



# 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.

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Visit our website at: [www.lcmedsoc.org](http://www.lcmedsoc.org)

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The DR Bulletin

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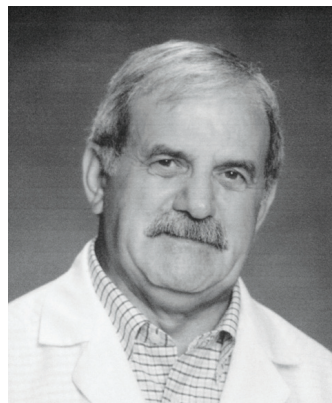
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### YOUR 2016 PRESIDENT, Charles J. Scagliotti, M.D.



In my initial letter to the members of the Lehigh County Medical Society I would like to express my gratitude to Dr. Robert Barraco for his leadership during his term as our past president. I am sure that all of our members echo my sentiment. He did a yeoman's job and provided great leadership.

In his last letter to our members, he outlined many of the problems we are facing as a medical society. Are these questions unique to LCMS or are they found in all volunteer organizations? Is it the new trend to be uninvolved and let other people make decisions for us?

Years ago the medical society was the central focus of private practice. Membership on hospital staffs was dependent on the recommendations of the medical society. Educational programs were

sponsored and conducted by the societies. Legal issues were resolved, and discipline, to some degree, was carried out. Office fees were regulated by consent of the membership of our societies. Things certainly have changed.

Private practice has become a model of the past; more and more physicians are now employed by large medical corporations or hospitals. Our fees are set by insurance companies and government agencies, most of the time with little or no input from physicians. Issues of discipline and care are carried out in courts of law and not by our peers. The medical practice models of the future are being decided by politicians and bureaucrats.

Do we like this? Will this be our legacy? How can we affect change?  
**GET INVOLVED!!!!**

In our past few elections there has been a resurgence of grass root initiatives, all beginning from small local groups and expanding exponentially. We have seen these initiatives be successful. Through our societies, we have affected change in our malpractice laws, tort reform, and MCARE changes. These were all started on local levels and were successful. Our board of directors has instituted changes in our by-laws to give med students and residents a greater role in our society.

This is only a beginning. Although continuing education remains important, we

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

The DR Bulletin is published six times a year bi-monthly, beginning in January, 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.

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

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.

**Preserve Your County Medical Society - The Grassroots of Organized Medicine**

must now broaden our focus to include the younger generation by introducing them to medicine and its related disciplines. We have started these programs in multiple arenas, such as the Health Career Club open to high school and junior high students.

Now that we have launched these initiatives we all need to be supportive and willing to mentor those younger than we. There are great young minds out there waiting to strengthen our cause. It is our duty to educate them in the benefits and challenges to having a career in medicine.

We must increase membership in our society, but, more importantly, we need to have active participation in and support for our initiatives. Active membership numbers are vital when we approach legislators and those in power, but we also need that same level of participation to carry out our current goals.

We have a legacy that was given to us; it is ours to give or it is ours to lose. We must choose wisely. Our future is dependent upon it.

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### **CMS Announces a New PQRS Web-Based Measures Search Tool**

The Centers for Medicare and Medicaid Services (CMS) has announced the availability of a Physician Quality Reporting System (PQRS) web-based measure search tool.

Access the search tool; <https://pqrs.cms.gov/#/home>

#### **How the Search Tool Can Help**

The search tool can help Eligible Professionals (EPs) and PQRS group practices more easily identify claims and registry measures that may be applicable to them. This will enable them to find measures that meet satisfactory reporting requirements for the 2016 PQRS program year.

The tool allows users to search measure-related keywords. It also allows for the searching and filtering of measure-related information including:

- Measure Number
- Reporting Methods
- National Quality Strategy (NQS) Domain
- Cross-Cutting Measures
- Measure Steward

Users can click on a measure to view the individual claims and registry measure specifications available for 2016.

The Pennsylvania Medical Society (PAMED) encourages physicians and practices to utilize the search tool in helping them select their PQRS measures for 2016.

#### **Other CMS Tools and Resources for 2016 PQRS**

Additional resources that EPs and practices may find useful for 2016 PQRS are available on CMS' PQRS Qual-

ity Measures webpage; <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/PQRS/MeasuresCodes.html>

These include:

- 2016 Measures List
- 2016 Individual Claims Registry Measure Specifications
- 2016 PQRS Measures Groups Specifications Documents
- 2016 Specialty Measure sets for 17 specialties

For further assistance or questions regarding measures, contact the QualityNet Help Desk at 1-866-288-8912 or via the e-mail address: [qnetsupport@hcqis.org](mailto:qnetsupport@hcqis.org).

PAMED members can also contact our PAMED's Practice Support Team at (717) DOC-HELP, that's (717-362-4357).

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### **Proposed Solution to Surprise Billing Announced by PA Department of Insurance; Public Comments Sought**

A proposed solution to the "surprise billing" problem was announced on Jan. 19, 2016, by the Pennsylvania Department of Insurance. This was in response to a hearing held Oct. 1, 2015, led by Pennsylvania Insurance Commissioner Teresa Miller, during which Brad Klein, MD, testified on behalf of the Pennsylvania Medical Society (PAMED). The Department is seeking feedback through a public comment period ending Feb. 29.

For more information on the solution, go to: <http://www.insurance.pa.gov/Coverage/Documents/Balance%20Billing%20Legislation%20PROPOSED%20DRAFT.pdf>

For more information on the announcement, go to: <http://www.media.pa.gov/Pages/Insurance-Details.aspx?newsid=160>

Surprise billing occurs when, for example, a patient goes to the hospital for surgery, and though the hospital and surgeon are in-network, unbeknownst to the patient, the radiologist, anesthesiologist, and/or other specialists are not. This can result in surprise medical bills to patients who weren't expecting them, and also can have negative effects on the physician-patient relationship.

PAMED is reviewing the Department's proposal and will be discussing with PAMED leadership.

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**LCMS is looking for members interested in becoming active on the Board of Trustees or on various committees.**

**Please contact our office if you are interested, 610-437-2288 or [lcmedsoc@rcn.com](mailto:lcmedsoc@rcn.com)**

## Two-Midnight Rule Guidelines Revised – What You Need to Know

The Centers for Medicare and Medicaid Services (CMS) recently revised its guidelines on reviewing short-stay hospital claims for patient status for admissions on or after Jan. 1, 2016. See guideline here, <http://qioprogram.org/sites/default/files/20160105-Reviewing%20Short%20Stay%20Hospital%20Claims%20for%20Patient%20Status%20Final.pdf>

“CMS announced that, despite the rule that says in order for a patient to be considered for inpatient status they have to be in the hospital for a period of time encompassing at least two midnights – that inpatient stays not meeting this requirement could still be considered for payment under Part A (inpatient dollars) on a case-by-case basis,” said Mary Ellen Corum, director of practice support at the Pennsylvania Medical Society (PAMED).

Starting Oct. 1, 2015 Beneficiary and Family Centered Care Quality Improvement Organizations (BFCC-QIOs) began conducting initial patient status reviews of claims for inpatient admissions. Under the revised exceptions policy, which went into effect Jan. 1, 2016, for admissions not meeting the two midnight benchmark, CMS says that Part A payment may be appropriate on a case-by-case basis where the medical record supports the admitting physician’s determination that the patient requires inpatient care, despite the lack of a two-midnight expectation.

CMS also said that BFCC-QIOs will consider complex medical factors such as history and comorbidities, the severity of signs and symptoms, current medical needs, and the risk of an adverse event to determine whether the medical record supports the need for inpatient hospital care.

It also said that recovery auditor patient status reviews will be conducted by recovery auditors for those hospitals that have consistently high denial rates based on the BFCC-QIO two-midnight short-stay review outcomes.

Visit the Inpatient Hospital Reviews webpage for additional information; <https://www.cms.gov/research-statistics-data-and-systems/monitoring-programs/medicare-ffs-compliance-programs/medical-review/inpatienthospitalreviews.html>

CMS will be discussing the new guidance at the Hospital Open Door Forum on Jan. 26.

PAMED members who have questions can call our Knowledge Center at (855) PAMED4U, that’s 855-726-3348.

### 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

## Lehigh County Medical Society Welcomes the following New Members

**Wilma K. Brucker, MD (OPH)**  
3110 Hamilton Blvd, Allentown, PA 18103

**Amy A. Jibilian, MD (PD)**  
3800 Sierra Cir, Ste 100, Center Valley, PA 18034

**Adam L Peyton, DO (GE)**  
1501 N Cedar Crest Blvd, Ste 110, Allentown, PA 18104

**Zachary T. Ritz, DO (Unspecified)**  
360 W Ruddle St, Coaldale, PA 18218

**Preetinder Kaur Singh, MD (FM)**  
1247 S. Cedar Crest, Blvd, Ste 202,  
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](http://www.lcmedsoc.org) or request a Membership Roster by calling the Lehigh County Medical Society at: 610-437-2288.**

### ATTENTION

## Lehigh County Medical Society 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](http://www.lcmedsoc.org)**  
Call: 610-437-2288

### **SAVE THE DATES**

April 16th 2015 Annual Social, location to be determined

May 10th 2015, SCAN Program, by the PA Chapter, American Academy of Pediatrics, at Lehigh Country Club

This program for primary care is designed to encourage change in the day to day practice procedures. Presentation team of a physician and local Children and Youth worker, the two hour PowerPoint presentation is approved under Act 31. More information to follow.

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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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