

Your Chapter in Action

September 29, 2017

Voting Now Open for a New Governor-elect in the Bronx/Manhattan Region!

The ballots for the current Governor-elect election have been mailed for the Bronx/Manhattan Region. The voting membership (Masters, Fellows, Members, and Resident/Fellow Members with an elect date of 1/1/2015 or earlier) can vote online or mail-in ballot. You would need your mailed ballot with your ACP Member Number and Election Passcode in order to vote. Only those members within the Bronx/Manhattan Region are eligible to vote. Below are the statements of the candidates. Online voting began on September 21, 2017 and ends on November 9, 2017 at 11:59 PM Eastern. Please be sure to vote! We are grateful to have these wonderful Chapter leaders run in this election.



Jitendra Barmecha, MBBS, MD, MPH, FACP

Present Position: Attending Physician, Dept of Medicine, SVP; Chief Information Technology &

Clinical Engineering, SBH Health System, Bronx, NY

Candidate Statement:

Health care is transforming into value based care which creates both opportunities and challenges for clinicians, patients and their caregivers. It is imperative that we lead discussions about how patient-centered and safer health care delivery is redefined through innovative workflows and digital technologies while preserving quality, effectiveness and career satisfaction. I will be a positive catalyst in pursuing NYACP's mission through my clinical and administrative roles at the health system, along with practice transformation and physician payment reform activities in organized



Louis Morledge, MD, FACP

Present Position: Private Practice, Morledge Medical

Candidate Statement:

While a Fellow of the NYACP for more than a decade and a member since 1992, I opted to get more involved over the past few years, eager to help shape and influence the changes we have witnessed in practice. I have been fortunate to have served as the District President for Manhattan and Councilor for the Bronx/ Manhattan Region. In addition, I have served on the Health and Public Policy, the Budget and Finance, and the Small Practices "Survival" Committees. As a general internist seeing patients each day, I have certainly witnessed the tremendous value of organized medicine medicine. As ACP advocates on behalf of both clinicians and patient/care-givers through various educational tools, services and networking opportunities, I will be honored to serve as a Governor representing the Bronx/Manhattan regions of NYACP.

not only in promoting outstanding education but also in serving as a substantial advocate at the state and national level. To see an educational idea or a practice concern move to an on-demand web course or to an organized presentation before the State legislature or Congress has truly been a gratifying. I am thankful to be considered for Governor and look forward to advocating for the needs of all physicians in our State.

If you are eligible to vote and have lost your emailed or paper ballot, and your ACP mailing address falls within the Bronx or Manhattan, you should email support@directvote.net or call 952-974-2339

Practice Management

CMS Reveals New Medicare Card Design and Distribution Plan Removing Social Security numbers strengthens fraud protections for about 58 million Americans



The Center for Medicare and Medicaid Services (CMS), through the Medicare Administrative Contractors (MACs), recently mailed letters to all Medicare Fee-For-Service providers about their work to assign new numbers (known as Medicare Beneficiary Identifiers or MBIs) and issue new Medicare cards to all people with Medicare beginning in April 2018. CMS will begin mailing the new cards to people with Medicare benefits in April 2018 to meet the statutory deadline for replacing all existing Medicare cards by April 2019.

CMS has assigned all people with Medicare benefits a new, unique Medicare number, which contains a combination of numbers and uppercase letters. People with Medicare will receive a new Medicare card in the mail, and will be instructed to safely and securely destroy their current Medicare card and keep their new Medicare number confidential. Issuance of the new number will not change benefits that people with Medicare receive.

Healthcare providers and people with Medicare will be able to use secure look-up tools that will allow quick access to the new Medicare numbers when needed. There will also be a 21-month transition period where doctors, healthcare providers, and suppliers will be able to use either their current SSN-based Medicare Number or their new, unique Medicare number, to ease the transition. This initiative takes important steps towards protecting the identities of people with Medicare. CMS is also working with healthcare providers to answer their questions and ensure that they have the information they need to make a successful transition to the new Medicare number.

For more information, please visit: www.cms.gov/newcard

Access 2016 PQRS Feedback Reports and 2016 Annual Quality and Resource Use Reports Now

2016 Physician Quality Reporting System (PQRS) Feedback Reports and 2016 Annual Quality and Resource Use Reports (QRURs) are available now. The reports were released on September 18, 2017. The PQRS Feedback Reports show program year 2016 PQRS reporting results, including if you are subject to the 2018 PQRS downward payment adjustment. The 2016 Annual QRURs show how physicians, physician assistants (PAs), and nurse practitioners (NPs) in groups and solo practitioners performed in 2016 on the quality and cost measures used to calculate the 2018 Value Modifier as well as their practice's 2018 Value Modifier payment adjustment.

Access and review your 2016 PQRS Feedback Report and 2016 Annual QRUR now to determine whether you are subject to the 2018 PQRS downward payment adjustment and your practice's 2018 Value Modifier payment adjustment as well as information on how to file an informal review. If you perceive your payment adjustment status was made in error, you may request an informal review of your 2016 PQRS results and/or 2018 Value Modifier calculation during the informal review period from now until December 1, 2017 8:00 pm Eastern Time. More information on how to file and informal review can be found below.

How to Access the Reports:

- Enterprise Identity Management (EIDM) Account. An EIDM account with the appropriate role is required for participants to obtain 2016 PQRS Feedback Reports and 2016 Annual QRURs.
- If you already have an EIDM account, then follow the instructions provided here to sign up for the appropriate role in EIDM.
- To find out if there is already someone who can access your PQRS Feedback Report and QRUR, contact the QualityNet Help Desk.
- To sign up for an EIDM account, visit the <u>CMS Enterprise Portal</u> and click "New User Registration" under "Login to CMS Secure Portal." Instructions for signing up for an EIDM account are provided <u>here</u>.
- Both reports can be accessed on the <u>CMS Enterprise Portal</u> using the same EIDM account.
- See the "Quick Reference Guide for Accessing 2016 PQRS Feedback Reports" or the "Quick Access Guide for 2016 PQRS Feedback Reports" for additional information. Both are available on the <u>PQRS Analysis and Payment webpage</u>.
- Visit the <u>How to Obtain a QRUR webpage</u> for instructions on accessing a 2016 Annual QRUR.

How to File an Informal Review:

- If you believe you were assessed the 2018 PQRS downward payment adjustment in error, please submit an informal review request.
- For more information about the informal review process, view the "2016
 Physician Quality Reporting System (PQRS): 2018 Downward Payment

 Adjustment Informal Review Made Simple" guide on the PQRS Analysis and Payment webpage.

- For the 2018 Value Modifier, groups and solo practitioners may request an informal review of perceived errors in their 2018 Value Modifier calculation. Additional information about how to request an informal review is available on the 2016 QRUR and 2018 Value Modifier webpage.
- You may request an informal review of your 2016 PQRS results and/or 2018
 Value Modifier calculation during the informal review period that will begin on September 18, 2017 and close on December 1, 2017 8:00 pm Eastern Tim

MLMIC Practice Tips

In the complex and busy world of healthcare delivery, physician practices may overlook basic office procedures that promote patient safety and reduce exposure to liability. These easy-to-implement recommendations are a guide for



physicians, other healthcare providers and staff, and may assist in preventing adverse outcomes, improving patient care, and minimizing liability exposure in the office practice.

Tip #16: Promoting Adherence to a Medication Regimen

The Risk: Patient nonadherence to a prescribed medication regimen is a common problem that physicians in all specialties encounter. Some factors that may influence medication adherence include the complexity of the regimen, the age of the patient, and the cost of medications. Patients and/or caregivers should be advised of the importance of taking medications exactly as directed. Educating patients regarding the use of medications should include information about potential drug interactions, side effects, and other related problems that may warrant medical intervention.

Recommendations:

- 1. Prescribing providers should educate patients about each medication, including its name, appearance, purpose, and effect. This education should include any potential side effects and/or interactions associated with the medication regimen. It should also stress the importance of contacting a healthcare provider should any reactions, questions or concerns arise.
- 2. Query patients regarding any underlying issues with medication selection in order to resolve any concerns.
- 3. The importance of using only one pharmacy to obtain all medications should be emphasized to patients or their representatives.
- 4. Patients should also be advised to:
 - Keep an accurate list of all medications including generic and brand names, over-the-counter medications, and herbal supplements, which includes dosages, dosing frequency, and the reasons for taking the medication;
 - Maintain a complete list of medical providers and their contact information;
 - Post the name and telephone number of their local pharmacy in a prominent location along with the name and phone number of their physician;
 - o Establish a daily routine when taking their medications; and
 - Bring a list of all medications that they are taking to each and every appointment.

- 5. Make patients aware of the various medication adherence aids and devices available, such as dosing reminders, pill boxes, and refill reminder programs.
- 6. Provide useful written information in plain language that clearly explains how patients can correctly manage their medications.
- Consider utilizing the teach back method when explaining medications to patients. First teach the information, then ask patients to repeat it back in their own words.
- 8. Physicians should help patients manage their medications, caution them to not share medications, and advise them to follow storage recommendations and dispose of old medications properly.

To read more of these MLMIC Practice Tips, click here!

Recognize Atrial Fibrillation Awareness Month with These ACP Patient Education Materials!

September is Atrial Fibrillation Awareness Month. ACP offers a variety of patient education materials to help you communicate easily and clearly with your patients about Atrial fibrillation. These include:



- A self-management guidebook with action plans and medication management worksheets
- A video series that highlights an Afib patient's self-management journey
- A Patient FACTS two-page takeaway sheet

These resources, along with many others, are available to you for FREE in both English and Spanish and in print and digital formats. <u>Access ACP's Atrial Fibrillation</u> <u>materials</u> and browse all of <u>ACP's patient education resources</u>.

Handwritten Paper Claims Will Begin to Be Returned on These Dates

On July 10, 2017, National Governmental Services (NGS) began returning any paper claims that include handwriting in fields other than the allowed signature fields (I tems 12, 13, or 31).

Claims have already been returned in areas of New York:

Date NGS will start to return handwritten paper claims

Counties

August 7, 2017

Albany, Oneida, Allegany, Onondaga, Broome, Ontario, Cattaraugus, Orleans, Cayuga, Oswego, Chautauqua, Otsego, Chemung, Rensselaer, Chenango, Saratoga, Clinton, Schenectady, Cortland, Schoharie, Erie, Schuyler, Essex, Seneca, Franklin, Steuben, Fulton, St. Lawrence, Genesee, Tioga, Hamilton, Tompkins, Herkimer, Warren, Jefferson, Washington, Lewis, Wayne, Livingston, Wyoming, Madison,

Yates, Monroe Montgomery, Niagara, Columbia, Delaware, Dutchess, Greene, Orange, Putnam, Sullivan, Ulster

November 13, 2017 Manhattan, Bronx, Brooklyn, Queens, Nassau, Rockland, Staten Island, Suffolk, Westchester

The Centers for Medicare & Medicaid Services (CMS) Internet-Only Manual (IOM) Publication 100-04, Medicare Claims Processing Manual, Chapter 26, Section 30, "Printing Standards and Print File Specifications Form CMS-1500" contains the printing specifications for the CMS-1500 claim form. You can access that form here.

These printing specifications do not provide instructions to submit handwritten claims. Please use this CMS IOM reference to ensure you are completing paper claims correctly.

Education

District Meetings

Syracuse: Tuesday, October 10, 2017 A Multiple Small Feedings of the Mind

- 1. NYS Advanced Primary Care and Practice Transformation
- 2. Don't Fear the Red Eye
- 3. Thrombectomy and Stroke Does it Work?

Pascale Italian Bistro at Drumlins 800 Nottingham Road, Syracuse NY 13224 6:00pm Registration / 6:30pm Dinner and Educational Program Event Flyer / Online Registration

Bronx: Wednesday, October 11, 2017

A Multiple Small Feedings of the Mind - Worth 1.5 CME!

- 1. NYS Advanced Primary Care and Practice Transformation
- 2. Delaying Progression of Chronic Kidney Disease and Early Detection
- 3. Microburst Insulin Therapy for Diabetes and Related Comorbidities

Diabetes Relief Center 2825 Third Avenue - 3rd Floor, Bronx NY 10455 6:00pm Registration / 6:30pm Educational Program Event Flyer / Online Registration

Suffolk: Tuesday, October 17, 2017

A Multiple Small Feedings of the Mind- Worth 1.5 CME!

- 1. NYS Advanced Primary Care and Practice Transformation
- 2. Therapeutic Advances in the Prevention and Treatment of Delirium

3. Screening and Intervention for PTSD, TBI and Suicide Prevention in Veterans

VA Northport, Room A1-5
9 Middleville Rd, Northport, NY 11768
6:00pm - Registration / 6:30pm - Dinner and Educational Program

<u>Event Flyer</u> / <u>Online Registration</u>

Hudson Valley South: Tuesday, October 24, 2017 A Multiple Small Feedings of the Mind - Worth 1 CME!

- 1. NYS Advanced Primary Care and Practice Transformation
- 2. Recognition, Management and Prevention of Veteran Suicide

Westchester Burger Company
353 N Bedford Rd • Mt. Kisco, NY 10549
6:00pm - Registration / 6:30pm - Dinner and Educational Program

<u>Event Flyer</u> / <u>Online Registration</u>

Staten Island: Wednesday, November 1, 2017

2017 Update in Geriatric Medicine MOC Session - Worth 10 CME and 10 MOC Points! Regina McGinn Educational Center, Staten Island University Hospital 475 Seaview Avenue • Staten Island, NY10305 6:00pm - Registration / 6:30pm - MOC Learning Session Event Flyer / Online Registration

SAVE-THE-DATE! Queens: Thursday, November 16, 2017
Medication Adherence in Patients with Type 2 Diabetes Mellitus
Additional information and registration details will be posted shortly

Primary Care and Neurology Conference: October 20-22, 2017

The High Peaks Resort in Lake Placid, New York is the venue for the 2017 "Current Topics in Primary Care and Neurology: Update for the Primary Care Practitioner" conference.

This annual educational event is sponsored by Albany Medical College's Department of Medicine, Department of Neurology and the Office of Continuing Medical Education and held in collaboration with the New York Chapter American College of Physicians – Hudson Valley Capital District.

The educational programming for this meeting is designed to be of interest to the physician, physician assistant or nurse practitioner whose practice involves the delivery of primary care to the adult and adolescent patient. While generalists are the target audience, sub-specialists who provide primary care will also find the topics useful. The sessions have been planned to be concise, up-to-date and clinically relevant.

We encourage you to take a look at the Conference Brochure and register today!