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NEWSLETTER OF THE CHICAGO MEDICAL SOCIETY

The Voice of Cook County Physicians

## IN UNITY THERE IS STRENGTH

# AMA fights on your behalf: CMS/ISMS join effort



North Shore Branch hosts AMA's Plested William G. Plested III, MD, an AMA board member from California, spoke before the North Shore Branch at its Oct. 31 meeting at Saint Joseph Hospital. Dr. Plested's topic: "Political Efforts of AMA and Organized Medicine." Pictured, from left, are: Drs. Edmund R. Donoghue, CMS president; Joseph L. Murphy, branch treasurer; Ashwin S. Patel, branch president; Omadath

B. Madoo, vice president; Dr. Plested; and Richard A.

Geline, CMS president-elect.

Unless Congress acts, physician payments will be slashed

IF CONGRESS FAILS TO DELAY THE 2002 Medicare payment update, payments to all physicians for all services will suffer a 5.4 percent cut effective Jan. 1, 2002. Legislation introduced by Sen. James Jeffords (I-VT) and Sen. John Breaux (D-LA) would prevent the cut from becoming effective.

Responding to these developments, the CMS Council passed an emergency resolution at its November meeting calling for changes to the underlying formula governing Medicare updates. The Society will sup-

port ISMS and AMA efforts to create a simple and predictable system that assures payment updates keep up with inflation in practice costs. (To encourage your legislators to support the Medicare Physician Payment Fairness Act of 2001, call the AMA Grassroots Hotline at (800) 833-6354, or go to www.isms.org)

Meanwhile, what are your elected officials doing? Senators Jeffords and Breaux have offered a bill in the U.S. Senate to dramatically improve the physician Medicare payment update for 2002. The bill is S. 1660, the "Medicare Physician Payment Fairness Act of 2001," and the AMA has given it overwhelming support.

The Jeffords-Breaux bill would change the payment update for 2002 from –5.4 percent to –0.9 percent. As the best option available in this year's difficult federal budget environment, S. 1660 would limit the update reduction. Further, the bill would require that the Medicare Payment Advisory Commission (MEDPAC) report no later than March 1, 2002, on replacing the flawed formula for determining the annual update.

This would be the fourth across-the-board cut in physician payments in 10 years, bringing the average annual update between 1992 and 2002 to just 1.1 percent, or 13 percent less than the increase in physician practice costs. The cut also comes at a time when physicians are facing heavy new regulatory costs and spiraling premiums for professional liability insurance.

"Congress must act now to keep Medicare beneficiaries from suffering the same access problems that challenge Medicaid beneficiaries," said Timothy T. Flaherty, MD, AMA chair.

# The Physician Practice Advocate—entry point to CMS services

YOUR SIMPLE PROBLEMS CAN BECOME major headaches if you or your staff can't quickly obtain answers or information. That's why CMS recently hired Katie Brown, the new Physician Practice Advocate. For two months now, Katie has been helping physicians countywide to solve everyday concerns before they cause chaos in their practices.

If the problem is insurance-related, the solution is sometimes as easy as Katie placing a phone call to ISMIE or Physicians' Benefits Trust (PBT). "I find that our members often feel better just to know that someone at their Society is putting in that extra effort for them with the insurance company," Katie says.

But insurance issues aren't the only questions the Physician Practice Advocate can

handle on your behalf. If you have concerns about membership, third-party payors, or other practice issues, Katie will tap the expertise at CMS, ISMS and AMA to help find you answers. So far, she has helped CMS members deal with diverse issues. These include helping a practice navigate a delicate issue with an aging colleague and tracking down answers to questions about websites. Other questions have come up about universal credentialing and pharmaceutical sponsorship of medical activities.

CMS is here to help you. Consider the Physician Practice Advocate your entry point to the resources of organized medicine. If CMS can't settle your problems, Katie will do all she can to find the right resource, make the right call, or help make sense of emerging challenges.

Katie can be reached at (312) 670-2550, ext 328, and by e-mail at kbrown@cmsdocs.org

## What members are saying

Has the economic downturn affected your medical practice?

At the Nov. 13 Council meeting, CMSnews asked several physician-members for their thoughts on how the economic slowdown has touched them professionally. Here are their comments:

"It hasn't affected patients seeking treatment. Disease doesn't take a holiday. And people have medical insurance."

Arvind Madhani, MD

General Surgery

"Anxiety among patients is very palpable—but it's less about direct economic impact and more about their projections of bioterrorism and about feeling safe in this country. Doctors understand the mechanisms behind the spread of bioterrorism agents, and they can explain things to their patients and make them feel more secure."

**Tobias James** 

Third-year medical student University of Chicago

"Even if people lose their medical insurance, they still see their doctors. They'll just come in sicker and may have to go on Public Aid."

Wilson H. Hartz, III, MD

General Surgery

## **LEGISLATION**

## Patient and physician safety and protection act introduced in House

UNDER THE PATIENT AND PHYSICIAN SAFETY and Protection Act of 2001 (HR 3236), resident physicians would have limits on their working hours similar to those for truck drivers and airline pilots. This proposed legislation, recently introduced in the U.S. House, marks the first time Congress has been asked to address this issue.

Introduced by Rep. John Conyers (D-MI) and co-sponsored by 11 other members of Congress, the legislation calls for resident work hours to be limited to 80 hours per week and no more than 24 hours at one time. In addition, it would limit emergency room shifts for residents to no more than 12 hours and address the issue of supervision

for all residents. The proposed legislation would also provide for annual surveys of resident-physician working conditions, public disclosure of hospitals that violate the hours limits and the imposition of civil penalties.

Among the organizations supporting this bill are Public Citizen, the Committee of Interns and Residents, the Center for Patient Advocacy, the American Medical Women's Association, the American Society for Addiction Medicine, the Academy of Organizational and Occupational Psychiatry, Physicians Committee for Responsible Medicine, and the Union of American Physicians and Dentists.

## **STRESS**

## Survey puts spotlight on resident concerns

RESIDENT PHYSICIANS HAVE A LOT OF demands on their time. And a lot of stress in their lives. They need help looking for jobs or fellowships and advice on personal financial issues such as repayment of student loans. Many want to learn about the pitfalls facing physicians starting their own practices, or joining established practices, and where the job market is best for their chosen fields. Others are looking for low-cost social events and seminars.

These were some of the findings highlighted in a recent CMS survey to learn more about resident members and needs currently not being met. As part of the informal investigation, CMS contacted 115 physicians in training.

Residents also ranked the value of benefits currently being provided. Publications topped the list. Advocacy came next followed by social events. Continuing medical education and help starting a practice came slightly behind followed by member services.

CMS has formed a Resident Branch to offer a forum for residents across the county to meet and discuss common issues.

If you are interested in participating on the committee, contact Tessa Rebmann at trebmann@cmsdocs.org

## Mark your calendar for Branch and Specialty Society meetings

Wednesday, Dec. 5, 2001 Southeastern Branch

**Wednesday, Dec. 5, 2001** Chicago Dermatological Society

Thursday, Dec. 13, 2001 Student Branch

Thursday, Jan. 3, 2002 North Side Branch Wednesday, Jan. 16, 2002 North Shore Branch

Wednesday, Jan. 16, 2002 Chicago Gynecological Society

The above meeting dates, current at press time, are subject to change. Please refer to your mailed meeting notice for full details (i.e., cost, date, time, topic, location, etc.) and to confirm dates; or visit our web site at www.cmsdocs.org. Detailed listings also appear in Chicago Medicine.

## **PREPARING**

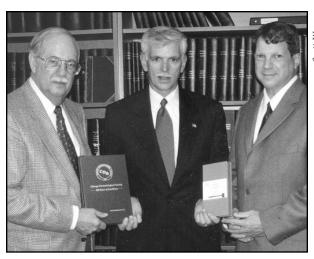
# CMS sets agenda for efforts against terrorism

THE NEWLY FORMED CMS AD HOC COMMITTEE on Terrorism met Tuesday, Nov. 13, to forge a response to the threat of terrorism. CMS is the voice of organized medicine in Cook County, and members of the committee considered what role your Society should play in educating physicians.

The committee will explore ways to help CMS members interact with city and state agencies in implementing preparedness plans. The committee also agreed that now would be a good time to expand the CMS relationship with public health. This would include making recommendations for the development and use of vaccines and agents for dealing with toxic substances.

In the coming months, the committee will reach out to experts in the field of emergency medicine, infectious disease and public health. Those names will be compiled into a source for future educational and informational events. CMS will also work to connect members to resources and information from the AMA, CDC, and ISMS. Look for listings and information at www.cmsdocs.org or check out CMSnews and Chicago Medicine.

The Ad Hoc Committee on Terrorism is chaired by John F. Schneider, MD, president-elect of ISMS and past president of CMS. Other members include Thomas Chorba, MD, Paul Mesnick, MD, Brian Farrell, MD, Martin Greenberg, MD, Daniel Schnuda, MD, William G. Troyer, Jr., MD, Raj B.



## **Derm Society donates artifacts**

The Chicago Dermatological Society (CDS) celebrated its 100th anniversary in October, and donated records of its history to the Chicago Medical Society. Shown, from left, are: Marshall Blankenship, MD, centennial chair, with a copy of the book he wrote on the CDS history; James Tarrant, CMS executive director; and Mark D. Gendleman, MD, with a copy of the centennial video written and directed by his wife, Lynn. Full coverage of the CDS centennial celebration will appear in the December issue of *Chicago Medicine*.

Lal, MD, Howard B. Levy, MD, and Urmila Chaudhry, MD.

Scott Warner

## Find us online at CMS Internet address www.cmsdocs.org



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