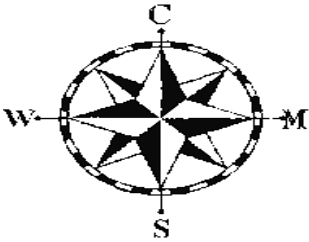


Westmoreland County Medical Society

JANUARY, FEBRUARY, AND MARCH

FIRST QUARTER 2016



Bulletin

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TIME FOR MEDICAID REVALIDATION IS RUNNING OUT

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If you haven't revalidated for Medicaid yet, the time for Medicaid revalidation is now.

Pennsylvania physicians who enrolled in Medicaid on or before March 25, 2011 must **revalidate by March 24, 2016**. As required by the Affordable Care Act, DHS must re-validate (re-enroll) all providers at least every five years.

Pennsylvania's Department of Human Services (DHS) sent a message to its stakeholders on January 7, strongly encouraging providers to submit their revalidations applications **as soon as possible**.

DHS says that 67 percent of service locations have been revalidated as of January 7. While progress is being made, there are still many service locations that have yet to revalidate.

Providers are urged to review all of their service locations in PROMISE. If there are service locations listed that are no longer applicable, now is the time to close them so that DHS can remove them from their list of those still needing revalidation. To close service locations, providers should follow the instructions on the Enrollment Information webpage.

What does this mean for physicians and other health care providers?

There will be no retroactive payment for services provided during a deactivated enrollment period. Revalidating now will prevent any interruption in your participation in and payment from DHS or partnered managed care plans.

Submitting an Enrollment Application

Enrollment applications may be submitted in one of four ways, unless otherwise specified in the application instructions:

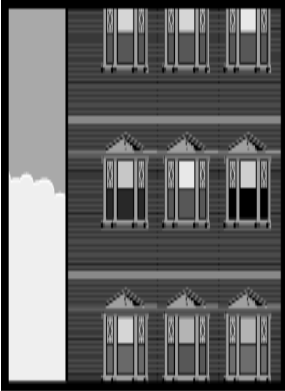
1. Email: Ra-ProvApp@pa.gov
2. Fax: (717) 265-8284
3. Mail: DHS/OMAP/BFFSP, Attention Provider Enrollment Unit, PO Box 8045, Harrisburg, PA 17105-8045
4. Online Electronic Provider Enrollment Application

Physician and physician group applications can be downloaded from DHS' enrollment information web page. Providers will need to complete a full

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Westmoreland County Medical Society



The County Medical Society office can be reached at (724) 837-5050

Office Hours:

Monday - Thursday
9 am to 12 Noon
Afternoon Hours by appointment only

E-mail:

office@wcmspa.org

Published 4 times a year by the Westmoreland County Medical Society in the interest of the medical society.

The opinions expressed in the Bulletin are those of the authors and do not necessarily reflect the opinion of the Westmoreland County Medical Society.

The editorial staff reserves the right to exclude any advertisement which, in its opinion, does not conform to the standards of the publication. The acceptance or rejection of any advertisement does not imply the endorsement or lack of endorsement by the Westmoreland County Medical Society of any company or its products.

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For the latest physician job openings see the JOB BANK at www.pamedsoc.org

HEALTH INSURANCE

For health insurance inquiries, please contact IntegrityFirst Corporation by calling 412-563-2106.

All changes to health insurance must be submitted in writing to Integrity First Corporation,

3633 Poplar Avenue, Pittsburgh, PA 15234

or you may fax them to 412-563-6109.

MEDICAL STUDENT EDUCATIONAL LOANS

The Westmoreland County Medical Society is sponsoring its annual Medical Student Educational Loan Program which offers loans to eligible medical students.

To be considered for the program, students must be attending an accredited school of medicine and they must be present or past residents of Westmoreland County.

The loan program was initiated with proceeds from a fund established by the Westmoreland County Medical Society with receipts from a polio immunization drive in 1964.

Over the years, the Fund has been supplemented by donations from the Westmoreland County Medical Society, interest income, charitable organizations, doctors and other individuals.

Applications for the loan fund are available through the Westmoreland County Medical Society Office, 231 South Main Street, Suite 207, Greensburg, PA 15601 or on our website at www.wcmspa.org.

Deadline for applications is May 9, 2016.



Medical Student Educational Loan Funds available again this year.



WE'RE HERE FOR *YOU!*

As the endorsed health insurance administrator of the Westmoreland County Medical Society, our goal is to be your helpful partner in making important insurance decisions such as:

- Questions on existing coverage or alternative options
- Ready to change over to Medicare
- Individual coverage for your child coming out of school

INtegrity First Corporation can also assist members with other lines of insurance such as:

- Professional Liability
- Life/Disability
- Bonds

**“INtegrity First Corporation...Where the customer never comes in second.
That’s Our Policy.”**

Phone: 412-563-2106

Fax: 412-563-6109

Email: info@integrityfirstins.biz

Or visit our website (www.integrityfirstins.biz) and click on to your WCMS page.

(Continued from page 1)

new enrollment application for their provider type **for each service location**. Once a completed application is submitted, DHS will conduct the required screening.

You may have already revalidated and DHS encourages providers to check the MA Enrolled Provider Portal Lookup Function to determine your revalidation date. All provider letters and portal login screens contain your next revalidation due date. Look for changes on the provider portal for each 13-digit logon to check your service location(s).

The re-enrollment date will be displayed in the masthead of the provider portal for each service location. This is also the current expiration date for that service location based on the most recent application on file with DHS.

Questions? Contact the DHS Program Office at 1-800-537-8862 with any questions or concerns. Members of the Pennsylvania Medical Society (PAMED) also can contact our PAMED's Practice Support Team at (717)DOC-HELP (717-362-4357).

IMPORTANT MEANINGFUL USE DEADLINES FOR PRACTICES TO REMEMBER

Feb. 29, 2016

- **Declaration of Intent:** To successfully report Meaningful Use (MU) for 2016, providers must complete the declaration of intent with the public health registry by Feb. 29, 2016.



March 11, 2016

- **Attestation:** March 11, 2016, is the deadline for 2015 Medicare attestation. Medicaid's attestation system will be available this spring. Physicians attesting to Medicaid's EHR program have a grace period until July 31.

March 15, 2016

- **Hardship Exemption:** Deadline to complete the MU hardship exemption to avoid the 2017 MU penalty, for physicians not attesting.

UPCOMING MEMBER BIRTHDAYS

MARCH	MARCH	APRIL	APRIL	MAY	MAY
Douglas Klions, MD	Molly Castille, MD	David Beyer, MD	Theodore Stem, MD	Robert Lafontant, MD	Robert Urban, MD
Mark Zerkovic, MD	Kathryn Byers, DO	Tiffany Helman, MD	Jeffrey Wolff, MD	Alberto Gauna, MD	Thomas Tomci, MD
Nawaf Nseir, MD	Richard Payha, MD	Saro Sarkisian, MD	Robert Davoli, MD	Thomas Ward, MD	Stacy Gillespie, DO
Ravinder Boorgula, MD	Sarfraz Ahmed, MD	Karen Lang, MD	Dean Watzman, MD	Lee Sung, MD	J. Frank Viverette, MD
William Lundie, MD	L. Douglas Pepper, MD	Wylie Overly, MD	Diana Denning, MD	Lorenzo Bucci, MD	Bruce Williams, DO
Laura Mejia, MD	Fred Hamaty, MD	Jawdat Nikoula, MD	Kerry Luck, MD	Lloyd Plummer, MD	Donald Brown, MD
Joseph Slezak, MD	Arshad Khan, MD	Guy Leone, MD	Morgan McCoy, MD	Charles Defrancesco, MD	Rabelais Tatchum-Talom, MD
Murat Bankaci, MD	Michael Szwerc, MD	Hai Wang, MD	Mark Kielbiowski, MD	Kimberly Scott Bucci, MD	Michelle Rathgeb, MD
Brian Wiczorek, MD	Justin Wallace, MD	Efren L. Leonida, MD	Matthew Wetzel, MD	Steven E. Mills, MD	Rahul Naidu, MD
Govindaraj Mohan, MD	Mehdi Javan, MD	George Gavin, MD	Mati Friebling, MD	Peter McConnell, MD	Frank McGrogan, MD
Frederick Schultz, MD	David Anto, MD	Juan Chahin, MD	Carol Fox, MD	Geoffrey Monsour, MD	Marjorie Tavoularis, MD
Lisa Hildenbrand, MD		John Parker, MD	Patrick Lally, MD	Joy Boone, MD	Andrew Polakovsky, MD
Christopher Rihn, MD		Edward Williamson, MD	Neil Baum, MD	Alan Rosenbloom, MD	Aster Assefa, MD
Theodore Schultz, MD		Howard Brumber, MD		Robert Donley, DO	Randall Cook, MD
Edward Johnson, MD		Steven Wodzinski, MD		Thomas Tomci, MD	Venkata Komanduri, MD

WESTMORELAND COUNTY MEDICAL SOCIETY HEALTH INSURANCE RENEWAL FOR 2016

The Westmoreland County Medical Society health insurance renewal rates were received and reviewed by the board on March 1, 2016. While many Highmark groups are receiving renewal rate increases in the high single to low double digits, the WCMS program sustained an average rate increase of 6.99%. The WCMS has six programs, four PPO programs and two traditional programs of Blue Cross/Blue Shield/Major Medical. The range of increase for the PPO programs is 4% to 8% while the traditional programs of Blue Cross/Blue Shield/Major Medical reduced by 8% to 17%. In addition to the medical insurance rates, there is no change to the premium for the vision or dental insurance.

According to our Highmark representative, some factors affecting the renewal rates are:

- The average age (with dependents) of the WCMS group is 47.7 years old. Our average age is older than the Highmark group average.
- 81% of medications received by WCMS insureds are brand name prescriptions and not generic.
- Only 5.6% of medications received by WCMS insureds were through mail order. Highmark mail order average is 9.6%. WCMS insureds are missing out on potential savings of up to 33% on prescription copayments.

The plan year is April 1, 2016 through March 31, 2017. Open enrollment begins on April 1, 2016. Now is the time to make changes to your plan or if you are currently not enrolled in the plan you may sign up now! There is no medical underwriting and no pre-existing condition exclusions. The new rates effective April 1, 2016 are included in this edition of the Bulletin.

Please call INtegrity First Corporation at 412-563-2106 or visit the WCMS page on the INF web site at www.integrityfirstins.biz with any questions you may have regarding the health insurance plans available to you. This plan is exclusively for members of the Westmoreland County Medical Society.

RENEWAL RATES FOR WESTMORELAND COUNTY MEDICAL SOCIETY MONTHLY RATES

April 1, 2016 to March 31, 2017

(The rates below include an administrative fee)

Traditional Blue Cross Blue Shield Major Medical Group 51474-00

	Individual	Parent/Child	Parent/Children	Employee & Spouse	Family
Blue Cross	\$538.08	\$1183.77	\$1183.77	\$1754.13	\$1754.13
Blue Shield	\$169.50	\$406.81	\$508.51	\$406.81	\$508.51
Major Medical	\$158.89	\$429.01	\$429.01	\$429.01	\$429.01
Total	\$866.47	\$2019.59	\$2121.28	\$2589.94	\$2691.64

Group 51474-01

	Individual	Parent/Child	Parent/Children	Employee & Spouse	Family
Blue Cross	\$539.42	\$1186.72	\$1,186.72	\$1758.51	\$1758.51
Blue Shield	\$169.50	\$406.81	\$508.51	\$406.81	\$508.51
Major Medical	\$158.89	\$429.01	\$429.01	\$429.01	\$429.01
Drug	\$229.09	\$629.98	\$629.98	\$629.98	\$629.98
Total	\$1,096.90	\$2652.52	\$2754.22	\$3224.30	\$3326.00

PPO High Deductible Health Plan

Group 013818-00

	Individual	Parent/Child	Parent/Children	Employee & Spouse	Family
Medical/ Surgical/Rx	\$840.72	\$2022.77	\$2022.77	\$2264.90	\$2601.18

PPO Blue High Deductible Value Plan

Group 013819-00

	Individual	Parent/Child	Parent/Children	Employee & Spouse	Family
Medical/ Surgical/Rx	\$854.61	\$2056.19	\$2056.19	\$2302.32	\$2644.17

PPO Split Co-Pay

Group 013820-00

	Individual	Parent/Child	Parent/Children	Employee & Spouse	Family
Medical/ Surgical/Rx	\$907.98	\$2184.60	\$2184.60	\$2446.10	\$2809.30

**PPO Enhanced
Group 013821-00**

	Individual	Parent/Child	Parent/Children	Employee & Spouse	Family
Medical/ Surgical/Rx	\$959.88	\$2309.46	\$2309.46	\$2585.90	\$2969.85

**PPO Enhanced
Community Blue
GroupCB01382110**

	Individual	Parent/Child	Parent/Children	Employee & Spouse	Family
Medical/RX	\$952.65	\$2292.06	\$2292.06	\$2566.42	\$2947.47

**Vision Enhanced
Group 80963-01**

Individual	Parent/Child	Parent/Children	Employee & Spouse	Family
\$8.55	\$17.09	\$25.64	\$17.09	\$25.64

**Vision Basic
Group 80963-00**

Individual	Parent/Child	Parent/Children	Employee & Spouse	Family
\$7.63	\$15.26	\$22.87	\$15.26	\$22.87

**United Concordia Dental
Enhanced Program
Group 847466-001**

Individual	Parent/Child	Parent/Children	Employee & Spouse	Family
\$41.15	\$128.08	\$128.08	\$128.08	\$128.08

Please Note:

Medical rates are valid for one year.

Vision rates and Dental Rates are valid through March 31, 2017.

OBITUARY: LAWRENCE F. BLACKBURN, M.D.



Dr. Lawrence F. Blackburn, 88, of Jeannette, died Sunday, Feb. 28, 2016, at home. He was born April 3, 1927, in Greensburg, a son of the late Dr. Lawrence L. and Helen Firster Blackburn. Dr. Blackburn started his private practice in the late '50s, joining his father in Greensburg. His aunt, Dr. Ida, started the practice in 1896 and when he retired in 1996 that ended 100 years of the Blackburn practice. He was a member of the American College of Physicians, a lifetime member of First United Methodist Church in Greensburg, a member and past, local and state president of the American Heart Association and also had served on the Salvation Army Board. He was a veteran of the Navy, having served during World War II. In addition to his parents, he was preceded in death by his sister, Nancy Thomas. He is survived by his wife, Kathleen C. Blackburn; two daughters, Elizabeth Blackburn and her husband, Gary Steinberg, of Takoma Park, Md., and Ruth Blackburn, of Boston, Mass.; a son, Phillip Snyder, of Greensburg; two grandchildren, Max Blackburn and Raya Steinberg; a brother, Charles Blackburn, of Greensburg; brothers-in-law, Greg Castine and his fiancée, Diane, and Jeff Castine and wife, Diana, all of Greensburg; and many nieces and nephews. Relatives and friends were invited to celebrate the life of Dr. Blackburn in the CLEMENT L. PANTALONE FUNERAL HOME INC., 409 W. Pittsburgh St., Greensburg. A funeral service was held in the First United Methodist Church of Greensburg. Interment followed in St. Clair Cemetery.

PAMED ABENITY DISCOUNT PROGRAM JOIN THE PENNSYLVANIA MEDICAL SOCIETY MEMBER PERKS PROGRAM!

As part of its wealth of membership benefits, the Pennsylvania Medical Society (PAMED) provides its members with an elite collection of perks, including thousands of local and national discount offers; monthly giveaways; and offers at hotels, restaurants, movie theaters, concerts, service centers, spas, theme parks, and more!

Recent popular offers include:

1. **1800FLOWERS.COM** - 20% off Flowers and Gifts
2. **National Car Rental** - Up to 20% off car rentals
3. **Alamo** - Save up to 20% off car rentals
4. **Budget Rent A Car** - Save up to 25% on car rentals and reserve your vehicle online
5. **Hertz** - Save up to 10% on your Car Rental with your Member CDP#
6. **Disneyland** - Save up to 10% on multi-day and park hopper admission tickets
7. **Firestone Complete Auto Care** - 15% off oil changes, maintenance, and repairs at over 2,300 company owned Firestone Complete Auto Care stores nationwide. Plus, pay only store cost plus 10% on Bridgestone and Firestone brand tires.
8. **Orlando Vacation.com** - Hotel and vacation home discounts near Disney World (Orlando, FL)
9. **Ticket Center** - 10% off premium and sold-out seats to concerts
10. **Ticket Center** - 10% off premium and sold-out seats to NFL games

More than 125,000 additional offers are available from brands including Costco, Disneyland, Olive Garden, AMC Theaters, Six Flags, Sam's Club, SeaWorld, Macaroni Grill, Brooks Brothers, LA Fitness, DirecTV, Target.com, Red Lobster, and more!

PAMED is your partner for your business, practice, and life of medicine.



ARE PHYSICIANS WARMING UP TO A SINGLE PAYER SYSTEM? PROS AND CONS

GUS GERACI, MD

Fifteen or 20 years ago, if you had mentioned single payer health care in a room full of physicians, there would have been a chorus of strenuous objections and epithets.

There is a growing chorus of physician voices who now support the idea.

What happened?

Frustration with the panoply of rules, prior authorization, differing guidelines and the appealing simplicity of only having to follow one set of rules, and having one payer to deal with versus the array that currently exist makes it very attractive to some.

What are the pros and cons?

Simplifying the rules, prior authorization variances, and billing procedures are all listed as advantages. Narrow networks would not exist, in theory, because all physicians could only join one plan. That plan would have every physician in it, with their quality being monitored by the single payer and able to enforce rules and guidelines that make sense.

The opportunity to improve quality, decrease administrative costs, and provide more care to more people for less money all seem very appealing. If you only have one payer, they could focus on quality and efficiency, and stop worrying about competition and marketing.

The danger of a monopolistic government or privately controlled single payer for all of health care makes others very nervous, including me. Imagine if the one and only source of your income could change, with a whim, how you get paid and what you get paid for.

You could lose (and thus patients would lose) the one advantage we all might have in the current world – and that is choice. People point out how bad some guidelines and quality measures are that currently exist, and they worry that those will only proliferate in the absence of choice.

Independent practices and even private hospitals, available on a cash basis, would spring up and leave the problem of catastrophic high cost illness to the single payer. That single payer would be responsible for the inpatient disasters or high cost cases, some of which may have been caused by the neglect of the cash practices.

Imagine getting a transfer from a private hospital because the patient ran out of money. Introducing a multi-tiered health system may allow only those with spare cash able to afford care that is quick and efficient, but steal “easy” cases from the single payer system.

People point out that countries with single-payer systems have health care that is “free.” Critics point out how delays and lack of resources contribute to deaths and inefficiency because there is no competition, and resources end up being necessarily limited.

Taxes may be much higher, but a worthwhile trade, according to some, because one eliminates healthcare costs for the individual.

Darn devilish details.

Single payer has the potential to do many wonderful things, but we would have to trust that a single entity that controlled the trillions of dollars involved in health care would, at least most of the time, do the right thing.

Perhaps if they put me in charge. I could do it right, but then again, maybe not. Your thoughts?

FIND SOLUTIONS TO CHALLENGES AT PAMED'S SPRING PRACTICE MANAGER MEETINGS

Every day, practice managers tell us they're frustrated by decreasing reimbursement, complex regulations, and hassles with insurers and the government.

The Pennsylvania Medical Society's (PAMED's) popular spring and fall practice manager meetings offer the cure for those frustrations. You'll hear important updates, get advice, and share and network with colleagues. Registration is now open for our spring meetings, which offer live and virtual options. These meetings are free to PAMED members.

SPRING PRACTICE MANAGER MEETINGS

PITTSBURGH	WILKES-BARRE	HARRISBURG
Thursday, April 21, 2016 Noon - 2 PM Allegheny County Medical Society 713 Ridge Avenue Pittsburgh, PA 15212	Tuesday, April 26, 2016 11:30 AM - 1:30 PM Mohegan Sun at Pocono Downs 1280 Highway 315 Wilkes-Barre, PA 18702	Wednesday, May 11, 2016 8:30 AM - 11:00 AM Pennsylvania Medical Society 777 East Park Drive Harrisburg, PA 17111 <i>Webcast also available; call-in information will be provided after registration is complete</i>

You'll find updates on these hot topics:

Medicare

- Medicare Access and CHIP Reauthorization Act of 2015 (MACRA)
 - ◊ Merit-based Incentive Program System (MIPS)
 - ◊ Alternative Payment Models (APMs)
- Meaningful Use Stage 3 – Dead or Alive?

Medicaid

- Revalidation
- Observation services

Legislative-Regulatory Updates

- Prior Authorization
- "Surprise Billing"
- Controlled substance database
- Telemedicine

Here's what past attendees are saying:

- Always walk away with updates and relevant information pertinent to the practice. These meetings are invaluable and so important to attend.
- I find every minute spent worth my time to come.
- Mary Ellen is a great presenter, makes things easy to remember, knowledgeable, dynamic, and keeps the audience engaged. Her presentation humanized the information.
- Patrick Hamilton is a great speaker — always well prepared and very informative.
- The information presented was extremely relevant to my position.

*Have a challenge that has you stumped? PAMED's Knowledge Center is only a phone call away
at 855-PAMED4U (that's 855-726-3348)*

ICD-10 GRACE PERIOD ENDS OCTOBER 1 PREPARE NOW WITH THESE THREE STEPS

There is a one-year “grace period” for ICD-10 during which Medicare Part B and Medicaid claims will not be rejected as long as the physician/practitioner uses a valid code from the right family of codes, as the Pennsylvania Medical Society (PAMED) reported last fall.

PAMED’s Practice Support team has heard that some practices are submitting claims using the unspecified family of codes instead of the more specific code, even when the documentation contains the detail. Although these claims aren’t being rejected now, they will be once the grace period ends.

Starting October 1, 2016, more specific codes will be required. PAMED encourages practices to be proactive and start coding with more specificity now in order to avoid claims rejections starting in October.

Here are three things to remember when preparing to use the more specific ICD-10 codes rather than the family of codes:

1. When using a crosswalk, remember that most codes do not cross one to one. Review all codes available and select the most specific code
2. If utilizing an EMR, make sure that the crosswalk includes mapping to the specific codes and not just mapping to unspecified codes
3. Remember laterality (right, left, bilateral, or unspecified designations) when documenting and selecting ICD-10 codes

PAMED ICD-10 Coding Resources

There are PAMED tools and resources that physicians and their staff can use to ease headaches during the transition to a new, more specific code set, including:

- Specialty-specific crosswalks
- Online documentation training for physicians
- Coding scenarios with answers and rationale

Members who have questions can contact our Knowledge Center at 855-PAMED4U, that’s 855-726-3348.

Looking for more coding help? PMSCO Healthcare Consulting, a subsidiary of PAMED, offers documentation and coding auditing services. And, try PMSCO’s **free** coding benchmark tool to compare your practice or individual physician data with Medicare statistics. It will show you areas where you might be losing revenue or are at risk for being targeted for an audit.

