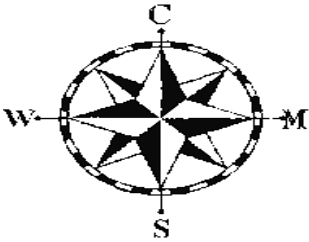


# Westmoreland County Medical Society

JULY, AUGUST, SEPTEMBER

THIRD QUARTER 2016



# Bulletin

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Registration for the PDMP is Now Available REGISTER NOW

## PENNSYLVANIA PDMP

### What Physicians and Prescribers Should Know about Pennsylvania's Prescription Drug Monitoring Program

Registration in the state's new prescription drug monitoring program (PDMP) is currently underway. Pennsylvania physicians who are licensed, registered, or otherwise lawfully authorized to prescribe controlled substances, other drug or device in the course of professional practice, or research in this Commonwealth are required to register in the PDMP. Once you have registered, the system will be ready for query which started Thursday, Aug. 25, according to the Pennsylvania Department of Health (DOH).

PAMED offers more information about reporting requirements, access to data, and the ways health care professionals can use the PDMP in their practice of medicine.

## HOW TO REGISTER

### How to Register in the PDMP: Online Tutorial

Are you looking for guidance on the PDMP registration process before you get started? Try this online tutorial that will walk you through the steps in the process. To start the tutorial, click the yellow "next" button at the lower right-hand corner of the web page.

**Register Online:** Registration for the PDMP is available now. Access DOH's PDMP webpage for more resources and a link to register.

## PDMP FEEDBACK

Physician comments on the registration process can be emailed to [stat@pamedsoc.org](mailto:stat@pamedsoc.org). Both positive feedback and constructive criticism are welcome. PAMED will gather these comments and submit them to DOH's PDMP team.

# 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

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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.

## OBITUARY: JOHN V. BARBER, M.D.



Dr. John V. Barber, formerly of Greensburg, PA, passed away on July 2, 2016 in Vero Beach, FL. He was born in Grove City, PA on September 9, 1921, the son of Cassius Vance and Zelda Claire (Snyder) Barber.

At Grove City High School, he was a state award winning oboe player. He graduated from Grove City College with a degree in Chemistry and continued his medical education at Temple University in Philadelphia, PA. His residency in Urology was completed at Allegheny General Hospital in Pittsburgh, PA. In 1997, he retired from private practice in Greensburg, moving with his wife, Judith, to Key West, FL.

He served his country during World War II in Guam and Saipan where he was a photo intelligence officer. Photography became a hobby throughout the rest of his life. During the Korean Conflict he served with the Army Medical Corps in San Antonio, TX.

He belonged to many professional and service organizations including: the Free Masons; Lions Club; Pennsylvania Medical Society; Westmoreland County Medical Society; American Medical Association; American Urological Association; American Heart Association.

Among his passions were ballet performance, classical music, wine, and international travel. John was also a gourmet cook. He was very proud of his three children and enjoyed caring for his beloved Yorkie.

In addition to his wife Judith, Dr. Barber is survived by daughters Candace (Richard) DeYoung of Bridgeville, PA; Suzanne Barber, and son Dr. G. Vance (Elizabeth) Barber of Greensburg, PA; and his brother Carl (Ruth) Barber of Danville, VA. Surviving grandchildren include Marcus (Elizabeth) DeYoung, Alyssa DeYoung, Gregory Barber and Ann (Christopher) Breaux; and two great grandchildren, Gavin and Leah DeYoung.



## **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](mailto:info@integrityfirstins.biz)**

Or visit our website ([www.integrityfirstins.biz](http://www.integrityfirstins.biz)) and click on to your WCMS page.

(Continued from page 1)

## PDMP CME

These sessions from PAMED's "Addressing PA's Opioid Crisis" CME series offer more details on the PDMP:

**Introduction to the PDMP:** Review prescriber and dispenser roles and more

**PA-PDMP: Be Smart. Be Safe. Be Sure:** Develop a plan to review and incorporate PDMP data into clinical decision making. Includes case studies.

Other courses in this series address naloxone, referral to treatment, and prescribing guidelines.

## Answers to FAQs on the PDMP

PAMED's *Quick Consult* can help address frequently asked questions.



## Be Smart. Be Safe. Be Sure.

PAMED's "Be Smart. Be Safe. Be Sure." initiative is focused on physician call to action and patient empowerment.

**WESTMORELAND COUNTY MEDICAL SOCIETY  
FALL GENERAL MEMBERSHIP MEETING  
WEDNESDAY, NOVEMBER 9, 2016**

**DENUNZIO'S ITALIAN CHOPHOUSE at  
ARNOLD PALMER REGIONAL AIRPORT, LATROBE, PA**

R.S.V.P. NO LATER THAN MONDAY, NOVEMBER 9, 2016  
BY CALLING 724-837-5050 or by  
E-MAIL: [office@wcmspa.org](mailto:office@wcmspa.org)

- **5:30 PM - HORS D'OEUVRES & VENDOR DISPLAY**
- **6:30 PM - PASTA BAR BUFFET**
- **7:30 PM - INTRODUCTIONS & ELECTION OF OFFICERS**
- **7:45 PM - PROGRAM TITLE**
- "Medical Marijuana addressing the DOH Regulations"**

**MEMBER & SPOUSE/SIGNIFICANT OTHER ARE FREE  
GUEST or NON-MEMBERS MUST BE PAID FOR IN ADVANCE  
(COST OF GUEST/NON-MEMBER DINNER IS \$40.00)**

**WCMS EVENT POLICY: A ticket  
will be given for one free drink at the bar.  
All other drinks will be on a cash basis.**

**Cancellations must be received prior to 3 PM the day of the event  
or you will be charged for the meals.**

## MACRA

The Medicare Access and CHIP Reauthorization Act (MACRA) of 2015 repealed the sustainable growth rate (SGR) payment formula and called for a shift toward payment for physicians based on the quality of care provided rather than quantity of patients seen.

The Centers for Medicare and Medicaid Services is proposing the implementation of a framework called the Quality Payment Program, signaling a major transformation in health care. The Quality Payment Program consists of two tracks: the Merit-based Incentive Payment System (MIPS) and Advanced Alternative Payment Models (Advanced APMs).

- **Video Series** - Watch members-only multi-part video series that breaks down everything you need to know about MACRA.
- **MACRA-nyms** - The list of acronyms connected to MACRA seems to get longer by the day. PAMED makes it easy to keep track of them all.
- **Quick Consult Series** - Read about MACRA in four parts:

<p><b>MACRA Overview</b> - Learn more about MACRA, MIPS eligible clinicians and performance categories, and reporting mechanisms.</p>	<p><b>MACRA and Advanced Alternative Payment Models (APMs)</b> - Learn about this new approach to payment for medical care in which providers take ownership for cost and quality performance.</p>
<p><b>An In-Depth Look at Advancing Care Information</b> - Find out more about the MIPS quality-based program that replaces Meaningful Use.</p>	<p><b>An In-Depth Look at Quality, Resource Use, and Clinical Practice Improvement Activities Quick Consult</b> - A closer look at the other quality-based programs that form the basis of MIPS.</p>

**Important Note:** These resources are based on the proposed rule that CMS issued on April 27, 2016. The rule will not be finalized until fall 2016, and it is possible that there will be some differences between the initial proposal and the final rule. In the event that CMS elects to make changes, PAMED will keep members posted via our email newsletter and update these resources as needed.

### MEDICARE WELLNESS VISITS: 7 STRATEGIES FOR IMPLEMENTATION

The Annual Wellness Visit is a covered Medicare benefit that can promote wellness in your patients and ensure your practice's financial health.

Get these seven strategies for implementing Annual Wellness Visit delivery at [www.pamedsoc.org](http://www.pamedsoc.org).



## **LEGISLATION TO ALLOW CRNP INDEPENDENT PRACTICE PASSES STATE SENATE**

**Downloads:** CRNP Bill - Collaboration FAQ Flyer, Education Training Matters - CRNP, SB 717 June 28 2016

On the evening of July 12, 2016, the state Senate passed SB 717 – legislation that allows CRNPs to practice independently and eliminates the requirement that they collaborate with physicians – by a vote of 41-9. The bill now goes to the state House for its consideration.

While the recent vote by the Senate is disappointing to the Pennsylvania Medical Society (PAMED), physician voices were heard at the Capitol. In just two weeks, physicians and others sent 1,358 messages to state legislators in opposition to SB 717. If you recently took action on this issue, PAMED thanks you for your advocacy. It's this kind of momentum that we need to build upon if and when the bill is considered by the House.

During the summer recess, legislators spend most of their time at home in their districts, where they are available to meet with constituents. We encourage **all** Pennsylvania physicians to contact their Representative during this time and schedule a meeting with him or her. If you need assistance with scheduling a meeting or with talking points, please contact Hannah Walsh, PAMED's Associate Director of Legislative Affairs, at [hwalsh@pamedsoc.org](mailto:hwalsh@pamedsoc.org).

These talking points may be helpful in talking to your Representative:

- [June 28 letter to state Senate debunking myths](#)
- [Education and training matters](#)
- [7 reasons to keep the team together](#)
- [Collaboration FAQ](#)

"Physician voices are powerful, and we **all** need to stand together and tell the House of Representatives that SB 717 would jeopardize patient safety and compromise quality of care for patients in Pennsylvania," said PAMED President Scott Shapiro, MD, FACC, FCPP.

**PAMED strongly opposes SB 717 and supports maintaining physician-led, team-based care in Pennsylvania. We encourage physicians to call those Senators who stood with physicians in opposing SB 717 and thank them for their support:**

Rep. Richard Alloway (R-Franklin County) (717) 787-4651

Rep. Jake Corman (R-Centre County) (717) 787-1377

Rep. Andrew Dinniman (D- Chester County) (717) 787-5709

Rep. John Eichelberger (R- Blair County) (717) 787-5490

Rep. John Gordner (R- Columbia) (717) 787-8928

Rep. Lloyd Smucker (R- Lancaster County) (717) 787-6535

Rep. Elder Vogel (R-Beaver County) (717) 787-3076

Rep. Randy Vulakovich (R- Allegheny County) (717) 787-6538

**Rep. Kim Ward (R- Westmoreland County) (717) 787-6063**

# WE KNOW THAT PHYSICIANS TODAY HAVE A LOT OF PAIN POINTS.

Find solutions to these challenges and more at PAMED's Annual Education Conference.

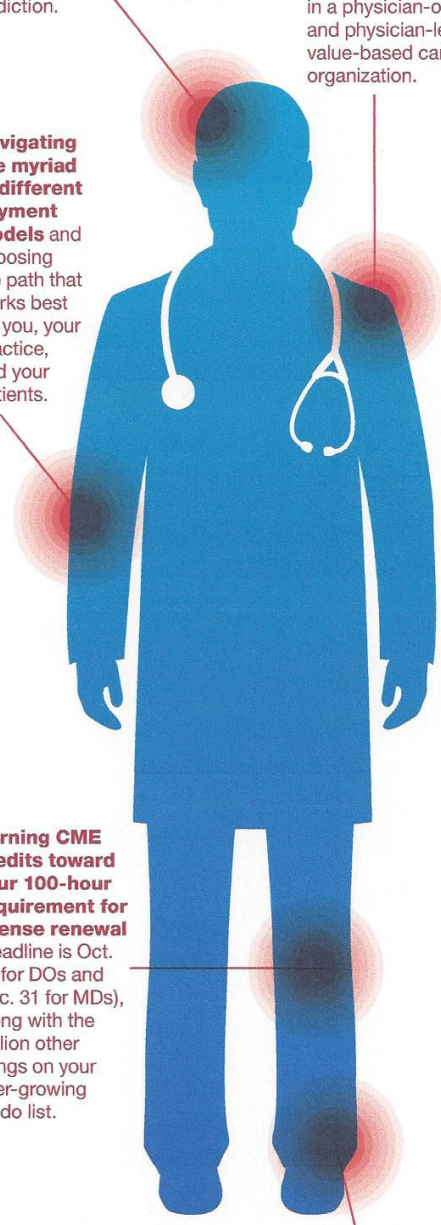
**Helping patients with chronic pain,** including setting realistic expectations, and talking with them about treatment options, and, if necessary, addiction.

**Achieving success** in a physician-owned and physician-led value-based care organization.

**Navigating the myriad of different payment models** and choosing the path that works best for you, your practice, and your patients.

**Earning CME credits toward your 100-hour requirement for license renewal** (deadline is Oct. 31 for DOs and Dec. 31 for MDs), along with the million other things on your ever-growing to-do list.

**Leading your practice, hospital, or health system** through the maze of health care reform and transformation.



## SCHEDULE FRIDAY, OCT. 21

8 a.m. – 12 p.m. (3.75 CME credits available)

### Be Smart. Be Safe. Be Sure: Approaches to Managing Your Patients with Chronic Pain

Learn best practices in assessment and therapy from panelists who specialize in chronic pain management; evaluate effective use of staff, financial, and community resources; and develop skills to engage in meaningful and realistic conversations with patients about pain management treatment options, drugs, and addiction.

12:30 – 3:30 p.m. (2.75 CME credits available)

### MACRA Options: Creating a Physician-Led Approach to Alternative Payment Models and Value-Based Care

Learn the strengths and weaknesses of different payment models; how models can be structured to protect physicians from inappropriate financial risk, ensure patients have adequate access to care, and reduce avoidable hospitalizations and unnecessary outpatient procedures; and how appropriately designed payment models can enable primary care physicians and specialists to work together to improve patient care.

**Don't miss this session!** This session will be helpful in framing the discussion for the **Reference Committee of the Whole** being held this year.

3:45 – 5:15 p.m. (1.5 CME credits available)

### Pennsylvania Health Care Topics Debates

Support the discussions as teams of medical students representing PA's medical schools debate issues impacting health care in the state. Topics will include current issues in the field of medicine with each team debating a different side of the issue.

7 – 8 p.m.

### Information Session for Reference Committee of the Whole

The health care landscape is continuing to change rapidly and PAMED is here to play an integral role in helping physicians succeed in the shift from volume to value. This information session will provide background for Saturday's Reference Committee of the Whole, which will be asked to discuss specific avenues for PAMED to strengthen physician autonomy by providing practice options and helping establish and support advanced practice models.

Learn more and register: [www.pamedsoc.org/AEC](http://www.pamedsoc.org/AEC)

## SATURDAY, OCT. 22

11:30 a.m. – 4 p.m.

### The Governance Experience: PAMED House of Delegates Reference Committees

Sit in on Reference Committee discussions and engage in the decision-making process during PAMED's House of Delegates annual business meeting, held in conjunction with the Annual Education Conference. Discover how PAMED delegates are helping to shape the future of medicine in Pennsylvania.

Along with the typical Reference Committees, there also will be a Reference Committee of the Whole held at this year's House of Delegates.

External forces are putting pressure on physicians in the transition from fee-for-service to value-based care. The Reference Committee of the Whole will be asked to discuss specific avenues for PAMED to strengthen physician autonomy by providing practice options and helping establish and support advanced practice models.

4 – 5 p.m. (1 CME credit available)

### The Hitchhikers Guide to the Health Care Galaxy

Have you ever watched an industry transform and say "I wish I had thought of that" (think Facebook, Netflix, etc.)? Acquire the skill sets to positively impact this nation's health care and create the health care system of tomorrow.

5 – 6 p.m. (1 CME credit available)

### Evaluating Scientific Research: Resident and Fellow Poster Reviews

Earn CME while you help to evaluate scientific poster presentations by members of PAMED's Residents and Fellows Section as part of our annual Residents and Fellows Poster Contest.

The Annual Education Conference is held in conjunction with PAMED's House of Delegates.

**Questions?** Contact PAMED's Knowledge Center at **855-PAMED4U** (855-726-3348) or **stat@pamedsoc.org**.

#### CME

The Pennsylvania Medical Society is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education for physicians.

The Pennsylvania Medical Society designates this live activity for a maximum of 10 AMA PRA Category 1 Credits™. Physicians should only claim credit commensurate with the extent of their participation in the activity.

The planners and faculty for this activity have no relevant financial relationships to disclose.

This is the one conference relevant to all Pennsylvania physicians regardless of specialty or practice setting!

# 95%

OF LAST YEAR'S ATTENDEES  
**HAD A BETTER UNDERSTANDING**  
of the topics  
and would recommend the  
conference to colleagues.

# 89%

OF LAST YEAR'S ATTENDEES  
**said they were BETTER PREPARED**  
TO DO THEIR JOB.

Register at [www.pamedsoc.org/AEC](http://www.pamedsoc.org/AEC)

### Free to members

All of these educational sessions – up to 10 credits of CME in all – are free as part of PAMED membership.

**10 CME CREDITS AVAILABLE!**

### \$149 for non-members

Join today to attend this conference for free and take advantage of PAMED's wealth of membership benefits. You can join online at [www.pamedsoc.org/join](http://www.pamedsoc.org/join) or by calling PAMED's Knowledge Center at **855-PAMED4U** (855-726-3348). You may be eligible for an introductory dues offer of \$95.

### Find hotel info online at

<https://resweb.passkey.com/go/PMS2016>

Learn more and register: [www.pamedsoc.org/AEC](http://www.pamedsoc.org/AEC)



**Dear Medical Society or Association:**

Novitas Solutions, Inc. (Novitas), your Medicare Administrative Contractor (MAC) for the fee-for-service program in Delaware, District of Columbia, Maryland, New Jersey, and Pennsylvania (Jurisdiction L) as well as Arkansas, Colorado, Louisiana, Mississippi, New Mexico, Oklahoma, Texas, Indian Health and Veterans Affairs (Jurisdiction H), requests your help communicating important changes to your members to prevent potential **loss of revenue** to their practice or facility.

**Provider Enrollment Revalidation Cycle 2**

All Medicare Part A and B providers are required to recertify the accuracy of their enrollment information every five years through a process known as revalidation. The initial five-year revalidation cycle was completed in 2015 and the Centers for Medicare & Medicaid Services (CMS) began Cycle 2 in March 2016.

CMS implemented improvements to streamline the revalidation process during Cycle 2. One enhancement is that CMS is establishing due dates with six months' advance notice of when the revalidation application must be received by to remain compliant with Medicare's revalidation requirements. CMS posts the due dates for all currently enrolled providers in the Medicare Revalidation Lookup Tool at [Data.CMS.gov/revalidation](http://Data.CMS.gov/revalidation). **A due date of "TBD" (to be determined) means that CMS has not set the date yet.** An application will be considered "unsolicited" if it is submitted but the provider/supplier is not due for revalidation in the current six-month period. If a due date is not established (i.e., "TBD"), a revalidation application should **not** be submitted. All unsolicited revalidation applications will be returned by Novitas.

The Revalidation Lookup Tool is updated every 60 days, so we encourage providers to check the tool periodically and respond timely once your due date is established. Novitas is also issuing notices by mail to providers two to three months in advance of the due date.

Providers/suppliers must submit a complete revalidation application by the established due date and respond to all requests for additional information issued by Novitas in a timely manner.

- Failure to submit a revalidation application will result in a hold on Medicare payments and subsequent deactivation if the application is not submitted.
- If the revalidation application is received, but additional information is requested (through development) and not received within the allotted 30-day timeframe, the provider's Medicare enrollment will be deactivated

In order to reestablish Medicare billing privileges subsequent to deactivation, the provider/supplier is required to submit a new, fully completed application. The provider/supplier will maintain their original Provider Transaction Access Number (PTAN); however, an interruption in billing will occur during the period of deactivation resulting in a gap in coverage.

- The reactivation date after a period of deactivation will be based on the receipt date of the new, fully completed application. Retroactive billing privileges during the period of deactivation will not be granted. Services provided to Medicare patients during the period between deactivation and reactivation are the provider's liability.

Novitas encourages providers/suppliers to utilize Internet-based PECOS (PECOS Web) to submit their revalidation application. This is the fastest and most efficient method for submission of revalidations.

The processing status of Cycle 2 revalidation applications can be obtained utilizing the Provider Enrollment Status Inquiry Tool located on Novitas' website.

Please access the following key resources for additional information:

- Provider Enrollment Status Inquiry Tool:  
Jurisdiction L - [http://www.novitas-solutions.com/webcenter/content/conn/UCM\\_Repository/uuid/dDocName:00004864?proto=http&do\\_main=www.novitas-solutions.com&space=MedicareJL](http://www.novitas-solutions.com/webcenter/content/conn/UCM_Repository/uuid/dDocName:00004864?proto=http&do_main=www.novitas-solutions.com&space=MedicareJL)  
Jurisdiction H - [http://www.novitas-solutions.com/webcenter/content/conn/UCM\\_Repository/uuid/dDocName:00004864?proto=http&do\\_main=www.novitas-solutions.com&space=MedicareJH](http://www.novitas-solutions.com/webcenter/content/conn/UCM_Repository/uuid/dDocName:00004864?proto=http&do_main=www.novitas-solutions.com&space=MedicareJH)
  
- Revalidation Helpful Hints and Reminders  
Jurisdiction L - <http://www.novitas-solutions.com/webcenter/portal/MedicareJL/page/pagebyid?contentId=00024849>  
Jurisdiction H - <http://www.novitas-solutions.com/webcenter/portal/MedicareJH/page/pagebyid?contentId=00024849>
  
- Internet-based PECOS (PECOS Web)  
<https://pecos.cms.hhs.gov/pecos/login.do>
  
- MLN® Special Edition (SE) 1605 article  
<https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/Downloads/SE1605.pdf>
  
- Revalidation Cycle 2 FAQs  
[https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/MedicareProviderSupEnroll/Downloads/Reval\\_Cycle2\\_FAQs.pdf](https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/MedicareProviderSupEnroll/Downloads/Reval_Cycle2_FAQs.pdf)
  
- CMS' Revalidation page  
<https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/MedicareProviderSupEnroll/Revalidations.html>

This communication is from Novitas' Provider Outreach and Education department. If you have questions, please contact our Provider Enrollment Help Line at (JL) 1-877-235-8073 or (JH) 1-855-252-8782.

## FIND SOLUTIONS TO CHALLENGES AT PAMED'S 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. Here is a list of fall 2016 dates and locations:

- **Sept. 15, 2016**, at the Health and Wellness Center in Doylestown, Pa.
- **Sept. 22, 2016**, at the Hilton Garden Inn in Cranberry Township, Pa.
- **Sept. 28, 2016**, at PAMED building in Harrisburg (**live webcast also available**).

You'll find updates on these hot topics:

- Medicare 2017 Physician Fee Schedule
- Prescription drug monitoring program
- Medical marijuana
- Legislative/regulatory updates
- Regulatory updates
- Payer updates
- Enrollment/revalidation

PAMED members can view video from PAMED's spring 2016 practice manager meeting (held May 11 in Harrisburg).

Not a PAMED member? Join today and you can attend a practice manager meeting for free.

### 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)*

There's an **APP** for that.



PAMED's New Mobile App now available from the App and Google Play stores.

## ARE YOU READY FOR LICENSE RENEWAL THIS YEAR?

Don't forget: 2016 is a license renewal year. Find out what you need to know about license renewal with PAMED's frequently asked questions:

- [CME FAQs for DOs](#)
- [CME FAQs for MDs](#)

And, access more than 40 patient safety and risk management CME credits.

### What are the requirements for licensure for an MD?

The State Board of Medicine regulations state that to renew a medical license, a physician will need:

- 100 total credit hours of CME in the two-year license cycle (with license cycles ending on Dec. 31 of each even year)
- A minimum of 20 of the total credit hours in Category 1
- 12 credit hours in the areas of patient safety or risk management (either Category 1 or Category 2)
- 2 credit hours from a Department of Human Services' (formerly DPW) approved course on the topic of mandated child abuse recognition and reporting for a **license renewal (effective 1/1/2015)** **OR** 3 credit hours from a Department of Human Services' approved course on the topic of mandated child abuse recognition and reporting for an **initial license (effective 1/1/2015)**.

### What are the requirements for licensure for a DO?

The State Board of Osteopathic Medicine has required CME for licensure for the past several years. With the passage of Act 13, the Osteopathic Board has been commissioned to include a patient safety/risk management component in addition to the current requirements.

The regulations state that - to renew an osteopathic medical license - a physician will need:

- 100 total credit hours of CME in the two-year license cycle (with license cycles ending on October 31 of each even year)
- A minimum of 20 of the total credit hours in AOA Category 1-A
- 12 credit hours in the areas of patient safety or risk management (either Category 1 or Category 2)
- 2 credit hours from a Department of Human Services' (formerly DPW) approved course on the topic of mandated child abuse recognition and reporting for a **license renewal (effective 1/1/2015)** **OR** 3 credit hours from a Department of Human Services' approved course on the topic of mandated child abuse recognition and reporting for an **initial license (effective 1/1/2015)**.

## MAKE LICENSURE RENEWAL EASIER WITH PAMED CME

PAMED offers CME that meets patient safety and risk management requirements. Courses include:

- **Child abuse recognition and reporting**: Meets the state's licensure requirement
- **"Addressing PA's Opioid Crisis: What Health Care Teams Need to Know"**: Includes sessions on naloxone, referral to treatment, prescribing guidelines, and PA's PDMP.

And, members can access more than 40 CME credits.

## ***UPCOMING MEMBER BIRTHDAYS***

SEPTEMBER	OCTOBER	NOVEMBER
William L. Bradley, MD	Elizabeth A. Detschelt, MD	Robert A. Crossey, DO
Mark M. Suzuki, MD	Adel W. Armanious, MD	Bindu M. Gutti, MD
Robert DeJesus, MD	Ted A. Matthews, Jr, MD	Primo V. Bautista, MD
Daniel R. Casper, MD	Jacob W. Shipley, MD	Geoffrey J. Bisignani, MD
Robert G. Tymoczko, MD	Subhashish Pal, MD	Peter M. Bertin, DO
Chito M. Crudo, MD	Daniel C. Clark, MD	Gloria J. Carter, MD
Rebecca A. Quel, MD	Wadih Nadour, MD	Mani Bashyam, MD
William T. Winslow, DO	Bruno P. Petrucelli, MD	Jacob A. DiCesare, DO
William M. Weisel, MD	John Domit, MD	Rachel F. Esposito, DO
Bruce A. Hershock, MD	Joseph T. Macioce, DO	James H. Thomas, MD
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Razel C. Siron-Gonzales, MD	Mark A. Milchak, MD	Richard E. Lynn, MD
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Matthew R. Panahandeh, MD	Greg S. Whorral, MD	
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Bruce A. Bradley, DO	Margi Ameet Desai, MD	
Richard F. Kucera, MD	James N. Masterson, DO	
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	Prakash K. Vin, MD	
	Tiffany Kay Romantino, MD	
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	John P. Horne, MD	

## **PENNSYLVANIA'S HEPATITIS C SCREENING ACT TAKES EFFECT ON SEPTEMBER 18, 2016**

On July 20, 2016, Pennsylvania Gov. Tom Wolf signed Act 87 of 2016, the Hepatitis C Screening Act, into law.

The Act, which takes effect on Sept. 18, 2016, requires each individual born between 1945 and 1965, who receives health services as an inpatient in a hospital or who receives primary care services in an outpatient department of a hospital, health care facility or physician's office, to be offered a hepatitis C screening test or hepatitis C diagnostic test.

The individual is not required to accept the test. However, if the individual consents to the test, and the screening test is reactive, the health care provider must either offer the individual follow-up health care or refer the individual to a health care provider who can provide follow-up care. The follow-up care must include a hepatitis C diagnostic test.

There are exceptions under Act 87. A health care practitioner is not required to provide the services if he or she reasonably believes at least one of the following:

- The individual is being treated for a life-threatening emergency.
- The individual has previously been offered or has been the subject of a hepatitis C screening test.
- The individual lacks capacity to consent to a hepatitis C screening test.

### **What Does This Mean for Physicians and Other Health Care Providers?**

The Pennsylvania Medical Society (PAMED) will continue to monitor this new requirement, including any new regulations promulgated by the Department of Health.

In the interim, it is highly recommended that parties subject to these requirements review the law and develop policies for compliance. These policies should include thorough recordkeeping, including situations where an individual refuses to take a test and situations where the individual is referred for follow-up care to another health care provider.

## **PRACTICES SHOULD BE AWARE OF CHANGES TO DEPARTMENT OF LABOR CIVIL PENALTIES, EFFECTIVE AUGUST 1**

The U.S. Department of Labor (DOL) recently announced increases to civil penalty amounts assessed by its administrations, including the Employee Benefits Security Administration (EBSA), Occupational Safety and Health Administration (OSHA), Wage and Hour Division, and Office of Workers' Compensation Programs. The changes were made to adjust for inflation, as required by the Federal Civil Penalties Inflation Adjustment Act of 2015.

The DOL says that the new civil penalty amounts are applicable only to civil penalties assessed after August 1, 2016, whose associated violations occurred after November 2, 2015. A few noteworthy changes include the following:

- OSHA's maximum penalties have increased by 78 percent, with the top penalty for serious violations increasing from \$7,000 to \$12,471. The DOL says OSHA maximum penalties have not been raised since 1990.
- Employee Benefit Security Act penalties that apply to health and welfare plans are increasing.  
For example:
  - ◊ Failure to file Form 5500 for plan's annual report - Penalty has been raised from up to \$1,100 per day to up to \$2,063 per day.
  - ◊ Failure to provide CHIP notice - Penalty has been raised from up to \$100 per day/per employee to up to \$110 per day per employee.
  - ◊ Failure to file annual report for Multiple Employer Welfare Arrangements (MEWA) - Penalty has been raised from up to \$1,100 per day to up to \$1,502 per day.

The DOL provides additional resources on the inflation adjustment:

- Fact sheet
- Chart of the individual penalty adjustments

## **MAKING SENSE OF YOUR QRUR - A HANDS-ON OPPORTUNITY TO DECIPHER YOUR REPORT AND LEARN STRATEGIES USED BY TOP PERFORMERS**

Medicare's Quality and Resource Use Report (QRUR) not only shows how your group or solo practice performed during 2015 on quality and cost measures, but it also has the potential to increase or decrease your reimbursement.

But, what do the numbers in **your** report mean, and how can you improve your score – **maximizing the opportunity for increased reimbursement and avoiding decreases** to your payments?

**Attend the Pennsylvania Medical Society's half-day, hands-on workshop on October 27 – free to members and \$199 for non-members – to learn about QRUR basics, discuss your report with experts, and identify areas for improvement.**

Due to the interactive nature of this unique workshop, only a limited number of spots are available! Reserve your space today!

**Date & Time:** Oct. 27, 8-8:30 a.m. registration/breakfast, 8:30-11:30 a.m. workshop

**Location:** PAMED, 777 E. Park Drive, Harrisburg

In this workshop, you'll gain expert advice and real strategies to put into practice whether you're a primary care provider or specialist, solo practitioner or group of any size, and whether you use electronic or paper charts.

### **Learn QRUR basics:**

- What is a QRUR?
- Why is a QRUR important?
- How is the Value Modifier calculated?
- What is quality-tiering?
- Why coding matters?

### **Discuss your report with the experts:**

- How do I read *my* QRUR?
- Live, hands-on discussions with CMS and quality improvement specialists to answer your questions to help you interpret your report.
- How do your scores compare to your peers?

Once you understand how CMS assesses you/your practice and your results, **learn strategies to improve your quality and cost scoring related to:**

- Patient engagement
- Workflows

....and more!

To make the most of this unique opportunity, attendees are encouraged to bring their QRUR to the workshop for live help in understanding their reports. If you need help accessing your reports, PAMED members can contact PAMED's Knowledge Center at 855-PAMED4U (855-726-3348) or [stat@pamedsociety.org](mailto:stat@pamedsociety.org).

## **PENNSYLVANIA SUPREME COURT TO REVIEW MEDICAL MALPRACTICE CASE ON INFORMED CONSENT REQUIREMENT**

The Pennsylvania Supreme Court has agreed to review an issue regarding the Medical Care Availability and Reduction of Error (Mcare) Act's informed consent requirement.

In *Shinal v. Toms*, a patient brought a medical malpractice case against a surgeon, alleging that the physician failed to provide information to obtain informed consent - as required by Mcare - prior to the removal of a non-malignant brain tumor.

At trial, the court provided instructions to the jury permitting them to consider information provided by the surgeon's physician assistant as part of the informed consent process. The trial court subsequently found in favor of the surgeon.

The patient later appealed to the Superior Court, challenging the trial court's jury instruction. The Superior Court agreed with the trial court's instruction and held that information given by a surgeon's qualified staff could be considered part of the informed consent process.

The Pennsylvania Medical Society (PAMED)—with support from the American Medical Association (AMA)—has filed an *amicus brief* in support of the Superior Court's holding that information provided by a physician assistant or other qualified assistant can be used to obtain a patient's informed consent for surgery.

The AMA has joined the brief on its own behalf and as a representative of the Litigation Center of the American Medical Association and the State Medical Societies. The Litigation Center is a coalition among the AMA and the medical societies of each state, plus the District of Columbia, whose purpose is to represent the viewpoint of organized medicine in the courts.

The AMA is the largest professional association of physicians, residents and medical students in the United States. Additionally, through state and specialty medical societies and other physician groups seated in its House of Delegates, substantially all U.S. physicians, residents, and medical students are represented in the AMA's policy making process. AMA members practice in every medical specialty area and in every state, including Pennsylvania.

PAMED thanks the AMA for its support.

### **PA DOH SELECTS DIRECTOR FOR OFFICE OF MEDICAL MARIJUANA**

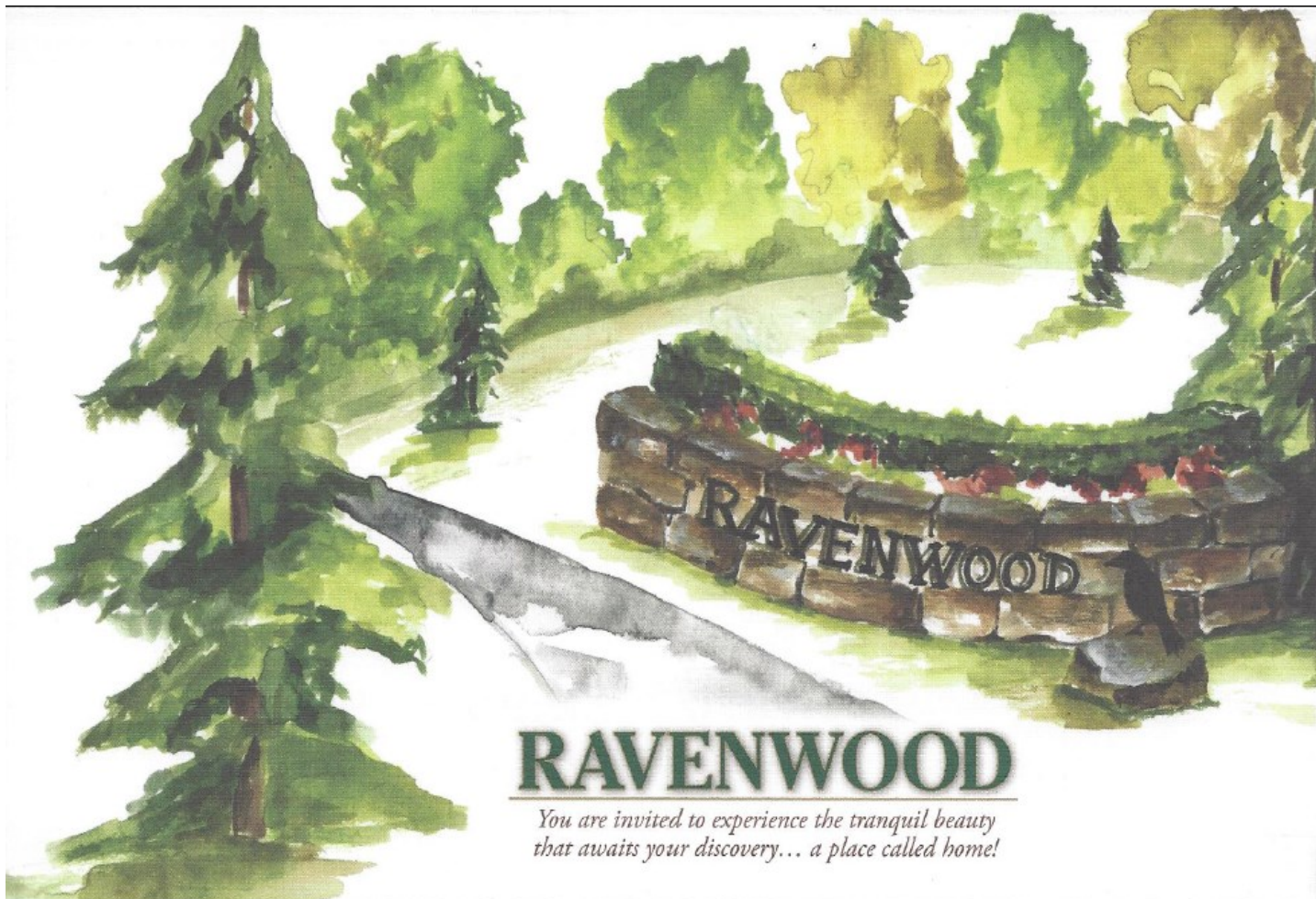
The Pennsylvania Department of Health (DOH) has taken another step in implementing its Medical Marijuana Program. On Aug. 4, 2016, DOH Sec. Karen Murphy announced the selection of John J. Collins as the director of the Office of Medical Marijuana.

Collins, who joined the DOH in April 2016 as part of its Division of HIV Disease, assumed his new role on August 8. DOH says that it expects the medical marijuana program to be fully implemented by 2018, and Collins will be guiding the process.

Other DOH actions taken toward program development include:

- DOH's creation of temporary regulations for the law's Safe Harbor Provision, which enables a parent or guardian of a minor under 18 years of age to lawfully obtain medical marijuana from another state, U.S. territory, or any other country to be administered to a minor
- The creation of a Medical Marijuana Physician Workgroup to provide input and medical expertise on behalf of patients. The Pennsylvania Medical Society (PAMED) will have representation on the workgroup.



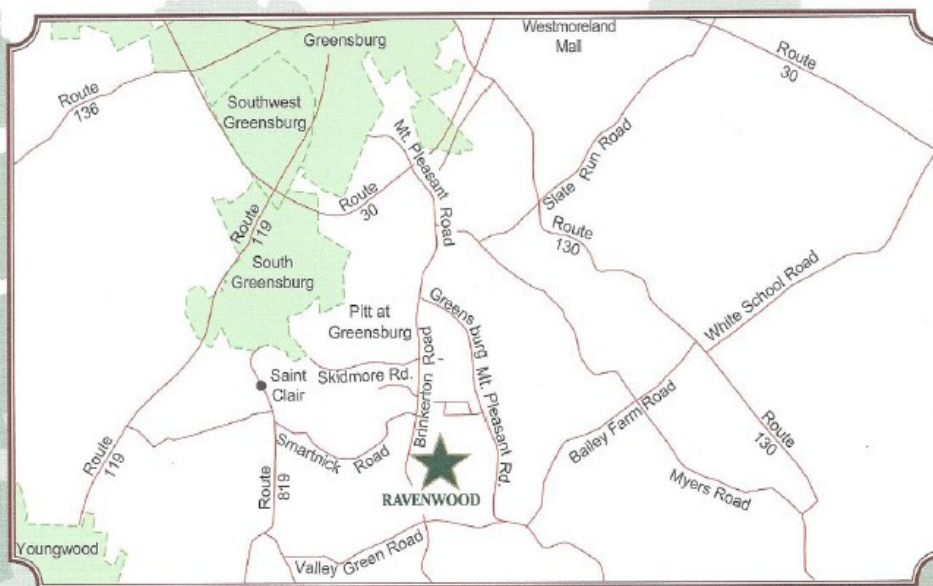


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We look forward to hearing from you soon.

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