

Philadelphia Medicine



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First-time delegate's impressions of PMS annual business meeting

By Arnold W. Cohen, MD



Never having been involved in the PMS but having been asked to be a delegate to the PMS Annual Business Meeting as a representative of the PCMS was an experience that I

was not sure would be worthwhile.

I consider myself well-known within my specialty, having spent many years in advocacy through my specialty societies. Starting out with a group in which nobody knew me was something that I did not think was worth it.

My first impression of this process was related to the "prep" meeting of the PCMS. After I got over the shock of the size of the reading material binder, I was impressed that the group fairly represents the interests of all of medicine. I felt that the PCMS was willing to listen to thoughts and ideas from new, as well as old, members. This meeting was very helpful and prepared me for the meeting that was to take place later.

For personal reasons, I was not able to stay in Hershey for the two-day meeting. Driving back and forth each day was not something I was looking forward to.

In fact, after leaving my house at 5 AM on Saturday morning, I must say I was less than enthusiastic. My first meeting was the breakfast for the new delegates and alternates. We were welcomed by Andrew Gurman, MD, who immediately put us at ease. He told us our badges had a red backing so that people knew we were new and they would help us and be kind to us. That action alone told me

that this organization really understands the people it represents.

He went on to tell us that there are formal ways of doing things but if we don't follow the pre-determined rules, he and others would be there to help. He was right.

I next went to the PCMS breakfast. Since we had already had a meeting to discuss our positions, this was a social event only broken up by "candidates"

The real excitement came at the Reference Committee meetings. That is where I was really impressed. The Committee allowed any delegates who wanted to speak their mind, to address the audience.

for positions coming in and asking us for our support. Since I didn't know the people, it was hard to make a decision.

The meeting itself was conducted just like other meetings where people talked about what an organization does, and where it's going. This was interesting, but certainly not exciting to me.

The real excitement came at the Reference Committee meetings. That is where I was really impressed. The Committee allowed any delegates who wanted to speak their mind, to address the audience. All sides of the issue were discussed. This was a non-judgmental process that allowed everyone to be recognized and heard. It was up to the panel to distill what was said into a committee opinion that could be voted upon the next day.

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PCMS News

"Rx - Walk with the Docs"

PCMS is seeking physician volunteers to participate in "Rx - Walk with the Docs." The US Department of Health and Human Services, Philadelphia Department of Public Health, and PCMS are co-sponsoring this event on Sunday, April 17, 2005 (rain date: Sunday, May 1, 2005).

The walk will take place on West River Drive. The walk will encourage participants to take an active role in learning about disease prevention, health management, good nutrition and physical activity. For more information call 215-563-5343, Ext. 113.

Revised "AMA Principles of Managed Care" available

The fifth edition of the AMA booklet "Principles of Managed Care" is now available free of charge. Based entirely on AMA policy and ethical opinions, this publication was developed to promote effective managed care techniques that are fair and equitable to physicians in ensuring that high quality healthcare services are delivered to patients.

Recently, in the consolidated case of Aetna Health Inc. v. Davila and Cigna Healthcare of Texas v. Calad, the US Supreme Court dealt a serious blow to state efforts to hold managed care organizations liable for negligent healthcare treatment decisions. Accordingly, it is anticipated that the revised "Principles of Managed Care" will continue to serve as a valuable, concise and convenient reference of AMA policy on managed care.

Visit www.ama-assn.org/go/principlesmanagedcare to download the booklet.

The PCMS Website accepts typical Classified Ads. We also advertise upcoming events, such as CME programs and seminars. Call 215-563-5343, Ext. 102, for more information.

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Editorial

Why you should volunteer for PCMS health activities

The Philadelphia County Medical Society has stated many times in the past several years that its priorities are to resolve professional liability insurance and reimbursement inequities.

These issues not only affect you as physicians but also ultimately impair the access to quality medical care for your patients. That is why these are and will remain our priorities.

The PCMS is also involved in other activities, many of which are public health measures for the good of our patients. We want to discuss four of these and ask you to consider volunteering to participate in one or more of them. Most will be a commitment for a few hours on one day only.

- On April 17, 2005 PCMS, the US Department of Health and Human Services and the City of Philadelphia Department of Public Health will sponsor "RX-Walk with the Docs." This will take place in Fairmount Park near the West River Drive. The goal is to encourage participants to take an active role in learning about disease prevention, health management, good nutrition, and physical activity. We want physicians to greet participants, talk to them in general about health and disease, and guide them to appropriate health booths that will be available.
- We will also be participating in two programs being organized by NBC/Channel 10. Both of these events will take place in April, 2005. On one Thursday afternoon and evening, physicians will gather at the Channel 10 studio on City Avenue to answer telephone calls from the public. Questions can be on any health topic. The physician answering the phone need not be a specialist on the topic to respond. The physician is not treating the caller, merely giving general information. The program is advertised as "Docs on Call." The event is telecast live.

Those who participated last year were profuse in their praise of the event. Physicians may volunteer for the afternoon or the evening only, or may do both.

- The second NBC/Channel 10 event will take place on the weekend following "Docs on Call." It is known as the "Fit Fest" and will be held at the Pennsylvania Convention Center on Market Street. It is a two-day affair. Many activities and health booths are planned. PCMS will have a booth with handouts. Physician volunteers are needed to staff the

Those who participated in "Docs on Call" last year were profuse in their praise of the event. Physicians may volunteer for the afternoon or the evening only, or may do both.

booths and answer general health questions. Thousands of people came to the fest last year. Volunteers can choose their day and hours, and need not commit for two full days.

- For those who are more ambitious and willing to make an continuing commitment, PCMS seeks volunteers for its Block Captain program. Hundreds of people in Philadelphia have become captains of their blocks. They have such responsibilities as checking up on neighbors during heat waves. PCMS uses these captains to educate their neighbors on medical issues. Our Public Health Committee hosts captains for lunch or dinner during the year. We hold three or four meetings a year. Attendance is usually 100 to 150 captains. The City of Philadelphia Department of Public Health and many other health organizations work with us. We need physician volunteers to meet the captains, answer questions and on occasion to make presentations.

—The Editorial Board

Impressions from page 1

On the second day, I was not sure how I would react to resolutions that the “powers in charge” had crafted. What I found, though, was a very democratic forum that allowed the Reference Committee Chairs to present their distillations of the Committee meetings and then allow delegates to modify and amend them as they thought appropriate.

Being new to the process, I didn't know if I would be able to affect this process. That concern was dismissed after I asked if I could amend one of the resolutions. Even though I didn't present it in the correct fashion at first, I was helped so that my amendment was heard, voted upon and accepted. This gave me a great deal of satisfaction in knowing that, despite my being involved in a group that I had no experience with, I could effect a change that

I thought would result in a better chance for the medical liability process to be dealt with more effectively in Pennsylvania. Because of this, I decided to continue participation in what I found to be a very reasonable and responsible organization.

I want to thank President Enrique Hernandez, who asked me to be a delegate to the PMS Annual meeting. I know that my positive experience was not unique, but I am sure, all the new, and not new, delegates felt the meeting to be important and productive. Because of this, I am now a strong proponent of the PMS and would ask all physicians to join so that we can have a powerful voice in our state's government with respect to all issues that affect us as physicians.

Dr. Cohen is Chairman, Department of Ob/Gyn, Albert Einstein Medical Center

New in 2005: preventive benefits and physician Medicare payments

HGS Administrators, the CMS (Centers for Medicare & Medicaid Services) contracted carrier, has informed PCMS that Medicare will be increasing physician fee schedule rates by an average of 1.5% in 2005.

Unlike prior years where a formula in the law required Medicare to reduce physician fee schedule rates, your Medical Societies vigorously campaigned to ensure that physicians receive an overall increase instead of the proposed minus 3.7%.

The 2005 calendar year will introduce new and important program initiatives to assist Medicare beneficiaries to stay healthier and to better access important preventive medical services.

To this extent all new Medicare beneficiaries will be eligible to receive an initial preventive examination which gives physicians the opportunity to make an overall assessment of a patient's health and provide counseling on nutrition and other steps to stay healthy.

Medicare will also provide new coverage for screening for cardiovascular disease and diabetes. For the complete listing of all the added beneficiary benefits and physician payment rates, please refer to the following websites:

- www.medicare.gov
- www.cms.hhs.gov/providers/bonuspayment
- www.hgsa.com

If you have a specific unresolved Medicare/Medicaid question or suggestion, please put your question in writing and mail, fax or e-mail PCMS. Our HGS Administrator Representative will be happy to answer your question(s).

Radio frequency tag helps avoid errors

A radio frequency tag that patients can affix like a bandage to ensure doctors perform the right surgery on the right person has won government approval.

The tag, manufactured by SurgiChip Inc., aims to prevent surgical mistakes that records show can kill patients, and is the first surgical marking device approved by the Food and Drug Administration to use radio frequency identification.

The patient's name and the site of surgery are printed on the SurgiChip tag, which encloses a chip encoded with the type of surgery, date of surgery and the surgeon's name.

Crash Course: Auto accident reimbursement

Part 1 of a 3-part series

The PCMS receives many questions about reimbursement for auto accident patients.

Act 6 of 1990 restricts the reimbursement for treatment of injuries sustained in a car accident to 110% of the current Medicare fee schedule. If no Medicare payment has been calculated, the payment is calculated at 80% of the physician's usual and customary charge.

In calculating the usual and customary charge, an insurer can use the requested payment amount on the physician's bill for services or use data collected by the carrier if that information is available. Changes in the Medicare fee schedule for payment are to be used by insurers and physicians within 30 days of their effective date or date of official publication in the Federal Register.

However, if care is provided in an acute-care facility to a patient with an immediate, life-threatening injury by a Level I or Level II trauma center accredited by the Pennsylvania Trauma Systems Foundation, or treatment for a major burn by a burn facility which meets all the standards of the American Burn Association, the amount of payment may not exceed the usual and customary charge.

Physicians who treat patients injured in a car accident may not bill the patient, but must bill the auto insurance carrier. The physician cannot bill or attempt to collect the difference between the physician's full charge and the amount paid by the insurance carrier from the patient.

When the patient's first-party benefits have been exhausted, the insurance carrier must notify the physician in writing within 30 days after receiving the bill for services. If only a portion of the physician's services is paid by the patient's insurance policy, the physician may bill the patient for the remaining services not paid.

Billing procedures will be discussed in the February issue of *Philadelphia Medicine*.

pcms people



Albert S. Kroser, DO, has been elected First District Councillor to the Pennsylvania Medical Society Alliance.

Steven Mandel, MD, has received the Pennsylvania Podiatric Medical Association Special Recognition Health Care Practitioner Award. The Award is presented to a healthcare practitioner, other than a podiatrist, who has significantly contributed to the podiatric profession.

The PCMS website accepts typical classified ads. We also advertise upcoming events, such as CME programs and seminars.

Call 215-563-5343, ext. 102 for more information.

Change of address?

Phone 215-563-5343, Ext. 102 with any change of address, phone, fax number or e-mail address.



Joseph G. Lewis, MD, FACC, was the guest speaker at the recent IMG meeting. He spoke on "Anti-platelet Therapy in Acute Coronary Syndrome & Peripheral Arterial Disease."

Host your event at PCMS!

Host your next party or conference/seminar at PCMS headquarters. Ample free parking. Contact Louise Eder on 215-563-5343, Ext. 107 to schedule an appointment.

PCMS people wanted!

Your colleagues would like to know what you're up to. Send news about academic or other appointments, achievements, awards, promotions, etc. to:

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Medicare, Medicaid payments to increase this year

The Centers for Medicare and Medicaid Services (CMS) say payments to physicians will increase by an average of 4% in 2005 and that they can bill more for preventive care.

Under the new payment rule, physicians will be able to bill and be paid separately for an electrocardiogram and a physical exam, while payments for vaccinations and other types of injections will also increase. Among other changes CMS announced for 2005 are:

- Payments for screening services such as mammograms will rise by an average of 40 to 60%.
- Medicare will pay for an annual physical performed in outpatient hospital departments such as the emergency room.
- Bone density test payments will rise by 4.5%.
- Overall, payments for outpatient hospital services will rise by 3.3% to account for inflation.
- Terminally ill Medicare beneficiaries will be able to receive a one-time evaluation and counseling from a physician employed by a hospice to determine appropriate end-of-life services.

Dow Jones Newswires, November 4, 2004

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