

# NEWSLINE

Published monthly for members of the Medical Society of the District of Columbia

## Young Physicians Section Reconstituted and Ready for Action

The Young Physician's Section of MSDC recently held a kickoff meeting to reinvigorate the involvement of young medical professionals in the Society and in the DC Community. Representatives from several specialties were present.

With a focus on leadership and advocacy, the group outlined a series of activities to be held over the coming months. The first of these programs took place in March in conjunction with the national AMA meeting. Led by Christian Shults, MD, an educational program was developed for trainees, and was followed by visits to Capital Hill.

A fall program focusing on advocacy is being planned in collaboration with the Child and Adolescent Psychiatry Society of DC. The program will address health care reform and offer guidance on how young professionals can become more involved in the legislative process.

There will also be several social events offered by the YPS in the coming months. In July, a picnic will be held to welcome new trainees to the DC area and to encourage interaction across medical specialties. A full meeting of the YPS will be held in the fall and will serve as the planning session for the 2009-2010 academic year.

Residents and early career psychiatrists interested in becoming more involved should contact Kayla Pope at [kpopemd@gmail.com](mailto:kpopemd@gmail.com), Hind Benjelloun at [hbenjelloun@yahoo.com](mailto:hbenjelloun@yahoo.com) or Christian Shults at [shultsc@gmail.com](mailto:shultsc@gmail.com).

## Mandatory Provider Reenrollment for All DC Medicaid Participating Providers

In preparation for the implementation of the new District of Columbia Medicaid Management Information Systems (DCM-MIS), the **Department of Health Care Finance (DHCF) is requiring all providers to reenroll.** The purpose of the reenrollment is to ensure that we have updated contact and billing information on all providers as we will be using to process claims for the new claims system (DCMMIS) in October 2009. (The only exception to this requirement is for providers who were newly enrolled after October 1, 2008.)

Reenrollment will begin on April 6, 2009. Providers have the option to reenroll anytime between April 6, 2009 and September 30, 2009, but we have asked that providers try to adhere to the schedule below. **Providers who do not re-enroll will face termination and claims will not be paid.**

Public Providers – April 6, 2009  
Physicians – May 4, 2009

As DHCF moves towards using more efficient technology, providers are encour-

aged to re-enroll on line via the new DHCF website at [www.dhcf.dc.gov](http://www.dhcf.dc.gov). On line enrollment decreases the need for paper because the only paper information a provider needs to send to our vendor, ACS, are the required documents by provider type. Current DC Medicaid provider numbers will not change.

To help our providers with the reenrollment process we have planned four training sessions. You will find a list of venues where we will hold training sessions on page 3.

An on-line training module will be posted on the website for providers who are unable to attend, or who want to learn about the reenrollment process at their convenience. In addition, DHCF is currently coordinating with various provider associations (DCPCA, DCHA, DCHCA, DC Coalition) to coordinate provider specific trainings.

Look for more information coming soon. We will provide continued communications around the reenrollment activity. (See *REEINROLLMENT*, p. 3)

## Participate and Save on Premiums

As an MSDC member, you can attend a live ProAssurance Loss Prevention Seminar for only \$50 (non-members pay \$100). You get the benefit of solid risk management information, 2.0 hours of CME credit, and—potentially—up to 5% premium credit off your professional liability premium for full attendance. ProAssurance National Capital Insurance Company (formerly

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To view dates, content information, and register, go to [www.ProAssurance.com](http://www.ProAssurance.com) and click on “2009 Loss Prevention Seminars,” or refer to the ProAssurance seminar brochure mailed to you in February. *Register now at [www.ChildhoodObesity.com](http://www.ChildhoodObesity.com)—the first seminar dates are April 14 and May 12.*

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## It's Never Too Late to Join an MSDC Committee

Do you want to play an important role in MSDC activities? If so, consider serving on an MSDC committee. We are currently seeking volunteers to serve on the following five bodies: Finance Committee; Physician Health Committee; Professional Standards Committee; Leadership Development/Nominating Committee; Membership; and the Legislation Committee.

For details on the goals and objectives of each committee and/or to express interest in serving on a committee, contact MSDC President Peter E. Lavine, MD (email [plavinemd@aol.com](mailto:plavinemd@aol.com) or MSDC Executive Vice President K. Edward Shanbaker (phone 202-466-1800 x101, email [shanbaker@msdc.org](mailto:shanbaker@msdc.org)).

## AMA Announces Physician Class Action Against Wellpoint

*Lawsuit expands effort to halt insurer scheme that shifts medical costs to physicians and patients* LOS ANGELES – In an expansion of its ongoing effort to expose and prohibit an industry-wide health insurance scheme to defraud patients and physicians of proper reimbursement, the American Medical Association (AMA) announced it is among several medical societies that filed a class action lawsuit against WellPoint, Inc., the largest health insurer in the U.S. The lawsuit, filed in Los Angeles federal court, alleges that WellPoint colluded with others to underpay physicians for out-of-network medical services, resulting in patients paying an excessive portion of the medical bill. The AMA filed similar class action lawsuits last month against Aetna Health, Inc. and CIGNA Corporation.

“Physicians will not tolerate an apparent conspiracy that allows health insurers to play by their own rules without regard to patients, or the legitimate costs required

to care for them,” said AMA President Nancy H. Nielsen, M.D.

To view the individual legal complaints filed against Aetna, CIGNA or WellPoint, please visit the AMA Litigation Center website. **Contact:** Robert J. Mills, AMA Media Relations, (312) 464-5970

## NATIONAL CONFERENCE ON Childhood Obesity

June 18-19, 2009 • Washington, D.C.

*Does diet during pregnancy determine a baby's future health risks?  
Are industry and government responsible for childhood obesity?  
How can school lunch programs create healthier students?*

Hear top scientists and policy experts answer these questions and more at the National Conference on Childhood Obesity, taking place on June 18-19, 2009 in Washington, D.C. Details and registration at: [www.ChildhoodObesityConference.org](http://www.ChildhoodObesityConference.org).

### **Speakers include:**

David Barker, M.D.; Geetha Raghuvier, M.D., M.P.H.; Katie Wilson, Ph.D., S.N.S; David Ludwig, M.D., Ph.D.; Eric Finkelstein, Ph.D.; Barry Popkin, Ph.D.; Frank Biro, M.D.; Mikael Knip, M.D., Ph.D., Neal Barnard, M.D., Darlene Moppert, M.S., R.D., L.D./N., Joan Sabaté, M.D., Dr.PH. and others.

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# Health Care Notification Network

The Health Care Notification Network (“HCNN”) is a unique online service that delivers FDA mandated drug Alerts (Dear Doctor Letters or “DDLs”) to healthcare providers electronically, replacing the current paper process of notifying them via U.S. mail. The HCNN was developed over the past three years in collaboration with the FDA, US liability carriers, the AMA and medical societies, as well as other partners.

Physicians currently receive important drug Alerts in the mail a few times each month; a process that is slow, ineffective and, according to the FDA and liability carriers, a threat to patient safety and professional liability. The HCNN network delivers these Alerts immediately online to enrolled physicians, fulfilling new FDA guidance that calls for electronic delivery of drug Alerts.

The HCNN is governed and controlled by the Health Alliance, a not-for-profit organization, with network operations provided by Medem and the AMA. There is no advertising, selling of physician data or disclosing of physician information to manufacturers or other third parties. The HCNN is used only to send patient safety

Alerts to physicians, including DDLs and safety notices associated with clinical trials. It is free to physicians, is funded by those who use the network to send Alerts – manufacturers and the FDA – and is the only network of its kind.

Other features of the HCNN include:

1. Physicians are free to opt out at any time
2. Physicians can have a copy of the Alerts sent to their office staff
3. Alerts to physicians are targeted by specialty so that not all doctors get all Alerts (this is the same for the current paper/mail process)
4. Non-physician subscribers, including PAs and NPs will soon be able to use the HCNN
5. All of the largest pharmaceutical firms are now engaged with the HCNN

The HCNN now has email access to over 250,000 U.S. physicians and the network is expanding rapidly due to the value provided to physicians and the enrollment efforts of HCNN partners. Other information regarding the HCNN can be found at [www.hcnn.net](http://www.hcnn.net).

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## *(REENROLLMENT, from p. 1)*

ties as providers will be notified by using Remittance Advice banner messages, provider bulletins, fax messages and mailings. Up-to-date information will be posted on the new DHCF website (under the “Four Our Provider” tab) at [www.dhcf.dc.gov](http://www.dhcf.dc.gov). The website is a good source for “late breaking news,” which is posted regularly. Providers are encouraged

to sign in often to review the site information.

For questions on the process, please contact ACS Provider Inquiry at 202-906-9319. Hours of operation are Monday-Friday, 8 am -5 pm.

If your questions and/or concerns are not addressed by our provider inquiry representatives, please feel free to contact Donald Shearer, Director of Program Operations at 202-698-2000.

Date	Time	Location
Tuesday, April 7	1:00 – 2:30 PM	Washington Hospital Center True Auditorium
Tuesday, May 5	10:00-11:30 AM	Providence Hospital Ground Fl Lecture Hall
Tuesday, June 23	2:00-3:30 PM	Washington Hospital Center True Auditorium
Tuesday, July 28	2:30-4:00 PM	Providence Hospital Ground Fl Lecture Hall

# Patient Education – A Message from ProAssurance National

Educating patients about the scope and limitations of medical care and their responsibilities in the physician/patient relationship serves as a deterrent to malpractice litigation. An increasing number of physicians use written materials to ensure patients understand treatment options, surgical risks, medication use and the expected outcome of care. These materials, which supplement oral discussions and instructions, also help educate family members who play a vital role in patients’ recovery from illness or surgery.

Patients may be reluctant to ask questions about treatment. They may be embarrassed to ask, or to admit they do not understand the physician’s explanations. Family members—who do not share the patient’s professional relationship with the physician—also may be reluctant to initiate questions. A crucial part of a physician’s job in educating patients is to educate family members as well. To do this:

- Include a family member in informed consent discussions;
- Inform both patients and family members of the names of other doctors who might make rounds; and
- Ask colleagues to introduce themselves to the patients and families at their first encounter in the hospital.

Patients who are facing a hospital stay—and their families—typically have questions and concerns that can be addressed ahead of time through proactive communication.

Family members are in an exceptional position to become your health care ally, providing you take steps to educate them—along with patients—about hospital procedures and post-surgical expectations.

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# New Leadership, Available Funding: Howard University AIDS Education Training Center (AETC) Announces Program Changes and HIV-related Educational Support for Primary Care Providers

The AETC local performance site at Howard University is affiliated with The PMAETC is funded through HRSA's Ryan White CARE Act which supports a network of 11 regional centers to conduct targeted, multi-disciplinary HIV-related education and training programs for healthcare providers. The mission of the AETCs is to improve the quality of life of patients living with HIV/AIDS through the provision of high quality professional education and training.

The Howard Local Performance Site (LPS), an affiliate of the Pennsylvania/MidAtlantic AIDS Education and Training Center, (<http://www.pamaaetc.org/>), aims to provide state-of-the-art HIV-related clinical training and educational support to the following groups of local healthcare providers: Physicians, Nurses, Physician Assistants,

Nurse practitioners, Dentists and Pharmacists. The LPS offers a variety of educational interactions including didactics lectures from world renowned HIV experts, clinical case consultations and case conferences. Staff for the LPS can also coordinate 1-day clinical preceptorships at local HIV-provider sites. These activities are not exclusive to HIV providers and the Howard LPS welcomes participation and inquiries from primary care, family practice, surgical and other sub-specialty providers.

Although the Howard LPS has been in existence since 2003, under the leadership the new co-Principal Investigator, Dr. Lisa Fitzpatrick, MD, MPH, the program is now exploring new directions to enhance clinical experiences and opportunities for both primary care and HIV providers. Dr. Fitzpatrick is a board certified infectious

diseases physician who is actively engaged in HIV primary care. As a result, her insights and those of other clinical providers are being incorporated into the new training strategy for the local AETC. They aim to make HIV-related education relevant, practical and targeted to achieve better clinical outcomes for unidentified, newly diagnosed and clinically-experienced HIV-positive persons.

If you are interested in learning more about these and other exciting educational programs and opportunities thru the Howard AETC, please visit their website at <http://www.pamaaetc.org/lpsdc.htm>, phone 202-821-9736. To utilize their free PAMAAETC confidential HIV/AIDS consultation hotline, please call: 1-866-664-2382.



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# Add Spouses' Voice and Strength to Challenges Ahead

As you experience each day, physicians and their families are standing at a crossroad between the health care system we have and the tough reforms we know are required...between the increasing demands on physicians in practice and the struggle to find and maintain work/life balance in a medical marriage.

The AMA Alliance is prepared for the challenges that we face as members of the family of medicine in 2009. We are a vibrant organization of women *and* men, of *all* ages, with an increasing number of us from coast to coast, enriching each other's lives in the family of medicine with our diverse backgrounds and ideas, lending our talents and adding our voices to health promotion, legislative advocacy and fundraising for the future of medicine.

The Alliance and its members, physician spouses throughout the country, do good work in our communities, with and for our medical societies and medical schools and for our own families. Although we have careers and families to manage, we work hard to support medicine's goals and create new opportunities for physicians to provide the care that is needed. We raise funds for scholarships and free clinics, we talk to legislators and their staff, we share health information in our grade schools, local businesses and

community centers. We support each other at every stage in our medical family life.

As members of the Alliance, we are 25,000 voices in a nationwide health advocacy network, whether we participate individually via the Alliance Web site at [www.amaalliance.org](http://www.amaalliance.org) or team up with each other to promote health in our communities, whether we have a leadership role at the state, county or national level or whether we simply prefer to support the family of medicine with a \$40 membership check every year.

The Alliance at every level has unity of purpose in our efforts to support all physicians. In 2009, we seek greater representation within the family of medicine, a year that offers bright hope for a critical turning point in our country's history and its health care.

The time for putting off personal involvement has passed. We applaud the physicians and their families in the District of Columbia. We welcome all physician spouses who want to roll up their sleeves virtually or literally, and join this wonderful network of people, resources and opportunity. Belong, make a difference, and grow with the AMA Alliance in 2009. It matters to medicine's future; it can make a difference for you and your family.

*The mission of the American Medical*

*Association Alliance, Inc. is to partner with physicians to promote the good health of America and to support the family of medicine.*

Sandi Frost  
President  
[sandi.frost@ama-assn.org](mailto:sandi.frost@ama-assn.org) to ask any question  
[www.amaalliance.org](http://www.amaalliance.org) to join  
[www.screenout.org](http://www.screenout.org) to sample an Alliance project

## By30 Designs: Affordable Website Development Services for Members

MSDC is looking for new innovative services to provide to our members. In doing so, we have partnered with By30 Designs Website Development to offer our members discount prices on their website development needs. All medical professionals would benefit from having a website that will increase their exposure and improve communication with their patients and staff. By30 Designs develops customizable websites for all MSDC members at their discounted price of \$449.99, which is dramatically less than most website developers.

MSDC was immediately attracted to By30 Designs Website Development because of their desire to address the two biggest problems that consumers face today: highly inflated prices and inconsistent labor. By30 Designs can offer website development at a lower cost and with dependable service that will meet your needs.

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## New AMA Resource: Keep Your Practice Competitive

In a shifting environment in which physicians are under pressure to collect, track and report data about the quality of the care they provide, how can small physician practices develop the infrastructure needed to compete in today's marketplace? An increasing number of physicians are opting to collaborate with other independent—even competing—colleagues to respond to these pressures. In some cases, physician collaboration may allow physicians to jointly contract with health insurance companies and other third-party payers.

The American Medical Association (AMA) Private Sector Advocacy unit has released the second edition of the booklet "Competing in the Marketplace: How physicians can improve quality and increase their value in the health care market

through medical practice integration" to provide guidance on integration issues. Outlining various strategies for physician practice integration—including physician practice mergers, financial integration and clinical integration—this resource can help physician practices stay competitive while complying with antitrust laws. This second edition includes a new preface and appendixes that highlight the AMA's antitrust activities.

Visit the AMA Private Sector Advocacy Web site at [www.ama-assn.org/go/psa](http://www.ama-assn.org/go/psa) to access the booklet "Competing in the Marketplace: How physicians can improve quality and increase their value in the health care market through medical practice integration, second edition" and other educational resources.

# New Drug Could Slow Development of Alzheimer's Disease

By 2050, over 86 million Americans, or 21% of the population, will be age 65 or older. Over that same period, the number of people with Alzheimer's disease (AD) is expected to increase from 4.5 million to 13.2 million, making Alzheimer's disease research more important and more urgent than ever.

Researchers are hopeful a new medication targeted at the cause of Alzheimer's disease now being tested in patients will significantly slow the disease's development. Much evidence suggests that AD is caused by amyloid plaque deposits and tangles in the brain which lead to cognitive decline, memory loss and behavioral changes. Amyloid, one of the main components of plaques in AD, is known to bind to Receptors for Advanced Glycation End products (or RAGE for short) on the surface of the brain cells. Researchers believe the experimental drug – what they call a “RAGE antagonist” – may be able to stop

amyloid beta from building up, attaching and in turn, slow down Alzheimer's. This represents the latest frontier of AD research focused on attacking the root of the disease progression versus just improving the disease's symptoms.

The study will recruit the volunteers from 43 sites nationwide in cities including Washington, DC at Georgetown University (Principal Investigator, Brigid Reynolds, NP) and Howard University (Principal Investigator, Thomas Obisesan, MD, MPH, FAAFP). Researchers are looking for approximately 400 volunteers ages 50 and older with mild to moderate Alzheimer's disease to help test this new approach in a Phase II clinical trial conducted by the Alzheimer's Disease Cooperative Study (ADCS), a consortium of leading researchers supported by the National Institute on Aging (NIA), part of National Institutes of Health (NIH). The ADCS at the University of California, San Diego

(UCSD) will coordinate the 18-month, double-blind, placebo-controlled clinical trial with a 3 month follow up period (for a total of 21 months participation).

Physicians and nurses will monitor the participants during regular visits and measure the severity and progression of disease using standard tests of functional and cognitive abilities. Neither the researchers conducting the trial nor the participants will know who is receiving the study drug and who is getting the placebo.

Please help us spread the word about this groundbreaking research by disseminating information about the study to your eligible, interested patients.

To learn more about the study, contact NIA's Alzheimer's Disease Education and Referral (ADEAR) Center at 1-800-438-4380 or by email to [adear@nia.nih.gov](mailto:adear@nia.nih.gov). To view a list of the research sites or for information on dementia and aging, go to <http://www.nia.nih.gov/Alzheimers>.

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## An Important Message from Highmark Medicare Services

In response to customer feedback, Highmark Medicare Services is pleased to unveil the new "Enrollment Center" on our website at: <http://www.highmarkmedicare.com/enrollment>. This new Enrollment Center is designed to be a one-stop shop for information related to provider enrollment. Features of the Enrollment Center include: links to CMS' system to submit internet-based enrollment applications, links to all other CMS paper enrollment applications/forms, a comprehensive Enrollment Reference Guide, Frequently Asked Questions, and Tips/Tutorials to aide in completing enrollment forms.

We are working on additional enhancements to the Enrollment Center, including a decision logic table to assist new and existing enrollees in selecting the appropriate enrollment form(s) to complete, as well as a tool to check the status of your applications on-line. These enhancements should be available later this spring.

Please take a few minutes to familiarize yourself with this new site, and share this link with other staff members. <http://www.highmarkmedicare.com/enrollment>