

SPECIALTY MEDICINE ON-CALL

May 2011

Guest Column: Congressman Phil Gingrey, M.D. (R-GA) “The HEALTH Act: A Real Reform Option”

In the era of health care reform, two things have been made clear. First, the need for reform is immediate. We need meaningful policy changes that will provide lower costs and better care to American patients. Second, the Patient Protection and Affordable Care Act (Obamacare) is not the answer this country is looking for. At nearly 3,000 pages and over \$1 trillion dollars, the bill over-promises and under-delivers, and Americans have made it clear that this is not the kind of reform we need.

So what are our options for making real changes? We can start by looking at broken parts of our health care system, like tort reform. With over \$200 billion spent annually on the practice of defensive medicine and frivolous lawsuits, it is evident that we are in dire need of tort reform.

The Alliance of Specialty Medicine (the Alliance) is a coalition of national medical societies representing specialty physicians in the United States. This non-partisan group is dedicated to the development of sound federal health care policy that fosters patient access to the highest quality specialty care.

www.specialtydocs.org

compensation.

Medical malpractice and product liability lawsuits, many meritless, have become so prevalent that hedge funds and Wall Street firms are now cashing in on the system by using them as investment vehicles to make a profit. By financing the litigation, they can fund lawsuits – regardless of whether they have merit or not – and then require a scandalous percentage of the rewards as payment. These rewards, however, should be going to the injured patient.

Luckily, there are ways we can prevent these wasted costs and mend the system so that frivolous lawsuits aren't getting in the way of legitimate medical malpractice cases. Earlier this Congress, I introduced H.R. 5, the Help Efficient, Accessible, Low-cost, Timely Healthcare (HEALTH) Act of 2011 as one way to address these issues. This bipartisan bill, cosponsored by House Judiciary Chairman Lamar Smith (R-TX) and Rep. David Scott (D-GA), would significantly improve our medical liability system while reducing the cost of health care in this country.

The HEALTH Act is modeled after proven medical malpractice liability reforms and creates reasonable guidelines – not caps – on punitive damages. It removes the threat posed by investors without in any way limiting compensation for all of the plaintiff's economic losses, medical costs, lost wages, future lost wages, rehabilitation costs, and any other economic out-of-pocket losses suffered due to a health care injury.

continued page two

Follow Specialty Docs on Twitter!
www.twitter.com/specialtydocs

from page one

By reforming the system to protect the well-being of the injured party and ensuring doctors can act in the best interest of the patient without hedge funds and investors preying upon both, we can significantly improve the doctor-patient relationship. Even more, according to the CBO, medical liability reform will reduce our federal deficit by at least \$62 billion over a 10 year period, and other credible studies have

estimated even greater savings.

By implementing reforms like these, we can improve the health care system and save valuable health care dollars that are all too often wasted. Third parties shouldn't be benefiting from the injuries of patients. The HEALTH Act will cut wasteful spending, reform a broken system, and implement real, meaningful reform to put the focus back on patients and their health care providers.

“Private Contracting” Legislation Aligned with Alliance Priorities

On May 4, 2011, the Alliance of Specialty Medicine endorsed the Medicare Patient Empowerment Act, HR 1700, sponsored by Representative Tom Price (R-GA). Under the legislation, Medicare beneficiaries and physicians would be allowed to privately contract for items and services outside of the Medicare system without penalty. Under the current system, physicians would be forced to “opt-out” of Medicare for two-years in order to contract with beneficiaries directly.

“Much like an out-of-network benefit in private health insurance plans, this new Medicare payment option would enhance patient access to the physician of their choice.” said Dr. Alex Valadka, a

neurosurgeon from Austin, TX and spokesperson for the Alliance. “Medicare patients need to know that access to their doctors will not be put at risk because of the politics of Washington.”

Unless Congress intervenes, physicians will again be faced with a steep cut of more than 30% beginning in 2013 due to the flawed Medicare physician payment formula. Private contracting is viewed by the Alliance member organizations as a sustainable, patient-centered solution for the Medicare payment system that will ensure patients continue to have access to the services for specialty medicine physicians.

Specialty Medical Societies Welcome American Society of Plastic Surgeons

A hearty welcome to the newest member of the Alliance of Specialty Medicine, the American Society of Plastic Surgeons (ASPS)! ASPS is the largest plastic surgery specialty organization in the world, advancing quality care for plastic surgery patients by encouraging high standards of training, ethics, physician practice and research in plastic surgery. ASPS advocates for patient safety, such as

requiring its members to operate in accredited surgical facilities that have passed rigorous external review of equipment and staffing.

For information on joining the Alliance of Specialty Medicine, visit www.specialtydocs.org or contact Vicki Hart at info@specialtydocs.org.

Specialty Docs Support Strategy to Improve Quality

Following the release of the National Strategy for Quality Improvement, the Alliance issued a statement of support for the federal government's effort to develop a transparent, coordinated, and actionable national quality strategy, and appreciation for the agency's collaboration with physician, patient, and other important stakeholders on its first report.

Alliance member societies continue to engage in quality improvement activities, which are aligned

with HHS triple aim of better care, healthy people and communities, and care that is affordable by all.

With the three aims in mind, the Alliance offered some caution on HHS efforts to reduce redundant and harmful care, noting that arbitrary cost-cutting mechanisms that could hamper patient access. The Alliance also cautioned HHS on public reporting of health care data, explaining that physicians, patients and even payers must clearly understand health care data in a way that allows for both actionable quality improvement and useful decision-making.

Alliance Critical of Obama's Boost to IPAB

The Alliance of Specialty Medicine expressed strong criticism of President Obama's recent proposal to reduce the deficit, as it would expand the Medicare Independent Payment Advisory Board (IPAB), which has quickly become one of the top legislative priorities for many healthcare stakeholders, including the Alliance.

As described under the Affordable Care Act, the IPAB consists of 15 unelected members, none of which can be practicing clinicians, who will make important decisions about healthcare; decisions that the Alliance maintains should be left to those in office and are accountable to the American public.

President Obama's proposal would strengthen

the IPAB in various ways, including setting the GDP benchmark lower, at GDP plus .5% in 2018, which would do more to restrain Medicare's cost growth.

Immediately following the release of the proposal, the Alliance voiced words of caution and urged the President to work with the physician community to reign in Medicare spending.

"The President's proposal to expand IPAB only furthers the largest problem facing Medicare patients, and that is access to physicians," said Alex Valadka, a neurosurgeon from Austin, TX and spokesperson for the Alliance. "If the President and Congress want to address Medicare spending seriously, then they should get in the game and work with the entire physician community to do so."

Alliance in the News

The Alliance of Specialty Medicine was recently quoted in the following publications:

- ◆ National Journal Daily: "Obama's Plan Would Give Payment Board Tougher Target" – April 13, 2011
- ◆ The Hill's Healthwatch Blog: "OVERNIGHT HEALTH: Obama unveils new reforms for Medicare, Medicaid" – April 13, 2011
- ◆ Congressional Quarterly (CQ) HealthBeat News: "Providers Alarmed Over Possible Across-the-Board Cuts in Obama Plan" – April 14, 2011
- ◆ CNN Money: "Who pays for Obama's Medicare plan? Hint: Not seniors" – April 15, 2011

Specialty Spotlight – Cataract and Refractive Surgery

Airline crash can shed light on healthcare safety protocols, speaker says

When US Airways pilot Chesley Burnett “Sully” Sullenberger III calmly and heroically landed Flight 1549 in New York’s Hudson River on Jan. 15, 2009, saving all 155 lives aboard, the breathtaking event captured the imagination and hearts of the nation.

Sully was elevated to bona fide hero status, celebrated by the United States and its leaders, and his pet cause of airline safety became a top concern. During the Government Relations session, Capt. Steve W. Harden, chairman and president of LifeWings, used the example of the US Airways incident to illustrate how airline experience can fluidly translate to the ophthalmic operating room.

LifeWings is a consulting firm made up of physicians, nurses, former NASA astronauts, former military flight surgeons, pilots, flight crew, former military officers, and more who teach healthcare providers and facilities to eliminate medical mistakes and provide safer patient care.

“By analyzing the lessons learned from the ‘Miracle on the Hudson,’ clinicians can learn how to dramatically improve patient safety and quality of care, which is the current direction of the Medicare and healthcare reforms that were included in the healthcare law,” said Brock K. Bakewell, M.D., government relations chairman.

Capt. Harden, a former Top Gun pilot for the U.S. Navy and a current commercial airline pilot, is the author of two books on patient safety, and he designed and implemented award-winning safety systems for the airline industry, military flight squadrons, and heavy construction companies, Dr. Bakewell said.

“I think what aviation has done really well has

taught folks how to take a group of experts and turn them into an expert team,” Capt. Harden said. Some components of ultra-safe systems are leadership action, teamwork, and skills training. Poor interpersonal interaction causes 70-80% of medical mishaps, he said.

The U.S. major jet airline safety system gets excellent results and has three important components, Capt. Harding said.

“First, the actors in an organization need to have really good teamwork, communication, and collaboration,” he said. “The only way they are going to get those is if they are trained to have them. A lot of that doesn’t naturally occur to us. Second, those teamwork skills are put to good use when there is effective use of hard-wired safety tools, what you might know as checklists or communication scripting, handoff tools, decision-making algorithms, anything that can systemize that which should be and can be systemized. Third, the leaders of the organization have to do certain things to make sure those tools are used well and that the teams are trained well to interact capably with great teamwork and communication.”

Checklists are going to be important as the government moves to implement quality of care measures in healthcare reform.

“It can either be done to you or you can take ownership of it,” Capt. Harden said.

The 1-hour talk created quite a buzz among audience members. Capt. Harding offered to send his checklist to those people who gave him a business card after the session. He was swarmed when it was over and took home a 2-inch-thick pile of cards.

“This is the best response I have ever gotten,” he said.

Sponsored by Alliance Members:



AMERICAN SOCIETY OF PLASTIC SURGEONS



HARVEY CUSHING

American Association of Neurological Surgeons



American Urological Association, Inc.



Heart Rhythm Society SM
Restoring the Rhythm of Life



Join the most powerful group of specialty physicians!

Joining forces with specialty doctors from across the country helps amplify the concerns specialty doctors share. By working together, specialty medical organizations can work more effectively to influence health care policy and ensure our primary goal: to continue to provide our patients the optimal care they need.

As a part of the non-partisan umbrella organization representing all of specialty medicine, your organization will:

- ◆Promote specialty specific issues as part of a larger coalition, increasing visibility and understanding of issues.
- ◆Help increase exposure for specialty medical care.
- ◆Gain access to insider information, background

materials and research on health policy initiatives and the political landscape.

- ◆Receive expert analysis on proposed legislation.
- ◆Caucus with other specialty organizations at the AMA House of Delegates and other forums to promote key issues that are important to specialty physicians.
- ◆Coordinate physician and patient grassroots efforts through a large and robust network.
- ◆Participate in future Alliance Fly-In events in Washington, D.C. Past events have included Capitol Hill visits and presentations by health policy experts.

For information on joining the Alliance, visit our website at www.specialtydocs.org or contact Vicki Hart at vhart@hhstrategies.com