



Lehigh County Medical Society

The mission of the Lehigh County Medical Society is to encourage physicians and healthcare professionals to have the highest moral and ethical standards; to counsel and censure them when necessary; to serve as a strong and united voice for our Lehigh County physicians, our patients and our community; to promote healthful living and well-being and to advance the highest standards of healthcare and service in our region through education, service and advocacy.

In this issue:

- LCMS President's Message
- New Members

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The DR Bulletin

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FROM YOUR 2013 PRESIDENT, Eric J. Gertner, M.D.



Any physician who has ever worked on an electronic medical record is well aware of so-called "computer glitches" that can paralyze even the most savvy among us. So it likely came as no surprise to any of us when the government's new website for patients seeking more affordable health insurance options came under fire in October, just as Americans were beginning to log on. What has been surprising has been how much the government shut-down it caused and the technical challenges that ensued have garnered all of the attention, while there has been comparatively little discussion recently around some of the most fundamental changes within the Affordable Care Act. These include the focus on wellness and prevention programs, as well as the emphasis on population health management.

Certainly we can debate the merits and challenges of mandatory health care coverage, the infringement on personal rights

and the burden on small businesses to pay for health coverage for its employees. These are neither small nor insignificant problems for us to face within the new legislation. However, also included within the Affordable Care Act are incentives to implement and promote wellness activities for patients and their employers who are at risk for maintaining a healthy workplace. Preventive services, once limited in their availability to patients through traditional health plans and hardly comprehensive or evidence-based, have become more standard and part of routine care for a greater number of our patients. In fact, the emphasis on primary care transformation or transition has led to calls for greater population health efforts and renewed interest in community-based partnerships. And these are good consequences of the Affordable Care Act.

Here in Pennsylvania, there continues to be interest in developing a more robust primary care network to provide care to our ever-aging Keystone Population. Earlier this year, the Commonwealth of Pennsylvania was one of 16 states to receive federal funding to develop a State Health Care Innovation model. Pennsylvania's plan involves the integration of models for transitions of care and care management, as well as community-based care teams focusing on patients with complex needs and higher utilization of health care services (so-called "superutilizers").¹ Through the use of Patient-Centered Medical Homes (PCMHs), expanded health information technology, telemedicine, and both defining and developing new skills for the healthcare workforce, this effort hopes to improve the quality of care while flattening or even decreasing overall costs. While those of

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Manuscripts offered for publication and other correspondence should be sent to 1620 W Highland St, Allentown, PA.

The opinions expressed in these pages are those of the individual authors and not necessarily those of the Lehigh County Medical Society.

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The ad material is for the information and consideration of the reader. It does not necessarily represent an endorsement or recommendation by the Lehigh County Medical Society.

The editorial board reserves the right to reject and/or alter submitted material before publication. All manuscripts and letters should be typed double-spaced on 8 1/2" x 11" stationary.

Preserve Your County Medical Society - The Grassroots of Organized Medicine

us in primary care will be most affected, those in the “Medical Neighborhood” – medical specialists, surgeons, and other hospital-based and ambulatory physicians – will become increasingly involved with new relationships and new partnerships to maintain the health of our collective population. In addition to the work on the State Health Care Innovation model, there is a bill before the state legislature, House Bill 1655, that looks to establish a Patient-Centered Medical Home Advisory Council. This group, which as proposed would include physician representatives from three primary care disciplines and the Pennsylvania Medical Society, would work with the Department of Public Welfare, the Insurance Department, the Department of Health, and other governmental agencies to further develop this plan to implement a Statewide medical home model.²

As the Affordable Care Act continues to move us toward greater population health management, we will be asked to look beyond the walls of our practices to ensure the health of our communities. We will be asked not only about the patients who are coming in, but increasingly about those that are not coming in, those that need important services, and those that have so-called “gaps in care” that need to be addressed. We will be asked to share information with colleagues differently, and we will be asked to use patient registries to identify those patients who need our attention. And as we continue to develop these skills, we will be focusing on prevention and wellness rather than illness. Thus, we will be fulfilling the promise of medicine, the only profession that, according to James Bryce (1914), “labours incessantly to destroy the reason for its own existence.”

As my year as President of the Lehigh County Medical Society draws to a close, I want to take this opportunity to thank our membership for its continued support and its belief that as physicians, we have more in common than we have differences. I also want to thank the Board of the Lehigh County Medical Society, for sharing a vision that as professionals, we have an obligation to support our communities and develop partnerships to promote optimal health. My immediate predecessors, James Wu and George Arangio, have both been incredibly supportive and helped make our community engagement program with the Allentown School District a great success. I also want to thank our executive, David Griffiths, without whose help our programs would still only be ideas. As I prepare to pass the gavel to Bob Barraco in January, I am confident that we will continue to grow as a medical society, that we will continue as good neighbors to our partners in the community, and that our actions and behaviors will serve as models of professionalism for the next generation of physicians.

1. <http://innovation.cms.gov/initiatives/State-Innovations-Model-Design/index.html>

2. <http://legiscan.com/PA/bill/1655/2013>

REMEMBER

If you change your business or home address and/or phone or fax number, please notify the Lehigh County Medical Society. Call: 610-437-2288

Pennsylvania Supreme Court Divided on PA-MED \$100 Million Mcare Lawsuit

In a long-awaited decision, on Thursday, Sept. 26, 2013, the Pennsylvania Supreme Court said that more factual development is needed to decide whether a 2009 state law transferring \$100 million from the Mcare fund violated the due process rights of physicians and hospitals.

The Pennsylvania Medical Society (PAMED) and the Hospital and Health System Association of Pennsylvania (HAP) filed the litigation in 2009 challenging the state’s transfer of \$100 million from the Mcare fund to the state’s general fund in 2009 as a means to help address the state’s fiscal woes.

While the Supreme Court, in a split 4-2 decision, reversed the Commonwealth Court’s decision in PAMED’s favor, it remanded the matter back to the Commonwealth Court. This means that the case is not over. Importantly, the Supreme Court ruled in PAMED’s favor on virtually every issue before the Court.

PAMED President C. Richard Schott, MD, said in reaction to the decision, “We are encouraged by most of the majority opinion, as well as Justice Baer’s dissent. It appears that the litigation has been narrowed to one key issue – whether health care providers were harmed by the \$100 million diversion. We believe there was clear harm.”

The Commonwealth Court had granted our motion for summary relief, finding that there were no material facts in dispute and that we were entitled to relief as a matter of law. Its opinion agreed with our position that the transfer was illegal. However, the Supreme Court ruled that there were unresolved factual disputes on that issue. The majority found that while the state cannot take money from the fund to the extent that it is needed for Mcare purposes, it is free to take “surplus” funds that are not needed to accomplish the fund’s purposes. The majority concluded that the Commonwealth Court did not adequately determine whether the \$100 million consisted of “surplus” funds and sent the case back down for a resolution of that factual issue. Justice Baer’s dissent would have affirmed the Commonwealth Court.

“While this Supreme Court decision is a set-back in terms of the timing of the resolution of this issue, we are pleased by a number of other rulings by the Court,” said Dr. Schott. “In particular, the Court rejected the state claims that we had no standing to challenge the transfer and that this was a ‘political’ matter beyond the Court’s jurisdiction to remedy.” PAMED will continue to work with HAP to illustrate that physicians were harmed by the diversion of funds.

Lehigh County Medical Society ATTENTION MEMBERS

Does your Physician Group have a Website?

Contact the Lehigh County Medical Society and have your Website linked onto the Lehigh County Medical Society Website.

www.lcmedsoc.org

Call: 610-437-2288

Resources on Health Insurance Marketplaces Aid Physicians, Patients

Wading through the myriad of tools and resources on the health insurance marketplace is a daunting task. A number of members have told the Pennsylvania Medical Society that they need help to sort out useful tools and resources as federal health coverage rolls out this fall.

PAMED has developed a one-page handout for your patients.

Also, check out these guides to the PAMED website and other Internet resources: <http://www.pamedsoc.org/Stories/Healthy-PA/Insurance-marketplace-resources.html>

Guide to help both patients and physicians
Guide with resources targeted to physicians
These lists are not meant to be comprehensive but simply guides to some good resources. If you find something out there that's really useful, we want to hear about it.

Also, members of the Pennsylvania Medical Society can use a simple form to ask our experts questions about the marketplaces and health care reform.

Here are some links you and your patients may find useful with health care marketplace sign-ups that began Oct. 1, 2013:

Starting Oct.1, 2013, consumers can go to this website to compare plans and fill out an application to enroll: <https://www.healthcare.gov/marketplace/individual/#state=pennsylvania>

Coverage can start as soon as Jan. 1, 2014. The deadline to enroll is March 31, 2014.

If your patient would rather complete a hard copy application, they can follow these links:

Standard Application

Use this application to apply for anyone in your family. If you're single, you may be able to use the short form.

Short Form: Application for single adults who aren't offered health coverage from their employers, don't have any dependents, and can't be claimed as a dependent on someone else's tax return

<http://www.cms.gov/CCIIO/Resources/Forms-Reports-and-Other-Resources/Downloads/marketplace-app-short-form.pdf>

Application for those who do not need financial assistance

<http://www.cms.gov/CCIIO/Resources/Forms-Reports-and-Other-Resources/Downloads/marketplace-app-no-financial-assistance.pdf>

Handouts about the new health plan marketplace can be found on these web pages: <http://www.ama-assn.org/ama/pub/advocacy/topics/affordable-care-act.page> and <http://www.ama-assn.org/resources/doc/washington/aca-implementation-facts.pdf>.

A video and answers to your patients' questions about the market can be viewed on this web page: <http://kff.org/aca-consumer-resources/>

WebMD provides a quick and easy step-by-step plan to help your patients sign up for a health plan: <http://www.webmd.com/health-insurance/insurance-plans/default.htm>

Lehigh County Medical Society Welcomes the following New Members

Natalie N. Allman, DO (IM - N)
826 Delaware Ave.
Fountain Hill, PA 18015

Suprina Dorai, MD (EM - Res)
LVHN Rehabilitation Services
2425 Schoenersville Rd.
Bethlehem, PA 18017

Jill Rose Crosson, DO (FM)
OAA Orthopaedic Specialists
250 Cetronia Rd., Ste. 303
Allentown, PA 18104

Michael A. Krafczyk, MD (FM),
OAA Orthopaedic Specialists
250 Cetronia Rd., Ste. 303
Allentown, PA 18104

Richard W. McClain, MD (D),
1259 S. Cedar Crest Blvd., Ste. 100
Allentown PA 18103

NOTE

Members of the Lehigh County Medical Society can now view the membership roster (Physician Directory) at our website: www.lcmedsoc.org or request a Membership Roster by calling the Lehigh County Medical Society at: 610-437-2288.

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The vision of the Lehigh County Medical Society is to be a relevant and influential leader in the Pennsylvania Medical Society; to unite our physicians and to empower them to deliver compassionate, ethical and evidence based healthcare of the highest quality and value to our community.

The Lehigh County Medical Society will accomplish its mission and its vision by the following:

Legislative Advocacy within our State Medical Society and our Government
Community Education within the Public Health Arena
Member Education, Collaborative Relationships and Collegiality
Service Activities for our members and our community

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