



CANS

NEWSLETTER

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CALIFORNIA ASSOCIATION OF NEUROLOGICAL SURGEONS, INC.

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President's Message

Patrick J. Wade, M.D.

CALIFORNIA POLITICS

As the State of California wrestles with how to insure the health care of all Californians, those of us on the sidelines can only watch and pray. Watch the Governor who again categorically opposes single payer, versus the Democrat controlled legislature, which seems to be unifying behind a very expensive employer mandate. Personal responsibility never seems to be in the legislative discussion.

As reported before, Sheila Kuehl's medical error reporting bill bears watching and we pray it does not become an open door for the trial lawyers to weaken MICRA Protection. With prison construction, transportation bonds and most other issues settled, the State budget will likely pass close to on time. No Health bill this year and not much else to argue about.

An election was held in the 37th District Tuesday the 26 of June in the Long Beach area; early reports show Richardson beating Oropeza 36% to 30%. We will have to wait to see how this one comes out. There will be a run-off August 21st between Richardson and the highest vote getting Republican. This is a strongly Democratic District. Richardson is an African-American as was her predecessor Millender-McDonald, who died recently. Oropeza will return to the State Senate.

The good news is we have a new Doctor in the U.S. Senate with the death of Senator Craig Thomas of Wyoming. The Wyoming Governor has appointed John Barrasso, M.D. who is an Orthopedic Surgeon from Casper Wyoming. Dr. Barrasso joins Dr. Coburn (Ob-Gyn) of Oklahoma in the Senate. Senator Barrasso is a Republican.

ANNUAL MEETING

We are planning a fun, educational meeting for you in January. It will be at Disney's Grand Californian. We expect this will be a great opportunity for family, parents, grandparents, children and grandchildren to come together after the Holidays. All can enjoy the Magic Kingdom at a time when it is least crowded.

Remember Monday the 21st of January is a Holiday.

Hope to see you at the CANS Annual Meeting 18 to 21 January 2008. ❖

The PQRI and the Neurosurgeon

Randall W. Smith, M.D., Editor

When Medicare begins its Physician Quality Reporting Initiative on July first, which it will do even in the face of some organized medicine opposition, each neurosurgeon who directly bills Medicare for his/her services needs to decide whether or not to participate in this optional program. The deal is that if you report certain Medicare designed quality measures on the operations you performed on Medicare patients between 7/1/2007

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and 12/31/2007, you will be paid a 1.5% bonus on allowed charges on all your Medicare billings during that time frame subject to an unclear cap and in part depending on how many measures you choose to report.

The quality measures pertinent to neurosurgery are all perioperative issues related to prophylactic antibiotics or venous thromboembolism prophylaxis. The more measures you report, the greater the bonus. The operative procedures for which you can employ these quality measures, the codes involved and data collection worksheets can be found at <http://www.ama-assn.org/go/toolsMedicarePQRI>; click on the PQRI Measures in the right column then scroll down to the Perioperative section. When you can document that the measure was met, you enter the appropriate code in section 24 of the CMS-1500 billing form where you enter the CPT code (with the same date of service as the CPT code) or in the SV1 "Professional Service" segment of the 2400 "Service Line" loop if you use the ASC X12N 837 electronic billing form. You needn't enter a billed amount for the quality measures but if your software forces you to do so, you can enter a number which will be denied by the Medicare payer but the measure will be captured by Medicare for the bonus payment which will be made as a lump sum distribution by Medicare in 2008.

To qualify for the bonus, you must report success in achieving the quality measure(s) 80% of the time. For instance, if you choose to report on the measures for choosing the right prophylactic antibiotic and ordering it given at the correct time preoperatively in 10 patients on whom you do a spine operation, you must have chosen and written correctly in 8 of them to qualify for the bonus.

Filling out the data collection worksheets and having documentation in your office chart that the quality measure was achieved in the quality measures noted above would not seem too onerous considering that a copy of your preoperative orders would be adequate documentation, the data forms aren't very involved and adding the quality codes to your bill isn't too difficult.

Whether or not to participate in this program is an individual decision for each neurosurgeon to make. If you don't do much surgery on Medicare patients, it may not be worth the time or trouble; but if you do, as well as perform plenty of consults on these patients, the 1.5% may be worth the thrash and prepare your office to be comfortable and efficient with this process as it is adopted, as threatened, by other third party payers. ❖

CA Health Plan, the Legislature and the CMA

Randall W. Smith, M.D., Editor

The CMA has been in a lead role forming a coalition called *Together for Health Care*. The coalition is comprised of the CMA, Health Net, Blue Shield, Kaiser, Catholic Healthcare West, the AARP, the California Teachers Association and the Services Employees International Union. Each of these groups has ponied up some money for an ad campaign trying to drum up general populace and specific legislator/lobbyist support for a system overhaul. The coalition can agree on the concept that something needs to be done though each player has an issue with some part of the Governor's plan or the Democratic leadership proposal discussed in last month's newsletter. The coming together of this polyglot group is founded on the belief by all the coalition members that something is going to happen and coalition members will be at the table when the final details are worked out.

Notably absent from the coalition is Blue Cross of California (BC) that is mounting its own ad campaign to preserve the status quo which has been quite profitable for it. BC counters that an individual mandate won't work any more than the individual mandate that everyone have a driver's license and liability insurance and be in California legally works. They want to increase the subsidy funding of the state high risk medical insurance pool and are willing to be taxed along with other insurers to help with increasing the subsidy which of course only addresses a small part of the current California healthcare problem. Their Harry and Louise ads, which compare a healthcare overhaul to the California energy deregulation debacle earlier this decade, might backfire if something really gets accomplished but I would guess with Blue Shield and Health Net at the table, they won't fare too badly. ❖

Neurosurgical Positions Available

CANS member Dr. Laura Anderson in Sacramento is looking to fill a part-time office position for a Physician's Assistant or a Nurse Practitioner which could become full-time. The clinic days and hours are flexible. Candidates with Work Comp and pain management experience will be given priority and there is opportunity for surgical assisting as well. A cover letter and a CV from those interested can be faxed to Sheri Bell in Dr. Anderson's office at 916 648-0155 (office telephone is 916 648-0144).

Neurosurgical Positions Available/Wanted

Any CANS member who is looking for a new associate/partner or who is looking for a position (all California neurosurgery residents are CANS members and get this newsletter) is free to submit a 150 word summary of a position available or of one's qualifications for a one time posting in this newsletter. Submit your text to me by E-mail (rws-avopro@sbcglobal.net) or fax (858 683-2022).

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Questions or comments can be sent to the editor, Randall W. Smith, M.D., at rws-avopro@sbcglobal.net or to the CANS office at janinetash@sbcglobal.net. Past issues of the monthly newsletter are available on the CANS website at www.cans1.org.

The newsletter is a mix of fact, rumor and opinion. The facts are hopefully clearly stated. The rest is open to interpretation. The opinion is mine. R.S. The assistance of Janine Tash and Patrick Wade, M.D. in the preparation of this newsletter is acknowledged and appreciated. If you do not wish to receive this newsletter in the future, please E-mail or fax Janine Tash janinetash@sbcglobal.net, (916-457-8202) with the word "unsubscribe" in the subject line.

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