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ALMDA

News & Notes

THE SOCIETY FOR POST-ACUTE AND LONG-TERM CARE MEDICINE

WWW.ALMDA.ORG

Partnering with ALMDA makes a difference in the lives of patients

Dear Colleague,

ALMDA appreciates your continued involvement as we strive to provide the best medical care and compassionate service in one of the most challenging medical environments. Membership in ALMDA and AMDA provides you with many benefits including free webinars, national advocacy and national networking, clinical practice guidelines and unique education on topics tailored to your practice setting.

Membership in AMDA is not required, but we encourage you be a member with [AMDA](#) in addition to [ALMDA](#) to maximize your educational opportunities and professional interactions.

I encourage you to register for our 2019 Mid Winter Conference, Jan. 27, at the Hyatt Regency Birmingham – The Wynfrey Hotel. See the full schedule on page 4 and registration information on page 5.

We appreciate our continued relationship with the Alabama Nursing Home Association and their commitment to supporting both of our annual meetings, and we value the work we do together through the Advisory Committee.

If you have any questions about membership, please contact the Director of Specialty Society Management, Meghan Martin, at mmartin@alamedical.org.

Sincerely,

Sally Ebaugh, MD, CMD
President 

CMS Issues Medicare Physician Fee Schedule Final Rule

AMDA

On Nov. 1, 2018, the Centers for Medicare & Medicaid Services (CMS) issued the Calendar Year (CY) 2019 Medicare Physician Fee Schedule (PFS) final rule, which will take effect Jan. 1, 2019. The final 2019 PFS conversion factor is \$36.0391, a slight increase above the CY 2018 PFS conversion factor. Key items from the final rule include the following:

Streamlining Evaluation and Management (E&M) Payment and Reducing Clinician Burden Begins in 2021

CMS is finalizing a significant reduction in the current payment variation in office/outpatient E/M visit levels by paying a single rate for E/M office/outpatient visit levels 2, 3, and 4 (one for established and another for new patients) beginning in 2021. However, CMS is not finalizing the inclusion of E/M office/outpatient level 5 visits in the single payment rate, to better account for

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BCBS Alabama to no longer cover OxyContin

Medical Association of the State of Alabama

Effective Jan. 1, 2019, Blue Cross Blue Shield of Alabama will no longer cover OxyContin for patients with the exception of Blue Advantage members. This is in response to concerns for members' care and safety.

Since 2015, opioid prescriptions in the United States and in Alabama have declined. Over the last two years, opioid prescriptions for BCBS Alabama's commercial members have decreased 18 percent. While progress is being made, this issue calls for continued action by all parties.

Beginning Jan. 1, 2019, the following changes to Blue Cross' Opioid Management Strategy for commercial members will be implemented:

- Roxybond, the new instant release oxycodone formulation that is considered "abuse deterrent" by the FDA, will be covered.

- Lucemyra (lofexidine), the first non-opioid approved drug to treat the symptoms of opioid withdrawal, will be covered.
- OxyContin, and its generic (oxycodone ER), will no longer be covered. Xtampza ER (oxycodone ER) will be available to all members at a non-preferred brand cost share.

Letters have been mailed to BCBS patients receiving OxyContin or oxycodone ER notifying them of the change and recommending that they follow up with their doctor to discuss potential alternatives. Providers have also been notified with a list of covered alternatives.

Several alternatives will be covered at the lowest copay for members who need a long-acting opioid for around the clock pain management: Morphine ER, Tramadol ER, Fentanyl ER and Methadone will be covered. 

Medicare Physician Fee Schedule continued

the care and needs of particularly complex patients

Also, after consideration of public comments, CMS is not finalizing aspects of their proposal that would have reduced payment when E/M office/outpatient visits are furnished on the same day as procedures, established separate podiatric E/M visit codes, or standardized the allocation of PE RVUs for the codes that describe these services. They are finalizing a policy for 2021 to adopt add-on codes that describe the additional resources inherent in visits for primary care and particular kinds of specialized medical care. These codes will only be reportable with E/M office/outpatient level 2 through 4 visits, and their use generally will not impose new per-visit documentation requirements. These codes are neither required nor restricted by physician specialty, though CMS acknowledges that, like many other physicians' services for which payment is made under the PFS, they are specifically intended to describe services that clinicians practicing in some specialties are more likely to perform than those in other specialties. CMS is also finalizing a policy for 2021 to adopt a

new "extended visit" add-on code for use only with E/M office/outpatient level 2 through 4 visits to account for the additional resources required when practitioners need to spend extended time with the patient.

For CY 2019 and 2020, CMS will continue the current coding and payment structure for E/M office/outpatient visits; therefore, practitioners should continue to use either the 1995 or 1997 versions of the E/M guidelines to document E/M office/outpatient visits billed to Medicare for 2019 and 2020.

Beginning in 2021, for E/M office/outpatient levels 2 through 5 visits, CMS will allow for flexibility in how visit levels are documented, specifically a choice to use the current framework, MDM or time. For E/M office/outpatient level 2 through 4 visits, beginning in 2021 CMS will also apply a minimum supporting documentation standard associated with level 2 visits when practitioners use the current framework or MDM to document the visit.

CMS intends to engage in further discussions with the public over the next several years to potentially further refine the policies, through future

notice and comment rulemaking, for 2021.

Facility-Based Measurement in the Post-Acute Care Setting

CMS initiated the process of facility-based measurement focusing on the inpatient hospital setting, but has noted in the past the policy goal of expanding the concept into other facilities and programs and, in particular, to use the post-acute care (PAC) and the end-stage renal disease (ESRD) settings as the basis for facility-based measurement and scoring. In the proposed rule, CMS summarized a number of issues and topics related to the use of PAC and ESRD facilities and solicited comment on these topics. In the final rule CMS noted that lots of comments were received and will consider them in a future rulemaking.

Finalized New Skilled Nursing Facility Specialty Measure Set

CMS finalized a new quality measure specialty set for Skilled Nursing Facilities (SNF) for the 2019 Performance Period and future years with the exception of the newly proposed composite measure: Falls: Screening, Risk-Assessment, and Plan of Care to Prevent Future Falls. CMS

CMS announces efforts to improve patient safety, quality of care in nursing homes

AMDA

The Centers for Medicare & Medicaid Services (CMS) has announced efforts to support better care and outcomes for nursing home residents under the Civil Money Penalty Reinvestment Program (CMPRP). This three-year initiative aims to improve residents' quality of life by equipping nursing home staff, administrators, and stakeholders with technical tools and assistance to enhance resident care.

As part of the CMPRP, CMS will develop a variety of work products for nursing home professionals such as staff competency assessment tools, instructional guides, training webinars, and technical assistance seminars. These supports aim to help staff reduce adverse events, improve dementia care, and strengthen staffing quality, including by reducing staff turnover and enhancing performance.

CMS has released a tool kit in the CMPRP series, the Nursing Home Staff Competency Assessment, and supporting materials (see the Downloads section of the [CMPRP webpage](#)). The competency assessment is designed to help nursing home frontline and management staff evaluate their skills.

For additional information on the CMPRP, please visit the [CMS website](#).

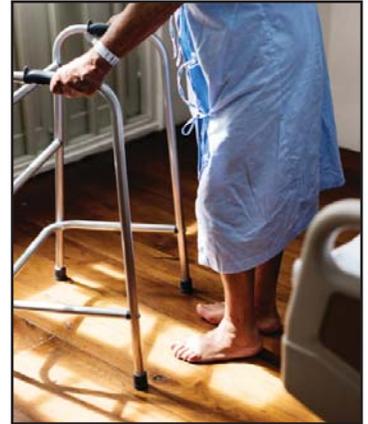


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Medicare Physician Fee Schedule continued

is no longer finalizing the inclusion of the composite falls measure because it must be fully vetted to utilize standardized tools that would appropriately identify the at-risk patient population. However, based on comments, CMS is finalizing the individual measures Q154: Falls: Risk Assessment and Q155: Falls: Plan of Care as additional measures in this measure set. [Click here](#) to view full measure set.

Telehealth Services

CMS continues to limit the subsequent nursing facility care services (CPT codes 99307-99310) furnished through telehealth to once every 30 days. CMS says that since these codes are used to report care for patients with a variety of diagnoses, including psychiatric diagnoses, they do not think it would be appropriate to remove the frequency limitation only for certain diagnoses. They say that the services described by these CPT codes are essentially the same service, regardless of the patient's diagnosis. CMS also continues to have concerns regarding the potential acuity and complexity of SNF inpatients, and therefore, they did not propose to remove the frequency limitation for subsequent nursing facility care

services in CY 2019.

Discontinue Functional Status Reporting Requirements for Outpatient Therapy

The data from the functional reporting system was to be used to aid CMS in recommending changes and reforming of Medicare payment for outpatient therapy services that were subject to the statutory therapy caps. Going forward, the functional status reporting data that would be collected may be even less purposeful because the Bipartisan Budget Act of 2018 repealed the therapy caps while imposing protections to ensure therapy services are furnished when appropriate. As a result, CMS is finalizing their proposal to discontinue the functional status reporting requirements for services furnished on or after Jan. 1, 2019.

Medicare Shared Savings Program Accountable Care Organizations (ACOs)

This final rule also addresses a subset of changes to the Medicare Shared Savings Program for ACOs proposed in August 2018. CMS is finalizing the following policies:

- A voluntary six-month extension for existing ACOs whose participation agreements expire on Dec. 31, 2018,

and the methodology for determining financial and quality performance for this six-month performance year from Jan. 1 through June 30, 2019.

- Allowing beneficiaries who voluntarily align to a nurse practitioner, physician assistant, certified nurse specialist, or a physician with a specialty not used in assignment to be prospectively assigned to an ACO if the clinician they align with is participating in an ACO.
- Revising the definition of primary care services used in beneficiary assignment.
- Providing relief for ACOs and their clinicians impacted by extreme and uncontrollable circumstances in 2018 and subsequent years.
- Reducing the Shared Savings Program core quality measure set by eight measures, and promoting interoperability among ACO providers and suppliers by adding a new CEHRT threshold criterion to determine ACOs' eligibility for program participation and retiring the current Shared Savings Program quality measure on the percentage of eligible clinicians using CEHRT.

Alabama Medical Directors Association 2019 Mid Winter Conference

January 26

Hyatt Regency Birmingham - The Wynfrey Hotel

Agenda

Saturday, January 26

7:30 a.m. – 8:30 a.m.

Meeting of the ALMDA Board of Directors, ALNHA's executives, ALAA executives and the ADPH Medical Director Advisory Committee

8:00 a.m. – 8:55 a.m.

Registration; Strolling Breakfast with Exhibitors and Poster Viewing

9:00 a.m. – 9:05 a.m.

Welcome

Sally Ebaugh, MD, CMD, President

9:05 a.m. – 10:35 a.m.

Update on Immunizations and Notifiable Diseases

Burnestine Taylor, MD, Medical Officer, Disease Control and Prevention, Alabama Department of Public Health

Learning Objective: Recognize the importance of immunizations and notifiable disease procedures.

10:35 a.m. – 11:00 a.m.

Break with Exhibitors and Poster Viewing

11:00 a.m. – 12:00 p.m.

Geriatrics – A Year in Review

Jacquelynn Luker, MD, Geriatric Fellow, University of Alabama Family Medicine Program; and Brittany McArthur, MD, Geriatric Fellow, University of Alabama Family Medicine Program

Learning Objective: Apply physician resident-in-training updates in the care given to the geriatric population.

12:00 p.m. – 12:30 p.m.

Lunch with Exhibitors

12:30 p.m. – 1:00 p.m.

ALMDA membership meeting and Poster Awards

1:00 p.m. – 2:30 p.m.

Psychotropic Medications for the LTCF Provider

Victor Sung, MD, Associate Professor, Department of Neurology, Division of Movement Disorders, University of Alabama - Birmingham

Learning Objective: Identify appropriate techniques to reduce or eliminate inappropriate use of psychotropic medications in nursing home residents.

2:30 p.m. – 3:30 p.m.

Preventing the Revolving Door of COPD Readmissions

Anand S. Iyer, MD, MSPH, Assistant Professor, Department of Medicine, Division of Pulmonary, Allergy and Critical Care Medicine, University of Alabama - Birmingham.

Learning Objectives: Identify the key demographic and clinical predictors of severe exacerbations of COPD and readmissions and describe novel approaches to prevent COPD readmissions post-hospital discharge.

3:30 p.m.

Adjourn

Accommodations

For hotel reservations at the Hyatt Regency Birmingham - The Wynfrey Hotel, call (800) 233-1234 and ask for the Alabama Medical Directors Association Room Block. Rate for Friday, Jan. 25, is \$139.

Room cutoff is Jan. 4, 2019.

Registration

To register, use the form on page 3 or print a Membership and Conference Registration form at www.almda.org.



THE ALABAMA
MEDICAL DIRECTORS
ASSOCIATION

ALMDA
19 S. Jackson Street
Montgomery, Ala. 36104
(334) 954-2500 | Fax (334) 269-5200
www.almda.org

2019 Individual Membership and Conference Registration

Name: _____ Professional Designation: _____

Facility Name: _____

Facility Address: _____
Street or PO Box City, State ZIP

*Home Address: _____
Street or PO Box City, State ZIP

Facility Phone: _____ *Cell Phone: _____

Fax: _____ *E-mail: _____

- Check here to opt out of being listed in the 2019 ALMDA Member Directory.
(*Home addresses, cell phone numbers and e-mail addresses will not be published).

Select a Membership Category (Pay dues online at www.tinyurl.com/ALMDA2019)

- Regular Membership: \$100**
Physicians and Nurse Practitioners involved in long-term care
- Associate Membership: \$50**
Nurses, Pharmaceutical Representatives, Administrators, and any other professional involved in long-term care

Meeting Registration (Register online at www.tinyurl.com/ALMDA2019)

Attendees of ALMDA's conferences must be a member. Choose the appropriate category above.

- Mid Winter Conference (Jan. 26, 2019) \$200 (Add \$25 if registering after Jan. 18)**
Hyatt Regency Birmingham – The Wynfrey Hotel, 1000 Riverchase Galleria, Birmingham, AL 35244
For hotel reservations, call (800) 233-1234 and ask for the Alabama Medical Directors Association Room Block. Rate for Friday, Jan. 25, is \$139. **Room cutoff is Jan. 4, 2019.**
- Annual Conference (July 25-28, 2019) \$300 (Add \$25 if registering after July 19)**
Sandestin Golf and Beach Resort, Linkside Conference Center, 9300 Emerald Coast Highway, Miramar Beach, FL 32550
For hotel reservations, call the Sandestin Golf and Beach Resort at (800) 320-8115 with group code 23S2YZ or reserve online at www.sandestin.com/23S2YZ.aspx. Rates begin at \$185 per night and apply for three days before and three days after the conference based on availability. **Room cutoff is June 21, 2019.**

- Annual Conference Guest(s) (meal functions only) \$75 each** Name(s): _____

PAYMENT:

Credit Card: VISA MasterCard American Express Check payable to ALMDA

Cardholder Name: _____

Billing Address: _____
Street or PO Box City, State ZIP

Card Number: _____ Exp. Date: _____ Security Code: _____

Signature: _____ Email for Receipt: _____ Amount: \$ _____

Complete form and return to: Alabama Medical Directors Association (ALMDA)
P.O. Box 1900 • Montgomery, AL 36102 • Fax: (334) 269-5200

For more information, please contact Meghan Martin at MMartin@alamedical.org or (334) 954-2500.



AMDA – THE SOCIETY FOR POST-ACUTE AND LONG-TERM CARE MEDICINE

ATLANTA GEORGIA 2019

ANNUAL CONFERENCE

March 7 – 10, 2019

Hyatt Regency Atlanta

AMDA 2019 Annual Conference comes to Atlanta March 7-10

Registration is open for the 2019 Annual Conference for AMDA – The Society for Post-Acute and Long-Term Care (PALTC) Medicine. Below are the top 10 reasons to attend the only educational forum of its kind in the field of PALTC:

1. CREDIT HOURS – Earn up to 21 CMD management credits, 24.75 CME credits, 24.75 ABIM MOC points.
2. NETWORKING – Focused interactions with colleagues, peers, mentors, and friends.
3. INSPIRATION – Hear from thought leaders in the PALTC community in education sessions and keynote general sessions.
4. CAREER GROWTH – Visit the job fair and network with facilities and institutions that are hiring. Gain skills to help advance your career.
5. MENTORING OUR FUTURE GENERATION – The [Foundation](#)
6. STATE CHAPTERS – Connect with colleagues from your chapter – network, socialize, make new friends.
7. LATEST PRODUCTS & SERVICES – Visit with companies showcasing the latest technologies and products in the PALTC industry in the Exhibit Hall.
8. INNOVATION – PALTC innovators compete in the Shark Tank Competition and display their ideas in the Innovation Pavilion.
9. PERSONALIZED LEARNING – A variety of education sessions with designated learning levels, teaching methods, and topic areas to help you select the sessions that best meet your needs.
10. SOCIAL EVENTS – Exhibit Hall Welcome Reception, State Chapter Receptions, President's Dessert Reception, and more.

[Futures Program](#) provides a unique opportunity for residents, fellows, and advanced practitioners to learn from mentors.

To register:

- **Join the Society** or **renew your membership** to get the discounted member rate.
- **Register for the conference** by Dec. 12, 2018, to qualify for the early bird registration rate.
- **Get a room** at one of the two conference hotels. Conference registration is required to book.

For more information visit

www.paltc.org

2019 Governmental Affairs Conference

January 28 - 30, 2019

Willard Intercontinental | Washington D.C.

Medical Association of the State of Alabama announces Government Affairs Conference: Jan. 28-30, 2019

Make plans to join your colleagues at the Medical Association of the State of Alabama's Governmental Affairs Conference in Washington, D.C., Jan. 28-30, 2019.

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 A67 to reserve a room at the discounted rate of \$299 night. The conference rate will apply for dates immediately preceding the conference based on availability. **The deadline to book a room is Jan. 2, 2019.**

ALMDA News & Notes

Alabama Medical Directors Association

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www.almda.org

Sally Ebaugh, MD, Publisher
Meghan Martin, Executive Editor
Charlotte H. Morris, Senior Editor

The Alabama Medical Directors Association (ALMDA) is the professional association of physicians and other professionals practicing in the long-term care continuum and is dedicated to excellence in patient care by providing education, advocacy, information and professional development.

The articles contained in ALMDA News & Notes are meant to provoke thought and comment and do not necessarily reflect the views and opinions of the members, Executive Council or staff of the Alabama Medical Directors Association. Comments and letters to the editor are welcome.