

Sept. 30, 2010

Given the new direction for the nation's health system, the AMA has developed *Health System Reform Insight* to help you understand the health system reform legislation and what it means to you and your patients.

Physicians appointed to new institute to help fund patient diagnostic and treatment methods research

The U.S. Government Accountability Office (GAO) on September 23 announced [the appointment of 19 members](#) to the Board of Governors of the new Patient-Centered Outcomes Research Institute (PCORI). Established by the Affordable Care Act (ACA), the PCORI is being set up as a nonprofit organization to fund research projects on the comparative effectiveness of various patient diagnostic, treatment and disease prevention methods.

AMA nominee Robert Zwolak, MD, a vascular surgeon at Dartmouth-Hitchcock Medical Center, was appointed to a six-year term. Twelve physicians are among the first 19 appointments, with experience spanning from large group practices and academic medicine to patient organizations, the U.S. Department of Veterans Affairs and the pharmaceutical and medical device industries. The director of the Agency for Healthcare Research and Quality and the director of the National Institutes of Health, or their designees, will also serve on the PCORI Board. A methodology committee of the PCORI has yet to be appointed.

Under provisions of the ACA, the PCORI replaces



Oct. 6:

Have something you want to say? AMA President Cecil B. Wilson, MD, is ready to listen. Share your thoughts, concerns and suggestions during [Office Hours with Dr. Wilson](#), an open and interactive conference call at 7 p.m. Eastern time. Office Hours is held on the first Wednesday of every month. [Register](#) today.

Dec. 1


Medicare payments for physician services are scheduled to be cut by more than 23 percent.

Dec. 31

From mid-November through Dec. 31, physicians will have their annual opportunity to review and perhaps change their participation status with the Medicare program.



[AMA comments on ACA implementation regulations](#)

[Investments in disease prevention and wellness initiatives under the Affordable Care Act](#) 

[New HHS Web portal to help](#)

the Federal Coordinating Council for Comparative Effectiveness Research that was established by the American Recovery and Reinvestment Act of 2009. The purpose of that panel, comprised entirely of federal agency representatives, was to coordinate federal comparative effectiveness research (CER) efforts to prevent duplication and encourage the complementary use of resources.

The purpose of CER is to enhance physician clinical decision-making and foster the delivery of patient-centered care. Most current research on medical treatments compares the benefits of a specific treatment to no treatment, but little information is available to physicians to help them determine if new treatments outperform existing options.

During the congressional debate, concerns were raised that the new PCORI could evolve into a rationing agency akin to the National Institute for Health and Clinical Excellence, which produces clinical guidelines for care provided by the National Health Service in England and Wales—based largely on evaluations of efficacy and cost effectiveness.


Under the terms of the ACA, however, the PCORI is prohibited from issuing mandates or recommendations concerning practice guidelines, coverage recommendations or policy, and is charged with using rigorous evidence standards and methodologies. Further, the law specifically forbids the new institute from factoring cost into its clinical evaluations.


Because of these safeguards and PCORI's independent, not-for-profit structure, the provisions establishing the institute are highly consistent with AMA policy.


AMA resource can help you re-evaluate your Medicare status

The AMA's "[Know Your Options: Medicare Participation Guide](#)" helps physicians evaluate their options for coping with the continuing threat of Medicare payment cuts and choose the right

[consumers buy health insurance](#)

[AMA summary and analysis: 2011 Medicare Physician Payment Proposed Rule](#) 

[Pathways for physician success under health care payment and delivery reforms](#) 

[How reform law integrity provisions impact your practice](#) 

[Medicare payment adjustments made for 2010](#) 

[Independent Payment Advisory Board](#) 


[New Payment and Delivery Reform Models](#) 

[Overview of Major Provisions Relating to Coverage](#) 

[Taxes and Credits in the Health System Reform Law](#) 

[Major Medicare Savings Under Health Reform Legislation](#) 

[Health Reform Law Raises GPCIs](#) 

[How Health System Reform Affects Patients](#) 

[How Health System Reform Impacts Physicians' Practices](#)

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direction for their practice.

The kit contains sample materials to help physicians explain their decision to patients; a calculator and an easy-to-use worksheet to help estimate how much their total revenues from Medicare patients would change if they switch their status to nonparticipation; and a detailed explanation of the three Medicare participation options.

Feedback

If you have specific comments on this edition of *Health System Reform Insight* simply reply to this message. For more general feedback on *Health System Reform Insight*, send an e-mail to hsr@ama-assn.org to alert the editor of your comments and concerns.

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