



MLCMS News Briefs

The monthly newsletter of the Mendocino-Lake County Medical Society

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June 2010

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Dr. Bruce Andich confirmed as MLCMS president-elect

Dr. Bruce Andich, a Willits internist who served as MLCMS president from 1989 to 1990, has been confirmed as president-elect by a vote of MLCMS members. His term will begin on July 1, when the current president-elect, Dr. John Williams, becomes president of MLCMS.

The election, which concluded May 31, also confirmed Dr. Jay Joseph as MLCMS secretary/treasurer and Drs. Brian Hanson, Anne Tait and Robert Werra as members of the board of directors. Drs. Bruce Andich, John Williams, Aldis Baltins and Richard Guthrie were confirmed as members of the CMA delegation.

Resolutions for CMA House of Delegates needed by June 26

Resolutions for the CMA District 10 caucus, including Mendocino and Lake counties, are due by June 26. The caucus is the first stop on the way to the CMA House of Delegates, which meets this fall to consider resolutions from around the state. Any MLCMS member can submit a resolution to Cynthia Melody at cynthia@mlcms.org or 525-4375, or to a local member of the CMA delegation (see below). Resolutions can cover almost any aspect of

medical care, including health reform, medical practice, health facilities, quality of care, medical ethics, legal issues, and public health.

Local members of the CMA delegation are Drs. Bruce Andich, John Williams, Aldis Baltins and Richard Guthrie.

House passes Medicare fix; all eyes on Senate

Despite House passage of a bill to stop Medicare SGR cuts, the Senate has left physicians in the lurch once again. This time, senators adjourned for a week-long Memorial Day Recess just as they were poised to take up the bill. As a result, the long-threatened 21% Medicare physician payment cut went into effect June 1, and the earliest senators can consider a solution is June 7.

In anticipation of the cuts, Medicare has instructed its contractors to hold physician claims for 10 business days. The hold, which will only affect claims with dates of service on or after June 1, gives Congress additional time to act before claims are processed at the lower rate.

The House bill would stop the Medicare SGR (sustainable growth rate) cuts for 19 months. In lieu of the scheduled 21% cut, the bill would implement a 2.2% payment increase for the remainder of this year, and a 1% increase for 2011.

Because the House bill is just another short-term fix of SGR, rather than a repeal, physicians could end up facing a 33% SGR cut in 2012. "As a physician, I am outraged by Congress's inability to protect health care for senior citizens and provide stable funding for Medicare," said CMA President Dr. Brennan Cassidy. "This is a recurring nightmare for seniors and the doctors who serve this vulnerable population."

CMA continues to advocate for a permanent repeal of the Medicare SGR. Congress has known for years about the inadequacies of the SGR formula, but it has not fixed the problem. CMA is lobbying Congress to replace SGR with a payment system that automatically keeps up with the cost of running a practice and is backed by a stable funding formula.

Physicians are an important part of that lobbying effort. Your senators need to hear from you! Call Dianne Feinstein and Barbara Boxer today at 800-833-6354 to let them know the impact the SGR cuts will have on your practice. You will be connected to their offices via the AMA Grass Roots Hotline.

Reminder: New physician signage regulations take effect June 27

California physicians will soon be required to inform patients that they are licensed by the Medical Board of California, and to provide patients with contact information for the MBC. The new regulations, which take effect June 27, require physicians to provide the MBC notice by one of three methods:

- Prominently posting a sign in an area of their offices that is conspicuous to patients, in at least 48-point type in Arial font.
- Including the notice in a written statement, signed and dated by the patient or patient's representative, and kept in that patient's file, stating the patient understands the physician is licensed and regulated by the MBC.
- Including the notice in a statement on letterhead, discharge instructions, or other document given to a patient or the patient's representative; the notice must be placed immediately above the patient's signature line in at least 14-point type.

Regardless of which method you choose, the notice must read as follows: **NOTICE TO CONSUMERS: Medical doctors are licensed and regulated by the Medical Board of California, (800) 633-2322, www.mbc.ca.gov.**

According to the MBC, physicians, not facilities, are responsible for compliance with this regulation. In group settings, only one sign must be posted (should that option be chosen), but it must be posted in a location where it can be seen by all patients.

A sample MBC sign is available at www.mlcms.org/resources. For more information, visit www.mbc.ca.gov.

CMA asks Blue Shield physicians to complete survey about ratings

CMA is asking physicians who contract with Blue Shield to complete a brief survey about the company's "Blue Ribbon" physician rating program, which began on June 1. Blue Shield decided to publish the physician ratings despite serious concerns about the validity and accuracy of the underlying California Physician Performance Initiative (CPPI) data.

CMA vehemently objects to the program and is evaluating all avenues to protect physicians from Blue Shield's ratings.

If you are contracted with Blue Shield, please take a few minutes to [complete a brief survey](#). Your responses are confidential and will be used to help CMA advocate on your behalf. If you have additional questions or concerns about the Blue Shield ratings, contact CMA at 800-786-4262 or legalinfo@cmanet.org.

Medicare PECOS enrollment deadline moved up to July 6

Medicare recently announced that the PECOS enrollment deadline will be moved up by six months. Pending any changes resulting from the public comment period, physicians now have less than 60 days to update their enrollment in Medicare if necessary.

Medicare physicians who have not updated their enrollment information in the past five years may need to fill out another application or risk facing payment problems for ordered or referred services. Although the new rules were previously scheduled to take effect in January 2011, with the signing of the federal health reform law that deadline was moved up to July 6, 2010.

Under the new rules, Medicare is authorized to reject claims if an ordering or referring physician is not identified in Medicare's Internet-based PECOS enrollment system. Thousands of otherwise acceptable Medicare claims could go unpaid merely because they were submitted by providers who enrolled in Medicare before the PECOS database was developed.

Physicians should also be aware that federal law requires providers who are enrolling or revalidating their PECOS enrollment to also sign up for electronic funds transfer (EFT). Although the online PECOS revalidation process appears to allow you to opt out of EFT, opting out is not an option. If you do not also complete the CMS-588 EFT enrollment form, you will be notified by CMS of the requirement and must do so before your claims are paid.

CMA has developed a members-only [step-by-step guide](#) to walk physicians through the process, from determining if they are already in PECOS to accessing the Internet-based PECOS enrollment system. This guide is available at the members-only website. A CMA [PECOS enrollment webinar](#) is also available for on-demand viewing at the members-only website.

For more details about PECOS, contact CMA at 800-786-4262 or memberservice@cmanet.org.

FTC delays Red Flag Rule until end of year

The Federal Trade Commission has delayed the compliance deadline for the Red Flag Rule until the end of 2010. In late May, the AMA filed a lawsuit asking a federal court to prevent the FTC from extending the Red Flag Rule to physicians. "The latest extension to the compliance date is a promising sign," said Dr. Cecil Wilson, AMA president-elect. "We call on the FTC to exempt physicians from the rule completely."

Get to know the new CEO of CMA

Golf, shyness, marriage, Bob Dylan and the future of CMA. What do they all have in common? They define CMA's new CEO, Dustin Corcoran. The full story is contained in a 9-minute video posted on [YouTube](#) and [Vimeo](#). For more details, contact Ron Lopp at 916-551-2042 or rlopp@cmanet.org.

Corcoran was the featured guest at the April 29 MLCMS dinner in Ukiah, his third visit to the area in the past few years. For those who have not met him, the video offers a good introduction.

EVENTS

An all-day conference titled **Connecting California to Improve Patient Care** will be held at the Vineyard Creek Hyatt in Santa Rosa on Friday, July 9. Sponsored by Redwood MedNet, a local nonprofit health information exchange, the conference features presentations by more than a dozen regional and national experts on electronic health records, Recovery Act funding, and related topics. Cost before July 1 is \$150. To register, visit redwoodmednet.org.

An hour-long CMA webinar on **The Art of Training, Evaluating and Retaining Qualified Personnel** will begin at 12:15 p.m. on Wednesday, June 9. In this online presentation, Practice Management Inc. will offer training on how to evaluate and retain qualified personnel for your medical practice. To register, visit cmanet.org/calendar.

CMA is also presenting an hour-long webinar on **Accountable Care Organizations (ACOs)**, a key component of the new federal health reform legislation. The idea behind ACOs is that coordination of care will improve quality, avoid unnecessary hospitalizations and emergency room visits, and ultimately produce a more cost-effective health care system. Under the new federal law, providers who join an ACO will share in the cost savings they achieve for the Medicare program. The webinar will be presented at 6 p.m. on Wednesday, June 9, and again at 12:15 p.m. on Tuesday, June 15. To register, visit cmanet.org/calendar.

CLASSIFIEDS

Physician consultant needed

Physician Consultant needed in Ukiah 20 hours per week under contract to provide consultative and interpretive medical services related to assessments and program planning for individuals with developmental disabilities in Mendocino and Lake Counties. Responsibilities include: participate as a member of the agency's eligibility team; provide medical consultation regarding requests for services; provide education for consumers, their

supporters, agency staff and service providers; participate in various agency committees and processes; act as a liaison between the agency and the medical community; and assist with the development and advocacy of medical care for individuals with developmental disabilities in the community. There are no direct patient care responsibilities. Successful candidate will be able to perform as a team member; exercise sound clinical judgment; render timely and appropriate decisions; possess thorough follow-up skills; work independently with minimal supervision; and have excellent verbal and written communication skills. Experience in providing care for individuals with developmental disabilities, preferably in pediatrics, is desirable. Send cover letter and resume to Director of Clinical Services, 525 2nd Street, Suite 300, Eureka, CA 95501, or to pokey@redwoodcoastrc.org.

Reimbursement specialist

Get paid faster, save money. Claims processing, patient payment plan, help with Medicare compliance, coding. www.revenuerecoverynetwork.com.

How to submit a classified ad

To submit a classified ad for MLCMS News Briefs, contact Nan Perrott at nperrott@rhscommunications.com or 707-525-4226. The cost is one dollar per word.

ABOUT MLCMS

The Mendocino-Lake County Medical Society, a 501(c)(6) nonprofit association, supports local physicians and their efforts to enhance the health of the community. Founded in 1938, MLCMS is affiliated with the California Medical Association and the American Medical Association.

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You are receiving MLCMS News Briefs because you are a physician or an affiliated medical professional in Mendocino County and/or Lake County. If you wish to unsubscribe, contact Steve Osborn at sosborn@mlcms.org or 707-525-4325.