



MSSNY's Physician Advocacy Day Brings Many Dedicated Physicians to the State Capitol

We thank the approximately 150 physicians and physician advocates who took the time to come to Albany this week to advocate with their Senators and Assemblymembers on a myriad of legislative issues to help maintain patient access to community-based physician care. The timing for the Advocacy Day was fortuitous, as both Houses were finalizing their respective one-House Budget proposals that set the stage for 3-way negotiations with the Governor.

We also thank the several key healthcare policymakers who addressed the physicians in the morning program before physicians had legislative visits in the afternoon. This includes NYS Health Commissioner Dr. James McDonald, Senate Deputy Majority Leader Michael Gianaris, Senate Minority Leader Rob Ort, Assembly Minority Leader Will Barclay, Senate Insurance Committee Chair Neil Breslin, Senate Health Committee Chair Gustavo Rivera, Assembly Health Committee Chair Amy Paulin, and Assembly Insurance Committee Chair David Weprin. With Senator Breslin retiring after this year, he was honored by MSSNY physician leaders for his extraordinary record of achievement in championing legislation that helps protect patients' ability to receive needed treatment and medications.

(DIVISION OF GOVERNMENTAL AFFAIRS)

Assembly and Senate Budget Proposals Oppose Executive Budget Proposals Opposed by MSSNY That Interfere with Patient Access to Physician Care

The New York State Assembly and State Senate this week advanced their respective "one-House" Budget proposals to set the stage for "3-way" negotiations with the Governor towards adopting a State Budget by April 1. Importantly, both the Assembly and Senate are recommending that various Executive Budget proposals that adversely impact patient access to continuity-based physician care be rejected from the final enacted Budget. Their recommendations include:

- ***Protecting the Treatment Services Provided through CPH.*** Both Houses opposed a proposal in Part L of the HMH Art. 7 Budget bill to repeal authorization for the MSSNY's Committee for Physicians Health (CPH) program. [CPH-Repeal-Oppose\(mssny.org\)](https://www.mssny.org/CPH-Repeal-Oppose). CPH has for over 40 years provided needed treatment services for thousands of physicians facing behavioral health or addiction issues. CPH is not funded out of the General Fund but through a \$30 set-aside through the physicians' biennial registration fee that results in an annual appropriation to CPH of \$990,000.

Physicians are urged to contact their legislators to thank them for advocating to preserve this essential program and asking that they maintain this position as the final State Budget is being negotiated. [Restore Funding for CPH Program \(p2a.co\)](#)

- **Protecting Continued Access to Excess Medical Malpractice Insurance Coverage.** Both Houses opposed a proposal in Part K of the Art. 7 HMH Budget bill to impose huge new costs on the nearly 16,000 physicians enrolled in the Excess Medical Malpractice Insurance program, by requiring physicians to pay 50% of the coverage cost [Excess Change Oppose \(mssny.org\)](#). This is a nearly \$40 million hit to community-based physicians across the state who already pay among the highest medical liability insurance costs in the nation.

Physicians are urged to contact their legislators to thank them for advocating to prevent this unfair cost imposition, and asking that they maintain this position as the final State Budget is being negotiated: [Reject Cost-Share for Excess Insurance Program \(p2a.co\)](#)

- **Preserving Physicians' Right to Appeal Claim Underpayments.** Both Houses opposed a proposal in Part H of the Art. 7 HMH Budget bill that would repeal the ability of physicians to bring claim disputes with Medicaid Managed Care plans to the Independent Dispute resolution (IDR) process [IDR-Repeal-Oppose \(mssny.org\)](#). This change, which would overturn a recent action by DFS to permit the appeal of these claims through IDR, will lead to steep health insurer payment cuts and network reductions, and discourage many physician specialists from providing essential on-call emergency department care.

Physicians are urged to contact their legislators to thank them for advocating to preserve this important right, and asking that they maintain this position as the final State Budget is being negotiated: [Retain Right to IDR \(p2a.co\)](#)

- **Preserving Patient Access to Physician-Led Team Care.** Both Houses opposed a series of scope expansion proposals in Part Q of the Art. 7 HMH Budget bill to permit Physicians Assistants (PAs) to practice without any physician supervision or collaboration after 8,000 clinical hours if they practice in primary care or are employed by a hospital; Permitting dentists to perform screening tests for HIV, Hepatitis and Diabetes; and authorizing pharmacists dispensing PrEP on a non-patient specific prescription basis. [Protect Physician-Led Team Care \(mssny.org\)](#)

Physicians are urged to contact their legislators to thank them for advocating to protect physician-led team care, and asking that they maintain this position as the final State Budget is being negotiated to [Preserve Physician-led, Team-based Healthcare \(p2a.co\)](#)

- **Protecting Patient Access to Needed Medications and Treatments.** Both Houses opposed proposals in Part I of the Art. 7 HMH Budget bill that would increase prior authorization hassles for Medicaid prescriptions by repealing "prescriber prevails" protections, as well as giving power to Medicaid to reimburse physicians for injectable medications at amounts even less than what the physician office paid to acquire the injectable medication.

(DIVISION OF GOVERNMENTAL AFFAIRS)

Please Urge Your Legislators to Reduce Exorbitant Medical Liability Risk and Costs

With legislation (A.9232/S.8485) again being introduced to greatly increase the damages awardable in wrongful death actions, and similar language being inserted in the Senate one-House Budget, physicians are urged to contact their legislators [Reducing Medical Liability Costs \(p2a.co\)](#) to request that any legislation to expand liability costs also take corresponding steps to help reduce our already staggering medical liability costs.

As New York's liability costs far exceed any other state in the country, increasing these costs by any amount, let alone the potential 40% increase that actuaries have predicted when analyzing this legislation, will exacerbate existing patient access to care challenges in our healthcare system.

Governor Hochul recently vetoed – for the second time – legislation that would have expanded the types of damages awardable in wrongful death actions. Her veto message appropriately highlighted the “significant unintended consequences” of this proposal, including the impact to our community healthcare infrastructure because of the likely huge increase in liability costs it would face through these expanded liability awards.

New York’s exorbitant liability costs are a major reason why New York is regularly ranked as one of the worst states to be a physician [Best & Worst States for Doctors \(wallethub.com\)](https://www.wallethub.com/insights/best-worst-states-for-doctors) and certainly a factor in the various shortages we face. Please urge your legislators to work for comprehensive legislation that will bring down these already untenable costs instead of making the problem even worse, and further harming patient access to needed care.

(AUSTER)

Change Healthcare Cybersecurity Incident Updates

In response to the ongoing challenges facing countless medical practices across the State arising from the Change Healthcare cybersecurity incident, here are a number of updates as it relates to claim submission to and payment from Medicare and commercial health insurance plans. MSSNY Councilor and Nassau County Medical Society President Dr. David Podwall was interviewed by CBS News discussing the huge adverse impact of this incident on patient care: [Patients, providers still feeling the effects of cyberattack on UnitedHealth Group. \(cbsnews.com\)](https://www.cbsnews.com/news/patients-providers-still-feeling-effects-cyberattack-unitedhealth-group/).

MIPS Reporting Delayed. Following [AMA advocacy](#) together with numerous medical societies across the country including MSSNY, CMS has extended the 2023 MIPS data submission deadline until April 15. The 2023 MIPS data submission window opened on January 2 and originally was scheduled to close on April 1.

While this is a positive development, AMA and other groups have expressed concern that the timeline is insufficient. Therefore, efforts are continuing to push CMS to automatically apply the Extreme and Uncontrollable Circumstances (EUC) hardship exception to all MIPS eligible clinicians for the 2023 performance period.

Medicare Advance Payments Available. National Government Services (NGS) sent out an alert [news - NGS MEDICARE](#) on Monday that Part A and Part B Providers experiencing cash flow problems related to Change Healthcare cybersecurity incident, may be eligible for Accelerated/Advance Payments (AAP). The expansion of the AAP is only for the duration of the claims processing disruptions associated with this incident. NGS has set forth the following steps for Part B providers.

More information from CMS about these Advanced payments here: [Change Healthcare/ Optum Payment Disruption Frequently Asked Questions | CMS](#)

1. Providers must submit their request in writing using the [form](#) on the NGS website (one for each billing PTAN).
2. Requests must be signed by the provider’s authorized official that is legally able to make financial commitments and assume financial obligations on behalf of the provider/supplier. (Digital signatures and fax requests are acceptable).
 - Providers that are part of a group practice may attach a list of PTANs/NPIs to the form. The authorized representative must have authority to sign on behalf of all parties included in the list. Payment will be sent to each individual NPI.
3. Submit the request by email to the applicable email address below:
 - Jurisdiction 6 Part B: J6AdvancePaymentPartB@anthem.com
 - Jurisdiction K Part B: JKAdvancePaymentPartB@anthem.com
4. Once the review is complete, NGS send decision letters to the providers requesting advance payments using the most expeditious method (e.g., email, facsimile, telephone). If the request is approved, the advance payments will be issued within five calendar days.

Waiving of Rules for Claim Submission to New York Health Insurers. As reported last week, in response to the Change Healthcare cybersecurity incident, the New York Department of Financial Services has issued [Insurance Circular Letter No. 2 \(2024\) \(ny.gov\)](#) setting forth that certain preauthorization, concurrent, and retrospective review requirements (collectively, “utilization review requirements”), appeal timeframes, reconsideration timeframes, claim submission timeframes, and eligibility verifications should be suspended or tolled when necessary, and that plans and PBMs “should ensure that there are no delays in health care services and that prescription drugs remain accessible to insureds”. DFS has developed a form for the physician or other provider to certify to the plan that suspension or tolling is necessary, because the cyber incident had an adverse impact on the provider’s ability to comply with these requirements.

DFS is asking for a list of physician offices who are having a cash flow crisis due to the Change Healthcare cyber incident for the purposes of helping formulate relief from health insurers. If you use Change Healthcare and your cash flow is in crisis, please provide your office’s full name and address along with NPI # to hlopez@mssny.org and we will forward it to DFS.

(AUSTER, LOPEZ)

MSSNY Pushes to Make Payment Parity for Telehealth Services Permanent

With the release of budget proposals for FY2024-25 from Governor Hochul, the Senate and Assembly, MSSNY is advocating to make payment parity for Telehealth services permanent. While the Senate one-House Budget proposal importantly calls for permanently extending this law, Governor Hochul and the Assembly have proposed only a one-year extension.

The policy was first passed in the FY2022-23 state budget after the use of Telehealth services expanded enormously during the COVID-19 pandemic. For a time, connecting virtually was the only option for patients and their physicians to connect. With the ending of the Public Health Emergency, in-office visits have increased but Telehealth remains a crucial tool for patients to access healthcare and it is expected to continue to be.

MSSNY will share updates as budget negotiations continue over the next few weeks.

(CARY)

Women Physicians Leadership Academy Continues This Weekend!

The MSSNY Women Physicians Leadership Academy programming continues this weekend, Saturday March 16th, with our third session “Designing Your Medical Career”. The session will start promptly at 7:45 am and go on until 11:15 am. There is still time to register, click [here!](#)

If you are unable to attend one of the sessions, they will be placed on-line at the MSSNY CME website as enduring material approximately one month after the live activity.

(RENTO)

Registration Now Open Medical Matters CME Webinar

[A Primer on Natural & Technological Disasters](#)

It sometimes seems that there is a constant barrage of disasters occurring, both small and large scale. Physicians and other healthcare professionals play an integral role in mitigating these disasters. Learn more about disaster preparedness by registering for the next Medical Matters webinar, [A Primer on Natural & Technological Disasters](#) on **March 20th at 7:30am**. Arthur Cooper, MD, past chair of MSSNY’s Committee on Emergency Preparedness and Disaster/Terrorism Response will serve as faculty for this webinar. [Register now](#)

Educational objectives are:

- Outline various types of natural and technological disasters including causes, frequency and impact.

- Describe the medical impact natural and technological disasters can have on the population as a whole.
- Recognize the role and responsibility of physicians in disaster preparation and response.

Additional information or assistance with registration may be obtained by contacting Melissa Hoffman at mhoffman@mssny.org

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 this live activity for a maximum of 1.0 AMA PRA Category 1 credits™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

(HOFFMAN)

MSSNY House of Delegates CME Day Thursday April 11, 2024

Registration Now Open Medical Matters CME Webinar

What's That Spot?

17 states have reported measles cases so far in 2024. As of March 13, 2024, the total number of measles cases in the United States nearly matching the total number of cases in 2023. Exacerbating the spread of measles, a number of rashes tend to mimic one another making differential diagnosis tricky. Learn more about discerning the presentation, comorbidities and causes of a variety of rashes by registering for the Medical Matters webinar, ***What's That Spot?*** on **Thursday April 11th at 7:30am**. William Valenti, MD, chair of MSSNY's Infectious Diseases Committee and Kira Geraci-Ciardullo, MD, MPH both members of MSSNY's Committee on Emergency Preparedness and Disaster/Terrorism Response will serve as faculty for this webinar.

Register now

Educational objectives are:

- Describe rash types, causes, variations, and diagnoses.
- Differentiate diffuse, vesicular, and maculopapular rashes (using case studies).
- Summarize best practices for diagnosing rash presentations.

Additional information or assistance with registration may be obtained by contacting Melissa Hoffman at mhoffman@mssny.org.

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(HOFFMAN)

Registration now open: Veterans Matters CME Webinars

New York State is home to more than 800,000 veterans, and a recent study showed that nearly half of these veterans receive healthcare services outside of the VA system. MSSNY Veterans Matters webinars provide physicians with essential information to treat veteran patients.

Veterans Matters: TBI in Returning Veterans, takes place on **April 11, 2024 @ 8:40 AM**.

The faculty for this webinar is David Podwall, MD.

Educational Objectives:

- Identify signs and symptoms indicative of the spectrum from concussion/mild TBI to severe TBI.
- Examine evidence-based treatment modalities and when to refer to a specialist.
- Identify red flags that indicate alternate or more severe pathology.
- Outline an appropriate management plan for a patient presenting with concussion/TBI

Volume 34, No. 11, March 15, 2024

including a return to "normal life" protocol.

[Veterans Matters Burn Pits: Psychological and Physical Impact on Veterans](#), takes place on **April 11, 2024 @ 9:50 AM**. The faculty for this webinar is Frank Dowling, MD and Mary Lee-Wong, MD.

Educational Objectives:

- Describe the reported physical and psychological sequelae after burn pit exposure.
- Outline possible symptoms that can result from burn pit exposure.
- Define aerosolized airborne hazards dissipated from prevalent items in burn pits.
- Identify different types of diseases that can be caused by burn pit exposure.

Additional information or assistance with registration may be obtained by contacting Nicholas Hospodar at nhospodar@mssny.org.

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*This program is supported in whole by a grant from the New York State Office of Mental Health.
(HOSPODAR)