

IMS Advocate

published by the Iowa Medical Society

October 9, 2009

DHS cost-saving measures

The Iowa Department of Human Services (DHS) recently announced a variety of cost-saving measures within the agency.

Medicaid will soon require prior approval before paying for radiology services including MRI. It is understood that the prior approval will be modeled after the Wellmark process. Additionally, beginning next spring, Medicaid will no longer make provider payments by check and will only reimburse electronically. Finally, Medicaid will soon begin using a new screening tool that looks for coding errors on Medicaid claims.

DHS believes that these changes, among others, will save the state approximately \$11 million dollars annually.

CDC advisories for H1N1

The Centers for Disease Control and Prevention (CDC) has released several guidance documents in anticipation of the 2009 seasonal and H1N1 flu season. The CDC's 10-step action plan for health care employers is available at www.cdc.gov/h1n1flu/10steps.htm.

Additionally, the CDC's clinician Web page on H1N1 is available at www.cdc.gov/h1n1flu/clinicians. To access the CDC's guidance for employers and businesses, visit www.cdc.gov/h1n1flu/business/guidance and for small businesses, go to www.cdc.gov/H1N1flu/business/guidance/smallbiz.htm.

Latest health reform bill includes Medicare geographic fix

The latest mark-up of the Senate Finance Committee's health reform bill included an amendment sponsored by Sen. Charles Grassley that would reduce Medicare's geographic practice expense adjustments by a quarter in January 2010 and then by half in 2011. Additionally, CMS would be required to analyze and ensure that geographic adjustments are correct; for years, IMS has insisted they have been inaccurate.

Congress continues to debate health system reform, and the Finance Committee's bill may be closest to what the final package will entail. This bill does not include a public option and also does not permanently fix the flawed SGR formula on which Medicare physician payments are based. The Senate bill also includes a provision from Sen. Grassley that incentivizes high quality, cost-effective care. The House bill contains similar language that is supported by Rep. Bruce Braley of Iowa. This would be positive news for Iowa, whose providers deliver extremely high value care. A newly published report from the Commonwealth Fund confirms this and ranks Iowa second among states for health system performance. View the report at www.commonwealthfund.org.

IBM proposes rules on wrong-site, unnecessary procedures

The Iowa Board of Medicine (IBM) filed notice of its intent to adopt a physician disciplinary rule for "performing or attempting to perform health care services on the wrong patient or at the wrong site on the body; performing an unauthorized procedure; or performing a procedure that is medically unnecessary or otherwise unrelated to the patient's diagnosis or medical condition."

A public hearing on this proposed rule will be at the IBM on October 27 at 11:00 a.m. Written comments are due by 4:30 p.m. on that same day. The IBM elected not to proceed at this time with rulemaking specifying protocol for wrong-site/wrong-patient surgery but continues to study the advisability of implementing national protocol. IMS raised several concerns with the proposed rule at the IBM's September meeting and will file comments and participate at the public hearing.

AMA gives guidance on HIPAA security breach compliance

The AMA has released a document to assist medical practices in complying with the HIPAA breach notification rule that went into effect September 23. Active enforcement will begin February 22, 2010. Medical practices are encouraged to come into compliance as soon as possible to avoid potential legal liabilities.

The new breach notification rule is focused on breach of "unsecured" protected health information (PHI). Providers can secure PHI through data encryption, which can help relieve breach notification requirements. To learn more, review the AMA guidance at www.ama-assn.org/ama1/pub/upload/mm/368/hipaa-breach.pdf. The federal rule can be accessed at www.hhs.gov/ocr/privacy/hipaa/understanding/coveredentities/breachnotificationifr.html.



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

IBM proposes standards for medical directors at medical spas

The IBM intends to adopt a rule stating that a medical director at a medical spa shall retain responsibility for the outcome of each delegated medical aesthetic service as well as for advertising by the spa. The proposed rule further details physician director responsibilities in delegating and supervising non-physician personnel performing medical aesthetic services.

A “medical spa” is an entity holding itself out as providing “medical aesthetic services,” an extensive list that includes ablative laser, intense pulse light therapy, and chemical peels. A “medical spa” does not include a dermatology practice wholly owned and controlled by an Iowa licensed physician. A public hearing on the rule will take place at the IBM on October 27 at 11:30 a.m.; written comments are due by 4:30 p.m. on that same day.

Obtaining and billing for H1N1 vaccine

To obtain doses of the H1N1 flu vaccine, Iowa providers must contact their local public health agency. The federal government is providing the H1N1 vaccine free of charge, so vaccine codes should be billed for zero dollars. The AMA has published a new H1N1 vaccine administration CPT code (90470 – H1N1 immunization administration (intramuscular, intranasal), including counseling when performed) and has revised existing code 90663 to include the H1N1 vaccine. **Note:** Medicare does not want providers to use the AMA CPT codes. Instead, use G9141 (influenza A, H1N1, immunization administration, includes the physician counseling the patient/family) and G9142 (Influenza A (H1N1) vaccine, any route of administration). Iowa Medicaid will use these same G-codes.

For more information on vaccination of Medicaid members, read IME Informational Letter 839. For more information for Medicare members, visit www.cms.hhs.gov/h1n1/. For general information, visit www.ama-assn.org/ama/pub/h1n1/resources/cpt-codes.shtml.

OIG releases 2010 work plan

The U.S. Department of Health & Human Services' (HHS) Office of Inspector General (OIG) posted its work plan (http://oig.hhs.gov/08/Work_Plan_FY_2010.pdf) for the fiscal year that started October 1. The OIG is tasked with rooting out fraud, waste, and abuse from HHS programs. These areas will draw particular OIG scrutiny in the coming year: 1) Medicare Incentive Payment for E-Prescribing; 2) Practice Expense Components of Diagnostic Imaging; 3) Place of Service; 4) E/M Services During Global Surgery Period; 5) Independent Diagnostic Testing Facility Utilization and Enrollment Standards; 6) Physician Reassignment Compliance; and 7) Payment for Referrals by Excluded Providers.

Non-Profit Org.
U.S. POSTAGE
PAID
Permit No. 9901
Des Moines, Iowa

Iowa Medical Society
1001 Grand Avenue
West Des Moines, IA 50265