# Westchester Physician

March 2017

Volume 33, Issue 3

### **PRESIDENT'S MESSAGE** Advocacy

One of the main benefits of your membership is the advocacy WCMS and MSSNY provide to all physicians in the state. Our team reviews all medical-related bills both in the Senate and House, and the governor's budget yearly. Of course, we lobby for our own issues and work with our lawmakers to propose new legislation to effect change in medical care and payments to the benefit of your patients and our members.

What may happen to the Affordable Care Act under the new President is on everyone's mind. Although many people were able to obtain insurance that they were not able to have before, a much larger percent of insured patients have had much higher associated costs for coverage and therefore decreased access. A MSSNY survey found that significant numbers of patients are facing deductibles imposing huge out of pocket costs before health insurers will even begin to pay for care. Nearly 21% of responding physicians indicated that  $\frac{1}{4} - \frac{1}{2}$  of their patients now face deductibles of \$2,500-\$5,000. The need and fight for good affordable health care for our patients remains on top of our priorities.

Reduction of the administrative burden is also a top priority. A MSSNY survey found that 83% of responding physicians indicated that the time they spend obtaining authorizations from health insurers had increased in the last three years, and nearly 60% indicated that it had increased significantly. A stunning recent report from the Annals of Internal Medicine found that, for every hour a physician spent seeing patients, another two hours was spent on paperwork. These are our current priorities; Assure more comprehensive physician networks including requiring plans to accept any willing physician; Reduce the time that health plans have to make medical necessity determinations, and require they be made by New York State licensed physicians practicing in the same or similar specialty as the physician recommending treatment; and Stronger regulation of pharmaceutical benefit manager (PBM) practices and assuring continuity in prescription drug coverage when formularies/prescription tiers change.

Fair payment for services involves our ability to provide services to our patients through our staffs of professional and non-professional

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GINO C. BOTTINO, MD President, WCMS

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#### **UPCOMING EVENTS**

MSSNY House of Delegates Friday, April 21—Sunday, April 23 Westchester Marriott Tarrytown, NY

MLMIC Dinner Thursday, April 11, 2017 Crabtree's Kittle House Chappaqua, NY

"Referral Rounds" Networking Thursday, May 4, 2017 Captain Lawrence Brewery Elmsford, NY

WCMS/WAM Annual Meeting Thursday, June 1, 2017 Westchester Country Club Rye, NY

#### WESTCHESTER PHYSICIAN

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> PETER J. ACKER, MD Editor

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#### FROM THE EDITOR... PETER J. ACKER, MD EVOLUTIONARY PEDIATRICS PART 2



In a column a few months ago I wrote about using an evolutionary perspective as a lens to examine aspects of pediatrics such as parental response to symptoms. I cited fever and cough as symptoms that can elicit worry and the degree of worry has its roots in our evolutionary past when the world was fraught with peril and it was extreme parental vigilance that ensured the survival of our species. Fever today usually means a simple viral illness whereas in years past it often portended disaster thus the disproportionate response from parents. Fear of snakes, for example, is another echo from our evolutionary past when we lived in wild terrains.

I have found that explaining things in terms of evolution is a good way to get parents to understand and thus be reassured. Plus it makes for an added level of interest in the routine physical exam appointments. Here is an example: many mothers often worry, especially so if it is their first baby about bony bumps in the skull. A casual caress of the infants head results in a sudden fear – what is that!? Can't be normal! Of course, I could just take a feel myself and tell it is completely normal, but I think it is more reassuring if an explanation can be given as to why that bump or ridge is there. In general, evolution is extraordinarily complex in that many different bodily systems and structures are changing and all of this is interconnected, so that the change in one trait will affect the way other traits can change. A primary tension, for example, is between two broad trends in primate evolution. The first is the development of a bigger and bigger brain which naturally requires a proportionately bigger skull. The second is our adaption of bipedalism which affects the structure of the hip bones with the result being that the pelvic outlet through which the head must push through during the birth process, becomes narrower. Of course, the two evolved in tandem – the bigger brain allowed us to manage our survival in a more sophisticated way and bipedalism allowed us to free our forelimbs to develop opposable thumbs. Our skulls changed to have plates of bone that were compressible and various bony prominences which had been required to buttress the muscles of a large mandible got scaled down. The remnants are the bumps parents feel.

Another example that comes to mind is the variation that we see in the ability of humans to focus with the far end of this spectrum is termed Attention Deficit Hyperactivity Disorder. In my mind's eye I can see a group of primitive humanoids on the open savannah hunting. The leader of the party, spear in hand is resolutely fixated on the antelope before him. It requires extreme focus to move with stealth. Towards the rear of the party is a completely different sort, turning is head one

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## Westchester County Medical Society



Come join us for our "REFERRAL ROUNDS" Networking Event Thursday May, 4, 2017

## Captain Lawrence Brewery

444 Saw Mill River Road Elmsford, NY 7:00pm

Is your referral pool too shallow? Have you been wanting to meet new referral physicians & Vendors? Come Join us for our REFERRAL ROUNDS Networking Event This is a great opportunity to meet physicians in primary care and different specialties to build your referral base...

## Referral Rounds Physician Networking Night Food, Drinks, Fun, Networking! Food and Beverages will be served

Members are encouraged to bring a non-member physician to this event as their guest! All members and guests are welcome at no charge.

**<u>RSVP in advance</u>**. Email Janine Miller, Executive Director at <u>jmiller@wcms.org</u> Please provide Name, address, Email & Telephone number of the attendee/s. THE MEDICAL SOCIETY OF THE COUNTY OF WESTCHESTER

THE WESTCHESTER ACADEMY OF MEDICINE CORDIALLY INVITES YOU TO ATTEND OUR

> EVENING LECTURE THURSDAY, MARCH 30, 2017 MOLLY SPILLANE'S 211 MAMARONECK AVENUE MAMARONECK, NY 10543



6:30 P.M.

EVENING LECTURE

New Developments in Qualified Retirement Plan Design for Medical Practices

#### Presented by Andrew E. Roth, Esq. Danziger & Markhoff, LLP

Seminar : This seminar will discuss New Developments in Qualified Retirement Plan Design for Medical Practices. Currently there are many types of retirement plans available to small business owners. Our presenter (Andy Roth) will discuss which types are beneficial to Medical Practices and, discuss ways in which medical firms can design and revise their retirement plans in order to increase partner contributions and reduce staff cost. Some of the topics covered will be: Types of qualified retirement plans, 2017 Contribution limits, Coordinating 401(k) plans and profit-sharing plans as a strategy to reduce staff costs. There will be several question and answer breaks, to answer questions about particular, or individual cases.

Andrew E. Roth is a partner of Danziger & Markhoff LLP with over 30 years of experience as an ERISA attorney. He is a frequent lecturer in the areas of pension, profit-sharing and employee benefits law. He has substantial experience in designing and implementing qualified plans for business owners that maximize deductible contributions on their behalf. His services include designing, drafting and obtaining IRS qualification for a broad range of defined contribution and defined benefit plans, as well as ensuring their continued compliance with applicable law.

No Cost for WCMS Members & Spouse or Guest. RSVP by Thursday, March 23, 2017 to Janine Miller, 914-967-9100 or by email jmiller@wcms.org Space is Limited.

## **PRESIDENT'S MESSAGE**

ADVOCACY

(Continued from page 1)

co-workers in our offices. With decreased "reimbursements" our ability to get many things done for our patients goes down and they feel neglected. As we condense into larger and larger corporate entities; our patients get less and less while on paper things seem to be working well. Some of our priorities to ensure fair payments are: Require insurers to offer patients coverage options for out of network care; Require insurer payment to physicians for time spent advocating for patients to receive necessary care or testing; Reduce the time frame in which health plans may recoup payments made to physicians; Assure fair payment for facility fees for physicians performing office-based surgical practices; and Assure patients can assign payment to their physicians regardless of participation status.

Medical Liability Reform continues to be a major issue in NYS, which has been difficult to effect change in. Diederich Healthcare showed that once again New York State had by far and away the highest number cumulative medical liability payouts (\$711,718,250), nearly two times greater than the state with the next highest amounts, Pennsylvania (\$374,018,550), and far exceeding states such as California (\$263, 874, 600)and Florida (\$248,911,150). A recent analysis from the website WalletHub listed New York as the worst state in which to practice medicine, in large part due to its overwhelming liability exposure as compared to other states. MSSNY supports several reforms that have been enacted in many other states. These reforms include: Placing reasonable limits on noneconomic damages; Identifying and assuring qualified expert witnesses; Strengthening the weak Certificate of Merit requirement; Limit physician liability for care to those individuals with whom there is a direct treatment relationship; and Assuring statements of apology are immunized from discovery. MSSNY also supports alternative systems for resolving liability claims such as Medical Courts or a Neurologically Impaired Infants Fund.

What we have managed to do and continue to do is

fight the legal lobby promoting bills that would increase our exposure. It is imperative that our legislators reject "stand-alone" measures to expand medical liability that would most certainly exacerbate these problems, such as legislation that would:

- Change NY's statute of limitations to a "date of discovery" rule Estimated 15% premium increase.
- Expand "wrongful death" damages to permit "pain and suffering" Estimated 53% premium increase.
- Permit the awarding of pre-judgment interest Estimated 27% premium increase.
- Eliminate statutory limitations on attorney contingency fees – Estimated 10% premium increase.
- Prohibit ex-parte interview by defense counsel of the plaintiff's treating physician.
- Change loss share rules regarding non-settling defendants.

Efforts to reform our medical liability adjudication system must be comprehensive!

Other efforts we are working on include:

Attracting & Retaining Physicians in NYS

Enhancing Quality of Care Through Peer Review

Enhancing Care Through E-prescribing

Enhancing Quality & Integration Through Health Information Network

**Eliminating Health Disparities** 

Quality through Physician-led Team-Based Care

Assuring Clinical Clerkship Slots for U.S. Medical School Students

**Public Health Initiatives** 

These initiatives are complicated and fraught with pitfalls that can make things worse, as opposed to better for us and our patients. It is akin to nuclear power; it all depends on how it is administered, and by whom. Like they say: "The devil is in the details!"

#### FROM THE EDITOR... PETER J. ACKER, MD EVOLUTIONARY PEDIATRICS PART 2

#### (Continued from page 2)

direction and another. It is that individual who hears the crack of a twig and notices the saber tooth tiger approaching. He sounds the alarm and they escape. Of course, the antelope has bounded off, but at least they have survived to resume the hunt. The point is you need diversity in a community in order to survive and therefore these opposite characteristics have remained in our genome.

I would be interested in other examples from any of readers of this column. You can email me at peter.acker411@gmail.com

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#### **BUSINESS OF MEDICINE LESSONS LEARNED IN BUSINESS SCHOOL** Rick Weinstein, MD, MBA

The biggest lesson I learned in business school was un-learning what I was taught probably from grade school all the way through residency. All our tests were graded and curved. You had to do better than the student next to you to get a better grade. You had to crush the SATs to get into the college you wanted. You had to do better than the other students at your college to get a coveted spot in medical school. Be the best medical student to get into the residency you want. Be the best resident to get the best fellowship. We have been raised in a purely competitive environment and are taught that our individual success is the key to achievement.

#### You Are Not Alone

Now you are working with other people in a practice. You are in a business environment and no one has taught you that the rules have changed. In business, oftentimes your partners' success means your success. If your partner is well respected in the community by patients and other doctors, his success will reflect on you. If your partner is considered a bad doctor or even worse to be morally questionable by others this will also reflect on you. As your partner gets busy, you will also benefit. Some days there will be patients that you end up seeing because your partner is not available. When you are too busy, it is critical to have a partner you can trust with your patients. The financial ebb and flow of normal business means there will be down times for you as an individual and for the entire business entity. Your ebbs will be mitigated by your partners during the down times.

#### The Rising Tide

There is a saying in the world of business that the rising tide lifts all boats. As your practice does well financially, everyone will benefit. A busy practice has opportunities that less successful practices do not. Once an orthopedic practice I previously ran got busy enough, we incorporated a physical therapy department. Then we leased a \$600,000 MRI. We were able to hire new doctors including a physiatrist. We hired physician assistants. This growth of our practice brought in millions of extra dollars to the practice. It was only through the success of all our doctors and the practice that we were able to grow and achieve tremendous financial rewards.

#### **Your Partners**

The other doctors in your practice are not your only partners. You need to partner with the businesses you work with such as the hospital or labs you utilize. Make fair deals with them for mutual benefit. Your office manager or organizational CEO is your partner. These people will help you succeed and you want to help them do their jobs. A large part of their job is aiding in your success. Part of being successful is knowing who not to partner with. Bad office managers need to be fired. Relationships with bad CEOs who are doing a bad job need to be terminated. Business school teaches you to watch your business and monitor your financial statements. If your group or partners are not transparent with showing you financial information ... RUN! I am a huge believer in transparency and if you are not getting information there is probably a reason.

#### **Lessons Learned**

The lessons in business school are to work with your partners for your mutual benefit. Continue to grow and develop your practice and the group practice. Monitor your successes and failures and learn from these results. Be smart who you partner with because your success is intertwined with their success.

Please reach out to me by email at <u>rix-termd@aol.com</u> for questions or topics you like me to address in this article.

#### With so much at stake, shouldn't you be represented by Kern Augustine?

The sad truth is, everything you've worked for can all disappear if you're not prepared for a government inquiry. Which is why if you or your practice is being investigated, you need counsel experienced and thoroughly knowledgeable in health law. At Kern Augustine, our goal is always to help you reach your goals by advising you on managed care, risk prevention, business planning, contracting and today's growing

maze of regulations. Yet, should you ever face careerthreatening litigation, rest assured that our expertise can help you feel as if your problems have disappeared. For more reassuring details, please call.

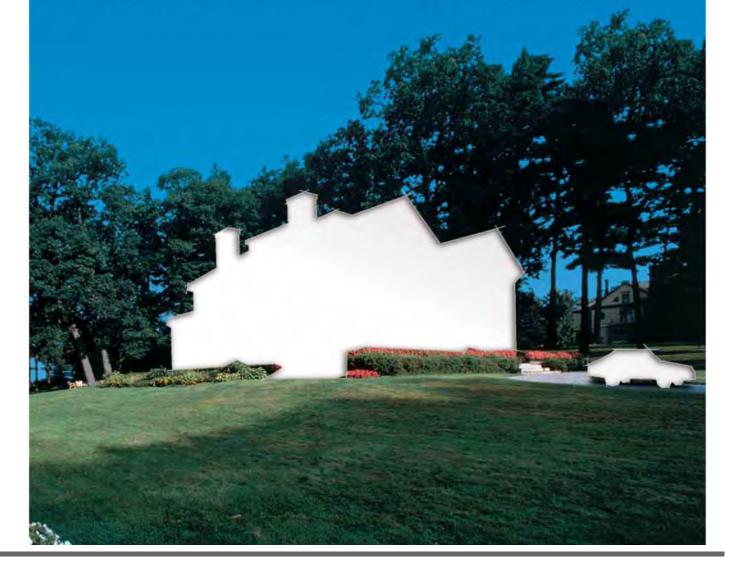
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#### **MSSNY LEGISLATIVE DAY RECAP**



**O**n Wednesday, March 8, 2017 MSSNY held its annual Legislative Day event. The Westchester County Medical Society represented the physician membership with a group of 10 physicians pictured above-Dr. Louis McIntyre, Legislative Committee Chair, Past President; Dr. Thomas Lee, Past President; Dr. Thomas Lester, MD, President; Dr. Paul Pechman; Dr. Karen Pechman; Dr. Andrew Kleinman, Past President MSSNY; and Dr. Kira Geraci-Ciardullo, MSSNY Speaker; and Dr. Bonnie Litvack, Assistant Secretary, MSSNY. MSSNY held an informational session for the morning program that included a legislative update by Morris, Auster, Esq., Senior Vice President and Chief Legislative Counsel MSSNY; a CME, a panel to discuss How Can we Protect the Physicianpatient Relationship?, and an update on the DSRIP/ Exchange. The panel included Senator Kemp Hannon, Chair, Senate Health Committee; Senator James Seward, Chair, Senate Insurance Committee; Assemblyman Richard Gottfried, Chair Assembly Health Committee; Assemblyman Kevin Cahill, Chair, Assembly Insurance Committee. Other speakers included Troy Oechsner, Deputy Superintendent for Health Department of Financial Services; Peggy Chan, DSRIP Program Director, New York State Department of Health; Assembly Majority Leader Joseph Morelle; and Senate Majority Leader John J. Flanagan. During this panel the audience was encouraged to participate through questions submitted via note card to be presented by Dr. Malcolm Reid, President MSSNY. The discussion was very informative.

The Westchester physicians along with Janine Miller, Ex-

ecutive Director were able to meet with many of our local legislators and their staff people including Senators Murphy, Latimer, Stewart-Cousins, Serino and Klein; Assemblymen Byrne, Otis, Abinanti, and Buchwald; and Assemblywomen Galef, Mayer and Paulin. Our group spoke about the importance of some of the items in the Governor's budget including: proposed funding for the Excess Medical Malpractice program; the registration and regulation of Pharmaceutical Benefit Manager (PBMs); regulation and taxation of E-cigarettes in the same manner as tobacco cigarettes; the proposal that would enable "comprehensive medication management protocols" between physicians, nurse practitioners and pharmacists; creation of the Health Care Regulation Modernization Team; the requirement that physicians receive a "tax clearance" as a pre-condition to receiving Excess Medical Malpractice coverage; repeal of "Prescriber Prevails in Medicaid & Medicaid Managed Care". There are also several other issues that were discussed with our local legislators including: Collective Negotiations; Due Process Protections; efforts to enhance physician involvement in peer review; reducing prior authorization hassles; Medical Liability Reform; reducing maintenance of certification burdens; expanding Date of Discovery; expansion of wrongful death damages; the prohibition of ex-parte interviews of plaintiff's treating physician; certification of certified registered nurse anesthetists (CRNAs); expansion of Podiatric scope of practice; establishment of corporate-owned "retail" clinics. Overall the day was a success, as many of our local legislators were engaged in the discussion of the issues that are most important to not only physicians of Westchester, but New York State as a whole. We appreciate all of those physicians who took time away from their patients to join us up in Albany. The work that they do on behalf of all the members of WCMS is invaluable.



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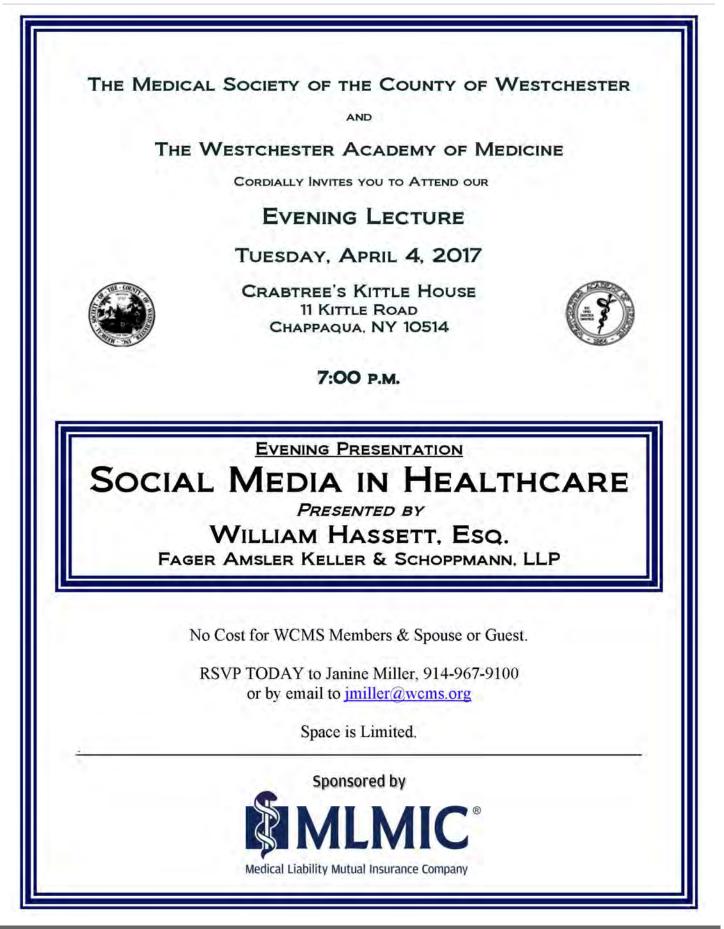
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\*The 20% dividend applies to policyholders insured by May 1, 2017 and who maintain continuous coverage through July 1, 2017 and is based upon the annual rate of premium in effect on May 1, 2017. The dividend will be paid as a credit on your July 1, 2017 renewal policy invoice.



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Installa	6:00 - 7:00 р.м. Networking Reception 7:00 р.м. Buffet Dinner ation of 2017-2018 Medical Society & Academy Officers
REMARKS OF	JOSEPH TARTAGLIA, MD, OUTGOING ACADEMY PRESIDENT
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	REMARKS OF GINO BOTTINO, MD Outgoing WCMS President
	REMARKS OF MARSHAL PERIS, MD Incoming WCMS President
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The Westchester County Medical Society Annual Meeting honoring **President-elect, Marshal Peris, M.D.** Thursday, June 1, 2017 Westchester Country Club, Rye New York 6:00 PM Cocktails - 7:00 PM Dinner – Biltmore Room

#### 2017 Souvenir Journal

In recognition of:

Marshal Peris, MD our President-elect, Gino Bottino, MD our Outgoing-president, and our "Friend of Medicine" award recipient - John Crabtree

Friends of the Westchester County Medical Society may insert an advertisement in the journal, or inscribe their personal good wishes and greetings.

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DEADLINE – <u>May 1, 2017</u>

Provide via email the file using PDF, JPEG, TIF or Word format - Email to jmiller@wcms.org

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Please call or email Janine Miller (914) 967-9100 jmiller@wcms.org to inquire about taking an ad.

The journal will be distributed at our meeting and posted online on our website.

#### **REGISTER NOW FOR UPCOMING VETERANS MATTERS CME PROGRAMS**

The Medical Society of the State of New York encourages you to register for its upcoming Veterans Matters programs. These programs include **CME presentations on PTSD and TBI in as well as Suicide in Returning Veterans.** Faculty for these programs is John McIntyre, MD and Frank Dowling, MD. Registration for all of these programs is open. Just click on either of the presentation dates below.

#### <u>Veterans' Matters: PTSD and TBI</u> <u>Webinar: Tuesday, April 4 at 8 a.m.</u>

**Faculty Presenter:** John McIntyre, MD The educational Objectives for the PTSD program are:

1) Describe the symptoms of PTSD and TBI.

2) Describe the treatment modalities of PTSD and TBI.

3) Describe military culture & how to overcome unique barriers to treatment intrinsic to military culture

Veterans' Matters: Suicide Live Seminar: Friday, April 28 at 8 a.m. at Brookhaven Memorial Hospital Faculty Presenter: Frank Dowling, MD The educational Objectives for the Suicide program are:

1) Address the causes and warning signs of suicide and suicidal behavior among veterans.

2) Explore the best evidence-based diagnostic and treatment options available including psychotherapy and pharmacotherapy.

3) Identify barriers in military culture to identification and treatment and how to overcome them.

Additional information or assistance with registration may be obtained by contacting Greg Elperin at <u>gelperin@mssny.org</u>.

Veterans Matters is a CME series made possible through a grant from the New York State Office of Mental Health.

The Medical Society of the State of New York is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education for physicians.

The Medical Society of the State of New York designates each live activity for a maximum of 1.0 *AMA*/*PRA Category 1 credits*<sup>TM</sup>. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

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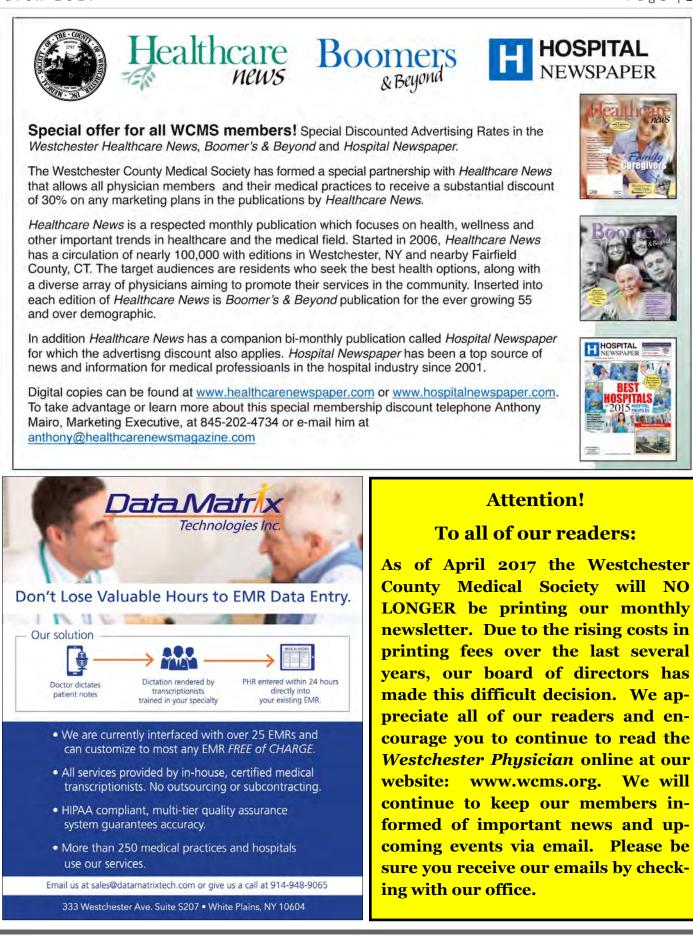


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