

June 9, 2011

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

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TOP STORIES

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1. AMA names new executive vice president/CEO

The AMA has named James L. Madara, MD, as its new executive vice president and CEO. Dr. Madara, 60, will assume leadership of the nation's oldest and largest physician group July 1.

Dr. Madara is an accomplished academic medical center physician, medical scientist and administrator who served as Timmie Professor and Chair of Pathology and Laboratory Medicine at the Emory University School of Medicine before assuming the Thompson Distinguished Service Professorship and deanship at the University of Chicago Pritzker School of Medicine. Dr. Madara was the longest serving Pritzker dean in the last 35 years.

Subsequently, he added the responsibility of CEO of the University of Chicago Medical Center, bringing together the university's biomedical research, teaching and clinical activities.

"The AMA is a venerable institution, and I am honored to lead it during this challenging and exciting time," Dr. Madara said. "I look forward to leveraging my skills and experience to help the AMA succeed and fulfill its core mission to promote the art and science of medicine and the betterment of public health."

Visit

<http://www.elabs10.com/ct.html?rtr=on&s=x8pbgr,jkgf,2ke5,ijbj,bktq,9t9z,a6f9>  
to view an AMA news release about Dr. Madara.

## 2. CMS proposes exemptions to Medicare ePrescribing penalty policy

The Centers for Medicare & Medicaid Services (CMS) announced May 26 that it would modify the penalty policy for the Medicare ePrescribing Incentive Program, a move that drew applause from the AMA.

According to a proposed rule from CMS, the agency would add more exemption categories so physicians are not unfairly penalized in 2012 for failing to meet requirements under the Medicare ePrescribing Incentive Program. CMS issued the proposed rule after the AMA continually stressed to senior CMS officials the urgent need to revise the policy. Of note, AMA President Cecil B. Wilson, MD, discussed the issue on several occasions with CMS Administrator Donald Berwick, MD.

"Eliminating unreasonable penalties and burdensome requirements, and providing physicians with more flexibility through an exemption process, will help ensure more physicians are able to successfully participate in the ePrescribing incentive program," Dr. Wilson said in a statement.

The AMA is reviewing the proposed rule, which is scheduled to be finalized later this year, in more detail.

Visit

<http://www.elabs10.com/ct.html?rtr=on&s=x8pbgr,jkgf,2ke5,8p6q,g2w1,9t9z,a6f9>  
to learn more about the proposed rule and the Medicare ePrescribing Incentive Program.

Visit

<http://www.elabs10.com/ct.html?rtr=on&s=x8pbgr,jkgf,2ke5,a57w,m9zm,9t9z,a6f9>  
to view the AMA's statement.

## 3. AMA calls on CMS to revise ACO proposal, issue interim final rule

In comments issued June 3, the AMA urged the Centers for Medicare & Medicaid Services (CMS) to make significant changes to its proposed rule on Medicare accountable care organizations and to issue an interim final rule, rather than a final one.

The AMA supports developing and testing ACOs as one of an array of payment and delivery innovations, but it urged CMS to revise the proposed rule to allow all interested physicians to lead and participate in ACOs.

"A well-developed ACO model has the potential to improve care coordination and quality while promoting cost savings, and to help ensure success the AMA has asked CMS to make numerous revisions and to issue an interim final rule that allows the flexibility to adapt as needed," AMA President Cecil B. Wilson, MD, said.

In its comments, the AMA offered constructive changes to the proposed payment and risk structure of ACOs to encourage participation by physicians in all practice sizes, including providing a payment option that does not require shared loss and allowing groups to receive a percentage of all savings achieved.

Visit

<http://www.elabs10.com/ct.html?rtr=on&s=x8pbgr,jkgf,2ke5,h2nw,glzi,9t9z,a6f9> to view the AMA's comments.

Visit

<http://www.elabs10.com/ct.html?rtr=on&s=x8pbgr,jkgf,2ke5,fie9,lpzv,9t9z,a6f9> to view CMS's proposed rule for ACOs.

In related news, the AMA urged the Federal Trade Commission (FTC) and Department of Justice (DOJ) to change a proposed policy regarding antitrust enforcement of ACOs so physicians in all practice sizes can develop, lead and actively participate in ACOs. Visit <http://www.elabs10.com/ct.html?rtr=on&s=x8pbgr,jkgf,2ke5,1f4s,imr9,9t9z,a6f9> to view a May 26 letter the AMA sent to the FTC and DOJ.

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FEDERATION NEWS  
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#### 4. AMA Annual Meeting begins next week

Hundreds of AMA member physicians and medical students will gather next week to help set policy on various issues in medicine and health care during the 2011 Annual Meeting of the AMA House of Delegates.

The policy-making meeting will take place June 18-22 at the Hyatt Regency Chicago. Events surrounding the meeting will begin June 16, with gatherings of AMA sections and special groups discussing policy proposals and participating in a full lineup of educational programming and networking events.

The House of Delegates will officially open June 18, when leaders in medicine will debate and set AMA policy on numerous issues that affect both physicians and their patients. On June 21, Peter W. Carmel, MD, a pediatric neurosurgeon in Newark, N.J., will begin his term as the 166th president of the AMA.

Visit the Annual Meeting website at [www.ama-assn.org/go/annual2011](http://www.ama-assn.org/go/annual2011) to learn more about the meeting. Daily highlights from the meeting as well as video recaps by The Doctor's Channel will be posted beginning June 18.

Also, visit [www.amednews.com/house](http://www.amednews.com/house) to view American Medical News' coverage of the meeting, as well as archives of past meeting coverage. Coverage of this year's meeting will begin June 18.

#### 5. Physicians frustrated with Illinois workers' compensation bill

Illinois physicians expressed frustration and disappointment in the state's recently passed workers' compensation bill, which contains a 30 percent reduction in fees that businesses must pay to doctors.

"[This bill] is really a plan to undercut funding for injured workers' medical care," Illinois State Medical Society (ISMS) President Wayne V. Polek, MD, said.

"These cuts mean fewer health professionals treating workers' compensation patients, longer waits for care and non-existent savings for businesses. Any alleged 'savings' will be offset by higher business expenses due to workers waiting longer for care and delaying their return to work.

"The cuts will also hurt business operations of medical practices, which must still pay the tab for the high cost of practicing medicine in Illinois."

The Illinois General Assembly passed the legislation in late May, and Gov. Pat Quinn is expected to sign it.

View <http://www.elabs10.com/ct.html?rtr=on&s=x8pbgr,jkgf,2ke5,juv,bjhz,9t9z,a6f9> to read the ISMS's statement.

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PUBLIC HEALTH  
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#### 6. Plate replaces pyramid as nation's new symbol for food guidance

The nation got a new symbol for food guidance last week when First Lady Michelle Obama, Surgeon General Regina Benjamin, MD, and Agriculture Secretary Tom Vilsack unveiled a new plate-like graphic that replaces the federal government's well-known food pyramid.

The new icon, released June 2 by the U.S. Department of Agriculture, emphasizes the fruit, vegetable, grains, protein and dairy food groups. The AMA praised the graphic, saying in a statement that it clearly presents what a healthy meal should look like and makes it easier for people to translate food group

recommendations directly onto their plates.

"The clearer emphasis on portion size and quantity is particularly important for achieving and maintaining a healthy weight," AMA Board Chair Ardis D. Hoven, MD, said.

View

<http://www.elabs10.com/ct.html?rtr=on&s=x8pbgr,jkgf,2ke5,ba4o,gs3z,9t9z,a6f9> to learn more about the new graphic.

View

<http://www.elabs10.com/ct.html?rtr=on&s=x8pbgr,jkgf,2ke5,aocq,kuza,9t9z,a6f9> to view the AMA's statement.

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ANNOUNCEMENTS  
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#### 7. Video explains physician-led payment and delivery models

Learn about innovative physician payment and care delivery models in Medicare and the private sector by viewing a video presentation by Harold Miller, executive director of the Center for Healthcare Quality and Payment Reform.

Taped in February during this year's AMA National Advocacy Conference, the 80-minute video—available to AMA members and Federation staff members—explores how physicians can find success with these payment and delivery innovations and emphasizes the need for doctors to play leadership roles in developing such new models as accountable care organizations, bundled payments and medical homes.

The video features an introduction from AMA Immediate Past President J. James Rohack, MD, and goes beyond conceptual discussions, exploring physician-led payment and delivery models through the lens of actual medical practice scenarios. Miller also offers recommendations on how physicians can utilize these new models to create win-win opportunities to improve quality of care, lower costs to third-party payers and increase revenues. A lively question-and-answer session follows Miller's presentation.

Visit

<http://www.elabs10.com/ct.html?rtr=on&s=x8pbgr,jkgf,2ke5,187d,ma82,9t9z,a6f9> to view the video.

#### 8. Report details trends in health inequities, patient expectations

Did you know that more than 14 million cases of disease are prevented each year by routine childhood vaccinations? Further, routine childhood vaccinations result in an annual savings of \$50 billion in direct and indirect costs.

Those statistics are just a sampling of the information available in Health Care Trends, a publication from the AMA's Council on Long Range Planning and Development. The latest edition is being posted in segments throughout the year, and new chapters covering health inequities and patient expectations are available now.

Other available chapters cover public health infrastructure and health economics.

Visit [www.ama-assn.org/go/healthcaretrends](http://www.ama-assn.org/go/healthcaretrends) to read more about Health Care Trends.

Visit

<http://www.elabs10.com/ct.html?rtr=on&s=x8pbgr,jkgf,2ke5,fgx4,dvlg,9t9z,a6f9> to learn more about the AMA's Council on Long Range Planning and Development.

#### 9. In American Medical News: Healthy San Francisco opens up care

A 4-year-old safety net initiative—Healthy San Francisco—survived a legal challenge to become an urban test bed for improving care coordination under health system reform. A story by American Medical News details this unique universal health care access program, which provides primary care medical homes plus emergency and specialty care to anyone who earns less than 500 percent of the federal poverty level, currently \$54,450.

Participants earning more than the federal poverty level also pay income-adjusted quarterly program fees, which reach a maximum of \$450, plus modest co-pays. Healthy San Francisco is available to most city residents between 18 and 64 years old.

Visit

<http://www.elabs10.com/ct.html?rtr=on&s=x8pbgr,jkgf,2ke5,9lue,jd94,9t9z,a6f9> to read the story.

#### 10. Apply for an AMA Foundation Healthy Living Grant

If you're involved in an organization that focuses on combating obesity, substance abuse and violence, then apply on the organization's behalf for the AMA Foundation's Healthy Living Grant.

This year the program is focusing on projects that involve collaboration with medical organizations. Grants of up to \$5,000 will support programs addressing one of three healthy lifestyles areas for children and youths ages 2 to 21: nutrition and physical fitness, violence prevention and prescription drug safety.

Applications are due July 15. Visit

<http://www.elabs10.com/ct.html?rtr=on&s=x8pbgr,jkgf,2ke5,221v,11vo,9t9z,a6f9> to view eligibility requirements and download an application.

The Healthy Living Grant Program is supported in part by an unrestricted grant from Purdue Pharma L.P.

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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.

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