

# IMS Advocate

published by the Iowa Medical Society

April 24, 2009

## Key legislation

**HF 781** – Establishes a direct-entry lay midwife scope of practice review committee. IMS opposes.

**HF 234** – Requires insurance coverage for mental health conditions. IMS supports.

**HF 795** – Relates to the choice of doctor in Workers' Compensation cases. IMS is monitoring.

**SF 3** – Sets a .08 blood alcohol limit for boat operating. IMS supports.

**SF 153** – Allows physician assistants to form PCs. IMS opposes.

**HF 478** – Requires coverage for diabetes education. IMS supports.

**HF 758** – Modifies damages recoverable for negligent or wrongful injury/death. IMS opposes.

**SF 394** – Requires a circulating nurse in operating rooms during surgical procedures. IMS opposes.

## AMA health care reform goals

In a recent letter to President Obama, the AMA offered physicians' support for his administration's eight principles for health care reform and outlined a framework for action.

The AMA highlighted the impact that medical liability has on health care costs, the necessity of removing antitrust barriers to quality improvement efforts, the importance of health IT, and the logic of building on the current employer-based system to promote individual choice and health insurance ownership. To read the letter and learn more, visit [www.iowamedical.org](http://www.iowamedical.org).

## IMS Annual Meeting wrap-up

IMS held its annual meeting April 17-19 in Coralville. At the meeting, Michael Kitchell, MD, of Ames was elected President of IMS. Timothy Kresowik, MD, of Iowa City was elected President-elect. Additionally, Robert Lee, MD, of Johnston and Bryan Pechous, MD, of Dubuque were elected to the IMS Board of Directors. The House also elected Peter Reiter, MD, of Ottumwa as Speaker of the House and Robert Anderson, MD, of Bettendorf as Vice Speaker. Harold Miller, MD, of Davenport was re-elected as a Delegate to the AMA, and Mariannette Miller-Meeks, MD, of Ottumwa and Stephen Richards, DO, of Algona, were re-elected as AMA Alternate Delegates. Thaddeus Anderson, MD, of Dubuque and Beth Bruening, MD, of Sioux City were elected to serve two-year terms on the IMS Nominating Committee.

The House also approved a resolution to add a medical student and a resident director to the IMS Board. Susan Hagen, MD, of Iowa City was elected to serve as Resident Director, and George "Chip" Wandling, Jr., of Iowa City was elected to serve as Medical Student Director.

The House of Delegates also considered one report and nine resolutions. These covered an array of topics including Medicare payments, Vitamin D deficiency, and Iowa law regarding out-of-hospital Do-Not-Resuscitate orders. To read these resolutions and see photo highlights from the weekend, visit [www.iowamedical.org](http://www.iowamedical.org).

## Legislature nears adjournment

The Legislature continues to battle budget bills and remaining issues, and it appears adjournment may occur next week. At that time, the fates of several areas of interest to Iowa physicians will be clear. IMS is still working toward passage of **HF 234**, which would create mental health and substance abuse insurance parity. IMS also continues to support positive provisions of **SF 389**, the health reform bill, while also fighting off scope of practice expansion attempts. Next week's *Advocate* will include a full run-down of this year's legislative session.

## IMS supports chronic interventional pain medicine statement

The Iowa Board of Medicine (IBM) recently issued a draft policy statement that declares the practice of chronic interventional pain management as the practice of medicine. The IBM policy statement comes after two years of dialogue on the issue, prompted by IMS acting on a resolution from its 2007 House of Delegates.

IMS supports the draft policy, as CRNAs do not have the education and training to engage in these procedures. Chronic interventional pain management is a very complex, specific subset of pain management that is a recognized medical subspecialty and requires the education and expertise of an MD or DO to perform. The issue will be further discussed at the May IBM meeting. For more information, please contact Heidi Goodman at [hgoodman@iowamedical.org](mailto:hgoodman@iowamedical.org).



## Iowa Medical Society legislative staff

### Michael Abrams

Executive Vice President  
mabrams@iowamedical.org

### Jeanine Freeman, JD

Senior Vice President of Legal Affairs  
jfreeman@iowamedical.org

### Karla Fultz McHenry

Vice President of Public Policy & Advocacy  
kmchenry@iowamedical.org

### Eric Nemmers, JD, MHA

Legislative Counsel  
enemmers@iowamedical.org

### Heidi Goodman, BSN, JD

Policy Counsel  
hgoodman@iowamedical.org

### Sandy Nelson

Manager of Health Care Economics  
snelson@iowamedical.org

### Cheryl Peers

Legislative Coordinator  
cpeers@iowamedical.org

**IMS Headquarters**  
1001 Grand Avenue  
West Des Moines, Iowa 50265  
(800) 747-3070 or (515) 223-1401  
Fax (515) 223-0590  
www.iowamedical.org

## CMS offers EMTALA guidance for on-call community plans

In March, CMS issued a memo to state surveying agencies addressing EMTALA regulations that allow hospitals to jointly develop a community call plan (CCP) for sharing emergency call. CCPs are voluntary.

If entered into, a CCP must: 1) clearly delineate the on-call coverage responsibilities for each participating hospital; 2) describe the specific geographic area served by the CCP; 3) provide assurances that local and regional EMS system protocol include information on the CCP; and 4) affirmatively state each hospital's recognition that the CCP does not at any time relieve a hospital of its EMTALA obligations to provide medical screening exams and stabilizing treatment. A hospital participating in CCP must include on its list of on-call physicians the names of all emergency room on-call physicians from each CCP hospital. To access the CMS memo, visit [www.cms.hhs.gov/home/medicare.asp](http://www.cms.hhs.gov/home/medicare.asp). Once there, click "Survey & Certification – General Information" under the "Provider Enrollment & Certification" tab. Once there, find Memo 09-26 under the "Policy & Memos to States and Regions" tab.

## CMS to host conference call on ICD-10 implementation

CMS will be hosting a conference call regarding ICD-10 implementation on Tuesday, May 19, from Noon-1:30 p.m. CDT. The call will focus on the crosswalks between the ICD-9 and ICD-10. Additionally, the call will provide an overview of the final ICD-10 rule that requires implementation by October 1, 2013. CMS will also discuss differences between ICD-9 and ICD-10 codes and resources that are available to assist in planning for the transition.

Conference call discussion materials and registration information is available at [www.cms.hhs.gov/ICD10/07a\\_2009\\_CMS\\_Sponsored\\_Calls.asp](http://www.cms.hhs.gov/ICD10/07a_2009_CMS_Sponsored_Calls.asp).

## AMA provides resource to help physicians e-prescribe

By the end of 2008, only 13 percent of physicians were prescribing medications electronically. To persuade physicians to begin e-prescribing, CMS is offering an incentive for 2009. The incentive payment is equal to two percent of all Medicare Part B eligible charges for the year. To learn more about the CMS e-prescribing incentive program, go to [www.cms.hhs.gov/ERxIncentive/](http://www.cms.hhs.gov/ERxIncentive/). On April 1, the AMA launched a new learning center ([www.ama-assn.org/ama/pub/erx/home.shtml](http://www.ama-assn.org/ama/pub/erx/home.shtml)) that provides tools and information and offers resources to help physicians when considering e-prescribing.