

November 4, 2010

AMA/FEDERATION NEWS: National headlines, grassroots news and important AMA announcements for Federation executives and communicators.

Editor's note: A special issue of AMA/Federation News will be delivered next week, featuring news from the 2010 Interim Meeting of the AMA House of Delegates.

TOP STORIES

- 1. AMA executive vice president and CEO to leave the AMA on June 30, 2011**
- 2. AMA urges Congress to take action to stabilize Medicare payments**
- 3. Medicine to assemble for AMA Interim Meeting; members have until end of day to share policy opinions**
- 4. November is Heal that Claim month**

FEDERATION NEWS

- 5. Be part of the revolution in payment practices in New Hampshire, Nebraska, Iowa**
- 6. Don't miss the second PCPI webinar in new measure testing series**

PUBLIC HEALTH

- 7. New AMA resource illustrates importance of physicians taking time for themselves**
- 8. Learn how to communicate events, errors to patients**

ANNOUNCEMENTS

- 9. Physicians, arm your practice for adoption of health IT**
- 10. New survey tool helps physicians capture patient experience data**
- 11. AMA offers strategies to address rising health care costs**
- 12. In *American Medical News*: Keeping staff morale high when pay raises are low**

TOP STORIES

1. AMA executive vice president and CEO to leave the AMA on June 30, 2011

The AMA Board of Trustees and AMA Executive Vice President and Chief Executive Officer (CEO) Michael Maves, MD, MBA, have mutually decided that Dr. Maves will complete his successful leadership of the AMA when his current contract ends on June 30, 2011. Dr. Maves has served in this role since 2001.

During his tenure, Dr. Maves personally led important multi-association efforts such as the "Scope of Practice Partnership," a coalition of national medical specialty organizations and state medical societies established by the AMA to clarify the roles and capabilities of non-physician health care providers. The AMA's House of Delegates also took a number of positions related to various aspects of health system reform. Working under the direction of the Board of Trustees, Dr. Maves ably led the management team in carrying out those directives.

“I have proudly served the AMA and its members for nearly nine years,” Dr. Maves said. “I am tremendously thankful for the opportunity to have worked alongside such an exceptional team of professionals. They are unwavering in their commitment to helping doctors help patients, and I intend to remain fully engaged in our shared mission.”

Visit <http://www.ama-assn.org/ama/pub/news/news/maves-to-leave-ama.shtml> to read an AMA news release about Dr. Maves leaving the AMA.

2. AMA urges Congress to take action to stabilize Medicare payments

According to the Centers for Medicare & Medicaid Services’ (CMS) final 2011 Medicare fee schedule rule, issued November 2, Medicare physician payments will be slashed 25 percent by January 1—starting with a 23 percent cut on December 1—unless Congress acts. In a statement, AMA President Cecil B. Wilson, MD, called on Congress to take quick action this month to stop the cut before it begins. Visit <http://www.ama-assn.org/ama/pub/news/news/medicare-final-rule.shtml> to view Dr. Wilson’s statement.

“Congress needs to send a strong message that seniors and physicians can count on Medicare by stopping the cut for at least 13 months, providing time for Congress to fix the Medicare mess once and for all,” Dr. Wilson said. In an interview with *Kaiser Health News*, Dr. Wilson predicted a “catastrophe” if the cuts—the 23 percent cut followed by an additional 2 percent cut on January 1—take effect as scheduled. Visit <http://www.ama-assn.org/ama/pub/news/news/stabilize-medicare-payments.shtml> to view a video clip of Dr. Wilson’s interview with *Kaiser Health News*.

The cuts are triggered by Medicare’s flawed sustainable growth rate (SGR) formula. The cost of repealing the SGR stands at more than \$300 billion this year. The magnitude of this pending payment crisis has escalated over the years because Congress has failed repeatedly to eliminate the SGR, postponing the difficult decisions required to offset the costs.

The payment crisis in the past year required Congress to pass four separate bills to postpone the cuts scheduled for 2010—and still more legislation is needed to maintain payment levels through the end of the year. Three of these bills passed after deadlines Congress imposed on itself had expired, and two of them passed after Medicare was compelled to start processing claims at the reduced rate.

Passage of legislation to stop the imminent cuts will have to be accomplished by a lame-duck Congress with a very full agenda of unresolved issues to address. It is highly unlikely that this environment will produce the permanent reform that is needed.

The AMA has advocated strongly that permanent repeal of the SGR is the answer to the payment crisis that is reducing access to care for Medicare patients and for military patients whose TRICARE coverage is based on Medicare rates. In addition to discussions with policymakers and other stakeholder groups through normal advocacy channels, the AMA has initiated a number of activities to maintain the pressure on Congress to act this month.

This summer the AMA organized and convened an SGR task force comprised of physician and staff representatives of state medical societies and national specialty organizations to discuss policy and strategy. Subsequently, the AMA circulated a joint letter to Congress signed by 66 national physician organizations and 51 state medical societies, urging Congress to provide at least 13 months of Medicare physician payment stability through 2011. Visit <http://www.ama-assn.org/ama1/pub/upload/mm/399/medicare-sign-on-letter-29sept2010.pdf> to view the joint letter.

The AMA has updated its physician payment action kit at <http://www.ama-assn.org/go/medicarepaymentkit> and Medicare participation guide at <http://www.ama-assn.org/go/medicareoptions> to help physicians understand this issue and make informed decisions about whether to change their status with the Medicare program. In addition, a series of webinars has been initiated to answer physicians' questions about their options; [slides](#) from these presentations have been posted on the AMA website. And the AMA Political Action Committee, or AMPAC, mailed grassroots material to 1.5 million seniors in 12 states, urging them to use the AMA toll-free patient hotline to call their legislators prior to Election Day on November 2 and explain the importance of maintaining patient access and choice.

Physicians can tell their legislators about how the payment crisis is affecting them and their patients. They can join the AMA Physicians' Grassroots Network at <http://www.ama-assn.org/go/grassroots> and e-mail them, or use the AMA's toll-free grassroots hotline at (800) 833-6354 to call them directly. And physicians can e-mail the AMA at SGRcrisis@ama-assn.org with their story about how the cuts have affected them and their practice.

3. Medicine to assemble for AMA Interim Meeting; members have until end of day to share policy opinions

Hundreds of physicians and medical students will gather later this week in San Diego for meetings of the AMA's sections and special groups in conjunction with the Interim Meeting of the AMA House of Delegates. Attendees will discuss policy proposals, participate in an array of education sessions and network with colleagues from around the country.

Among the early highlights will be an AMA Medical Student Section (MSS) event focusing on healthier lifestyles at the Mid-City Gym Recreational Center in San Diego. The effort is part of the AMA-MSS's national service project, which centers on the AMA Healthier Life Steps™ Program. Visit <http://www.ama-assn.org/go/healthierlifesteps> to learn more about the program.

Another highlight will be "The evolving Affordable Care Act: what it means to you and your patients," a special education session sponsored by the AMA's sections and special groups. AMA President Cecil B. Wilson, MD, and Richard Deem, the AMA's senior vice president for advocacy, will present.

The AMA House of Delegates will meet November 6–9 to debate and set AMA policy on a variety of topics, including Medicare physician payment reform, health IT and professionalism in the use of social media.

AMA members have until the end of the day today, November 4, to voice their opinion on reports and resolutions submitted to the AMA House. Members are invited to log in to a new Members Forum at <https://extapps.ama-assn.org/login/id/members-forums?URL=http://www.ama-assn.org/ama/pub/community/forums.shtml%3fplckForumPage%3dForumCategory%26plckCategoryId%3dCat%253a591a37b5-0a17-4217-bcb2-3ceea8697e8c&M=GET> and discuss the reports and resolutions being considered by Reference Committee J. The committee considers advocacy-related topics on medical service, medical practice and insurance.

Visit <http://www.ama-assn.org/go/interim2010> to download the meeting handbook, which contains proposed policies, and to stay informed throughout the meeting. Daily highlights, as well as daily video recaps by The Doctor's Channel, will be posted there.

Also, visit www.amednews.com/house for *American Medical News*' coverage of the House beginning Nov. 6.

4. November is Heal that Claim month

The AMA is urging physicians to take action this fall against inaccurate payments from private health insurers during November—Heal that Claim™ month—and is supplying physicians with resources to fight flawed and inefficient claims processing.

One in five medical claims is processed inaccurately by commercial health insurers, according to the AMA's National Health Insurer Report Card at <http://www.ama-assn.org/go/reportcard>, and the administrative costs of ensuring proper insurance payments can consume up to 14 percent of physicians' earned revenue. Heal that Claim™ month, designated by the AMA, is part of the AMA's Heal the Claims Process™ campaign—devoted to helping physicians make sure they are reimbursed accurately.

“The AMA's goal is to significantly reduce the administrative costs of processing claims from 14 percent to one percent and allow doctors to focus on caring for patients, instead of battling health insurers over delayed, denied or shortchanged medical claims,” said AMA President Cecil B. Wilson, MD.

Visit <http://www.ama-assn.org/go/healthatclaim> to learn more about the Heal the Claims Process™ campaign, and to access easy-to-use online resources to help prepare, track and appeal claims.

Visit <http://bit.ly/d6kz5Y> to view a blog post by Dr. Wilson about Heal that Claim™ month.

Visit <http://www.ama-assn.org/ama/pub/news/news/november-heal-that-claim-month.shtml> to view an AMA news release on Heal that Claim™ month.

Physicians can visit <http://www.ama-assn.org/ama/pub/physician-resources/solutions-managing-your-practice/coding-billing-insurance/heal-claims-process/join-heal-claims.shtml> to pledge

support for the campaign, or <http://www.ama-assn.org/go/clickandcomplain> to report any unfair health insurer practices.

Physicians also can e-mail practicemanagementcenter@ama-assn.org to share their successes or sign up at <http://www.ama-assn.org/go/pmalerts> for the AMA's free e-mail alerts to help stay up to date on unfair payer practices.

FEDERATION NEWS

5. Be part of the revolution in payment practices in New Hampshire, Nebraska, Iowa

Learn how physicians can lead new payment and delivery models, such as accountable care organizations, by attending “Pathways to Success: What physicians need to know about ACOs and the coming revolution in payment practices,” an AMA seminar being held in various cities around the country.

Upcoming seminars are scheduled from 10 a.m. to 3 p.m. Eastern time November 13 at the Marriott Grappone Conference Center in Concord, N.H.; from 5:30 to 9 p.m. Central time December 7 at the Omaha Marriott in Omaha, Neb.; and from 6 to 9 p.m. Central time December 8 at the Marriott West Des Moines Hotel in West Des Moines, Iowa.

Participants **at these** seminars will hear from national and local experts who have had varied—and successful—experiences with the new payment models.

The seminars are open to physicians and their office employees, as well as nonphysician staff members of organizations represented in the AMA House of Delegates. There will be significant time during both seminars for interactive discussions, questions and networking. Space is limited, so register today. Continuing medical education credit is available for participating in the seminar series.

Visit <http://www.ama-assn.org/go/paymentpathways> to learn more about upcoming seminars and to register for each.

The American Medical Association is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education for physicians.

The American Medical Association designates this live activity for a maximum of 4.0 *AMA PRA Category 1 Credits*[™].

6. Don't miss the second PCPI webinar in new measure testing series

Are you planning to test your physician performance measures and want to ensure that you benefit from lessons learned from past measure testing projects? State and specialty society employees as well as physicians are invited to attend “Measure Testing Projects: Revealing

Lessons Learned,” at 1 p.m. Eastern time November 17. This is the second in a series of three measure-testing webinars that will be offered.

Hosted by the AMA-convened Physician Consortium for Performance Improvement® (PCPI), the webinar will feature presenter Keri Christensen, an AMA senior policy analyst, who will highlight best practices from past measure-testing projects and address questions regarding measure testing, including:

- Who should perform the chart abstraction?
- How can we ensure that each chart abstracter interprets the measures correctly?
- How do participating physician practices benefit from the project?
- What resources do the participating physician practices need to provide in order to make the project successful?
- How do we know that our results are statistically significant?

Visit <https://cc.readytalk.com/cc/schedule/display.do?udc=oqwxbr4aun8n> to register to attend this free webinar.

Visit <http://www.ama-assn.org/go/pcpi> to learn more about the PCPI.

PUBLIC HEALTH

7. New AMA resource illustrates importance of physicians taking time for themselves

As part of its Healthier Life Steps™ program, the AMA recently launched a new toolkit—“A Physician’s Guide to Personal Health”—to help physicians take time for themselves and reflect on steps they may need to take to live a healthy life and serve as role models to their patients.

The toolkit provides background information and resources to help physicians improve four key health behaviors: healthy eating and physical activity, as well as elimination of risky drinking and tobacco use. In addition, physicians can access a screening milestone document, action plans and progress tracking calendars. Continuing medical education credit is available for this activity.

Visit <http://www.ama-assn.org/ama/pub/physician-resources/public-health/promoting-healthy-lifestyles/healthier-life-steps-program/physicians-personal-health.shtml> to view and download the new toolkit.

Visit <http://www.ama-assn.org/go/healthierlifesteps> to learn more about the Health Life Steps™ program.

Visit <http://www.ama-assn.org/go/physicianhealth> to learn more about the importance of physician health.

Visit <http://www.ama-assn.org/go/physicianhealthgroup> to log in to participate in an online community discussion about physician health.

The American Medical Association is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education for physicians.

8. Learn how to communicate events, errors to patients

Errors in the medical environment—and their aftermath—can be particularly difficult for both physicians and patients. Physicians can find out how to evolve beyond the “shame and blame” philosophy of singling out an individual toward real reform and redesign of the health care system during “Patient safety 103: Communication—disclosing events and errors to patients,” an AMA webinar scheduled for 1 p.m. Eastern time Nov. 17.

The program will feature David Mayer, MD, vice chair for quality and safety, director of cardiothoracic anesthesiology and co-executive director of the Institute for Patient Safety Excellence at the University of Illinois at Chicago College of Medicine. Dr. Mayer has been an invited keynote speaker at numerous international patient safety and education meetings and has authored a number of patient safety articles. Also featured is Timothy McDonald, MD, chief safety and risk officer for health affairs for the University of Illinois. Dr. McDonald has expertise in patient safety and risk management.

All health professionals, health professions students, educators and patient safety experts are encouraged to participate. Cost is \$79 per site for AMA members and \$99 per site for nonmembers.

Visit <http://eo2.commpartners.com/users/ama/session.php?id=4880> to learn more about this webinar and to register.

The American Medical Association is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education for physicians.

The American Medical Association designates this educational activity for a maximum of 1.5 AMA PRA Category 1 Credits™. Physicians should only claim credit commensurate with the extent of their participation in the activity.

ANNOUNCEMENTS

9. Physicians, arm your practice for adoption of health IT

Whether physicians are part of a small group practice preparing for “meaningful use” or have questions about an electronic health records system that’s already in place, the reality is that the era of health IT adoption is here.

The AMA’s hour-long webinar at 1 p.m. Eastern time Nov. 18 will feature a panel of experts to discuss health IT lessons learned. Visit <https://cc.readytalk.com/cc/schedule/display.do?udc=hq9vs57zrmxv> to learn more and register for the webinar.

This is the second in a two-part series of webinars designed to help physician practices make sound health IT decisions. The first webinar was held today and covered the best strategies—used in real practices—to help guide physicians’ health IT decisions and move their practices forward with health IT.

Visit <http://www.ama-assn.org/go/hit> and click on “Health IT webinars” to learn more about the “Moving your practice forward” webinar series and others. You can also download PowerPoint slides from each of the presentations.

10. New survey tool helps physicians capture patient experience data

A new, easy-to-use Web-based application from the AMA can help physicians make meaningful strides in their office’s quality improvement efforts. RealTime, offered by the AMA and Press Ganey Associates, provides physician-owned survey results that allow physicians to:

- Identify opportunities to improve patients’ experiences
- Improve patient loyalty and increase referrals
- Evaluate their practice against the competition
- Grow their bottom line
- Show patients they value their input

The application captures patients’ experiences and preferences without adding administrative burdens to a physician’s practice. It also produces relevant information, uses cost-effective survey methods and provides real-time data.

Physicians can visit <http://www.ama-assn.org/go/patientexperience> to learn more and order RealTime today. AMA members receive a discount, and special early bird pricing is available.

Visit <http://www.ama-assn.org/ama/pub/news/news/realtime-patient-feedback.shtml> to view an AMA news release about RealTime.

11. AMA offers strategies to address rising health care costs

A new series of publications and interactive presentations from the AMA identifies opportunities to address the rate of growth in health care spending while improving health outcomes and quality of care.

The series, “Getting the most for our health care dollars: Strategies to address rising health care costs,” highlights specific topics and actions that can help move the health care system in a direction that aligns costs and benefits in ways that make sense.

Visit <http://www.ama-assn.org/go/healthcarecosts> to learn more.

12. In *American Medical News*: Keeping staff morale high when pay raises are low

Many medical practices are running the numbers and realizing that staffers can be given only extremely small raises, if any at all, according to a November 1 *American Medical News* article.

To help remove some of the sting, employees should be kept apprised of their practice's financial health and told why no raises or only a small one will be given, *American Medical News* reports.

Visit <http://www.ama-assn.org/amednews/2010/11/01/bica1101.htm> to read more about this issue.

External links to Web sites and e-mail addresses are offered to provide readers with additional sources of news and information. The AMA is not responsible for the content contained in these external sources.

If you have any questions regarding this newsletter please send an e-mail to AMA.Federation.News@ama-assn.org or call (312) 464-4657.

TO CHANGE YOUR E-MAIL ADDRESS: Send an e-mail to AMA.Federation.news@ama-assn.org with your old e-mail address and your new e-mail address.

TO UNSUBSCRIBE: click <mailto:unsubscribe-Federation.News@enews.ama-assn.org> to bring up a new e-mail message, and click "send." Or create a new e-mail message with unsubscribe-Federation.News@enews.ama-assn.org in the "To:" area and click "send." No subject line or text is necessary. You will be removed immediately.

Sent by the American Medical Association, 515 N. State St., Chicago, IL 60654, (312) 464-5000.

Sent by: American Medical Association * Helping doctors help patients
515 N. State Street
Chicago, IL 60654