

Aug. 18, 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. Proposed Medicare data release rule needs improved safeguards

Ensuring that public reports on Medicare and private payer data are valid, reliable and actionable is critical, the AMA and 81 physician organizations told the Centers for Medicare & Medicaid Services (CMS) in comments submitted last week on the proposed rule on Medicare data for performance measurement.

The organizations applauded the inclusion of safeguards that protect patients and physicians, but noted several critical issues that must be resolved for physician measurement and public reporting to be effective.

In a comment letter, the organizations called on CMS to ensure physicians have the opportunity to review their data for accuracy and to appeal any errors before their information is made public.

"Just as the release of reliable information can be helpful for patients and physicians, the release of incorrect information could harm patients and the entire Medicare system," said AMA President Peter W. Carmel, MD.

The comment letter provides detailed recommendations to CMS on additional safeguards and ways to standardize the data collection to assist in developing meaningful, actionable reports.

Visit

<http://www.elabs10.com/ct.html?rtr=on&s=x8pbgr,mo3o,2ke5,45xl,8h00,9t9z,a6f9> to view the letter.

Visit

<http://www.elabs10.com/ct.html?rtr=on&s=x8pbgr,mo3o,2ke5,gfxs,90ci,9t9z,a6f9>  
to read more about this in AMA Wire.

## 2. Physicians call for changes to HIPAA accounting of disclosures rule

The AMA and 19 medical specialty societies are urging the Office for Civil Rights (OCR) to make significant changes to its proposed amendments to the Health Insurance Portability and Accountability Act accounting of disclosures rule.

The OCR's proposed rule would create a new patient right to access reports and make changes to the accounting of disclosures requirement. In an Aug. 1 letter, the physician organizations call on the OCR to withdraw the proposed access report requirement and make modifications to the proposed accounting of disclosures report requirement.

The reports would be required to show all electronic access to a patient's health information for up to three years and could be hundreds or even thousands of pages long. This would make them extremely burdensome and costly for physician practices to create and maintain, and of little practical value to the patient requesting them.

Visit

<http://www.elabs10.com/ct.html?rtr=on&s=x8pbgr,mo3o,2ke5,fw6z,1wqe,9t9z,a6f9>  
to read the AMA's comment letter.

Visit

<http://www.elabs10.com/ct.html?rtr=on&s=x8pbgr,mo3o,2ke5,d984,bn13,9t9z,a6f9>  
to read more about this in AMA Wire.

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## 3. Physicians file amicus brief in California Medicaid case

The AMA and several other organizations filed an amicus brief earlier this month with the U.S. Supreme Court, arguing that patients, physicians and other providers have the right to file suit opposing a California law that breached the state's obligations under the federal Medicaid Act.

The matter stems from several lawsuits fighting pay cuts in Medi-Cal, the state's Medicaid program. California lawmakers proposed the cuts in 2008 to close annual budget deficits of \$20 billion or more in recent years, even though they violated federal law.

Physicians, including the California Medical Association (CMA), hospitals and

others filed a lawsuit in 2008 fighting a 10 percent cut scheduled for July of that year. A lower court blocked the 2008 pay reductions, and the state then appealed to the U.S. Supreme Court. The CMA also filed a legal brief on the matter July 29.

The AMA, through the Litigation Center of the AMA and State Medical Societies, filed the amicus brief Aug. 5. The American Academy of Pediatrics, the American Congress of Obstetricians and Gynecologists, the American Academy of Family Physicians, the American College of Emergency Physicians and the American Dental Association joined the AMA on the brief.

The Supreme Court will hear oral arguments on the issue Oct. 3.

Visit

<http://www.elabs10.com/ct.html?rtr=on&s=x8pbgr,mo3o,2ke5,ip8j,d4hx,9t9z,a6f9> to read about the CMA brief.

#### 4. North Carolina overrides veto, enacts liability reform legislation

North Carolina physicians achieved a monumental medical liability reform victory recently in the form of a new law that will help the state save health care dollars, improve access to care and minimize meritless lawsuits.

The law became a reality July 25 when the North Carolina House of Representatives overrode Gov. Bev Perdue's veto of Senate Bill 33, which includes a \$500,000 cap on noneconomic damages. The law also increases the evidentiary burden for claims related to emergency care and requires expert witnesses to use actual (rather than hypothetical) evidence, among other reforms.

The North Carolina Medical Society (NCMS) spearheaded this effort, mobilizing grassroots advocacy in the local medical and business communities.

"This was a tremendous victory for the people of North Carolina and their physicians," Robert W. Seligson, the society's executive vice president, said.

The AMA also partnered with the NCMS to help advance this important effort.

Visit

<http://www.elabs10.com/ct.html?rtr=on&s=x8pbgr,mo3o,2ke5,dlbs,hv4a,9t9z,a6f9> to learn more about the law.

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PUBLIC HEALTH  
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#### 5. Physicians, public health organizations push for stronger air quality regulations

Fourteen physician and public health organizations have joined forces to urge

the Obama administration to implement tougher air quality standards to improve respiratory health, according to a recent article in American Medical News.

The associations, including the American Academy of Pediatrics and the American College of Preventive Medicine, issued their comments supporting new ozone air pollution standards in an Aug. 3 letter to the White House. The organizations are particularly concerned about the health of children, who breathe more air per unit of body weight than adults and can therefore be exposed to a higher dose of contaminants, which can lead to lung damage.

Visit

<http://www.elabs10.com/ct.html?rtr=on&s=x8pbgr,mo3o,2ke5,28zo,kcrj,9t9z,a6f9>  
to read the full article.

Visit

<http://www.elabs10.com/ct.html?rtr=on&s=x8pbgr,mo3o,2ke5,892l,ar7m,9t9z,a6f9>  
to read the letter.

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ANNOUNCEMENTS  
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#### 6. Report: ACA to have limited effect on employer insurance enrollment

Recent studies by major research firms provide projections about the impact of the Affordable Care Act (ACA) on health insurance coverage of the non-elderly. According to a new policy research perspective report from the AMA, the share of the non-elderly population with health insurance will increase by more than 10 percentage points in 2016—from 81 percent to around 93 percent.

More specifically, the report examines the predictions of five recent studies regarding the ACA's impact on employer-sponsored health insurance. Four of the five studies suggest that the decrease in enrollment in employer-sponsored insurance will be less than 2 percent. One study projects enrollment to rise as much as 5 percent. The reports also provide a range of estimates for enrollment in the health insurance exchanges.

AMA members and Federation staff can visit <http://www.elabs10.com/ct.html?rtr=on&s=x8pbgr,mo3o,2ke5,ep9g,7atg,9t9z,a6f9> to read the full policy research perspective.

#### 7. AMA column highlights need to improve federal health IT programs

In a column posted on physician blog KevinMD.com, AMA Immediate Past President

Cecil B. Wilson, MD, calls for improvements to the federal health IT incentive and penalty programs. The column outlines specific changes for which the AMA is advocating, including an additional reporting period for physicians to comply with ePrescribing requirements, more categories for the ePrescribing penalty exemption and improved incentives.

"The AMA is committed to successful health IT adoption by physicians and will continue working to ensure that this can be achieved in a manageable way," Dr. Wilson writes. The column also provides information about resources the AMA provides to help physicians as they adopt health IT.

Visit

<http://www.elabs10.com/ct.html?rtr=on&s=x8pbgr,mo3o,2ke5,bb4x,b1cf,9t9z,a6f9> to read the column.

#### 8. New database of medical fees made public; AMA offers physician webinar

A new consumer database of medical fees became available on Aug. 1. Created by FAIR Health, this online database allows patients to look up the average charges for specific medical services for their locality.

The AMA recently offered an educational webinar to give physicians a preview of the database and help them prepare for questions that patients might ask them about their fees. The hourlong webinar is now available for on-demand viewing.

Visit

<http://www.elabs10.com/ct.html?rtr=on&s=x8pbgr,mo3o,2ke5,fkif,9qui,9t9z,a6f9> to watch the recording.