



Network New York The Alliance Voice

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Contact Us

krohrer@mssny.org

Mission: "to support our physicians and promote health in our communities"



News from the Tri-President, Lynn

Greetings Alliance Members as we herald in Autumn!

What a fantastic September we have just experienced! I hope you have enjoyed it and spent many hours outside in your gardens or other natural settings. As we acknowledge the onset of October, we have many exciting opportunities ahead!

As we celebrate with the AMAA and the AMA our 20th Anniversary of our initiative STOP AMERICA'S VIOLENCE EVERYWHERE or SAVE, events are happening all over the country and state sponsored by our Alliance members. Schenectady County Alliance members have worked tirelessly to present a strong, many faceted message in an effort "to combat the epidemic of violence". They are sending posters to active Medical Alliances across the state to share and display in your community. You can receive these by emailing Cheryl Stier at cstier@nycap.rr.com. Please see the SAVE article for more information. Onondaga County members are sponsoring a "shower" for residents of Vera House (residents are victims of domestic violence). We will be collecting stories and events from across the State as part of our 20th Anniversary of SAVE. Please share your stories with us by emailing our Executive Director, Kathleen Rohrer at Krohrer@mssny.org.

I am eagerly awaiting our Fall Leadership Conference October 18th and 19th at the glorious Glen Sanders Mansion in scenic Scotia, New York. You all received invitations, so pack up your camera & bring another member or a prospective new member and join us for our fabulous Fall Event!

My thanks go to Joan Cincotta (Onondaga) and Beth Perenyi (Broome) for attending our National Meeting in Chicago in June. Joan, Beth and I serve as your "Presidential Team" this year until our Annual Meeting April 14-15 in Tarrytown, NY in conjunction with the MSSNY House of Delegates. So save the date! See you in Scotia!

Peace, Lynn

Fall Conference-October 18 and 19 - It's not too late to register!



Our Fall Conference will be held at the Glen Sanders Mansion, Scotia, New York on Sunday, October 18 and Monday, October 19. The Conference will begin with dinner on Sunday evening at 5:30 PM. Our keynote speaker will be Mellany Bagtas of Merrill Lynch who will address investment and retirement options. An entertaining and informative presentation on New York birds will be given by retired biologist, Rich Guthrie. Our Board of Directors will meet immediately following dinner on Sunday. Monday's speakers include: Wendi Bekkering who will lead us in an interactive program "In her Shoes" on domestic violence, Kevin Brady who will present on social media, and updated Alliance information including county SAVE Day observances. All attendees are encouraged to bring guests and spouses. Registration fee for the meeting is \$35 which will be waived for first time attendees and honorary members. Raffles will be held to benefit the AMA

Foundation, AHEI, Physician's Home and the Belle Tanenhaus Memorial Leadership Fund. To register and obtain further information, contact Kathy Rohrer at krohrer@mssny.org

Legislation

VIPS: Very Influential Physician Spouses. If you have a personal relationship with a legislator in your county, state or even national, AMAA would like your name and that of the legislator(s). A VIPS form can be completed on line at www.amaalliance.org

Federal

Advocacy is needed on multiple pieces of legislation that are now before Congress. Go to the AMA's Grassroots to send letters of support.

U.S. Representative Renee Elmers (R-NC) introduced legislation (**H.R. 3309**), the Further Flexibility in HIT Reporting and Advancing Interoperability Act, or Flex-IT 2 Act) to reduce the overwhelming burdens physicians are facing with complying with federal EHR meaningful use requirements. Only 19 % of providers have met Stage 2 attestation requirements. The bill would accomplish the following:

- Delay Stage 3 Rulemaking until at least 2017, or MIPS final rules or at least 75 percent of doctors and hospitals are successful in meeting Stage 2 requirements.
- Harmonize reporting requirements (MU, PQRS, IQR) to remove duplicative measurement and streamline requirements from CMS.
- Institutes a 90-day reporting period for each year, regardless of stage or program experience
- Encourages interoperability among EHR systems
- Expands hardship exemptions, as they are very narrowly defined under current regulations

New York's Representative Joseph Crowley and Senator Charles Schumer introduced the Resident Physician Shortage Reduction Act of 2015 (**H.R. 2124/S. 1148**) to create 15,000 new residency slots to overcome the outdated cap placed in 1997. The AMA has also created a designated advocacy page in support of these efforts, entitled www.SaveGME.org.

: **H.R. 2568** (The Fair Medical Audits Act of 2015) establishes incentives for RACs to make more accurate audit findings and increase educational efforts to help physicians avoid common mistakes. Currently, recovery audit contractors or "RACs" are paid on a contingency basis by Medicare to find overpayments to health care providers. This gives these contractors undue monetary incentives to audit doctors. The five regional firms contracted by the government are paid up to 12.5 percent of all claims they successfully identify as invalid. This bill:

- **Makes the audit process much more transparent.** The FMAA requires RACs to provide pre-audit notification and post audit reporting to physicians and other health care providers regarding specific information relating to an audit.
- **Establishes more rigorous qualifications for RAC officials performing claim reviews** **Increases accountability of RACs for Inaccurate findings.** The current system is a bounty hunter approach that creates financial incentives for auditors to make overzealous and often-inaccurate audit findings. FMAA establishes financial penalties for RACs for inaccurate audit findings, while creating new incentive payments for RACs who voluntarily educate providers on common errors.
- **Delays payment to auditors until after an external appeal.**
- **Promotes more targeted documentation requests by RAC auditors** help to address this by compensating providers for certain documentation requests.
- **Requires a sound extrapolation formula for determining overpayment amounts and shortens "look-back" period from 4 years to 2 years**

H.R. 1190 (Protecting Seniors' Access to Medicare Act of 2015) repeals sections of the Patient Protection and Affordable Care Act creating the Independent Payment Advisory Board charged with developing proposals to reduce the per capita rate of spending under Medicare.

H.R. 160 (Protect Medical Innovation Act of 2015) repeals the excise tax on medical device manufacturers and importers which was also enacted as part of the ACA.

H.R. 2050 (Middle Class Health Benefits Tax Repeal Act of 2015) repeals the so-called "Cadillac Tax" on comprehensive health insurance coverage another part of the Affordable Care Act. This excise tax on high-premium health insurance plans is scheduled to be implemented in 2018. It will be a 40% tax on health premiums above a threshold of \$10,200 a year for individuals and \$27,500 for families.

H. R. 650 (Medicare Patient Empowerment Act) allows any Medicare beneficiary to enter into a contract with an eligible professional (regardless of whether a participating or non-participating physician or practitioner) for any item or service covered by Medicare. Allows such beneficiaries to submit a claim for Medicare payment in the amount that would otherwise apply, except that where the professional is considered to be non-participating, payment shall be paid as if the professional were participating.

New York State

Concern has been raised about the adequacy of the health plans. New York State of Health showed that out of network coverage benefits were only available in 11 counties in New York State, and none below the Bear Mountain Bridge. "More and more of our patients are underinsured due to the increasingly inadequate coverage and narrow networks offered by insurers," said Dr. Maldonado. The plans have a lower premium, but often carry higher deductibles and have narrower networks with stringent accessing protocols. In a recent survey conducted by MSSNY, 21% of responding physicians indicated that one ¼ – ½ of their patients faced deductibles of \$2,500-\$5,000, and that 32% of responding physicians indicated that up to 10-25% of their patients faced deductibles of \$2,500-\$5,000. Nearly 25% of responding physicians indicated that 25 to 50 % of their patients faced deductibles of \$1,000-\$2,500, and 36% of responding physicians indicated that up to 25% of their patients had deductibles of \$1,000-\$2,500. AS part of the remedy, MSSNY continues to advocate for **(S.1846, Hannon/A.3734, Rosenthal)** to assure that our patients have the ability to purchase coverage in New York's Health Insurance Exchange that enables them to be treated by physicians outside the plan's network.

Another issue with health insurance coverage is the merging of health insurers which will give them greater market power to reduce physician and hospital choice for patients. MSSNY is currently advocating for collective negotiations capabilities for physicians and exploring other mechanisms within safe harbor regulations that allow for greater collaboration in the efforts to bring about meaningful healthcare reform.

MSSNYPAC

If you are not a member, please considering joining along with your spouse. MSSNYPAC is a separate segregated fund established by MSSNY to engage in campaign activities in New York State. It accepts contributions from New York physicians, residents, students and Alliance members to achieve political recognition for physicians. It targets support for elected state and federal officials and candidates who advance physicians' goals and strengthens physicians' voice in governmental affairs. The New York Public Interest Research Group published a list of donors and the amount of contributions each made last year. For example, trial lawyers were listed as #7 and contributed \$578,710 while MSSNY was listed as #40 with contributions of \$213,024. MSSNYPAC needs our support!

The PAC's structure is an Executive Committee and subcommittees for federal and state elections. Please consider joining MSSNY PAC to support advocacy efforts. The Alliance contribution is \$100. Contact Kathy Rohrer (krohrer@mssny.org) for an application.

To see how your legislators voted on key legislation go to www.mssnypac.org/scorecard.

SAVE Project-20th Anniversary of SAVE Day, October 14, 2015



The SAVE initiative to "Stop America's Violence Everywhere" was launched by the AMA Alliance in June 1995, in response to the disturbing toll that violence was taking in our local communities. SAVE Day became a day to heighten awareness of the need for crisis intervention and to educate the public; in particular children. Violence leaves lasting physical and emotional scars that can destroy the lives of families and communities. The message of SAVE continues to focus on the serious public health issue of violence in our homes, schools, and communities. The Schenectady Alliance has organized a campaign to heighten awareness throughout the state. For further information or to obtain a poster, contact Cheryl Stier at

cstier@nycap.rr.com. You can participate by:

- Wearing blue clothing and displaying blue lights in your home or business on October 14th.
- Liking us on Facebook (“SAVE NY 2015” Facebook page) and posting photos of your group wearing Blue or standing by a blue light. The post begins on October 1st and runs to the 14th.
- Tweeting #SAVEDAY to Stop America’s Violence Everywhere

On college campuses, the blue light represents a way for students to obtain emergency assistance. In the field of medicine, a “Code Blue” is synonymous with a situation requiring immediate assistance. Blue light bulbs are available at the Home Depot and a portion of the sale goes to Autism speaks. Violence in our communities is an emergent crisis and requires a just response. Don’t forget to e-mail your SAVE activities to Kathy Rohrer at Krohler@mssny.org.

Alliance News

The AMA Alliance has updated its mission: To unite and empower physician families.

Its new national health initiative is **stopping opioid abuse**. This abuse impacts not only our own physician families, but also our friends in our communities. It’s time to put a halt to this exploding health crisis. A task force, chaired by Barbara Hover (MO) will develop the tools to educate our members and to influence legislation. The AMA also is developing tools to curb opioid abuse.

The AMA Alliance also has announced couple membership categories:

- \$80 Regular Member Couple
- \$50 Early Career Couple (1 to 3 years post training)
- \$15 Medical Student Couple
- \$15 Resident Couple

Scholarship News

The AMA Foundation presented the MSSNY/Dr. Duane and Joyce Cady Physicians of Tomorrow Awards to rising fourth-year medical students Victor Hoang, Natasha Ramsey and Michelle Smith. Each recipient was nominated by their medical school and will receive a \$10,000 scholarship recognizing academic achievement.

The AMA Alliance Grassroots Honor Fund is given in memory of John Levin to fourth year medical students interested in women’s and children’s healthcare. The two recipients, Dinah Lewis and Leslie Maness, will each receive \$10,000.

Health News

The American Academy of Pediatrics and the American Academy of Allergy, Asthma & Immunology recommends that “infants at high risk of peanut allergies be given foods containing peanuts before they turn 1.” The recommendations stem from “a major allergy” study published this year that indicated that “exposure to peanuts in infancy seemed to help build tolerance — contrary to conventional thinking.”

Distracted driving led to 3,338 deaths in 2012. According to the National Highway Traffic Safety Administration, incidences show a continuous increase. There are three categories of distracted driving: manual (driver removes hands from the wheel), visual (driver is not looking at the road), and cognitive (driver is not focusing only on driving). Any activity that removes the driver’s main focus from driving causes distracted driving. This includes eating, grooming, talking to passengers, and listening to the radio. Cell phone use and texting provide a major distraction, because they involve all three categories of distracted driving.

Texting for 4.6 seconds at 55 mph would be equivalent to driving 100 yards without looking. Usage of cell phones while driving causes 18% of distracted driving deaths in the U.S. At any given time around 600,000 drivers may be using cell phones or other electronic devices. This has been shown statistically to increase the risk of a crash by 3 times. The most inexperienced drivers, age 15-19, are the most likely to be in a crash caused by distracted driving. 25% of teenaged drivers respond to a least one text whenever they drive. Both teens (20%) and adults (10%) who were polled, participate in texting while driving. Hands free devices, while not visually or manually distracting, still provide a major cognitive distraction to the driver.

Drivers need to be educated about the extreme danger which texting, cell phone usage, and any type of distracted driving places them, their passengers, bystanders and other drivers. For more information, go to: www.distraction.gov

News from Around the State

Broome

Our fall luncheon will be held at Vestal Hills Country Club on October 22nd. Linda Snyder, Executive Director, A Room to Heal, will present an overview of this organization which creates healing environments in the homes of children with serious medical conditions and accept our \$250 donation. We continue to fundraise for our scholarship fund by holding our annual poinsettia sale and distributing our holiday card. We are asking our members to clean out their closets and donate unused adult gift items to The Glove House, a nonprofit child welfare organization. Our annual Holiday dinner is planned for December 3rd at PS Restaurant.

Onondaga

We are sponsoring a shelter shower to benefit Vera House as our SAVE Day activity on Wednesday, October 14th at 6:30 PM. Welcome home baskets as well as most needed items are being solicited from our members. Members are also invited to either give a cash donation or shop the OCMS/Vera House Wish List on Amazon.com. We will put together a Raffle Basket to raise money for the Scholarship Fund. The basket is usually worth at least \$1000. Tickets will be sold at the Medical Society's Annual Dinner (November 12) and at the Alliance's Holiday Luncheon (December 2). The lucky winner's ticket will be drawn at the luncheon. The Holiday Luncheon will feature our Alliance Day Project which will benefit the refugee community this year. We will also have our Holiday Ad in the Syracuse newspaper on Sunday, December 27 where local doctors will pay \$50 to have their names listed with a greeting to colleagues and patients. An artistic piece (painting or photo) done by a local member of our medical family will also appear in the ad. Money raised from the ad will be added to the Scholarship Fund. Plans for a Doctors' Day celebration on March 30th are also underway.

Schenectady

Our Alliance has been busy this fall organizing our SAVE campaign. Besides contacting colleges and organizations in our community to support the SAVE campaign, we developed posters and cards concerning community resources available to victims of domestic violence. We are also organizing and obtaining sponsorships for our Luncheon & Fashion Show on December 2, 2015.



Planning Calendar

AMSSNY Fall Conference, Scotia, NY	October 18, 19, 2015
MSSNY Advocacy Day	March 8, 2016
Annual Meeting, Westchester Marriott, Tarrytown, NY	April 14-15, 2016
Northeast Regional Meeting, Gettysburg, PA	April 15-17, 2016
AMAA Annual Meeting and Leadership Development, Chicago, IL	June 12-14, 2016

Member-At-Large Membership

The Alliance is doing important works within our state and across our country, taking an active voice in medical legislation and a meaningful role in health issues. The Alliance needs YOUR support in order to continue with these efforts. Though you may not have the time or inclination to become involved presently, payment of your dues will help those who are already actively engaged. If you desire to become involved, members-at-large have the opportunity to serve on the board and can be delegates to our convention. Alliance members continue to work on projects concerned with violence, internet safety, bullying, peaceful conflict resolution, awareness for the need of organ and tissue donation, health literacy, smoking cessation, the growing problem of obesity- especially in children, and many other health and legislative issues.

JOIN US NOW

If you are already a member... THANK YOU... Don't forget to renew.

Please Print Information

Name: _____ Spouse's Name: _____

Address: _____ County: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Work Phone: _____ E-Mail: _____

Payments of dues for county, state and national should be made directly to your county alliance (if unsure if your county Alliance is active, call 1-800-523-4405). If your County does not have an active Alliance, you may become a Member-At-Large (MAL) by sending your State (\$25) and National (\$50) dues (Total of \$75). Senior/Widows (65+ and 20 years active service) State dues are \$12.50. (\$62.50 if State and National) Please make checks payable to AMSSNY-MALs and submit to:

AMSSNY-MAL
865 Merrick Avenue
Westbury, NY 11590-9007