

MSDC

Message from MSDC President John W. Larsen, MD

May 1, 2015

Dear Colleague,

It has been six months since I was installed as the President of the Medical Society of the District of Columbia (MSDC). The Medical Society staff and leadership have been working diligently on your behalf. Some of the work, such as the recent permanent repeal of the Sustainable Growth Rate (SGR) Formula, has been reported on widely, but much goes under the radar. I would like to take this opportunity to update you on the Medical Society's work to help you and your patients.

Just this week, the MSDC Board met with the new Director of the DC Department of Health LaQuandra Nesbitt, MD, to review current regulatory matters and a broad range of issues, such as health disparities in the District and new leadership at the Board of Medicine. [MSDC has played an active role in various healthcare bills](#) introduced since the start of the year. MSDC has coordinated with stakeholders, testified at a public hearing, raised physician concerns and monitored a series of bills related to physician payment, patient care and practice requirements. It is desirable for the Medical Society and its leaders to work collaboratively with other organizations and providers to promote quality healthcare in our city and to join forces with national and regional partners when necessary.

MSDC is Working at the National, Regional and Local Levels

Nationally, the Medical Society collaborated with medical societies across the country to win a strong bipartisan majority on H.R. 2, "Medicare Access and CHIP Reauthorization Act" and repeal the SGR. It is telling that even a split Congress could agree to halt the continued temporary patches which were so disruptive to practices and patient care. [Now that H.R. 2 has been signed into law](#), the Medical Society will work to ensure that implementation of the law yields a more sustainable system. The Medical Society is also pushing to empower Medicare beneficiaries to contract directly with their physicians regardless of Medicare participation.

[The Medical Society has been critical in addressing a gap between the District's mental health law and federal patient privacy provisions](#) which could undermine care coordination. To close the gap, MSDC convened a collaborative group with specialty groups and stakeholders from various practice settings and helped secure introduction of B21-7, "Behavioral Health Coordination of Care Amendment Act of 2015." MSDC is collaborating with diverse groups so that the law will allow optimal patient care while upholding patient privacy requirements.

Further challenges in the District of Columbia include the maldistribution of clinical sites, legislative obstacles and complicated insurance practices. Insurer hassles, such as high deductibles, high copays and cumbersome prior authorization protocols, impact both physicians and patients. That is why the Medical Society strongly supports B21-32, "Specialty Drug Copayment Limitation Amendment Act of 2015," which reduces excessive copays on specialty drugs and helps patients afford their medications. The Medical Society also continues to educate Councilmembers and their staff on the administrative burden of insurer prior authorization protocols. These procedures not only consume practice resources and time but they also negatively impact patient care.

We do not expect one simple sweeping remedy, but we do expect to work with others to achieve cumulative improvements. The Medical Society has long been able to combine the voices of many specialties into a powerful, unified voice of medicine. The Medical Society tracks local and national issues, practice management protocols and keeps you informed. Contact your Medical Society at 202-466-1800 when you have concerns that are important to your practice.

Sincerely,

John W. Larsen, MD
President, Medical Society of the District of Columbia

P.S. Don't forget to save the date October 28 for MSDC's 2015 Annual Meeting and Reception.



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