

# Ask your legislator to protect IBD treatment options for your patients

American Gastroenterological Association

This week, AGA and members of the Step Therapy Coalition were on Capitol Hill and met with over 20 offices to garner support for Restoring the Patient's Voice Act (HR 2077), legislation sponsored by Reps. Brad Wenstrup, R-OH, and Raul Ruiz, D-CA, that would provide patients and providers with an equitable and transparent appeals process when subject to step therapy protocols.

We received positive feedback from our coalition meetings and are hoping it translates into an increase in cosponsorship for the legislation. AGA is concerned that a growing number of patients with inflammatory bowel diseases (IBD) who are often treated with biologics are being subjected to step therapy protocols that can have adverse health effects on patients who fail or do not respond positively to the medication that the insurer is forcing them to try.

The bipartisan legislation would require employer sponsored health plans to do the following:

- Establish a clear and convenient process for physicians to appeal a step therapy protocol for their patient.
- Grant patients exceptions to step therapy under five critical circumstances.
- Expedite care by requiring a timely decision for appeals three days or 72 hours or within 24 hours if life threatening.

We thank those members who took the time to contact their members of Congress to ask them to cosponsor HR 2077 and if you haven't already, please *call on your legislator to support this legislation*.

AGA is working closely with the Crohn's and Colitis Foundation, Arthritis Foundation, Digestive Diseases National Coalition, National Psoriasis Foundation, American Academy of Dermatology, American College of Rheumatology and other partners in generating support for HR 2077.



# Join us in New Orleans for the AGS 2018 Annual Conference

Feb. 17-18, 2018

Hyatt Centric French Quarter New Orleans

The AGS Room Block at the Hyatt Centric is almost full. Reserve your room today by calling (888) 421-1442 and asking for the Alabama Gastroenterological Society room block or reserve online at www.tinyurl.com/2018AGSReservations.

See pages 2 and 3 for meeting agenda and registration.



## AGS Conference Agenda

## SATURDAY, FEBRUARY 17

7:00 a.m. – 8:00 a.m. Breakfast with Exhibitors

8:00 a.m. – 8:15 a.m.

Welcome and Opening Remarks

J. DeWayne Tooson, MD, AGS President

3. Dewayne Tooson, MD, AGS President 8:15 a.m. – 9:15 a.m.

**HCV Transplant Cholestatic Liver Disease**Phillip Henderson, DO, Clinical Instructor of Medicine,
USA College of Medicine

### 9:15 a.m. - 10:15 a.m. Management of Achalasia

Mouen Khashab, MD, Associate Professor of Medicine and Director of Therapeutic Endoscopy, Johns Hopkins Hospital, Division of Gastroenterology and Hepatology

10:15 a.m. Morning Break with Exhibitors

10:30 a.m. – 11:30 a.m. Advances in Therapeutic Endoscopy

Mouen Khashab, MD, Associate Professor of Medicine and Director of Therapeutic Endoscopy, Johns Hopkins Hospital, Division of Gastroenterology and Hepatology

11:30 a.m. – 12:30 p.m. Management of Refractory IBD

Steve Hanauer, MD, Professor of Medicine, Northwestern University Feinberg School of Medicine

12:30 – 2:30 p.m. Mardi Gras Lunch Party with Exhibitors

2:30 p.m.

Enjoy the rest of your day in the City of New Orleans

## **SUNDAY, FEBRUARY 18** 7:00 a.m. - 7:30 a.m.

7:00 a.m. - 7:30 a.m. Breakfast with Exhibitors

7:30 a.m. – 8:00 a.m. Business Session, Installation of 2018-2020 Officers

8:00 a.m. – 9:00 a.m. Coding Pitfalls in Ambulatory Surgery Centers Kristin Vaughn, CPC, Ask Mueller Consulting, LLC

9:00 a.m. - 10:00 a.m. GI Practice Management, Ancillary Opportunities in GI Reed Hogan, MD, GI Associates and Endoscopy Center

10:00 a.m. Morning Break with Exhibitors

10:15 a.m. - 11:15 a.m. Advances in Pancreatic and Biliary Endoscopy Kenneth Sigman, MD, Birmingham Gastroenterology Associates

11:15 a.m. - 12:15 p.m.

Management of Liver Tumors

David Fettig, MD, Birmingham Gastroenterology

Associates

12:15 p.m. Evaluation and Adjourn

#### The accreditation statement:

This activity has been planned and implemented in accordance with the accreditation requirements and policies of the Medical Association of the State of Alabama through the joint providership of the Medical Foundation of Alabama and the Alabama Gastroenterological Society. The Medical Foundation of Alabama is accredited by the Medical Association of the State of Alabama to provide continuing medical education for physicians.

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Hyatt Centric French Quarter New Orleans



www.alagastro.org



## 2018 ANNUAL CONFERENCE REGISTRATION FORM

Name		_ DMD DO CRNP PA PharmD Medical Science Liaison*		
Practice Name	□ Resident/Fellow □ Student □ Other		er	
Address	City/State/2	_ City/State/Zip		
Phone	Fax	E-mail _		
Office Manager	Office Mana	office Manager's E-mail		
Dietary Needs	<b>□</b> First time	☐ First time attendee? (check if yes)		
FEES (After Feb. 9 add \$100)				
☐ AGS Physician Member or Out of State Physician \$37	75	■ Physician Nonn	nember \$475	
☐ AGS Associate Member or Out of State Non Physicia	an Clinician \$275	■ Associate Nonr		
□ Retiree - \$150 □ Residen	it - Free	☐ Student - Free		
☐ Medical Science Liaison* \$475 ☐ Practice	e Manager \$150			
*The medical science liaison's company must be a reg	gistered vendor at	the conference. Co	ontact Jennifer Hayes for details	
Total number of adults attending reception				
Guest Name(s):				
ONLINE REGISTRATION				
Go to www.tinyurl.com/AGS2018 to register online.				
ACCOMMODATIONS				
Reserve a room at the Hyatt Centric French Quarter or	nline at <i>www.tinyu</i>	ırl.com/2018AGSRes	<b>Servations</b> or call 888-421-1442	
and ask for the Alabama Gastroenterological Society	room block. Rates	s begin at \$229 per r	night and are valid for three	
days before and three days after the conference base likely sell out before that date.	ed on availability.	The room block exp	ires Jan. 24, 2018, but will	
If you have special needs or need assistance, please of	contact Jennifer H	ayes, at (334) 954-25	500 or <i>JHayes@alamedical.org</i> .	
PAYMENT				
Credit Card: ☐ VISA ☐ MasterCard ☐ Americ	can Express 🗆	Check made pay	yable to AGS	
Cardholder Name	_ E-mail addres	ss for receipt		
Card Number	_ Exp. Date		Security Code	
Billing Address	_ City, State ZIP			
Signature			Amount: \$	

## CMS releases 2018 Medicare payment rules

#### American Gastroenterological Association

CMS has released two calendar year (CY) 2018 rules that finalize policy and payment changes for the Medicare Physician Fee Schedule (PFS) and the Hospital Outpatient Prospective Payment System (OPPS) and Ambulatory Surgical Centers (ASC) Payment System.

The PFS final rule appeared in the Nov. 15 Federal Register, and OPPS and ASC final rule was published in the Nov. 13 issue.

#### 2018 Medicare Physician Fee Schedule Final Rule

2018 Proposed Conversion Factor: The 2018 PFS conversion factor is \$35.99, an increase of +0.41 percent from the 2017 PFS conversion factor of \$35.89. This update reflects the +0.50 percent update established under the Medicare Access and CHIP Reauthorization Act of 2015 (MACRA), reduced by 0.09 percent, due to the misvalued code target recapture amount, required under the Achieving a Better Life Experience Act of 2014.

Payment Changes for Anesthesia for GI Procedures: For CY 2018, the AMA CPT Editorial Panel is deleting CPT codes 00740 (Anesthesia for upper GI procedures) and 00810 (Anesthesia for lower GI procedures) and replacing them with the following five new codes. The current CY 2017 base unit for upper and lower GI is 5 base units.

#### CMS finalized the following values for CY 2018:

00731 (Anesthesia for upper GI, not otherwise specified) = 5 base units.

00732 (Anesthesia for upper GI, ERCP) = 6 base units

00811 (Anesthesia for lower GI, not otherwise specified) = 4 base units

00812 (Anesthesia for screening colonoscopy) = 3 base units

00813 (Anesthesia for upper and lower GI during the same session) = 5 base units

Each base unit is approximately \$22.

Read the full Tri-Society regulatory summary of the final rule at www.gastro.org.



## PDMP software change nears

The Prescription Drug Monitoring Program (PDMP) promotes public health and welfare by detecting diversion, abuse, and misuse of prescription medications classified as controlled substances under the Alabama Uniform Controlled Substances Act. On Dec. 12, 2017, the Alabama PDMP is scheduled to change its database software system to the Appriss PMP AWARxE system.

In PMP AWARxE, the username will be an email address and each user must have a unique user name (email address). Any accounts that share the same email address will **not** be transferred to the new system. If your account is not transferred, you will have to submit a new registration application and wait for your account to be approved by the state administrator.

For assistance, please contact technical support directly at (855) 925-4767 option 1.

For policy questions, you may contact the Alabama Prescription Drug Monitoring Program at (877) 703-9869 or by email at pdmp@adph.state.al.us.

## Dec. 1-7 is Crohn's & Colitis Awareness Week

Crohn's and Colitis Awareness Week is observed each year from Dec.



1 through Dec. 7 to shed light on the challenges faced by people who

suffer from these illnesses.

According to the latest figures, IBD affects an estimated 1.6 million Americans. In fact, there are more than 70,000 new cases of IBD in the United States each year.

Tips for Managing IBD.

## New Medicare cards coming in April

CMS has redesigned its Medicare card to remove Social Security numbers and use a randomly-assigned number to better protect users from identity theft and fraud.

CMS will begin mailing the *new cards* in April 2018 to meet the April 2019 deadline to replace all existing Medicare cards.

#### How to get ready for the change

- · Ask your billing and office staff if your system can accept the 11-digit alphanumeric Medicare Beneficiary Identifier.
- If your system cannot accept the new number, system changes should be made by April 2018.
- If providers use vendors to bill Medicare, ask them if they are ready for the change.
- Verify your patients' addresses: If the



address you have on file is different than the address you get in electronic eligibility transaction responses, ask your patients to contact Social Security and update their Medicare records. This may require coordination between your billing and office staff.

For more information go to https:// www.cms.gov/Medicare/New-Medicare-Card/Providers/Providers.html.

## ASGE launches GI Operations Benchmarking Platform

The American Society for Gastrointestinal Endoscopy (ASGE) has launched a new and improved interactive tool to assist its members in measuring the financial and operational performance of their GI practice.

Powered by the ASGE Beyond our Walls Campaign, the ASGE GI Operations Benchmarking Platform supports healthcare teams in enhancing practice efficiencies and profitability through data-driven decision-making.

A free member benefit, ASGE's GI Operations Benchmarking Platform enables GI units from all settings to benchmark their unit(s) against more than 100 metrics.

More information can be found at <a href="http://www.asge.org/benchmarking.">http://www.asge.org/benchmarking.</a>

## Government Affairs Conference set for January

Make plans to join your colleagues at the Medical Association of the State of Alabama's Governmental Affairs Conference in Washington, D.C., Jan. 29-31, 2018. Protecting and promoting medicine's interests on Capitol Hill is a never-ending responsibility that requires participation from physicians across all specialties. Let your voice be heard in Washington. *Register today*!

Reserve a room at the Willard Intercontinental Hotel by calling (800) 424-6835 or (202) 628-9100 or online at www.washington. intercontinental.com. Use Group Code MAS to reserve a room at the discounted rate of \$289/night. The deadline to book a room at the Willard Intercontinental is Jan. 2, 2018.

## Three steps for increasing medicine's influence

The following is a summary of an article appearing in the Nov. 22 Rotunda

From the outside looking in, the political process likely seems as inviting as a shark tank. Intimidating, confusing and frustrating are often used to describe advocacy-related interactions with government.

In his Gettysburg Address, President Abraham Lincoln famously opined our nation's form of government - "of the people, by the people, for the people." However, outcomes are typically directed by those choosing to engage government on issues important to them, and so government becomes "of the people, by the people, for the people [who choose to participate]."

#### How physicians can participate

Step 1: Join, join, join. A significant portion of success is simply showing up, but most physicians don't have the time to spend traveling to Washington, DC, or Montgomery for Congressional or legislative meetings, hearings and sessions. But when like-minded people pool their resources good things can happen. Advocacy organizations (individual state medical societies, and state and national specialty societies) concerned with ensuring delivery of quality care and a positive practice and liability environment all deserve your support and membership.

Step 2: Get to know a few key people. Physicians are responsible for a lot, and in today's world especially, it's easy to get in a

routine and leave the job of representing the profession to someone else. While membership in organizations advocating for physicians helps fund advocacy operations, paying membership dues alone is not enough. Getting to know a few key people is not difficult, even if only by phone or email. In lawmakers' minds, there is no contact more important than one from a constituent.

Step 3: Put your money where your mouth is. Political action committees (PACs) help elect candidates physicians can work with on important issues. When it comes to PAC contributions, never underestimate the impact of even a small donation. Choosing not to participate in the political process is akin to getting sued, consciously sitting out voir dire and letting the plaintiff's lawyer pick the jury.

#### **Summary**

The future of medical care rests with the men and women actually caring for patients every day. A representative democracy functions best when the electorate holds those elected to office accountable. Increasing medicine's ability to successfully advocate for physicians and the patients they serve will require increased participation in the political process. Physicians must join the organizations fighting for them, get to know their elected officials and contribute to PACs whose goals align with their own.

Read the full article at *alagastro.org*. §



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#### Alabama Gastroenterological Society 2016-2018 Officers

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