The Louisiana State Medical Society (LSMS) can trace its history to the late 1800’s and is the only member organization in Louisiana that represents all physicians – regardless of specialty or location. With more than 6,000 members, LSMS is a strong advocate focused on protecting physicians and their right to practice medicine so they can focus on providing quality healthcare to the citizens of this state.

**PHYSICIANS FOCUS ON PATIENTS. WE FOCUS ON PHYSICIANS**

The primary focus for all physicians is their ability to provide quality healthcare to patients. Access to care, for both insured and uninsured patients, is an ongoing issue that presents itself in every year. Healthcare policy issues are numerous, diverse, and shaped by all branches of government.

The LSMS continually advocates on behalf of physicians on the following issues:

- Protecting the Cap – Affordable medical malpractice insurance
- Protecting patient safety by ensuring the right professional is providing the right care permitted by his or her education, training, and skills
- Making Medicaid sustainable and engaging providers
- Ensuring an adequate healthcare workforce
- Ensuring fair and transparent insurance markets for patients, employers, and physicians
- Preserving the integrity of the practice of medicine
- Understanding the impacts prescriptions have on the practice of medicine
- Reducing red tape, regulations, and the hassle factor
- Utilizing technology to treat and care for patients

**PROTECTING THE CAP • AFFORDABLE MEDICAL MALPRACTICE INSURANCE**

Louisiana has an established malpractice cap which provides stability and affordability of insurance assuring Louisiana’s healthcare providers that they will be able to obtain and maintain insurance and continue to practice medicine in the state. At the same time, the system provides a viable fund for compensating claimants. The law in place provides a total liability exposure for damages of $500,000 exclusive of medical expenses. Healthcare providers who choose to enroll in the Patient’s Compensation Fund – which is 100% self-funded by the participants - remain responsible for coverage for the first $100,000 of each claim. The Fund then provides coverage for the second $400,000 plus lifetime related medical expenses for the injured party. The Louisiana Supreme Court has ruled that the legislature has sole authority to establish a cap which was instrumental in working toward continuing private and public healthcare costs. A shortage of physicians in Louisiana is acknowledged. Without this constraint on damages awarded for medical liability actions, we drastically reduce the chances of attracting new physicians or retaining the physicians currently providing healthcare in Louisiana.

**PROTECTING PATIENT SAFETY BY ENSURING THE RIGHT PROFESSIONAL IS PROVIDING THE RIGHT CARE PERMITTED BY HIS OR HER EDUCATION, TRAINING, AND SKILLS**

Physicians currently practice in teams with other healthcare professionals to provide comprehensive patient care. These patient-focused teams are an excellent health care model but must be physician-led to ensure quality, continuity, and efficiency in care. The LSMS strongly opposes any efforts to expand scope of practice beyond what is safely permitted by non-physician practitioners’ education, training, and skills. We further encourage legislators to support stronger self-identification rules to promote transparency and ensure that patients know and understand who is providing their health care.
MAKING MEDICAID SUSTAINABLE AND ENGAGING PROVIDERS

Physicians are critical to Louisiana’s healthcare system if it is to be cost-effective, otherwise, the state’s efforts to increase preventative care, improve medically necessary treatment for the chronically ill, and reduce inappropriate emergency department utilization will falter.

State leaders must realize that cutting physicians’ payments is not an effective tool for controlling healthcare costs and often exacerbates the cost of care. The already artificially low Medicare reimbursement is considered the floor for payments, but in Louisiana, Medicaid reimbursements are now roughly two thirds of what Medicare pays. In recent years, physicians who care for Medicaid patients have seen reimbursement rates cut by 15 to 45 percent, depending on their specialty. Providers cannot continue to make ends meet and pay common business expenses at this threshold.

Expanding Medicaid eligibility to individuals with income levels at or below 138 percent of the federal poverty level added thousands of patients into a system plagued with inefficiency and facing regular budget shortfalls. Our duty is to address lingering issues hindering the Healthy Louisiana program to ensure adequate access and promote healthier outcomes for Louisiana’s most vulnerable patients.

The LSMS continues to advocate for a Medicaid program that:
• Provides Medicaid recipients with access to quality healthcare
• Provides reasonable and timely payments to physicians who provide Medicaid services
• Relies on funding sources that are dedicated and stable, thereby allowing the program to remain fiscally sound and sustainable, even in times when the state of Louisiana is facing budget deficits
• Contains choices for patients, i.e. traditional insurance plans, managed care plans, benefit payment schedule plans, and purchasing pools to enable individuals to benefit from group rate premiums
• Prohibits discrimination against any physician specialty
• Provides incentives such as small business tax breaks, limited malpractice caps, or other non-reimbursement incentives for physicians who accept Medicaid patients
• Provides complete financial transparency so taxpayers can easily determine if their dollars are being used in a manner that maximizes access to quality care.

ENSURING AN ADEQUATE HEALTHCARE WORKFORCE

It’s no secret that Louisiana does not have enough physicians to meet demand. To address this shortage, it is critical that Louisiana ensures stable, state support for a physician’s education and training to help cultivate future generations of Louisiana physicians. In turn, this ensures stable access to healthcare for the citizens of this state. The LSMS believes we need to support physician-led healthcare teams that can safely meet the diverse needs of the state’s population. As a part of that, the Legislature is encouraged to consider innovative residency incentives such as forgiving loans (in part or in whole) for residents willing to work for a specified time in underserved locations or looking at creating regional residency programs with neighboring states.

ENSURING FAIR AND TRANSPARENT INSURANCE MARKETS FOR PATIENTS, EMPLOYERS, AND PHYSICIANS

The LSMS continues to advocate for fair contracting in the regulated insurance market. We will continue to fight against efforts to interfere with the physicians’ right to contract and protect the right of physicians to seek payment for the services they render. The LSMS also works hard to provide more standardization when dealing with health plans, such as standardizing prior authorization forms for prescription drugs. We believe strongly that as the hassle factor is decreased and physicians can spend more time treating patients, overall outcomes improve. In recent years, surprise billing has been a big part of offered legislation. Physicians hear daily about patients’ problems with insurance and believe that any surprise billing conversation must include the following: increased transparency for patients to understand their insurance, network adequacy requirements that ensure
patients can actually receive needed care and remain in-network, and dispute resolution mechanisms that recognize who the dispute is between and do not create an artificial rate. Additionally, insurance is big business and they are in business to make money. Stronger regulation on how a claim is denied and what avenues patients have would be a welcomed relief to both patients and providers.

UNDERSTANDING THE IMPACTS PRESCRIPTIONS HAVE ON THE PRACTICE OF MEDICINE

Pharmacists and medication play a critical role in healthcare. A strong working relationship between pharmacists and physicians can help to optimize patient care. In recent years, these relationships have been stressed due to insurance-forced prior authorizations which make it difficult for a physician to treat patients and frustrating for a pharmacist to efficiently complete their role. The back and forth volley that both are forced into does not enhance care collaboration. Additionally, the punitive reaction against both physician and pharmacist in the very real opioid epidemic has created further tensions. Many patients need medications to control pain at various times in life, such as post-surgery and for aging issues. When a physician writes a prescription, there is a reasonable expectation that it will be filled. A pharmacist has two options: fill the prescription or don’t fill the prescription. They are not legally allowed to change the medication prescribed or to short-fill it without physician approval. With today’s enforcement of opioid restrictions, more pharmacists are choosing not to fill the prescription at all, leaving patients in pain and without options. LSMS continues to support legislation that works to repair physician-pharmacist relationships and control an insurance companies’ ability to practice medicine.

Physicians prescribe medications based on scientific research which targets the medication to the diagnosis and the amount appropriate to provide a patient based on a number of factors – including interactions with other drugs. This is what gives physicians cause for concern in the debate for medical cannabis. To date, there has been no long-term research that scientifically shows health benefits of cannabis or the impact to a patient already on a drug regimen. LSMS encourages more research to identify the health benefits associated with the use of therapeutic cannabis.

REDUCING RED TAPE, REGULATIONS, AND THE HASSLE FACTOR

We need legislative solutions to cut through the red tape, regulations, and other unproductive elements that do nothing to improve quality and everything to interfere with physicians’ ability to practice medicine efficiently and effectively.

Physician manpower shortages, increasing practice business costs, and lower reimbursement rates are forcing physicians to make tough decisions. If patients cannot find physicians to provide the care they need, their only alternative will be the hospital emergency room and costs will skyrocket. In time, not only Medicaid patients, but even privately insured patients will have difficulty finding a physician and will be forced to absorb indirect costs associated with an inefficient health care system.

USING TECHNOLOGY TO TREAT AND CARE FOR PATIENTS

Expectations regarding healthcare quality, efficiency, and patient safety are constantly evolving. When you add technology to the mix, determining how to adapt while still providing hands-on, quality healthcare is challenging. Several evolving areas of medicine that we see on the horizon could require legislative authority or oversight involvement.

Telemedicine is not new. What is new is the use of telemedicine between patients and corporate telemedics who don’t have history or background commonly associated with a patient/physician relationship. Any physician will tell you that being able to help an ill patient who’s traveling and has a video phone app enabling them to see the patient is convenient and worthwhile. But to turn patients over to corporate telemedics who are vastly removed from our state and who have never personally treated that patient causes concern. In the past several years, Louisiana has enacted legislation, rules, regulations, and policy to oversee
telemedicine in the state. LSMS expects there will be more in the future and will carefully consider each piece on its merits and how it impacts Louisiana physicians.

Robotics and other forms of artificial intelligence (AI) in healthcare have made the biggest leap forward in recent years. However, in today’s world, human oversight is still required. Robotic and AI-assisted surgery have been proven to be less invasive and can shorten a patient’s recovery time. Using this technology allows physicians to use tiny incisions while performing complex procedures with more precision, control, and flexibility. What is major surgery can now also be minimally invasive. It’s a new horizon that physicians have embraced and medical schools have adjusted curriculums to focus on both in training and in ethics.

Electronic Health/Medical Records (EHR/EMR) and, in particular, how that information is used and shared along with Health Information Exchanges (HIE) are the newest components of medical technology. Individually, an EHR/EMR stores patient information and data for a specific physician on a specific patient. These systems make a patient’s record immediately available and in “real-time” during a medical appointment with that physician and were created as a way to manage/reduce paper charts, billing, and scheduling. With the advent of electronic prescribing of medications, the transfer of specific data one way became commonplace. With today’s advanced technology, the sharing of information is available which has the potential to allow primary care physicians and specialists to better coordinate care and manage protocols on shared patients. Perhaps the greatest benefit will be in government-subsidized healthcare arenas. The potential of sharing health records means that a patient who visits an emergency department will have their record shared with their primary care physician eliminating the duplication of costly tests and procedures. In coming years, LSMS expects there to be legislation related to how to successfully and confidentially share this information among providers.

PRESERVING THE PRACTICE OF MEDICINE

Physicians are the best advocates for their patients. LSMS works tirelessly to defend physician-led medicine because the knowledge, skills, and experience that fully-trained physicians offer is unequaled. Ensuring that health care professionals’ scope of practice is reflective of the training and education they have is essential to protecting the lives of adults and children from unsafe medical practices. The members of the LSMS are confident that state leaders and lawmakers — with input from patients, healthcare providers, employers, taxpayers, and others — can develop comprehensive solutions that are beneficial for patients and taxpayers. Louisiana has a unique opportunity to provide its most vulnerable patients with access to quality health care and the LSMS stands at the ready, as it has since 1878, to assist the administration and lawmakers during this most challenging time.