

IMS Advocate

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Wellmark requires NPI only

Wellmark has announced that starting November 15, 2008, submitted claims must contain *only* the NPI. Claims containing the NPI and other legacy numbers, such as Wellmark's provider number, will be rejected and will then need to be resubmitted with only the NPI.

Blues settlement payments

IMS has learned that checks associated with claims filed by physicians in the *Love* multi-district litigation settlement with the Blues, including Wellmark, have not yet been mailed. Those checks will be mailed as ordered by the federal court once all appeals have been addressed. No estimate of a date has been provided.

2009 IMPAC campaign begins

The Iowa Medical Political Action Committee (IMPAC) 2009 campaign began October 1, 2008.

IMPAC is a voluntary, non-profit organization and political arm of IMS that collects contributions from physicians, spouses, students, and friends of medicine. IMPAC distributes these funds in a bipartisan manner to state and federal candidates running for office in Iowa. In this way, IMPAC helps elect candidates who want to protect quality health care and the practice of medicine in Iowa.

For more information, contact Cheryl Peers at (800) 747-3070 or cpeers@iowamedical.org or visit www.iowamedical.org.

IMS resolutions discussed during AMA interim meeting

Members of the IMS Executive Committee and the Iowa Delegation to the AMA attended the AMA Interim Meeting this week. Discussions at the meeting covered a wide array of topics including artificial trans fats, environmentally friendly practices, increasing access to care, and Medicare physician payment reform. Medicare geographic equity was the primary issue for the Iowa Delegation. IMS brought forth resolutions asking for: 1) a study on the difference between rural and urban practice expenses; 2) a study on the way rents are reflected in the Geographic Practice Cost Index (GPCI); and 3) AMA advocacy supporting geographically neutral payments under physician quality improvement initiatives. These statements were included in a substitute AMA resolution.

Congress passes mental health parity law

The economic recovery bill passed by Congress and signed into law by President Bush in October included a provision requiring parity between mental and physical health benefits. This provision, the "Paul Wellstone and Pete Domenici Mental Health Parity and Addiction Equity Act of 2008," has been in the development stage since Congress passed the first Mental Health Parity Act in 1996. This new law significantly expands parity requirements from the original legislation.

The new coverage requirements go into effect in January 2010 for most plans. Among other things, it requires that plans have equal financial requirements such as deductibles, co-payments, and coinsurance for mental health/substance abuse treatment benefits as it does for physical health benefits. Additionally, it requires equal treatment limitations such as caps on frequency of care, number of visits, and days of coverage.

The new law exempts employer-based group health plans with fewer than 50 members. It also exempts for one year any plans that see a two percent increase in the cost of benefits during the first year of the law or a one percent increase in subsequent years.

Mental health parity has been a priority of IMS and the AMA for many years. IMS continues to support a full mental health and substance abuse parity law in Iowa and will continue to work toward parity for Iowans not affected by the new law.

Iowa Medicaid offers Web-based patient management tool

The Iowa Medicaid Electronic Records System (I-MERS) is a free Web-based tool providing updated information about all claims submitted to Iowa Medicaid for current Medicaid members. I-MERS allows providers the ability to view specific claim information for procedures, prescriptions, and other care Medicaid members had received. Sensitive information including mental health, substance abuse, and HIV/AIDS is excluded.

To register for I-MERS, send a letter to Iowa Medicaid: IME Provider Services, I-MERS Access, 100 Army Post Road, Des Moines, IA 50315. Please include your provider number, provider type, tax ID number, organization name/address, an organization contact, and your signature. More information is available at www.ime.state.ia.us.



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Physician notification to IDOT re: driver's license suspensions

Iowa Code section 321.186(4) permits a physician (not a PA or nurse practitioner) to report to the Iowa Department of Transportation (IDOT) the identity of a person who has been diagnosed as having a physical or mental condition that would render the person physically or mentally incompetent to operate a motor vehicle in a safe manner. The law does *not* create a duty to report. Reports are confidential, and the law provides immunity for reporting.

The law directs the reporting physician to make reasonable efforts to give written notification to the person who is the subject of the report stating the nature of and reason for the disclosure. To report, IDOT recommends that the physician prepare a letter on the physician's letterhead giving the person's full name and date of birth. The letter must be signed by the physician and state the reason why the physician is recommending suspension of driving privileges. The letter can be mailed or faxed to IDOT, Office of Driver Services, PO Box 9204, Des Moines, IA 50306, fax (515) 239-1837. Physicians may also want to consult AMA Ethical Opinion E-2.24, *Impaired Drivers and Their Physicians*.

FTC delays enforcement of "Red Flag Rules"

In October, the Federal Trade Commission (FTC) announced that it would suspend enforcement of its Red Flag Rules requiring "creditors" to develop and implement written identity theft prevention programs. The original deadline of November 1, 2008, has been moved to May 1, 2009. The question of whether or under what circumstances physicians are "creditors" remains unresolved. The AMA, the MGMA, and several national specialty societies believe that physician offices are not "creditors" subject to these rules. They sought the delay to allow time to work out this dispute and provide clarity to medical practices.

Iowa Medicaid offers expanded electronic claims submission

As noted in Iowa Medicaid Informational Letter 757, providers who electronically submit Medicaid claims may now take advantage of the electronic submission process to submit claims relative to an approved Exception to Policy (ETP). This new process will be effective with ETPs granted on or after November 1, 2008. For ETPs granted on/after this date, the ETP letter itself does not need to be sent to the IME when the claim is submitted electronically. Informational Letter 637's instructions for paper submissions should continue to be followed for providers who file on paper. The paper process must be followed for all ETPs granted prior to November 1, 2008. To learn more about how to electronically submit claims for services approved under an ETP, visit Iowa Medicaid's Web site at www.ime.state.ia.us.

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