Practice Management

New York State E-Prescribing Reminder

More than a month has passed since the mandate to issue all prescriptions electronically. NYACP has received numerous questions regarding what physicians who have not been issued a waiver need to do if their electronic prescribing system is unavailable.

There are a few exceptions upon which a practitioner may rely if they are unable to issue a prescription electronically. These are:

- Temporary technological or electrical failure - PHL 281(3)(b).
- Issued by a practitioner under circumstances where, notwithstanding the practitioner’s present ability to make an electronic prescription, a practitioner reasonably determines that it would be impractical for the patient to obtain substances prescribed by electronic prescription in a timely manner and such delay would adversely impact the patient’s medical condition, provided that if such prescription is for a controlled substance, the quantity of controlled substances does not exceed a five day supply if the controlled substance were used in accordance with the directions for use - PHL 281(3)(d).
- A prescription issued by a prescriber is to be dispensed outside of New York State – PHL 281(3)(e).

In such cases, a physician may issue an Official New York State prescription form, oral prescription or a fax of an Official New York State prescription.

However, if a physician relies upon one of these exceptions, a note of such fact must be included in the patient’s record and notice must be sent to the NYS Department of Health (DOH) by email.

The e-mail notification to the Department should be sent to erx@health.ny.gov and must include the following information:

1. That it is a notification to the Department pursuant to Public Health Law Section 281(4) or (5);
2. Practitioner’s name;
3. Practitioner’s license number;
4. Practitioner’s telephone number;
5. Practitioner’s preferred work e-mail address;
6. Practitioner’s work address;
7. Patient initials only (the Department does not want patient confidential information to be sent); and
8. The reason(s) for the exception(s), including the citation(s) to PHL Section(s) 281(3)(b), (d), and (e) as referenced in the bullets above.

In those cases involving temporary technological or electrical failure, the notice must be sent to DOH as soon as practicable, but in no instance more than 72 hours following the end of the technological or electrical failure that prevented the issuance of an electronic prescription.

In the case of a prescription to be dispensed outside New York or the physician reasonably determines that it would be impractical for the patient to obtain substances prescribed by electronic prescription in a timely manner and such delay would adversely impact the patient’s
medical condition, such notice must be sent to DOH within 48 hours of the date the prescription was issued.

NYACP continues to monitor the implementation of the electronic prescribing mandate and encourages members to contact the Chapter office at (518) 427-0366 if they are experiencing problems.

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**Medicare: 2016 PQRS GPRO Registration is Now Open**

Physicians, nurse practitioners, physician assistants, clinical nurse specialists, and certified registered nurse anesthetists in groups of all sizes and those who are solo practitioners are subject to the Medicare Value Modifier in 2018, based on performance in 2016. These groups can register to participate in the 2016 Physician Quality Reporting System (PQRS) Group Reporting Option (GPRO) via the Physician Value - Physician Quality Reporting System (PV-PQRS) Registration System.

Avoiding the 2018 PQRS payment adjustment by satisfactorily reporting via a PQRS GPRO is one of the ways groups can avoid the automatic downward payment adjustment (-2.0% or -4.0% depending on the size and composition of the group) and qualify for adjustments based on performance under the Value Modifier in 2018.

More information is available on the [PQRS Payment Adjustment Information](#) web page.

Groups can participate in the PQRS program for the 2016 performance period by selecting one of the GPRO reporting mechanisms between April 1, 2016 and June 30, 2016 (11:59 pm EDT):

- Qualified PQRS Registry
- Electronic Health Record (EHR) via Direct EHR using certified EHR technology (CEHRT) or CEHRT via Data Submission Vendor
- Web Interface (for groups with 25 or more Eligible Providers [EPs] only)
- Qualified Clinical Data Registry (QCDR)
- Consumer Assessment of Health Providers and Systems (CAHPS) for PQRS Survey via a CMS-certified Survey Vendor (as a supplement to another GPRO reporting mechanism). See [CAHPS for PQRS Made Simple](#) for complete details.

Groups with 2 or more EPs that choose not to report via the PQRS GPRO in 2016 must ensure that the EPs in the group participate in the PQRS as individuals in 2016 and at least 50 percent of the EPs meet the criteria to avoid the 2018 PQRS payment adjustment in order for the group to avoid the automatic downward payment adjustment and qualify for adjustments based on performance under the Value Modifier in 2018.

The [Registration System](#) can be accessed using a valid Enterprise Identify Management (EIDM) account. Instructions for obtaining an EIDM account with the correct role are provided on the [PQRS GPRO Registration](#) web page. Instructions for registering to participate in the 2016 PQRS GPRO are provided in the [2016 PQRS GPRO Registration Guide](#).

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**Transforming Clinical Practice Initiative (TCPI): Innovation Day is May 24!**

The CMS Transforming Clinical Practice Initiative (TCPI) is designed to support clinician practices through nationwide, collaborative, and peer-based learning networks that facilitate large-scale practice transformation. The initiative is designed to support clinician practices over the next four years with support from Practice Transformation Networks (PTNS) and Support and Alignment Networks (SANS).

The Practice Transformation Networks are peer-based learning networks designed to coach, mentor and assist clinicians in developing core competencies specific to practice transformation in their own practice. PTNS will provide technical assistance and peer-level support to assist
clinicians in delivering care in a patient-centric and efficient manner making them eligible for higher reimbursement in the growing alternative payment model market.

The Support and Alignment Networks, comprised of national and regional professional associations, including ACP, will utilize existing and emerging tools (e.g., continuing medical education, maintenance of certification, core competency development). These will especially support the recruitment of clinician practices serving small, rural and medically underserved. Watch for more information from our Chapter as all of the new alternative payment models develop across New York State.

To help navigate the TCPI and PTNs, CMS is holding Transforming Clinical Practice Initiative Innovation Day on Tuesday, May 24.

*To register and listen to the live proceedings on YouTube please click below (which will be held in Baltimore, MD)*

- **Morning:** [http://www.youtube.com/watch?v=urOOYMZVJb8](http://www.youtube.com/watch?v=urOOYMZVJb8)
- **Afternoon:** [http://www.youtube.com/watch?v=Nqli93MCQnI](http://www.youtube.com/watch?v=Nqli93MCQnI)

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**Update on the Zika Virus**

As of April 27, 2016, 101 positive cases of Zika Virus have been identified in New York State, 62 of which are residents of New York City. These are the result of contraction during travel to affected regions or sexual contact, and there have been no confirmed cases of local transmission of Zika virus, either in New York or the rest of the country. 1,299 patients have been registered for testing using the Countermeasure Data Management System (CDMS).

The known Zika vectors are mosquitoes of the Aedes genus, which are present in New York state with distribution currently including New York City and the following counties: Dutchess, Nassau, Orange, Putnam, Rockland, Suffolk, Sullivan, and Ulster, and Westchester.

On March 17, 2016, Governor Andrew M. Cuomo announced a comprehensive six-step action plan to combat potential transmission of the Zika Virus in communities across New York state, which can be [read here](http://www.ny.gov/content/zika). The Zika Information line that was set up as part of the plan has received 254 requests for Dunk larvicide from the public, and all associated education materials have been approved and printed. Dunks began mailing on Friday April, 22, 2016 and will continue on a daily basis.

Physicians should check their Health Commerce System account for updates from the Department of Health.

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**Membership**

**Have You or a Colleague Recently Received An Award? The Chapter Wants to Know!**

The New York Chapter of ACP is currently looking to feature member accomplishments on our website. If you or a colleague you know has recently received local recognition, an award, or has been published in a scholarly journal, the Chapter wants to know!

*We want to put our members first and make sure they receive the appreciation they deserve.* You can contact Benjamin Max at [bmax@nyacc.org](mailto:bmax@nyacc.org) with any information or recommendations.
**Education**

**Rochester Meeting: Hands On Experience With Joint Injections**

On April 27, 2016, the NYACP Rochester District held an interactive district meeting at Pomodoro Grill in Rochester. In addition to an informative lecture, this meeting entitled "A Rheumatologist’s Approach to Common Joint Complaints Seen in Primary Care," employed a hands-on approach, with attendees using mannequins and medical equipment to practice injection techniques.

Nearly two dozen physicians and residents attended this hands-on meeting proctored by Bethany Marston, MD from University of Rochester Medical Center. All attendees were involved, as the format allowed for them to review the techniques and indications for common sites for steroid injections as well as review the basics of common joint complaints and understand important exam findings specific to these complaints.

**NYACP 2016 Annual Scientific Meeting**

*Early bird registration rates end on May 20th - Register today!*

**Opportunities to receive up to 7.5 CME credits and 30 ABIM MOC points**

- **Saturday, June 4, 2016**
  - Rye Town Hilton
  - 699 Westchester Avenue • Rye Brook, NY

  - **Begin the day with our very popular poster competition which will display over 100 posters from the Chapter's Resident/Fellow and Medical Student Members**
  - **Plenary talks from distinguished faculty such as Stephen Peterson, MD, MACP from NY Methodist Hospital and Louis Aledort, MD, MACP from Mount Sinai Hospital**
  - **Plenary and Breakout sessions include**: Update in Malignancy Screening, Update in the Management and Diagnosis of Hepatitis C and A Combination Approach to Managing Hyperlipidemia and many more!

Use this link for the full agenda and faculty bios.

Don’t miss this day-long event of cutting edge education and networking. Overnight accommodations for the Westchester Hilton are still available. You can easily book your overnight room online: Westchester Hilton Reservation (NYACP Room Block is no longer available)

Register Online Today!

**2016 District Meetings**

**SAVE-THE-DATE**

**Southern Tier District Meeting: Tuesday, June 7, 2016**

- CKD Inform: Early Detection and Prevention
- Little Venice Restaurant
- 111 Chenango St • Binghamton, NY 13901
- Registration 6:00 • Dinner and Educational Program: 6:30

Registration information coming soon!