



OSMA News Now

*The Latest News, Views, Updates, and Information for Physicians
from the Oklahoma State Medical Association*

May 28, 2010

Legislature Adjourns Today

Today is the final day of what is shaping up to be a very good legislative session for OSMA members. As we speak, bills are on Governor Henry's desk that will:

- Minimize budget cuts to the Oklahoma Health Care Authority, thereby maintaining Medicaid provider rates.
- Implement the Health Care Indemnity Fund, which will allow the \$400,000 cap on noneconomic damages contained in last year's lawsuit reform bill to take effect.
- Protect physicians who provide volunteer care at a school event from civil liability
- Give physicians and other health care providers a seat at the table of a new Health Information Exchange Trust, which will be the state entity responsible for managing federal grant funding for the creation of a state health information exchange.

We are not at the finish line yet, but we have high hopes for a very successful end to our legislative session. Keep watching for further updates from OSMA as these bills are implemented.

PhysiVersion 5010 of the HIPAA standard transactions go into effect January 1, 2012. Will you be ready?

Version 5010 of the HIPAA transactions will be required for use by physicians and other health care providers, payers and clearinghouses on Jan. 1, 2012. Version 5010 corrects technical issues, accommodates new business needs, and provides overall improvements from the current 4010 version. If you currently conduct electronic administrative transactions, such as checking a patient's eligibility, filing a claim, or receiving a remittance advice, either directly with a health plan payer or a clearinghouse, you will need to be prepared to send and receive only the 5010 version of the HIPAA transactions starting on the compliance deadline.

The American Medical Association (AMA) can help! The AMA has various resources to help you implement the 5010 HIPAA transactions. Start preparing today to prevent future cash flow interruptions and disruptions in transaction processing.

Complimentary AMA Web resources available:

www.ama-assn.org/go/5010

- 7 Steps Practices Can Take Now to Prepare for 5010
- 5010 Project Plan Template – Helping Practices Prepare for the New HIPAA Standards
- 5010 Checklist
- 5010 Fact Sheet Series
 - #1 HIPAA 101: How It Started and What's New
 - #2 5010 Timeline: Getting the Work Done in Time for the Deadline
 - #3 The Language of HIPAA
 - #4 What's Different in the 5010 Transactions
 - #5 Testing Your Readiness for the 5010 Transactions
 - #6 Complying with the HIPAA Transactions and Code Sets

AMA Business Products publications and training available:

www.amabookstore.com

- AMA HIPAA School – an online training solution to achieve HIPAA and HITECH compliance. Visit ama.hipaaschool.com
- HIPAA Plain & Simple, second edition: A Health Care Professionals Guide to Achieve HIPAA and HITECH Compliance
- EHR Implementation: A Step-by-Step Guide for the Medical Practice
- Policies and Procedures for the Electronic Medical Office
- Tools for an Efficient Medical Practice

In addition to the 5010 HIPAA transactions, practices also need to be implementing the ICD-10 code set to meet the Oct. 1, 2013 compliance deadline. Visit www.ama-assn.org/go/ICD-10 to access various ICD-10 related resources.

Congress and the Sustainable Growth Rate (SGR)

According to the AMA, House leaders reached agreement late Thursday night on a revised extenders package (H.R. 4213) that they may bring to the floor today before leaving for the week-long Memorial Day Congressional recess. The SGR provisions in the new proposal include a 2.2 percent Medicare physician payment update for the remainder of 2010, a 1 percent update for 2011, and a return to the current SGR formula in 2012—which will result in an estimated 33 percent payment cut that year.

The overall price tag for the bill was reduced in response to concerns expressed by members of the Blue Dog Coalition, who objected to federal deficit increases that would have been produced by previous versions of the bill. Costly provisions that were reportedly dropped from the bill last night include extensions of COBRA benefits for the unemployed and FMAP (Medicaid) funding increases to the states.

There are reports that the House will vote on the SGR provisions of H.R. 4213 separately from the bill's other provisions, after which the two sections of the bill will be merged again and sent to the Senate.

With respect to the Senate, Majority Leader Harry Reid announced last night that there would be insufficient time following House action on H.R. 4213 to complete Senate consideration of the bill before Memorial Day. As a result, the Senate is adjourning and the 21 percent Medicare physician payment cut scheduled for 2010, which has been postponed three times already, will technically take effect on June 1. The Centers for Medicare & Medicaid Services already issued instructions to its contractors to postpone processing claims for Medicare physician services provided on or after June 1 for 10 days to provide time for Congress to complete its action and overturn the scheduled cut retroactive to June 1.

Because Senators will not be available to vote on the legislation today, there is some possibility that the House will also defer action until returning from the Memorial Day recess on June 7.

New grassroots messages will be circulated later today. **Physicians and patients must let their Representatives and Senators know that enough is enough—Congress is wreaking havoc on the Medicare program and physician practices across the country! Make your voice heard during the Memorial Day Recess!**

Following is a press statement issued by the AMA:

May 27, 2010

SENATE TURNS ITS BACK ON SENIORS AND MILITARY FAMILIES *Senators Leave for Vacation, Allowing Medicare Meltdown to Begin June 1*

Statement Attributable to: J. James Rohack, M.D.
President, American Medical Association

The Senate has turned its back on seniors, and America's physicians are outraged that Congress has deserted patients by failing to address this year's Medicare cut before the June 1 deadline. Senators are more interested in heading home for the holiday than in preventing a Medicare meltdown for seniors. The 21 percent Medicare physician payment cut has been looming all year, and yet all Congress has managed to do is repeated short-term delays. This is complete mismanagement of a health care program that America's seniors and the disabled rely on. Already, about one in four Medicare patients looking for a new primary care physician have trouble finding one, and congressional inaction will make it much worse.

"It is sad and ironic as we enter the Memorial Day holiday that Congress' inaction on the 21 percent cut puts health care for America's military heroes and their families at risk. TRICARE, the health care program for military families ties its payment rates to Medicare.

"Enough is enough: nine times in eight years Congress has delayed the cut and not fixed the problem. Congress needs to buckle down, stop growing the problem and fix it once and for all to save the Medicare and TRICARE programs for America's seniors and military families."