

COSMOS Call - October 19, 2020

Dr. Mike DellaVecchia (PA)	Moe Auster (NY)
Dr. Art Fougner (NY)	Todd Baker (OH)
Dr. Chris Gribbin (NJ)	Pat Clancy (NY)
Dr. Marilyn Heine (PA)	James Potter (NH)
Dr. Susan Hubbell (OH)	Marty Raniowski (PA)
Dr. Bonnie Litvack (NY)	Phil Schuh (NY)
Dr. Thomas Madejski (NY)	Mark Thompson (DE)
Dr. James Poole (NJ)	
Dr. Danae Powers (PA)	
Dr. Shannon Pryor (MD)	
Dr. David Rosman (MA)	
Dr. Greg Shangold (CT)	
Dr. Scott Shapiro (PA)	
Dr. Bo Subbarao (CT)	

The meeting began at 7:00 PM. Dr. Litvack welcomed the participants and noted the several issues she wanted to discuss toward creating action steps for each of these issues.

Surprise Billing

Moe Auster gave an overview of various bills before Congress to address surprise medical billing. Dr. Heine noted that even, among the best of the bills – the one advanced by the Ways & Means Committee, there are problems in that the Independent Dispute Resolution entities are not permitted to consider physician charge data in contrast to states such as NY and CT where the IDR is required to consider charge data. She noted that the President was very close to including an adverse surprise billing component to an Executive Order on healthcare, but withdrew it at the last minute. She also noted how helpful patient advocacy and free market groups such as Action 4 Health have been in countering the messages being pushed by the insurance, business, labor and some patient advocacy groups.

Dr. Gribbin asked if these Congressional bills were specific to ERISA claims only. Dr. Powers noted that an adverse surprise medical billing law will hurt independent practice physicians. Dr. Heine noted AMA efforts to include in the discussion insurer abuses including narrow networks. Dr. Shapiro noted part of the narrative is the result of an inappropriate conflation with patient concerns with high deductibles. Dr. Fougner also noted this issue arises as a result of health insurers' narrow networks.

Mr. Auster noted the AMA's new Health Insurance Competition report creates a new opening to discuss abusive insurer practices and narrow networks. Dr. Heine noted a potentially adverse bill under consideration in the Pennsylvania State Legislature and Phil Schuh suggested that we raise the issue of air ambulances not being part of these SMB discussions. With this issue likely to re-surface in the post-election Session of Congress (mid-December) to extend the current federal Budget resolution, Dr. Litvack suggested that we should plan to work towards a joint statement on this issue in the context of other items to be discussed in the next stimulus package.

Cannabis

Dr. Litvack noted that the upcoming New Jersey ballot initiative to legalize recreational use marijuana. She discussed a possible joint statement, that could be promoted particularly in the NY-NJ-CT metropolitan area raising concerns given that each of our states are all considering legalization. Dr. Gribbin noted there will be consideration at the upcoming MSNJ Annual meeting to have MSNJ support legalized marijuana use. Dr. Poole noted public surveys that suggested that it would be approved by 60% of the state. Dr. Madejski noted that Mississippi and South Dakota also have ballot initiatives on this. Dr. Rosman noted the difficulties of turning around poll numbers at this late date.

Dr. Litvack suggested that we draft a statement for consideration that could be released next week if the MSNJ keeps its traditional position in opposition to legalized recreational marijuana use.

Unionization

Dr. Litvack noted that the increased numbers of employed physicians suggested that it may be time to push for increased physician union participation. Dr. Madejski noted an upcoming AMA report on this topic. Dr. Heine noted that there are several existing unions that contain physician representation. Dr. Litvack specifically noted Doctors Council, and also noted a MSSNY Committee that will soon be meeting to discuss how we can better educate employed physicians with unionization options. Dr. Dellavecchia wants to be part of this Committee's discussions. Dr. Fougner noted that the significant numbers of employed physicians today, many of whom face one-sided contracts with large health systems, makes the case why we need to assist physicians with options to be part of a union.

Scope of Practice

Dr. Litvack noted that the passage of a nurse practitioner (NP) independence statute in California gives momentum to similar pieces of legislation in all of our states. She also noted that nurse anesthetists and physician assistants (PAs) are also looking for independence. Mark Thompson noted a PA independence bill in Delaware and Dr. Pryor noted that in Maryland that held off an Executive Order that would have temporarily granted independent practice, as has happened in several other states.

Dr. Powers noted some of the challenges of these issues, including the amount of time patients now spend with NPs and PAs employed by physicians. Mark Thompson noted that we should highlight the "3Es – education, expertise and experience". Dr. Heine noted that it was important to highlight that these changes could adversely affect patient in poorer areas of our respective states. She also noted the anecdotes collected by the PPP coalition which have been shared with the public. Dr. Shapiro advised to be ready to respond to studies that non-physicians are sued less. Dr. Heine noted studies that show that expanded use of independent NPs leads to higher health care costs due to expanded referrals for diagnostic tests. Dr. Pryor discussed the importance of physicians spending time with patients.

Dr. Litvack suggested that we develop a joint statement on the importance of maintaining physician led team care.

Medicare Cuts

Dr. Gribbin discussed potentially steep cuts that may be incurred by several specialties due to changing Medicare payment rules. He noted HR 8505 sponsored by Dr. Burgess to prevent the cuts in a manner that will also preserve the increases that will be coming for primary care. Dr. Heine noted multiple "sign-on" letters initiated by members of Congress to prevent these steep cuts, including one letter that had 230 members of Congress join. Dr. Gribbin and Dr. Litvack discussed working on a joint letter on this issue.

Other Issues

Todd Baker discussed a Covid liability immunity bill enacted in Ohio. Dr. Rosman discussed that Covid liability immunity was achieved by Executive Order in Massachusetts. Dr. Litvack noted that New York had passed a law that eliminated physician/hospital liability immunity protections, for acts or omissions after August 3, that are unrelated to care for a patient with Covid or suspected to have Covid. However, we fought off legislation to completely repeal our liability protections.

Dr. Powers and Dr. Rosman raised concerns generally about lack of trust of physicians and other scientists by some in the public for political reasons.

The meeting ended at 8:15 PM.