

Philadelphia Medicine



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Incoming PCMS president Harvey B. Lefton, MD, will move to increase membership, educate the public and politicians

By David Woods, PhD



When he was president of the Pennsylvania Society of Gastroenterology, Dr. Harvey Lefton increased that organization's membership by 50%. As the incoming

151st president of the Philadelphia County Medical Society, he has similar goals. PCMS membership, particularly of younger physicians, is a way to get the agenda, the needs and concerns of the medical profession in front of the public and politicians, he says, and he'll work on that by individual contact with as many eligible potential members as he can reach by e-mail or a phone call.

In addition, he'd like to get Philadelphia physicians more involved in what's going on in the city, especially in what he calls the epidemic of 'diabesity'. On the broader front, he believes that the current US healthcare system is hugely expensive and wasteful. Eventually, he says, it will be supplanted by some form of universal health plan that will cover everyone.

Dr. Lefton believes that the medical profession needs to maintain itself as an honorable and compassionate force to counterbalance the intrusions of politicians and insurance companies. He credits his predecessor as PCMS president, Dr. Lynn Lucas-Fehm, as having advanced those objectives, particularly in her poignant editorials in *Philadelphia Medicine* on issues of importance to PCMS members in particular, and practicing doctors in general.

The incoming president heads an 11-member private practice of gastroenterology. He gained his MD degree at

Jefferson Medical College, and completed both his internship and residency at the Cleveland Clinic hospital. He is a clinical professor of medicine at the Drexel University College of Medicine and a fellow of both the American College of Physicians and the Philadelphia College of Physicians; he has published widely in the field of gastroenterology.

A man with a dry sense of humor and a direct manner, Dr. Lefton said that one of the more telling editorials that he wrote for the *Pennsylvania Gastroenterology Society Journal* was titled "Colonoscope Your Congressman." What he meant by that was the need for physicians to get their issues and concerns in front of the public and politicians.

...the PCMS has to be more than a club, it must have a strong reason for being

People in the Senate and Congress, at both the federal and state levels, talk about health issues such as colonoscopy without really knowing much about them. We have to educate them, he says, and for that the PCMS has to be more than a club, it must have a strong reason for being and not just serve as a cog in the wheel of Philadelphia's mega medical school mentality.

Married for 44 years to Paulette; they have a daughter Allison and a son Daniel—both in their 30s. The new president's interests outside medicine include cooking, reading, music, art—especially the Barnes Foundation—and travel.

There are two reasons to be on this earth, says Harvey Lefton: to comfort those who need comforting; and to irritate those who need to be irritated!

Dr. Woods is the publisher of Philadelphia Medicine.

PCMS NEWS

Help with Medicare Group Benefit Coverage

PCMS is hosting two luncheon meetings at Society headquarters with USI Affinity representatives for members who received notice about changes to their Medicare group benefit coverage.

Tuesday, June 12, 11:30 AM

or

Wednesday, June 20, 11:30 AM

Please specify date -

RSVP: 215-563-5343, Ext. 102

The PCMS Young Physicians Section will meet on Thursday, June 7, 2012, at 6:00 PM at Society headquarters. Physicians under 40 years of age are invited to attend.

RSVP: 215-563-5343, Ext. 101

All PCMS Members Topic: Update on Gout

Date: Tuesday, June 26, 2012

Location: R2L Restaurant

2 Liberty Place – 37th Floor

6:00 PM – Registration

6:30 PM – Dinner/Program

FREE for PCMS Members Only

Must RSVP by June 22

Phone: 215-563-5343, Ext. 113

(This program hosted by the PCMS IMG Section.)

All events are posted on the PCMS website.

These include CME programs and seminars from outside sources.

If you would like to post your event on the website, call 215-563-5343, Ext. 102

Host your event at PCMS

Host your next party or conference/ seminar at PCMS headquarters. Ample free parking. Contact Louise Eder on 215-563-5343, Ext. 107 to schedule an appointment.

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Phone: (215) 563-5343

E-mail: stat@philamedsoc.org

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Publisher

David Woods, PhD

Production Editor

Norman Kline

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Editorial

A farewell message of heartfelt thanks

By Lynn M. Lucas-Fehm, MD, JD



As my tenure as PCMS president comes to a close, I wish to express my heartfelt thanks to all members, staff and colleagues who made this year so special.

The camaraderie, dedication and support which was so graciously provided made a hectic year run smoothly.

In looking back, I found that one of my most rewarding experiences was the response I received concerning my monthly articles in *Physicians News Digest*. Your comments letting me know that we share the same frustrations, goals and love of our profession were appreciated. In particular, I enjoyed the respectful debates I participated in with some of you about organized medicine and the role it has played and will continue to play as healthcare reform continues.

This debate about the role and effectiveness of organized medicine is intertwined with the very survival of PCMS and all medical societies at the county, state and federal level. It is critical that we find a way to effectively unify to make sure we can influence and contribute to the continuing debate and implementation of healthcare reform. This is vital not only to the success of organized medicine but also is instrumental in as-

uring that patient care is not a casualty of legislative action.

In particular, I enjoyed the respectful debates I participated in with some of you about organized medicine and the role it has played and will continue to play as healthcare reform continues.

Accomplishing the correct balance between cost reduction, quality, and productivity is a daunting task which is difficult to measure with a formula. Physicians are uniquely qualified to make sure that efficient care does not have to lack compassion and cost saving does not have to result in what some would define as rationing.

I will close with two quotes that exemplify the importance of unity and action at this moment. The first is attributed to Benjamin Franklin, who at the signing of the Declaration of Independence stated:

"We must hang together or we shall most assuredly hang separately."

The second is by Mahatma Gandhi: "First they ignore you, then they laugh at you, then they fight you, then you win."

Thanks for all your support.

Dr. Lucas-Fehm is the president of PCMS.

Call for resolutions—Giving direction to organized medicine

We want to hear from you. Do you have any major issues, concerns or problems that are affecting your ability to practice medicine?

One of the most direct ways for you to get involved is to submit a resolution to the House of Delegates (HOD) through the PCMS delegation. It's important that the Pennsylvania Medical Society (PAMED) know the difficulties PCMS physicians face in our daily practice of medicine, such as cumbersome regulations and issues that affect the doctor-patient relationship.

As the association's legislative body, the HOD meets once a year in October to establish PAMED policies on key issues that affect the practice of medicine, from medical ethics to critical matters of public health.

Deadline for submission of resolutions to PCMS is August 1, 2012. PCMS stands committed to serving the needs of all Philadelphia County physicians and advancing the health of our patients and community.

For additional information, please contact PCMS staff at 215-563-5343 or by e-mail at stat@philamedsoc.org.

Avoiding the 2013 eRx payment adjustment

Individual eligible professionals and CMS-selected group practices participating in eRx GPRO who were not successful electronic prescribers in 2011 can avoid the 2013 eRx payment adjustment by meeting the specified reporting requirements between January 1 and June 30, 2012.

6-month reporting requirements to avoid the 2013 payment adjustment:

- Individual eligible professionals – 10 eRx events via claims
- Small eRx GPRO – 625 eRx events via claims
- Large eRx GPRO – 2,500 eRx events via claims

Did you receive an e-prescribing penalty letter?

The Centers for Medicare & Medicaid Services recently sent some physicians a letter that starts:

This letter is to inform you that you are subject to a payment adjustment under the Medicare Electronic Prescribing (eRx) Incentive Program because you did not meet the program requirements for the 6-month reporting period of January 1, 2011, through June 30, 2011. For 2012, this payment adjustment will result in a 1% reduction in the fee schedule amount that would otherwise apply to your Medicare Part B covered professional services for all charges with a date of service from January 1-December 31, 2012.

CMS encourages physicians who think they are receiving the e-prescribing penalty in error to contact its help desk. The QualityNet Help Desk can be reached by phone Monday-Friday, 7 AM to 7 PM (Central time) at 866-288-8912 or by email (qnetsupport@sdps.org).

Medicare changes to 3-day payment window rule will affect physician billing

The expansion of the three-day payment window rule to include wholly-owned physician offices and clinics and a new HCPCS modifier, PD introduced by the Centers for Medicare and Medicaid Services (CMS) may complicate current billing and coding processes.

Beginning July 1, 2012, services performed by a physician practice will be paid using the facility (vs. non-facility) rate for the physician component of diagnostic services and non-diagnostic physician services that are:

- Performed in the three days prior to an inpatient admission
- Clinically related to the admission
- Performed by an entity that is wholly owned or operated by the hospital.

Compliance with these changes could affect how and when employed physicians bill for those services affected by the rule. For example, the physician practice may

have to hold claims for three or more days after the office service is rendered or until the practice is notified by the hospital that the patient was admitted.

Additionally, the employed office-based physicians will have to determine whether the service they provided is “clinically related” to the admission in order to know which services to append the PD modifier.

These changes also should be taken into consideration by those physician practices that are looking to sell to a hospital in response to emerging payment strategies driven by the Affordable Care Act.

If you are a member of the Pennsylvania Medical Society and have any questions about these changes, please contact our Division of Practice Economics and Payer Relations, at 800-228-7823, ext. 2644.

Pennsylvania Health Care Cost Containment Council sheds new light on readmissions

About 2 in 15 hospital stays in Pennsylvania involved a readmission in 2010, with hospital readmissions costing the government more than \$500 million.

The Pennsylvania Health Care Cost Containment Council studied readmissions because they add so much to healthcare costs, and because some are preventable.

The study found Dauphin County, home to three hospitals, had higher readmission rates than many counties. Readmissions involve hospital patients who were discharged but had to return for medical reasons. Some aren't the hospital's

fault — the patient might not follow discharge instructions, for example — while some result from preventable medical complications and infections.

The PHC4 found heart failure patients had the highest readmission rate, nearly 25%. Next were mental health patients, followed by patients with abnormal heartbeats. The PHC4 said its report is among the most comprehensive done on the subject, and hospitals can use it as they figure out how to eliminate readmissions. You can read the report at www.phc4.org.

PAMED President, Marilyn Heine, MD (center); with Kurt Miceli, MD, Chair, PCMS Young Physicians Section; and Lynn Lucas-Fehm, MD, JD, PCMS President, during Young Physicians event



pcms people

PCMS Awardees 2012, continued from insert

The Vanitha Appadorai Vaidya, MD, Award for Humaneness in Medicine

Rachael Susan Truchil, MD, MPH



Dr. Truchil is currently a third-year resident in Internal Medicine at the Hospital of the University of Pennsylvania in the Primary Care Track. During her outpatient training she worked at many community clinics including The Jonathan Lax Center which is a major provider of HIV care and services for the urban HIV positive population in Philadelphia and Prevention Point Street-Side Health Project which is an acute care clinic housed in a needle exchange clinic that provides basic medical services to some of the most medically underserved populations in Philadelphia. She is also the resident Firm Chief at the Penn-supported Refu-

gee Clinic which provides initial care and screening to new refugees relocating to Philadelphia.

Dr. Truchil earned her medical degree from the University of Pennsylvania School of Medicine in 2009. During medical school she volunteered at a local needle exchange program and at Planned Parenthood. She was a teaching assistant for Introduction to Public Health and Health Care in the United States. During her fourth year of medical school she won the Ken Ginsburg Soul of Medicine Award. Dr. Truchil then stayed at Brown to complete her Masters in Public Health where she researched disparities in receiving recommended cancer screening tests including mammograms, Pap tests, and colonoscopies.

After residency, Dr. Truchil plans to work at Geisinger Medical Center in Danville, PA, where she will practice as an outpatient primary care physician. Dr. Truchil will also serve as a preceptor of medicine residents and be involved in developing quality improvement initiatives designed to deliver better and more efficient outpatient care.

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