

Progress Notes

MARCH 2020

MSMA Reporting the Progress of Missouri's Medicine

www.msma.org



MSMA: Advocates for ALL Medical Specialties

Each legislative session is different, but one thing they all have in common is the strong working relationship between MSMA and the state's medical specialty societies at the Capitol.

This year, we have joined forces with the Missouri College of Emergency Physicians to address problems presented by House Bill 2086. This well-meaning bill makes changes to emergency room forensic evidence collection. MoCEP and MSMA consider some of these changes to be overburdensome.

For example, the original language of the bill would require mandatory reporting of stab wounds deeper than one inch to law enforcement. There is no way to properly measure stab wound depth, and even if there was, it would run counter to the standard of care. This provision, and another that deals with mandatory annual forensic training for emergency room employees run afoul of MSMA policy.

MSMA and MoCEP will continue working with the bill sponsor to ensure proper collection of forensic evidence in the ER without overly burdensome regulations on physicians.

PHONE 2 ACTION

Echo MSMA's advocacy message and easily communicate with legislators by using Phone 2 Action. Sign up to receive text alerts with a formatted message for your specific state Representative or Senator. You may modify the message or send as is.

How to sign up for alerts: In the "To:" field of your phone's texting app, enter the numbers 52886. In the "message" field, enter the phrase: MOMEDICAL. You'll receive a reply directing you to a website for enrollment. Your home address should be used which will connect you to your specific legislators. You will then begin to receive texts from MSMA; click on the text, and you'll be able to send the message!

162nd Annual Convention

April 3-5, 2020 | Renaissance St. Louis Airport Hotel | www.msma.org/annual-convention

GENERAL SESSIONS



Friday, April 3 | 1:30 pm
MO HealthNet Update

Kirk Mathews, MBA
Chief Transformation Officer
MO HealthNet
Jefferson City, Missouri



Saturday, April 4 | 10:00 am
Vaping: Public Health Scourge or Safer Way to Use Nicotine?

Donald Bohnenkamp, MD
Associate Professor, Psychiatry
Washington University School of Medicine
St. Louis, Missouri



Friday, April 3 | 3:30 pm
To CBD or Not to CBD? That is the Question for Medical Practitioners

Merrill Norton, PharmD., DPh, ICCDP-D
Clinical Associate Professor
University of Georgia
College of Pharmacy
Athens, Georgia



Saturday, April 4 | 1:30 pm
Stop the Bleed/ Trauma First Aid

Laurie J. Punch, MD
Associate Professor of Surgery
Washington University School of Medicine
Acute and Critical Care Surgery
Barnes-Jewish Hospital
Co-Director, Stop The Bleed STL
St. Louis, Missouri



Saturday, April 4 | 8:00 am
Artificial Intelligence and Machine Learning in Health Care

Kent Bottles, MD
Thomas Jefferson University
College of Population Health
Philadelphia, Pennsylvania



Saturday, April 4 | 3:30 pm
Corona Virus Update

Randall W. Williams, MD
Director, Missouri Department of Health and Senior Services
Jefferson City, Missouri



Insurance Market Sees Increase in Premiums

Missouri physicians have enjoyed a stable "soft" market for professional liability insurance since the 2003 premium spike and the subsequent legislative passage of multiple tort reform efforts led by MSMA. The market is now beginning to transition to a "hard" market with an increase in premiums.

Your MSMA Insurance Agency is an independent agency that can assist you in identifying options with multiple carriers: ISMIE, Medical Protective, Medical Liability Alliance, MMIC, NORCAL Mutual, Pro Assurance, and The Doctors Company. Call 866-676-2467 for more information.



162nd (2020) House of Delegates Proposed Resolutions

View full resolutions at www.msma.org/proposed-resolutions

Reference Committee A

Start Time: 10:00 am / Friday, April 5

Resolution #1

MSMA Women Physicians Section

RESOLVED, that the MSMA Bylaws Chapter XIII be created to recognize the Women Physicians Section, and that in all places where a Section is mentioned in the MSMA Constitution and Bylaws that Women Physicians Section will also be added.

Resolution #3

Gender Equality in Healthcare

RESOLVED, that our Missouri State Medical Association support gender equity throughout all aspects of medical practice and at every level of physician training including, but not limited, to treatment, performance evaluation, career promotion, publication, research funding, financial compensation, and representation among healthcare leadership, and be it further

RESOLVED, that our Missouri State Medical Association encourage hospitals, academic institutions, and other healthcare organizations in Missouri to a) use objective, gender-neutral criteria in pay structures and processes of promotion, and b) adopt institutional transparency of compensation and regular gender-based pay audits.

Resolution #5

Ensuring Affordable Insulin

RESOLVED, that our Missouri State Medical Association support legislation capping out-of-pocket insulin costs at an affordable level for individuals and further encourage our American Medical Association to support similar legislation.

Resolution #9

Early Entry Pathway to ABIM Initial Certification Examination

RESOLVED, that the MSMA recommend that the ABIM offer an early entry pathway to initial certification examination sometime between May and June of the final year of residency for Internal Medicine residents that (1) have participated in their in-service examination during each of their first two years of Internal Medicine residency, and (2) have an anticipated training completion date on or before August 31st in that same calendar year, and (3) have provided a completed program director's report; and be it further

RESOLVED, that the MSMA recommend that the ABIM continue to provide the option of the mid-August initial certification examination for graduating Internal Medicine residents of that same calendar year.

Resolution #10

Medication-Assisted Treatment for Opioid Use Disorder in Correctional Facilities

RESOLVED, that our Missouri State Medical Association will adopt policy congruent to the American Medical Association's position, as stated in resolution H-430.987, to support legislation that (a) encourages or requires correctional facilities to assess incarcerated or detained individuals for opioid use disorder, (b) encourages or requires correctional facilities to make available evidence-based treatment for opioid use disorder, including initiation and continuation of Medication-Assisted Treatment (MAT) in conjunction with counseling, to all incarcerated or detained individuals including pregnant women, or (c) expands funding for such assessment and treatment.

Resolution #11

Surprise Billing

RESOLVED, that Missouri Healthnet & all Commercial Health Insurers of Missouri shall not require credentialing of exclusively hospital based healthcare providers (both hospital employed and non-hospital employed) at in-network hospitals, and shall reimburse the services of these same healthcare providers from the date of acquisition of their hospital privileges at fair market-value in a timely fashion and with independent dispute resolution as described by current AMA policy listed below:

"The out-of-network payments shall be keyed to the market value of physician services and that maintains a level playing field for future in-network contract negotiations. Any payment process for out-of-network care should ensure that timely (i.e. within 30 days of claim submission), upfront payment is made from the insurer that is of an amount that is commercially reasonable and in line with the services provided by the physician. Legislation should provide for a robust independent dispute resolution (IDR) mechanism that incentivizes all parties to act fairly and reasonably from the start in setting charges and payment amounts, without ever needing to be invoked. Then for those circumstances where the insurer's up-front payment is insufficient (whether due to factors such as the complexity of the patient's medical condition, the special expertise required, comorbidities, or other factors unique to that provider or geographic area), the IDR process itself will allow for a quick, efficient, and easy resolution, without the need for attorney involvement or costs to the federal government." 8; and be it further

RESOLVED, that Missouri Healthnet & all Commercial Health Insurers of Missouri shall immediately provide limited credentialing for all non-exclusively hospital based healthcare providers (both hospital employed and non-hospital employed) that provides services for patients admitted through the emergency department at in-network hospitals, and shall reimburse the services of these same healthcare providers from the date of acquisition of their hospital privileges at fair market-value in a timely fashion and with independent dispute resolution as described by current AMA policy listed below:



“The out-of-network payment shall be keyed to the market value of physician services and that maintains a level playing field for future in-network contract negotiations. Any payment process for out-of-network care should ensure that timely (i.e. within 30 days of claim submission), upfront payment is made from the insurer that is of an amount that is commercially reasonable and in line with the services provided by the physician. Legislation should provide for a robust independent dispute resolution (IDR) mechanism that incentivizes all parties to act fairly and reasonably from the start in setting charges and payment amounts, without ever needing to be invoked. Then for those circumstances where the insurer’s up-front payment is insufficient (whether due to factors such as the complexity of the patient’s medical condition, the special expertise required, comorbidities, or other factors unique to that provider or geographic area), the IDR process itself will allow for a quick, efficient, and easy resolution, without the need for attorney involvement or costs to the federal government.”

Reference Committee B

Start Time: 10:30 am / Friday, April 5

Resolution #2

Eliminating Barriers in Rural Communities for Cardiac Rehabilitation

RESOLVED, That the Centers for Medicare and Medicaid Services, National Coverage Determination for Cardiac Rehabilitation Programs rules be modified to allow for cardiac rehabilitation programs to operate with the general supervision of a physician when an Automated External Defibrillator (AED) is immediately available, and the patient is attended by nursing staff currently trained in Basic Life Support and AED use; and be it further

RESOLVED, that the MSMA forward this issue to the American Medical Association (AMA).

Resolution #4

Minimum Standards for Parental Leave during Graduate Medical Education Training

RESOLVED, that the Missouri State Medical Association support efforts asking the American Medical Association (AMA) to urge the American College of Graduate Medical Education, the American Board of Medical Specialties, and other relevant stakeholders to adopt minimum requirements for parental leave during residency and fellowship training in accordance with AMA policy H-405.960, and be it further

RESOLVED, that the Missouri State Medical Association endorse the concept of equal parental leave for birth and adoption as a benefit for resident physicians, medical students, and practicing physicians regardless of gender or gender identity.

Resolution #6

Non-medical Exemptions for Immunizations

RESOLVED, that our Missouri State Medical Association support the elimination of non-medical (religious, philosophical, or

personal) exemptions from mandated pediatric immunizations and, in the alternative, support stricter guidelines for religious exemptions to immunizations.

Resolution #7

Research and Recreational Marijuana

RESOLVED, that the Missouri State Medical Association will make it known that we strongly oppose the legalization of recreational marijuana in Missouri until further research can better clarify the risks and benefits.

Resolution #8

Decriminalization of HIV

RESOLVED, that our Missouri State Medical Association advocate for repeal of legislation that stigmatizes and criminalizes individuals for HIV positive status; and be it further

RESOLVED, that our Missouri State Medical Association support repeal or amendment of legislation specifically penalizing individuals living with HIV for non-disclosure of seropositive status when science based measures of non-transmission have been attempted, such as but not limited to: a) condom use, b) use of antiretroviral treatment to the point of undetectable viral levels, c) use of pre- and post-exposure prophylaxis, and d) use of needle-exchange programs; and be it further

RESOLVED, that our Missouri State Medical Association support repeal or amendment of legislation specifically penalizing individuals living with HIV for exposure of others to bodily fluids scientifically proven not to lead to HIV transmission.

Resolution #12

Ensuring Network Adequacy for MO HealthNet Patients

RESOLVED, that the MSMA support legislation that require any Missouri Hospital System or its subsidiaries that accept reimbursement for inpatient Medicaid services to:

1. Credential with Medicaid all of its employed outpatient primary care and specialty physician and allied healthcare provider network

2. Provide outpatient services for Medicaid patients via its employed outpatient primary care and specialty physician and allied healthcare provider network

3. Provide new and existing Medicaid patients with the same opportunity for access to their employed outpatient primary care and specialty physician and allied healthcare provider network as they do for new and existing Medicare and commercially insured patients;

and be it further RESOLVED, MSMA support legislation that reinvests any savings from decreased utilization of Emergency Department and Hospitalizations of Medicaid patients back into the Medicaid healthcare provider network.

View full resolutions at
www.msma.org/proposed-resolutions





Missouri State Medical Association
113 Madison | P. O. Box 1028 | Jefferson City, Missouri 65102
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MARCH 2020



MARCH VOLUNTEERS

- Louis Del Campo, MD - Springfield
- Amanda Turner, MD - Nevada
- George Hubbell, MD - Lake Ozark
- William Turner, MD - Nevada
- Lent Johnson, MD - Hannibal
- Joanne Loethen, MD - Prairie Village, KS
- Joseph Corrado, MD - Mexico

Get involved as the Physician of the Day during the legislative session. Meet your local legislators and get introduced in the House or Senate chambers. It's a great experience and a great service. All specialties are welcome and encouraged to serve!

SIGN UP!

www.msma.org/physician-of-the-day

