

# MSDC

## MEDICAL SOCIETY OF THE DISTRICT OF COLUMBIA

*eNewsline*

January 12, 2018

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### **DC Gets \$8 Billion Economic Boost from DC Physicians**

Earlier this week, [MSDC and the American Medical Association announced that DC physicians generated \\$8 billion in economic activity](#) for the District of Columbia. Nationwide, physicians contribute \$2.3 trillion in economic activity. The findings of [Physicians In the District of Columbia](#), part of the [2018 AMA Economic Impact Study](#), also highlighted the jobs, tax revenue and other contributions of District physicians:

- In the District of Columbia, physicians created a total of \$8 billion in direct and indirect economic output (i.e., sales revenues) in 2015. On average, each physician supported \$1,758,834 in output.
- In 2015, physicians supported 34,349 jobs (including their own), the total of direct and indirect positions. On average, each physician supported 7.59 jobs.
- Physicians contributed \$4.406 billion in direct and indirect wages and benefits for all supported jobs in 2015. On average, each physician supported \$973,050 in total wages and benefits.
- Physicians supported \$210.3 million in local and state tax revenues in 2015. On average, each physician supported \$46,440 in local and state tax revenues.

These findings demonstrate the significant economic power that physicians have. MSDC is using these findings to conduct robust advocacy in 2018 in favor of fair physician reimbursement and against administrative hassles that discourage practicing in the District.

### **This Year: Join MSDC in Using the \$8 Billion Physician Voice**

With the power of \$8 billion in economic activity, physicians have a strong voice on physician payment, opioid prescribing, women's health, behavioral health, scope of practice, and regulatory relief. The Medical Society speaks on your behalf on legislation and policy that impacts every physician, regardless of specialty or practice setting. MSDC is seeking physicians, particularly dermatologists and opioid prescribers, to participate in its advocacy. Contact Ed Shanbacker at [shanbacker@msdc.org](mailto:shanbacker@msdc.org) for details.

### **TOP STORIES**

- > [MSDC Plays Key Role in Healthcare Market Stability, Fair Physician Payment and DC Public Health](#)
- > [FDA: Minors Should Not Take Cough and Cold Medicines Containing Opioid Ingredients](#)
- > [Practice News: Upcoming Deadline for MIPS Data Submission](#)
- > [Public Health: Harsh Influenza Season Underway](#)

### **MSDC Helps Ensure Healthcare Market Stability, Fair Physician Payment and Public Health in the District**

Have you seen MSDC's [2017 Annual Report](#)? It provides an overview of the Medical Society's accomplishments last year on regulatory, public health and practice issues to:

- preserve practice stability and patient access to care despite uncertainty in healthcare

### **MSDC eNewsline**

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- fight for fair physician payment and minimize practice hassles and administrative burdens
- improve the health of Washingtonians

For previous editions, visit [eNews Archive](#).

## 2018's Top National Advocacy Issues

The AMA has outlined its [legislative and regulatory priorities for 2018](#) in support of a healthier nation. These issues include:

Protecting access to coverage	Telemedicine	Prior authorization
Medicare physician payment reform	Insurer issues	Regulatory relief
Drug pricing transparency	Ending the opioid epidemic	Scope of practice

## Top Issues For the District in 2018

If you haven't already indicated your top issue for physicians in the District, please take MSDC's [3-question survey](#). This survey will close on January 31.

## FDA Drug Safety Communication on Cough Medicine Use by Minors

### FDA Protects Kids from Serious Risks of Opioid Ingredients Contained in Some Prescription Cough and Cold Products by Revising Labeling to Limit Pediatric Use

The U.S. Food and Drug Administration [just announced](#) that it is requiring safety labeling changes to limit the use of prescription opioid cough and cold medicines containing codeine or hydrocodone in children younger than 18 years old because the serious risks of these medicines outweigh their potential benefits in this population. After safety labeling changes are made, these products will no longer be indicated for use to treat cough in any pediatric population and will be labeled for use only in adults aged 18 years and older. Read the [News Release](#).

## NATIONAL HEALTHCARE NEWS

### Pressure Mounts on Lawmakers to Fund CHIP as States Remain in Limbo

The [Wall Street Journal](#) reports that pressure is mounting on Congress to authorize long-term funding for the Children's Health Insurance Program because some states, including Virginia, will exhaust the funds from a short-term fix in December by as soon as the end of the month. Sen. Orrin Hatch (R-UT), one of the original authors of the CHIP legislation, has called on Congress to pass a five-year reauthorization in its January 19 government spending bill.

### Trump Administration Will Let States Require People To Work For Medicaid

Yesterday, the Centers for Medicare & Medicaid Services (CMS) announced a [new policy](#) targeted at "able-bodied, working-age Medicaid beneficiaries." The Trump Administration, [National Public Radio](#) reports, is encouraging states to require "able-bodied" Medicaid recipients to work or volunteer in order to keep their health insurance coverage.

### AMA: Fight Continues Against Anthem Pay Cut for Same-day Services

Physicians have vowed to continue pushing back against a health insurer's plan to reduce payment for significant, separately identifiable evaluation and management services that are provided on the same day a procedure is performed or a wellness exam is conducted. Indianapolis-based Anthem Blue Cross Blue Shield announced last week it would reduce the size of its planned payment cut for such services from 50 percent to 25 percent and move the implementation date back from Jan. 1, 2018, to March 1, 2018. Read more at [AMA Wire](#).

## PRACTICE NEWS

### QPP Checkup: CMS Submission System Now Available

#### Physicians Have Until March 31, 2018 to Submit 2017 MIPS Performance Data and Avoid a -4% Payment Adjustment in 2019

From the [Physicians Advocacy Institute \(PAI\) QPP Roundup, January 2018](#)

CMS launched its new [QPP submission system](#) to allow physicians and other clinicians to submit their 2017 MIPS performance data. Physicians have until March 31, 2018, to use the system and avoid a negative payment adjustment in 2019. You will need to know your Enterprise Identity Management (EIDM) account credentials to log in, then you will be able to report data as an individual or group practice and receive "real-time initial scoring," according to CMS.

Use of the CMS submission system is optional. Clinicians may still report their data using

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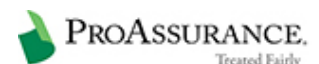
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## MSDC 1817 SOCIETY



other options including qualified clinical data registries (QCDRs), qualified registries, attestation, via electronic health records (EHR) system vendors, or the CMS Web Interface.

*Editor's Note:* CMS web interface users—which includes groups with 25 or more clinicians and some alternative payment model (APM) entities—have a shorter timeframe to submit quality data. Their submission window opens Jan. 22, 2018, and closes March 16, 2018.

To learn more about the CMS QPP submission system, please review the [CMS fact sheet](#). To learn how to create an EIDM account, review this [CMS user guide](#).

### Other Resources

["The Top 10 Changes to Understand for 2018 QPP Participation"](#) \*NEW\* from PAI  
[AMA MACRA Website](#)  
[CMS' Quality Payment Program Website](#)

### Medicare Webinars

The Philadelphia Regional Office of CMS is pleased to announce two upcoming webinars for the Quality Payment Program (QPP):

**MIPS Reporting for the 2017 Performance Year:** Tuesday, January 23, 2018 1:00 PM EST  
This webinar will focus on the requirements of the 2017 MIPS program, with an emphasis on the reporting requirements and submission mechanisms available to clinicians ahead of the March 31, 2018 reporting deadline. [Register or learn more.](#)

**Year 2 of the Quality Payment Program (Rescheduled):** Tuesday, February 6, 2018 at 1:00 PM EST

This webinar, which is rescheduled from the webinar originally slated for December 14, 2017, will focus on the changes to the program in 2018, including the MIPS low-volume threshold for 2018, new exemptions for clinicians in small/rural practices, scoring methodology, as well as changes to Advanced Alternative Payment Models (APMs). If you registered for the December 14th call, CMS asks that you register for the new call, as the dial-in information has been updated. [Register or learn more.](#)

### Hospitals Nationally Hit Hard By Medicare's Safety Penalties

As the federal government penalizes 751 hospitals for having too many infections and patient injuries, some states are feeling the cuts in Medicare payments more than others.

The penalties — now in their fourth year — were created by the Affordable Care Act to drive hospitals to improve the quality of their care. Each year, [hundreds of hospitals lose 1 percent of their Medicare payments](#) through the Hospital-Acquired Conditions Reduction Program.

Read the [full NPR article](#).

### MSDC NEWS

#### MSDC Office Closure

MSDC offices will be closed on Monday, January 15, 2018, in observance of Martin Luther King Jr. Day.

#### Member Benefit: Discounted Physician Leadership Training Final Cohort Starts on February 8. Don't Delay!

Register for the Maryland Physician Leadership Institute's [Certificate Program in Physician Leadership](#). MSDC members qualify for the Med-Chi member rate. Read the program description below or get more details [online](#). The first cohort is already underway, but the second cohort begins on February 8, 2018.

#### Program Description

Contrary to common belief, leadership is a learned quality. Character traits of charisma and personal magnetism are not the same as good leadership skills. All physicians are leaders in the workplace of their practice, no matter the setting. This program shares the relevant skills developed in the business world of quality leadership. It will also equip you with practical tools in finance, practice improvement, strategy and decision making, and empower you to



### CORPORATE PARTNERS



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participate in the leadership of your organization in the rapidly changing world of health reform.

## **DC Government Updates**

### **DC HealthLink Reminder: Get Covered, Stay Covered**

[DCHealthLink.com](http://DCHealthLink.com), the District's state-based health insurance exchange established under the Affordable Care Act, provides health insurance to more than 76,000 people through the small business marketplace. Despite the federal marketplace limiting its open enrollment period to six weeks, DC Health Link remains open until January 31, 2018, for plans with a coverage start date of March 1, 2018. For this reason, patients and practices should pay close attention to deadlines and coverage start dates.

### **DHCF Seeking Physicians for Health Information Exchange Policy Board**

The DC Department of Health Care Finance (DHCF) is seeking medical providers to fill two vacancies on the DC HIE Policy Board. The Board advises the Department of Health Care Finance regarding the implementation of secure, protected health information exchange and health IT policy initiatives. Providers with an interest and expertise in health information exchange and technology would be great additions to the Board. Applications are now being accepted online through the [DC Mayor's Office of Talent and Appointments- Board and Commissions](#).

### **DC DHS Seeks Medical Doctors for Case Review**

The DC Department of Human Services is seeking medical doctors to review cases for eligibility for Interim Disability Assistance, Medicaid, and other programs. Applicants are being sought on an as-needed basis and will be paid per case. Please email [Constance.weaver-thomas@dc.gov](mailto:Constance.weaver-thomas@dc.gov) or [Emily.busch@dc.gov](mailto:Emily.busch@dc.gov) with inquiries.

## **PUBLIC HEALTH**

### **Harsh Flu Season Underway**

#### **CDC: Early Season Influenza A(H3N2) Activity and Treatment of Patients with Influenza Antiviral Medication**

U.S. influenza activity has increased significantly over recent weeks with influenza A(H3N2) viruses predominating so far this season. In the past, A(H3N2) virus-predominant influenza seasons have been associated with more hospitalizations and deaths in persons aged 65 years and older and young children compared to other age groups. In addition, influenza vaccine effectiveness (VE) in general has been lower against A(H3N2) viruses than against influenza A(H1N1) pdm09 or influenza B viruses. Last season, VE against circulating influenza A(H3N2) viruses was estimated to be 32% in the U.S. CDC expects that VE could be similar this season, should the same A(H3N2) viruses continue to predominate. For this reason, in addition to influenza vaccination for prevention of influenza, the use of antiviral medications for treatment of influenza becomes even more important than usual.

On December 27, 2017, CDC issued [HAN 409](#) to

- Remind clinicians that influenza should be high on their list of possible diagnoses for ill patients because influenza activity is increasing nationwide, and
- Advise clinicians that all hospitalized patients and all high-risk patients (either hospitalized or outpatient) with suspected influenza should be treated as soon as possible with a neuraminidase inhibitor antiviral. While antiviral drugs work best when treatment is started within 2 days of illness onset, clinical benefit has been observed even when treatment is initiated later.

Read the [full health advisory](#).

### **Do You Know the Immunization Rates for DC?**

Based on Medicare fee-for-service administrative claims data (Part B), DC rates for 2016-17 influenza immunizations are 49.2% and for pneumococcal (either PCV or PPSV) DC rates are 52%. Rates are lower for males by almost 10% and the lowest rates are in Wards 7 and 8. For guidance, see [CMS 2017-18 influenza vaccine resources](#). The Delmarva Foundation, Quality Improvement Organization is emphasizing immunizations as part of its antibiotic stewardship efforts.

### **CDC: Multistate Outbreak of E. coli O157:H7 Infections**

CDC, several states, and the U.S. Food and Drug Administration continue to investigate a multistate outbreak of 24 [Shiga toxin-producing E. coli O157:H7](#) (STEC O157:H7) infections in 15 states. Since CDC's initial media statement on December 28, seven more illnesses have been added to this investigation. The last reported illness started on December 12, 2017.

The likely source of the outbreak in the United States appears to be leafy greens, but officials have not specifically identified a type of leafy greens eaten by people who became ill. Leafy greens typically have a short shelf life, and since the last illness started a month ago, it is likely that contaminated leafy greens linked to this outbreak are no longer available for sale. Canada identified romaine lettuce as the source of illnesses there, but the source of the romaine lettuce or where it became contaminated is unknown.

The entire press release is available [here](#).

## **EVENTS**

### **[AMA 2018 AMA National Advocacy Conference](#)**

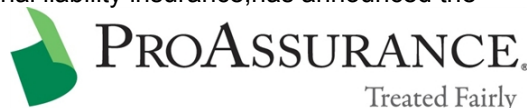
February 12-14, 2018

Grand Hyatt Washington (1000 H Street NW, Washington, DC)

The American Medical Association 2018 National Advocacy Conference is fast approaching. [Register today](#). This year's conference features a terrific lineup of guest speakers and a variety of activities and opportunities that will leave you more well-informed and empowered to advocate for patients, the medical profession and the future of health care.

### **Mark Your Calendars for ProAssurance's 2018 Seminar Series!**

ProAssurance, MSDC's 1817 Society Member and partner for medical professional liability insurance, has announced the dates of its 2018 loss prevention seminars. The schedule is below. and members will receive a brochure in the mail.



**Thursday, March 29, 2018:** American College of Cardiology (Washington, DC)

**Thursday, April 19, 2018:** Dover Downs Hotel & Casino (Dover, DE)

**Thursday, May 3, 2018:** Hyatt Regency Fairfax (Fairfax, VA)

**Thursday, May 17, 2018:** American College of Cardiology (Washington, DC)

**Thursday, June 14, 2018:** American College of Cardiology (Washington, DC)

**Thursday, July 12, 2018:** Bethesda Marriott (Bethesda, MD)

**Thursday, August 9, 2018:** Chase Center on the Riverfront (Wilmington, DE)

**Thursday, August 23, 2018:** Virden Center (Lewis, DE)

### **[1st International Perinatal TOTAL Health Congress](#)**

June 27-30, 2018

Sinaia, Romania

The main objectives of this historic Congress are to define the importance of the first thousand days of life and their lifelong health consequences; a focus on research, education and training, health systems and services, and health policies; and to highlight innovative and transdisciplinary projects that demonstrate the advantages of collaboration and integration in achieving TOTAL Health. Learn more at <https://www.perinatal2018international.org>.

## **MEDICAL REAL ESTATE LISTINGS**

*Brought to you by MSDC Corporate Partner GZ Medical Realty. Contact [Pete Papantoniou](#) for your real estate needs.*

### **Full Time/ Part Time Office Space Available**

Well-designed and attractively decorated office of three general internists has additional consulting room/exam room suite available. Looking for another general internist to share space and overhead in fully staffed and equipped internal medicine office. Shared call coverage is possible. Contact Alan Stone, MD, 202-466-8118 or [aws.md@verizon.net](mailto:aws.md@verizon.net).

### **Part Time/Full Time Office Space Available**

3 Washington Circle

Washington, DC 20037

Part time/full time office space available immediately at 3 Washington Circle. This includes a large consultation room, fully equipped examination room, lab drawing facility onsite, EKG machine, space for receptionist, space for medical records, shared use of copier, telephone system, wireless internet and waiting room. Ideal for general internist, medical subspecialist or surgeon. If interested, please call Mark Sklar, MD. 202-887-4769 or email [mmsklar@gmail.com](mailto:mmsklar@gmail.com).

### **Boutique Townhouse Medical Office for Rent Across From GWU Hospital/ Medical School**

900 New Hampshire Ave., NW

Washington, DC 20037

Boutique townhouse medical office for rent across from G.W.U. Hospital & School of Medicine. Very close to Foggy Bottom Metro. Three rooms, one on entry level with powered table/chair & overhead surgical light. Consultation room, reception/waiting room, & possibility of 2 additional rooms. Two-car driveway. Call/text Sheldon K. Gottlieb, MD, 301-509-3319, or email [skgottliebmd@comcast.net](mailto:skgottliebmd@comcast.net).



**2440 M Street NW**

2440 M Street NW

Washington, DC 20037

2440 M Street is a Class A 110,000 SF medical office building with a three-level parking garage in northwest Washington, DC. The building has abundant patient and physician parking. Please contact [Peter Papantoniu](#) at 301-961-1941 or see [the online listing](#) for more information.



### Alexandria Professional Center

4660 Kenmore Avenue  
Alexandria, VA 22304

Alexandria Professional Center is a 119,000 SF medical office building with over 30 medical and dental practices that offers close proximity to INOVA Alexandria Hospital and I-395. Contact [Peter Papantoniu](#) at 301-961-1941 or see the [online listing](#) for more information.



## MEDICAL LISTINGS AND OPPORTUNITIES

### Get Involved with the AMA Physician Innovation Network

Health tech companies are looking for physician ideas and input! As influencers in health care, physicians are invited to join the [AMA Physician Innovation Network](#), the platform that connects physicians and health tech companies.

Why Join?

- Connect with health tech companies that match your interest and expertise
- Influence the development of emerging solutions in health care
- Learn about health tech entrepreneurship from like-minded peers
- Explore both paid and volunteer opportunities with health tech companies
- Become a thought leader by sharing your experience and knowledge with others
- Access to experts through virtual panel discussions on topics such as "[Giving Physicians a Seat at the Health Care Innovation Table](#)"

Your ideas and your input are needed to improve emerging solutions for patients and physicians - [join today](#).

### Clinical Trial Openings for Innovative Proton Therapy

The Maryland Proton Treatment Center (MPTC) is dedicated to advancing scientific knowledge about the role of proton therapy in the treatment of cancer. MPTC currently has trials open for pediatric cancer patients and for cancers of the breast, central nervous system, prostate, head and neck, lung and all sites. For information about clinical trials and National Clinical Trial identification, visit [www.mdproton.com/ClinicalTrials](http://www.mdproton.com/ClinicalTrials).

Would you like to lose weight and do you have high cholesterol?



Has a doctor ever said that you have a condition called "fatty liver"?

### Join a Nutrition Study for Weight Loss and Metabolism

A no cost 16-week research program will provide you with information and tools designed to change eating habits, help people lose weight, and improve health.

We are testing whether diet changes can naturally increase metabolism, aid in weight loss, and help you reduce fat.

Qualified participants will receive at no cost, study-related:

- Weekly nutrition education classes
- One-on-one consultation with a registered dietitian
- Resting and post-meal metabolic rate and body composition testing

Interested? Please call 855-STUDY-18 today!  
Find out more at [www.PhysiciansCommittee.org/study](http://www.PhysiciansCommittee.org/study)

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