

Philadelphia Medicine



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PCMS signs onto DocBookMD

DocBookMD is a mobile, secure HIPAA-compliant smartphone platform for your iPhone, iPad or Android device, supplied at no charge to PCMS members thanks to the generous sponsorship of PMSLIC.

It provides demand messaging: Send and receive secure HIPAA-compliant messages, multi-media collaboration. Send high resolution images, e.g., of X-rays, EKGs or wounds and fast look-up of your County Medical Society colleagues.

As physicians, you are always looking for ways to manage hectic professional schedules. DocBookMD will help you save time and prevent delays at Point-of-Care. We invite you to register today directly from your iPhone, iPad or Android device and see for yourself how DocBookMD can help you.

Getting started

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DocBookMD® 3.3 key features:

- Exclusively for members. PCMS membership and activation is required.
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PAMPAC supports statewide justices who are fair minded and understand physicians' issues

To pave the way for court decisions that will have a positive impact on your medical practice, PAMPAC supports statewide justices who have two key attributes: they are fair-minded and

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understand physicians' issues. In 2009, PAMPAC support was pivotal in electing our preferred candidates for Supreme, Superior, and Commonwealth Courts.

In the 2010 election, PAMPAC had an excellent record with wins by state and federal legislators and in the governor's office.

In the 2011 statewide judicial election, PAMPAC supports Anne Covey for Commonwealth Court and Victor Stabile for Superior Court. Both candidates demonstrate a depth of knowledge and appreciation about the issues that impact our profession. Both candidates will attend the PAMED Annual Meeting.

Mr. Stabile, a Cumberland County attorney in private practice, is the PAM-
See PAMPAC supports on page 3

PCMS NEWS

PCMS solicits nominees for awards

The Philadelphia County Medical Society requests your nominations for the following Awards:

- **Strittmatter Award** – Since 1923, the Strittmatter Award, the Society's most prestigious scientific award honors a PCMS physician who has demonstrated to the Society the most valuable contributions to the healing art, surgical or medical. Requirements: A physician colleague should submit the nominating letter(s), and include the candidate's current c.v.
- **Cristol Award** – Presented to a PCMS member who has made valuable contributions to the Society. Requirements: Nominated by a physician member, the letter of nomination should include the candidate's activities in the Medical Society.
- **Practitioner of the Year Award** – Presented to a PCMS member for excellence in patient care and community service. Requirements: Letter(s) of nomination may be sent by physician colleagues, medical students and staff. Please include a current c.v. and written examples of community service.
- **The Dr. Vanitha Appadorai Vaidya Award for Humaneness in Medicine** – Presented to a PCMS Resident/Fellow physician for their skills in working with people, patients, and their families and understanding human as well as clinical needs. Medical students, Physicians and Professional Staff are urged to submit nominating letter(s) and include written examples of their nominee's humaneness.

Please send your nomination letters along with the candidate's appropriate background information to Award Chair, PCMS 2100 Spring Garden St., Philadelphia, PA 19130. DEADLINE: JANUARY 1, 2012. You may also e-mail your nomination letter to: stat@philamedsoc.org. For information phone 215-563-5343, Ext.113. The Awards will be presented during the PCMS President's Installation on June 9, 2012.

Philadelphia Medicine



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Editorial

Message to Washington – simplify the process

By Lynn Lucas-Fehm, MD, JD



On May 18, 2011, an ACO Town Hall Meeting took place at PCMS headquarters. Physicians from numerous specialties, age groups, private and academic settings were in attendance to hear a presentation by Dr. Barbara Connors, Chief Medical Officer from the Centers for Medicare and Medicaid Services, Region III.

Following her overview of the ACO process, the question and answer period began. Two things became overwhelmingly clear: first, there is no straightforward outline for successfully creating an ACO; and second, the process seems almost as complicated as the tax code.

As an optimist, I began to look for something positive that could arise from an evening that seemed to produce frustration in so many present. My quest was answered when it dawned on me that within the room filled with physicians from all specialties, practice sizes and backgrounds, there was a sense of unity. Doctors found common ground in the recognition that ACOs like the other acronyms we deal with on a daily basis (HMOs, PPOs, EHRs, PQRI, etc.) are all overcomplicated administrative nightmares created by lawyers and business professionals, not physicians. This same frustration is shared by our patients who often feel as if they are at the mercy of the healthcare system more that comforted and healed by it.

The needless complexity of our healthcare system has created an environment in which physicians and patients have a common goal. In short, there is one thing we can agree on: physicians and patients should unite to make our medical system less complicated. The administrative layers that the patient and physician currently traverse have eroded what used to be a sacred trust known as the doctor patient relationship into a time controlled appointment defined by CPT codes and RVUs.

I am not foolish enough to believe

that the practice of medicine can be completely free of the administration that is firmly entrenched in the healthcare delivery system. Reimbursement, insurance and quality measures require structure to assure oversight and accountability. However, to allow healthcare to become even more complicated is unacceptable. We must influence in the next few years evolving legislation by standing together.

It will not be easy. Some of you have heard the comment that the DC in Washington DC stands for divide and conquer. Each year various specialty groups negotiate with the government on behalf of their organizations and as a specialty physician I know that these

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interactions with our legislators must continue.

However, these specialist weighted meetings often do little more than place a bandaid on a small portion of a far larger wound. In order to effect meaningful change that will benefit all of us, there must be an equal commitment of time and energy to the realization that we are stronger together than we will ever be apart. A failure to unite will result in further erosion of our ability to influence and manage our own profession.

I suggest we send a unified message to Washington. Simplify the process. Quality, efficiency and reimbursement issues are difficult but certainly do not require the multilayer administrative process that increases costs and places unnecessary burdens on the physician and patient.

Dr. Lucas-Fehm is the 150th President of the Philadelphia County Medical Society

PAMPAC supports

from page 1

PAC supported candidate for Superior Court. He has defended physician clients and is a Republican. His opponent is David Wecht, an Allegheny County Common Pleas Court judge. The Pennsylvania Superior Court hears cases on appeal from county courts. PAMPAC supported Mr. Stabile in his successful primary election contest.

Anne Covey is the PAMPAC supported candidate in the election for Commonwealth Court. In the primary election, PAMPAC supported Ms. Covey and also Kathryn Boockvar in their respective contests. Covey is a Republican and Boockvar is a Democrat. Each won their respective party nominations. Both are attorneys in private practice in Bucks County.

After interviews with the PAMPAC Board, Ms. Covey was selected as the candidate to be supported in the General Election. The Commonwealth Court has jurisdiction over cases that are filed against the Commonwealth of Pennsylvania.

The November 8 statewide judicial election offers an opportunity to elect candidates to the bench whom we believe are best for medicine. With the proper resources, financing and grassroots involvement, PAMPAC can influence these elections.

Oct. 11 is the last day to register to vote before the Tuesday, November 8 election.

What have we learned in 2,100 years? The answer?
“The budget should be balanced, the Treasury refilled, public debt should be reduced, the arrogance of officialdom should be tempered and controlled, people must again learn to work instead of living on public assistance, and the assistance to foreign lands should be curtailed lest Rome become bankrupt.”
 This is Cicero in 55 BC. So what have we learned in 2,100 years?
 Apparently nothing.

Nearly all physicians must revalidate Medicare enrollment by 2013

Doctors are concerned that enrollment problems could lead some in good standing to get kicked out of the program.

Roughly 750,000 physicians in the Medicare program soon will be asked to revalidate their individual enrollment records during a massive anti-fraud effort required by the health system reform law. The Centers for Medicare and Medicaid Services hopes to weed out only the people who shouldn't have billing privileges, but physicians are concerned that legitimate health professionals could get caught up in the enrollment sweep by mistake.

CMS gradually will send revalidation requests by mail to more than 1.4 million health professionals — more than half of whom are doctors — between now and March 23, 2013, the agency announced on August 10. Physicians who have enrolled since March 25, 2011, will not be required to revalidate, because their applications were scrutinized under new screening criteria, CMS said. Those receiving a request would have 60 days to recertify their enrollment information, which for some doctors will be similar to the process they first used to sign up with the program.

“Failure to submit the enrollment forms as requested may result in the deactivation of your Medicare billing privileges,” CMS stated in the notice.

Physician practice administrators are being told to watch for the letters requesting revalidation. Practices are urged to begin revalidation as soon as they receive a request. Physicians can revalidate using paper applications or by using CMS's online enrollment system, called PECOS, the Provider Enrollment, Chain and Ownership System, which CMS says is the most efficient way to submit necessary information.

A massive re-enrollment effort

Medicare plans to revalidate the enrollments of more than 1.4 million individuals and facilities by March 23, 2013. Physicians account for more than half the list.

Health professional type	Enrollments	% of total
Physicians	750,836	52%
Nonphysicians	300,362	21%
Clinics, group practices and others	241,441	17%
Equipment suppliers	102,104	7%
Institutional professionals	49,926	3%
Total (as of March 2)	1,444,669	100%

Source: “Provider Screening Statement of Work,” Centers for Medicare & Medicaid Services, draft, May 27 (https://www.fbo.gov/download/7ed/7ede34997265f33746b202050761791c/Draft_SOW_Provider_Screening.pdf)

Doctors considered low risk

Health professionals are subject to different screening criteria during the Medicare enrollment process. Physicians and nonphysician practitioners fall in the limited-risk category; physical therapy, x-ray suppliers and currently enrolled home health agencies are in the moderate risk category; and new home health agencies and new equipment suppliers are in the high-risk category.

Type of screening	Limited	Moderate	High
Verification requirements set by Medicare	Yes	Yes	Yes
License verifications	Yes	Yes	Yes
Verification of Social Security numbers, taxpayer ID numbers, etc.	Yes	Yes	Yes
Unscheduled site visits	No	Yes	Yes
Fingerprint-based background checks	No	No	Yes

Source: “Provider Screening Statement of Work,” Centers for Medicare & Medicaid Services, draft, May 27 (https://www.fbo.gov/download/7ed/7ede34997265f33746b202050761791c/Draft_SOW_Provider_Screening.pdf)

pcms people

Demetrius Bagley, MD, professor of radiology and urology at Jefferson, has been awarded a Lifetime Achievement Award from the Endourological Society.

Gary Emmett, MD, director of inpatient pediatrics at Jefferson, was recently interviewed by *USA Today* on the topic of preventing sports injuries among student athletes.



The PCMS Board of Directors expressed appreciation to John Molitoris, 2nd year medical student, Temple, for his having assisted PCMS in recruiting Temple medical students.

Looking for Office Space?
 PCMS headquarters has up to 4,000 sq. ft. of office space available for lease with onsite parking. Call 215-563-5343, Ext. 101.

Thank you for your membership in The Philadelphia County Medical Society.



We thank you for your continued support. Your membership strengthens the Society and helps us fulfill our mission of aggressively advocating and supporting the interests of physicians and their patients. Please do your part to make your medical society stronger by encouraging your colleagues to become members of PCMS. You are our strongest advocate. Questions or comments? Call 215-563-5343, Ext. 101 or e-mail stat@philamedsoc.org.

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