningful use”? Join the crowd.

Do you need help in understanding what is required to qualify under the “Meaningful Use” federal standards for stimulus funds, or what a Health Information Exchange program does?

Do you know you may be eligible for No-Cost services provided by Colorado’s Regional Extension Center (CO-REC) to help you prepare for selecting and implementing an electronic health record if you are a small primary care practice?

Are you aware there are approved lists of vendors that are being vetted that will assure you they meet interoperability requirements?

We not only have the questions, but we have the answers too!

Denver Medical Society  Thursday, October 21, 2010  Robyn Leone, Director
1850 Williams Street  12:00-1:30  lunch provided  Colorado Regional Extension Center

RSVP to the DMS at 303-377-1850 or email to dms@denvermedsociety.org by Monday, October 18th.
An excerpt from the
Denver Medical Bulletin
May 27, 1911

American Surgical Association Meeting

The meeting of the American Surgical Association in Denver June 19, 20, 21 will bring to this city one of the most important medical bodies of the world, corresponding in dignity to the similar associations of England, Germany and France. The attending members will be entertained by a dinner at the Denver Club on the evening of the 19th, and an automobile ride to Morrison on the afternoon of the 21st; the members of the County Society will also be requested to assist in showing them the city. The meetings will be held in the ordinary of the Brown Palace hotel and are open to the profession. The most important feature of the meeting will be a discussion on “The Present Status of General Anaesthesia,” contributions to which will be made by Bevan of Chicago, Moore of Minneapolis, and Meltzer of New York. Among others who will read papers are William and Charles Mayo of Rochester, Bloodgood of Baltimore, Scudder and Richardson of Boston, and Harold J. Stiles of Edinburgh, Scotland.

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