

January 22, 2015

Advocacy Update

Governor Cuomo Presents State of the State and New York State Budget



On January 21st, Governor Andrew Cuomo presented his \$141.6 Billion proposed state budget. In the health area, the Governor proposed to continue and advance new approaches to healthcare delivery to control spending growth and improve health results. Of interest to our members, healthcare transformation utilizing federal waiver monies, awarded through DSRIP grants, seeks to reduce avoidable hospital use by 25% over the next five years. In addition, the CMS \$100 million grant to implement the State Health Innovation Plan over a four year period builds upon Medicaid reform efforts and extends them to achieve similar outcomes across the entire health care system, both public and private. The Chapter will be reviewing the entire 548 page budget booklet, looking for more specific detail on "increased payments to essential community providers", "leveraging health homes"; some changes to "health insurance premiums for coverage both inside and outside of the Health Benefit exchange"; investments in caregiver supports, New York Connects, a statewide one stop access to free and objective assistance on accessing long term care services; discontinuing resident work hour audits (noting duplication of effort with federal oversight), discontinuation of the physician profile website and "ending the Aids Epidemic by 2020".

Public hearings on the budget will be announced shortly, in anticipation of final budget action by March 31, 2015.

E-Prescribing Deadline - March 27, 2015



The Chapter's e-prescribing advocacy activities are a high priority in anticipation of the upcoming March 27th implementation deadline for electronic prescribing for all prescription medications including electronic prescribing of controlled substance (EPCS). Following many meetings in the late fall and early winter, we have met with the Bureau of Narcotic Enforcement, worked with key legislators in the Senate and Assembly and the Administration, including the Governor and the Dept. of Health, to communicate our ongoing concerns with challenges faced by our members. Many of the EMR software vendors are not ready to launch or test their systems prior to the mandatory date, the waiver process has not yet been released, there are multiple challenges with nursing home and home care, and responsibilities/procedures for residents in training are not clearly defined by the regulations. We have advocated directly on behalf of our members and joined with many others in medicine in a joint statement calling for the State to delay implementation or ease enforcement timelines.

Nurse Practitioner (NP) Attestation Form

The Chapter submitted formal comments on the new nurse practitioner attestation form for those nps with more than 3600 hours of experience resulting from last year's change in the nurse practice act. The Chapter also signed onto a joint letter submitted on behalf of NYACP, MSSNY, NYSSA, NYSAFP, ACOG District II, NYSSOS, AAP District II, NYSPA and the NYSRS. We will continue to report on your role as a "collaborating physician" with both experienced nurse practitioners with more than 3600 hours and those with less than 3600 hours. Watch our website and upcoming issues of YCIA.

Collective Negotiations Legislation

The Chapter is monitoring (through a statewide collaboration with many other stakeholders) Collective Negotiation legislation A.355(Gottfried)/S.1157(Hannon) that would enable independently practicing physicians to jointly negotiate patient care payment terms with health insurance companies under close supervision by the State.

NYS Abuse Deterrent Formulation Legislation

The Chapter's Health and Public Policy committee continues to monitor and participate in discussions related to legislation focusing on abuse deterrent formulation (ADF) to reduce abuse and diversion of opioid drugs.

Current legislation has two components which deal with pharmacy switching: (1) the bill prohibits the substitution of an ADF with a non-ADF without the MD's written consent and (2) the bill prohibits non ADF opioid prescriptions to be filled unless an ADF is not available. The Chapter continues to solicit input from members on how these concepts impact practice, following last year's focus group that yielded interesting results. The Chapter remains interested, active and committed to the goal of reducing drug abuse in NYS.

New Member Benefit

NYACP and DrFirst: Your E-Prescribing Solution

The New York Chapter American College of Physicians is excited to announce a new member benefit to help physicians comply with the I-STOP E-Prescribing Mandate effective March 27, 2015.

For those physicians without an electronic medical record (EMR) e-prescribing program, [DrFirst](#) is offering standalone e-prescribing software products at a discounted price to NYACP members. The products include Rcopia® and EPCS GoldSM.

Members with an existing EMR must contact their current vendor to verify their EMR capability. Please be sure to confirm that your current version is eRx compliant. For members without an EMR or those EMRs that do not meet the certification standards, these DrFirst products are your immediate solution.

You can read more about DrFirst and the E-Prescribing Mandate [here](#).

Quality

Exploring New Payment Models: The NYACP, CMS, and Transforming Clinical Practice Initiative

NYACP continues to work on initiatives that target new payment models and assist members with practice transformation. The CMS Transforming Clinical Practice Initiative (TCPI) is designed to help clinicians achieve large-scale practice transformation. There are two initiatives within TCPI: Practice Transformation Networks (PTN) will be formed by group practices, health care systems and others to provide clinical practices with quality improvement expertise, technical assistance and help as they prepare for clinical and operational practice transformation. Support and Alignment Networks (SANs) will be formed by professional associations that align memberships, communication channels, CME credits and other work to support the PTNs and clinician practices. NYACP is actively involved with these initiatives.

New York State was awarded one of the CMS State Innovation Model (SIM) Initiative - Model Test Awards, designed to provide financial and technical support over a four-year period to test and evaluate multi-payer health system transformation models. Linda Lambert, NYACP Executive Director, was appointed to the SIM's Integrated Care Workgroup.

Education



NYACP Annual Scientific Session - Early Bird Registration Discount Expires Sunday, January 25, 2015 at midnight!

There are only a few days left for a **discounted** registration for the 2015 Annual Scientific Meeting. Act now to receive this significant registration discount!

The Chapter's premier educational event will be held in West Harrison, NY beginning February 6. For New York City residents, that's only a short 15-minute cab ride from the Harrison Metro-North station.

Chapter members and non-members alike will be able to meet, network, and earn up to **27.5 AMA PRA Category 1 Credits** throughout the weekend. In addition, there will be multiple SEP sessions on Friday and a Weekend Board Review Course for physicians in their ABIM MOC certification or recertification phase.

For full program information and registration: [Review Program Agenda Here](#)

Pre-Exposure Prophylaxis Dinner

Don't Miss Out! The NY Chapter ACP, in collaboration with NYSDOH's Clinical Education Initiative through the Mount Sinai Institute for Advanced Medicine, invites you to a special dinner following the Scientific Session on Friday evening, February 6, 2015. You will earn one additional CME category 1 credit by attending the complimentary dinner program presented by:

Antonio E. Urbina, MD, Medical Director Spencer Cox Center for Health

[Register Here for Scientific Session, HIV Dinner and Weekend Board Review](#)

I-STOP and E-Prescribing Webinars: Be Ready to Comply with the Mandate Effective 3.27.15

Hosted by: DrFirst

Topics to be covered:

- (1) New York State Controlled Substance Epidemic
- (2) I-Stop Legislation & NYS Prescription Monitoring System (PMP)
- (3) Legend and Controlled Substance E-prescribing
- (4) Rcopia® and EPCS GoldSM 2.0 Demo



Friday, January 30, 2015

7:30am - 8:30am (EST)

[Register Here](#)

Monday, February 2, 2015

12:00pm - 1:00pm (EST)

[Register Here](#)

Wednesday, February 4, 2015

7:00pm - 8:00pm (EST)

[Register Here](#)

This webinar is scheduled for the following dates:

Practice Management

What to Look For If the Diagnosis Isn't Ebola

With the recent outbreaks in West Africa, Internists have a heightened sense of Ebola symptoms presenting during diagnosis. However, Ebola is not always the disease. From *ACP Hospitalist* is an article on what to look for when Ebola is ruled out.

An excerpt:

"If a patient comes to your hospital with a fever and history of travel to West Africa, there's no question what you'll be most worried about-Ebola.

But there are a number of other diseases that should be considered in differential diagnosis, even as you take precautions against the possibility of Ebola, because they will present with similar symptoms and are endemic to the same area. "

Read the full article [here](#).

The Current and Future State of Stroke Treatment

Like any field of medicine, new technology and procedures are devised and implemented at a rapid pace; the process of stroke treatment is no different. This article from the *ACP Hospitalist* features insights from S. Andrew Josephson, MD, Medical Director of Inpatient Neurology and Chair of the Neurohospitalist Program at the University of California, San Francisco (UCSF) is essential for any physician that routinely encounters patients that require stroke treatment.

An excerpt from the article:

"Much research and discussion have focused on the right time window for giving thrombolysis to patients with acute ischemic stroke. Yet a day may come when the debate about a cutoff of 3 or 4.5 hours will seem rather quaint".

Read the full article [here](#).

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