

Take Action to Stop 3% Medicaid Rate Cut

The North Carolina Medical Society (NCMS) Government Affairs staff is working with key legislators to repeal the 3 percent retroactive cut to Medicaid reimbursements. In August 2014, the General Assembly mandated a 3 percent cut to physician payments to be effective retroactively to Jan. 1, 2014. The 3 percent reduction in physician payments going forward started on Monday, March 2. The recoup of payments for the last 14 months, however, has not yet been implemented.

In a statement released to the media on Monday, when the NC Department of Health and Human Services began the 3 percent reduction in payments going forward, **NCMS President Robert E. Schaaf, MD, FACR**, stated: "North Carolina's physicians are preparing for an unprecedented retroactive payment cut on services already provided to Medicaid patients over the last 14 months....requiring these medical practices to pay back 3 percent of what the state has already paid them...would wreak havoc with the finances of these businesses."

As part of the effort, hundreds of NCMS members responded thus far to our call to contact their legislators to ask them to repeal this unnecessary and ill-advised retroactive take back of money paid for services provided to the state's most vulnerable population. [Talking points](#) with examples of how medical practices throughout the state would be affected by such a retroactive cut help make the case. [Take action and contact your legislator](#).

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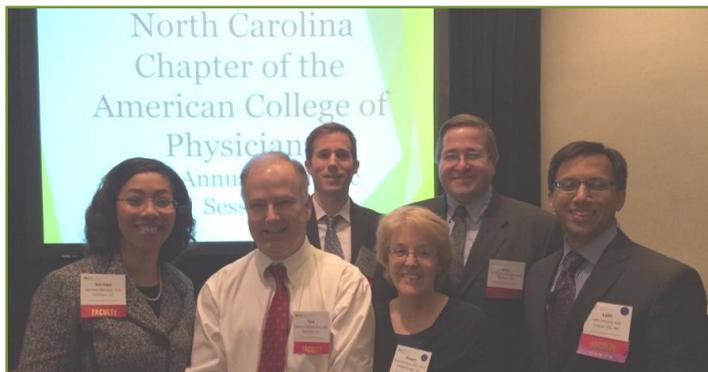
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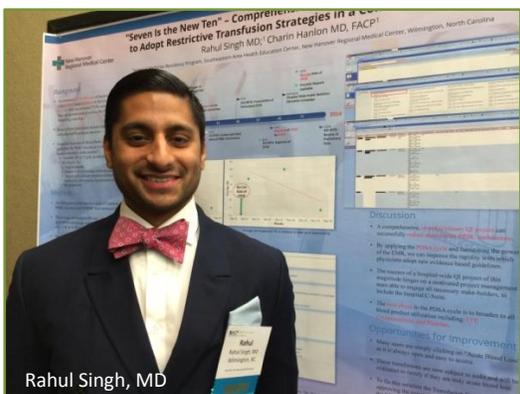


Internists and Hospitalists Gathered in Durham for the 2015 NC,ACP Annual Scientific Session

More than 200 internal medicine physicians and medical students met Feb. 13-14 in Durham for the 2015 NC,ACP Annual Scientific Session. This year's amazing program was developed by Program Co-Chairs Dr. Dawn Brezina and Dr. Sharon Rubin. New to this year's meeting, the



Friday schedule featured concurrent tracks tailored to inpatient and outpatient care. This feature was well-received by the attendees. In one track, the hospitalists enjoyed presentations on topics including *Foley-Related UTI*, *Managing Hospital-Acquired CDI*, and *Transitions*, among others. The outpatient track included presentations on *Autoimmune Disease*, *Managing Hepatitis C*, *Pre-Op Screening and Management*, and more.



The foyer was a-buzz with the excitement that the medical student and resident poster presentations brought to the meeting. Presenters competed for cash prizes, and the winners of each category additionally have expenses reimbursed to participate in the national poster competition in April. The best overall poster winner was **Dr. Rahul Singh** (pictured) for his poster "*Seven Is the New Ten – Comprehensive Quality Improvement Project to Adopt Restrictive Transfusion Strategies in a Community Hospital.*" The winners:

- Best High Value Care: **Eric Walford, MD** (UNC Chapel Hill)
- Best QI and Best Overall: **Rahul Singh, MD** (New Hanover Regional)
- Best Clinical Vignette: **Sean Marco, MD** (ECU Brody)
- Best Clinical Research: **Basem Mishriky, MD** (ECU Brody)
- Best Student: **Rita Kuwahara** (UNC Chapel Hill)



Many thanks to the poster judges, Drs. Matt Blackwell, Deb Bynum, Charin Hanlon, Rick Hobbs, Shilpa Bhardwaj, David Miller, Emily Mullen, Alex Paya, Poonam Sharma, Heather Tarantino, and Jane Trinh.



Chief Residents from all seven medical schools and residency programs presented interesting cases to the full audience on Saturday morning, and Dr. Sharon Rubin led teams from Duke, ECU and UNC in a competitive final round match of Doctor's Dilemma. The Duke team comprised of Drs. Nick Turner, Paul St. Romain and Peter Hu won the match. "The NC,ACP is excited to send a resident team to represent North Carolina at the National Meeting in Boston. This team will have to study hard and be quick with responses as the national competition will have tougher questions!"

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Significantly Revised Workers' Comp Fee Schedule Achieves Final Approval--First Update in 20 Years!

The North Carolina Chapter of the American College of Physicians and the North Carolina Medical Society (NCMS) are excited to report that the N.C. Industrial Commission has confirmed that North Carolina's workers' compensation fee schedule has been updated for the first time in nearly 20 years. The [new rates](#) will take on effect July 1, 2015. The N.C. Rules Review Commission on Thursday, Feb. 19, 2015, approved administrative rules which provide the fee schedule update. "The new fee schedule means huge progress for our state's injured workers, the physicians who treat them, and our workers' compensation system as a whole," said NCMS President Robert E. Schaaf, MD, FACR in a statement released by the NCMS on Feb. 23, 2015.

This outcome is the result of many years of advocacy by the NCMS on this issue along with many specialties' efforts and a lot of work by NCMS Associate General Counsel Conor Brockett, who guided the successful strategy to completion. The update was required by legislation calling for the Industrial Commission to link workers' compensation rates to Medicare rates and policies. One of the forces that propelled this action is the difficulty that workers currently experience when seeking care resulting from on-the-job injuries. The proposed rules were published in the North Carolina Register in November 2014 and a public hearing was held in December. The NC,ACP joined the NCMS in a [comment letter](#) supporting the proposed rules.

"The new Industrial Commission Medical Fee Schedule incorporates long needed revisions that will protect injured workers' access to healthcare while significantly reducing the overall cost of the workers' compensation system by establishing fair and reasonable fees for medical treatment," said Chairman Andrew T. Heath, in a [press release](#).

Advocacy Update

Members of the North Carolina General Assembly (NCGA) convened briefly in Raleigh in mid-January to complete organizational work that included selecting leaders for both chambers. Rep. Tim Moore (Cleveland) was selected as House Speaker and Sen. Phil Berger (Guilford, Rockingham) was again selected as Senate President Pro Tempore. The legislative session got underway in earnest on Jan. 28.

Committee assignments for the 2015-2016 session were announced on Wednesday, Jan. 28. On the House side, Rep. Nelson Dollar (Wake) was again named Senior Chairman on *Appropriations* and Vice Chairman on *Health*. Rep. Donny Lambeth (Forsyth) was named Chairman on *Appropriations* and also on *Health*. Lambeth is also a member of the *Joint Legislative Oversight Committee on Health and Human Services*. Rep. Marilyn Avila (Wake) was named Vice Chairman on *Appropriations*, Chairman on *Appropriations, Health and Human Services*, and Vice Chairman on *Health*. On the Senate side, Sen. Tommy Tucker (Union) will play a bigger role in health policy and appropriations. Tucker was named Co-Chairman on *Appropriations on Health and Human Services* and Co-Chairman on *Health Care*.

Key issues for physicians in this legislative session include:

- Advocating for a physician-led Medicaid program

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- Stopping harmful Medicaid rate cuts
- Protecting the medical liability reform gains of 2011

NC,ACP members interested in participating in our White Coat Wednesday program, presented jointly with the North Carolina Medical Society, are encouraged to contact us at ncacp@ncmedsoc.org. The White Coat Wednesday program brings physicians to Raleigh for briefings, meetings with legislators, and a taste of how our state's General Assembly functions. These events are held on Wednesdays, but physicians are welcome on Tuesdays, Wednesdays and Thursdays – the weekdays when the legislature is in session. If you can't make it to Raleigh, but you are interested in meeting locally with your legislators, please [let us know](#) and we will help make that happen.

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NCMS Responds To Proposed ACO Program Changes

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The North Carolina Medical Society's (NCMS) ACO Task Force finalized their comments on proposed changes to the Medicare Shared Savings Program (MSSP) and submitted them to the Centers for Medicare & Medicaid Services' (CMS) last month. [Review the comments here](#) (PDF).

Generally, the Task Force found CMS' proposals to be a positive step to encourage more practices to participate in, and continue to participate in the MSSP, although there were some concerns outlined in the comments. CMS released the draft rule on the MSSP for Accountable Care Organizations (ACOs) on Dec.1, and proposed a number of modifications, including:

- Allowing for an additional 3 year agreement period containing no downside risk but with a lower shared savings payment potentials (40 percent);
- Adding a third track with prospective patient attribution and greater risk and savings potential;
- Updating the Minimum Savings Rate and Minimum Loss Rate for Track 2 to mirror Track 1;
- Changing the beneficiary assignment methodology;
- Clarifying some ambiguities in the rule;
- Improving data sharing and reducing administrative burden.

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March 17 Webinar: Personal Financial Planning for Early Career Physicians

As you may know, the ACP offers a series of free online webinars on leadership topics relevant to internal medicine. These webinars provide both an educational experience and a discussion forum so that ACP members can learn, pose questions, and share ideas with leaders in the internal medicine field.

Registration is now open for the next **webinar** in the series, "**Personal Financial Planning for Physicians**," which will be held on **Tuesday, March 17**, 2015, at **6:30 pm** ET. The webinar, which is intended **for early career physicians**, will be presented by Ralph L. Hibbs, Jr., MBA, CPA, Chief Financial Officer at American College of Physicians.

We encourage you to register for the Personal Financial Planning for Physicians webinar here (<http://tinyurl.com/moqs3zt>) and share this information with colleagues that may be interested. If you have any questions about the ACP Leadership Academy webinar series please contact ACP Membership Development staff at mbrdev@acponline.org.

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The New BCBSNC “Estimate Health Care Costs” Website Provides Cost Estimates for Various Procedures. But How Accurate is the Data?

Please take a few minutes to browse [this new website](#) and let us know about any inaccuracies and/or discrepancies. In an effort to improve health care costs transparency, Blue Cross and Blue Shield of North Carolina (BCBSNC) recently launched a new online costs estimator. Health care consumers can use the site to compare the cost of various procedures within a geographic range simply by entering the type of treatment, their location and the search range in miles. We are looking into this issue at the request of physicians who are concerned with the accuracy of the data presented. Please email your feedback to the NC,ACP at ncacp@ncmedsoc.org, or contact us at 919-833-3836.

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NC Doctors’ Day 2015

March 30, National Doctors’ Day, is a time to recognize and celebrate the hard work of physicians – all of the many medical specialties make up a remarkable community, coming together as one to help and heal patients. The observance dates back to 1933 and was officially established by Congress in 1990.

Now the North Carolina Medical Society (NCMS) is beginning a new, homegrown tradition with [North Carolina Doctors’ Day](#). To mark the event, NCMS is sponsoring the 2015 North Carolina Doctor of the Year Award, allowing patients and the public to honor our state’s physicians who are:

- Passionate about keeping patients happy and healthy
- Experts in using life-changing treatments to give patients the best care
- And making a positive impact in the community

See more at: www.ncdoctorsday.org/

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Rep. Ellmers Reintroduces the Flex-IT Act

U.S. Representative Renee Ellmers (R-N.C.) introduced The Flexibility in Health IT Reporting (Flex-IT) Act of 2015 ([H.R.270](#)) on January 26, 2015. Originally introduced in the 113th Congress, this legislation gives providers the flexibility they need to successfully comply with Meaningful Use requirements. The bipartisan bill was introduced with two Republicans and two Democrats leading as original co-sponsors, including Rep. Marsha Blackburn (R-Tenn.), Rep. G.T. Thompson (R-Penn.), Rep. Ron Kind (D-Wis.) and Rep. David Scott (D-Ga.).

The Flex-IT Act allows providers the option to choose any three-month quarter for an EHR reporting period to qualify for the Meaningful Use Program in 2015, as opposed to a full year. This shortened reporting period would be an important step in addressing the challenges faced by doctors, hospitals and other medical providers while avoiding threats to patient safety due to the rigid reporting period currently in place.

Last year, the U.S. Department of Health and Human Services (HHS) published a final rule, which included a provision that requires providers to perform a full-year EHR reporting period in 2015. The full-year reporting rule has sparked much outrage in the health care industry, as evidenced in the low attestation numbers reported last year. CMS reports released in December confirmed that only 4 percent of physicians and less than 35 percent of hospitals achieved Stage 2 Meaningful Use requirements.

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CMS Announces Shortened 90-day Reporting Period for Meaningful Use Attestation

Some welcome news came out of CMS on Jan. 29, when the agency announced its plan to shorten the 2015 reporting period for Meaningful Use from one year to 90 days. [Read more](#) about what this means to you and your practice.

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The Sunshine Act Reporting Period Restart

The second year of data submission under the Sunshine Act began on Feb. 2, 2015. March 31, 2015, is the deadline for all applicable manufacturers and group purchasing organizations (GPOs) to submit corrected 2013 data (if needed) and submit their 2014 data to the Open Payments system. CMS released the first year of [Open Payments data](#) on Sept. 30, 2014. We encourage all physicians to review the site and to ensure the accuracy of payments associated with them.

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McCrorry Addresses Medicaid, Partnership with Doctors in State of the State Speech

In his State of the State Address on February 12, 2015, North Carolina Governor Pat McCrorry calls for a “patients’ first philosophy” in health care. He spoke about a “partnership with doctors” (@1:00), “physician-led reform” (@1:40), and the intention to “Continue to make North Carolina an excellent place for doctors to practice medicine.”(@2:47) Watch the health care portion of his speech online at http://www.youtube.com/watch?v=El_uQNwzSSE.

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