

**Administrative Office: 805/484-6822**

**www.venturamedical.org**

**May 12, 2017**

**CALL ON GOVERNOR AND LEGISLATURE TO KEEP PROMISE TO MEDI-CAL PATIENTS**

As the passage of the American Health Care Act (AHCA) by the U.S. House threatens to slash Medicaid funding and defund Planned Parenthood, California's leading health care providers are fighting to ensure Congress protects patient access to the vital services provided by Medicaid and community clinics.

An equally important battle is being waged here in California. More than one third of all Californians struggle to access dentists, physicians and clinics, as a result of the state's underfunded Medi-Cal program.

CMA President, Dr. Ruth Haskins wrote in a letter to the Legislature, "More than a third of Californians, including 50 percent of children in the state, rely on Medi-Cal for health care. Offering increased coverage is a hollow talking point when patients are forced to wait months to secure an appointment with a physician or dentist, can't access a specialist or have to travel 60-plus miles to their medical appointments."

Instead of improving access to care for the 14.3 million Californians served by Medi-Cal, the current budget proposes to use tobacco tax funds to backfill a cut to the state's general fund contribution to the program. This plan does nothing to improve California's health; it maintains the status quo and adds more patients to the back of the line in already overflowing waiting and emergency rooms.

There are well-documented barriers to care within Medi-Cal and Denti-Cal. Sixteen California counties have no Denti-Cal providers or none able to accept new patients. More than 50 percent of Medi-Cal patients have reported difficulty getting in to see a specialist. And increasingly, community clinics are forced to close their doors due to severe underfunding.

**Contact your State Legislator:**

Senator.Jackson@senate.ca.gov  
916/651-4019

Senator.Stern@senate.ca.gov  
916/651-4027

Assemblymember.Acosta@assembly.ca.gov  
916/319-2038

Assemblymember.Irwin@assembly.ca.gov  
916/319-2044

Assemblymember.Limon@assembly.ca.gov  
916/319-2037

*"Tobacco tax revenues must be invested as voters legally required (passage of Prop.56), to improve health care access for 14.3 million California patients. Status quo is not acceptable."*

The State Legislature has until June 15 to adopt a final 2017-2018 budget.

<https://twitter.com/cmaphysicians>

<https://www.facebook.com/cmaphysicians>

<https://www.linkedin.com/company/california-medical-association>

**U.S. HOUSE VOTES TO STRIP MEDICAID, LEAVES MILLIONS WITHOUT HEALTH CARE COVERAGE**

American Health Care Act will erode pre-existing condition protections, defund Planned Parenthood and cause over three million Californians to lose health insurance coverage.

The U.S. House of Representatives voted to pass H.R. 1628, an amended version of the American Health Care Act (AHCA), to repeal and replace the Affordable Care Act (ACA).

In response, the California Medical Association (CMA), representing over 43,000 physicians in all specialties and modes of practice, warned that this flawed policy will worsen both coverage and access to care for Californians, especially for Medicaid (Medi-Cal) patients, women and Californians living with pre-existing health conditions.

The AHCA is not good news for Californians. It cuts Medicaid by \$880 billion (\$24 billion in California), dooming California at time when one-in-three Californians is dependent on the already underfunded system for health care. Fifty percent of rural Californians will lose coverage gained through Medi-Cal expansion or private insurance under the ACA.

U.S. Senate Republicans said Thursday they won't vote on the House-passed bill to repeal and replace the ACA, but will write their own legislation instead.

CMA urges U.S. Senate leaders to engage with physicians and other experts on the front lines caring for patients to develop a proposal that protects health care coverage for our most vulnerable populations, addresses affordability, and improves patient access to physicians.

**VCMA General Membership Dinner Meeting**

**Thursday, May 25<sup>th</sup>**

**Ruth Haskins, MD, CMA President**

*"Bring Back the Joy of Medicine"*

Dr. Haskins will provide simple, evidence based options for individuals to apply to minimize the daily stressors that currently abound in the practice of medicine.

6-7pm Exhibitor Reception

7pm – Buffet Dinner & Speaker

Spanish Hills Country Club, Camarillo

**RSVP: julie@venturamedical.org**

**CMS TO ISSUE MIPS PARTICIPATION STATUS NOTICES**

Starting in late April, the Centers for Medicare & Medicaid Services (CMS) began notifying physicians whether they will be subject to Medicare's new Merit-Based Incentive Payment System (MIPS). MIPS is part of the new Medicare Quality Payment Program established under the Medicare Access and CHIP Reauthorization Act of 2015 (MACRA).

Providers with less than \$30,000 in Medicare payments or fewer than 100 Medicare patients are exempt from the MIPS reporting requirements. Physicians who exceed this threshold are subject to MIPS and are encouraged to participate in MIPS for the 2017 transition year to avoid a negative payment adjustment.

Over the next month, physicians will be receiving letters from CMS informing them if they, or the individuals in their group, are exempt from MIPS. The letter also advises physicians to review their information and determine whether they plan to participate as an individual physician or as a group, how to avoid a penalty or possibly earn a positive adjustment, and includes an FAQ with additional information. For clinicians participating under multiple TINs, a separate notification will be sent to reflect each TIN.

If you did not receive a letter, you can confirm your participation status using the CMS MIPS participation lookup tool.

Physicians can visit the California Medical Association (CMA) MACRA resource center to better understand the payment reforms

and access resources to help with the transition. The center is a one-stop-shop with tools, checklists and information from CMA, CMS, the American Medical Association and national specialty society clinical data registries. View the CMA resource center at [www.cmanet.org/macra](http://www.cmanet.org/macra) or visit the CMS Quality Payment Program website for more information

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### **MEDI-CAL EHR INCENTIVE PROGRAM REPORTING DEADLINE EXTENDED**

The California Department of Health Care Services (DHCS) has announced that it will extend the attestation deadline for the Medi-Cal electronic health record (EHR) incentive program reporting for the 2016 program year. The deadline has been pushed to May 23, 2017. After that date, DHCS will only accept 2017 attestations.

As a result of this extension, attestations for the 2017 program year will not be accepted until after the 2016 program year closes on May 23, 2017, at 6 p.m.

The Medicaid EHR Incentive Program provides funding to Medicaid (Medi-Cal in California) providers and hospitals to adopt, implement, upgrade and make meaningful use of certified EHR technology. Eligible providers should be aware that 2016 is the last year that they can sign up for the program. Providers who have not received at least one incentive payment by the end of the 2016 reporting year won't be able to receive any EHR incentive program payments in the future.

Questions may be addressed to: Medi-Cal.EHR@dhcs.ca.gov or (916) 552-9181.

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### **FEDERAL APPEALS COURT UPHOLDS DECISION TO BLOCK ANTHEM-CIGNA MEGA-MERGER**

A federal appeals court on Friday upheld a lower court's decision to block the \$48 million mega-merger between Anthem and Cigna. The ruling favored the U.S. Department of Justice and 11 states, including California, who argued that the Anthem-Cigna merger would limit price competition and lower the quality of health care.

CMA has long been concerned with the consolidation of health plans and health insurers, and the reduction of competition. When market power is consolidated among just a few companies, insurers contract with fewer physicians, limiting choice for patients, increasing wait times for referrals, and sometimes forcing them to pay more to see out-of-network doctors.

Seventy-one percent of the nation's metropolitan areas already lack competitive commercial health insurance markets. A merger between Anthem-Cigna would further diminish competition in 121 metro areas throughout the 14 states where Anthem is licensed to provide commercial coverage.

Health insurer consolidation also compromises the ability of physicians to advocate for their patients. In practice, market power allows insurers to exert control over clinical decisions, which undermines the patient-physician relationship and eliminates crucial patient care safeguards. Competition among health insurers, on the other hand, can lower premiums, enhance customer service and spur innovative ways to improve quality while lowering costs.

Barring an appeal to the U.S. Supreme Court, today's federal appeals court ruling would represent the final blow the Anthem and Cigna's proposed merger.

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### **NEW OUT-OF-NETWORK BILLING AND PAYMENT LAW TAKES EFFECT JULY 1: WHAT PHYSICIANS NEED TO KNOW**

On July 1, 2017, a new law (AB 72) will take effect that will change the billing practices of non-participating physicians providing non-emergent care at in-network facilities including hospitals, ambulatory surgery centers and laboratories. The law, signed in 2016, was designed to reduce unexpected medical bills when patients go to an in-network facility but receive care from an out-of-network doctor.

CMA is hosting a free members-only webinar to educate physicians about the new law on May 17 at 12:15 p.m. The one-hour webinar will provide an overview of the new law, including when it applies, the interim payments required under the law, and how to challenge the interim payment through the independent dispute resolution process.

For more information, or to register, visit [www.cmanet.org/events](http://www.cmanet.org/events). Attendees should register at least one hour before the webinar. If you do not register an hour before the webinar start time, we cannot guarantee your attendance.

Contact: CMA's member service center, (800) 786-4262 or [memberservice@cmanet.org](mailto:memberservice@cmanet.org).

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### **BIPARTISAN LEGISLATION TO ADDRESS PHYSICIAN SHORTAGES INTRODUCED IN CONGRESS**

Legislation designed to increase the number of physicians providing care in underserved and rural areas was introduced in Congress this week by California Congressman Darrel Issa (R-San Diego). The bill, supported by the CMA, would extend and expand the Conrad 30 Waiver program that allows physicians who come to the United States for training to remain in the country upon completing their medical residency if they agree to practice in underserved areas for at least three years. It would increase the number of Conrad 30 waiver physicians in California from 30 to 45 per year.

Under current law, international medical students using a J-1 visa to study in the United States are required to return to their country of origin for two years upon completion of their medical residency before they are eligible to apply for a green card or visa. The Conrad 30 program, which will expire April 28 without congressional action, waives this return requirement for a limited number of new physicians each year who agree to work for three years in an underserved area of the U.S. The bill Conrad State 30 and Physician Access Act would reauthorize the program until 2021.

The legislation also expands the program by providing a path to increase the number of waivers available to states, allowing the program to expand beyond the current allotment of 30 waivers per state if certain requirements are met.

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### **CLASSIFIEDS**

Free listings for VCMA members. Submit ad info to: [marycarr@venturamedical.org](mailto:marycarr@venturamedical.org)

### **PRACTICE OPPORTUNITIES**

**Simi Valley-** Urgent Care opening, Full-time MD, DO or PA needed ASAP. Outpatient Urgent Care Facility. There is an opening as well to assist with coverage on an ongoing basis. The clinic is open Mon-Friday 8am-8pm and Sat/Sun 9am-5pm. There are two additional Urgent Care locations; Thousand Oaks and Newbury Park, CA. No call schedule is required. Provider will see approximately 20-35 patients per shift. This would include standard urgent care procedures (suturing), Occupational Medicine and primary care as well. We have x-ray on site. The Simi Valley location has a high volume of Occupational Medicine. This Center is looking for a Full-time MD, DO or PA as soon as possible. [www.medcentersimi.com](http://www.medcentersimi.com)

Requirements: CA Medical License; Board Certified or Eligible; DEA; Family Practice, Urgent Care or Occupational Med Experience. National Medical Examiners Certificate a plus. Paid Medical Malpractice insurance.

Please contact Denice @ 805-583-5555 ex 26 or email [admin@medcenterofsimivalley.com](mailto:admin@medcenterofsimivalley.com)

**Oxnard** - Established Medical Practice for sale Brian Tamura, MD at 805-981-9111

**Thousand Oaks area** - seeking candidates from either **academic or private practice backgrounds to consider.**

- Part-time or full-time; Flexible schedule
- 100% Outpatient, Privately owned
- New 6,300 square foot office facility
- Traditional Family Medicine with an Integrative Medicine approach
- Competitive financial package
- Well established in the area and poised for high growth
- Opportunity to concentrate on women's health issues both young adults to adults
- Opportunity to become vested in the profitability of the practice

[drwilkes@summithealth360.com](mailto:drwilkes@summithealth360.com) Please reply with your specialty and location of interest, and the best number to reach you along with a few dates and times you are available to speak.

**Ventura** - Full Time MD or DO needed for M-F 8:00 AM to 5:00 pm at WVMC. WVMC is a designated Federally Qualified Health Center (FQHC), affiliated with the Ventura County Medical Center (VCMC). If interested please contact Kristina Navarro @ 805-641-5611 or [Kristina.navarro@ventura.org](mailto:Kristina.navarro@ventura.org)

### OFFICE SPACE AVAILABLE

**Camarillo** - Office with two to three exam rooms to share. Part time or full time. Affordable and flexible. Please contact (805)383-2929.

**Oxnard** - Medical office in prime location, Palms Medical Plaza. 1640 sq feet, comes fully furnished, networked, with 2 large 'procedure rooms', Newer 2 story medical building, several plumbed exam rooms, multiple work areas, in-suite restroom.

Easy access to building, with own parking lot. Large windows with green view. Newly painted. All utilities and cleaning included in rent of \$4,750. Contact (805) 479 7680

**Thousand Oaks** - Sublease up to 4 days per week; 7 exam rooms in prof. bldg. Please call Lynn at (805)482-8989

**Thousand Oaks** - 2700 SF office with large procedure room and recovery area, and 4 exam rooms. Available Mondays and Tuesdays 8 AM to 12 noon; Wednesdays 2 to 6 PM. More info, visit [www.AGImedical.com](http://www.AGImedical.com)

**Ventura** - For Lease: 500 sq.ft. Beautiful medical office on Brent St. (805)258-2059 ext.2447 for info.

**Westlake Village** - Space Offered: 1-5 operatories in well maintained medical building in Westlake Village. Photos on our website at [www.smilesbyaps.com](http://www.smilesbyaps.com). Please call (805) 279-7021

**Westlake Village** - Remodeled, medical office for sublease. Available up to four days a week. (818)438-5997 [Brisbeee@aol.com](mailto:Brisbeee@aol.com)

### FOR SALE

**OB/GYN Equipment** - Colposcope for sale. Call (805) 535-4422

**Pediatric Practice Equipment** - Vaccine 4.3 cubic ft. refrigerator-freezer combo; paid \$1499, only used 4 months. (Best offer) WelchAllyn Rectal thermometer. \$100 2 different sizes pediatric Aneroid Sphygmomanometers; \$30 ea. or \$50 both. SECA newborn scale \$70

Email: [spa.pinzonarellano@gmail.com](mailto:spa.pinzonarellano@gmail.com)

**Pediatric weight machine.** Never used (not digital) Capacity: 41 lb x 1/4 oz \$250.00. Contact Terry Yingling at 805-446-4444, Ext. 209

### MARK YOUR CALENDAR

**May 23 VCFMC-ACO 2018 Participation Enrollment Meeting** 6:30pm - Agoura Hills Event Center

**May 25 VCMA Membership Dinner Meeting** Spanish Hills Country Club (SEE PAGE 1)

### CMA WEBINARS

Your VCMA/CMA membership gives you free access to both live and on-demand webinars updating you and your staff on key issues affecting physicians. Upcoming webinars include:

**May 17: Assembly Bill 72:** What Physicians Need to Know About the New Law on Payment and Billing for Out-Of-Network Services 12:15pm-1:15pm

**May 31: Aligning Clinical Practice with Diabetes Prevention: Screen, Test and Refer** 12:15pm-1:15pm

Past Webinars can be viewed On-Demand for FREE in the CMA Resource Library.

### MOST REQUESTED MEMBER BENEFIT

**Resume Service:** Call 484-6822 or email [julie@venturamedical.org](mailto:julie@venturamedical.org) to request resumes to fill practice personnel positions. 100's on file. FREE to members.

### Professional Liability:



has been endorsed by VCMA for the past 15 years. For quote or questions contact: [MLawrence@thedoctors.com](mailto:MLawrence@thedoctors.com)

**The MIPS Navigator™** is an online tool that makes it possible for individual clinicians or practice administrators to quickly and easily sort through the various MIPS alternatives and produce a practice specific "2017 MIPS Itinerary/Plan" for each of the 4 MIPS domains that will maximize their likely MIPS success.

1. A step-by-step guide to maximize your score.
  2. Continued access to the MIPS Navigator FAQs and list serve through 2017.
  3. The ongoing ability to update your plan.
- Regular \$69.95 for 1 year subscription, only \$49.95 through VCMA website homepage link: [www.venturamedical.org](http://www.venturamedical.org) click on MIPS Navigator icon link. Endorsed by VCMA.

Homepage link: [www.venturamedical.org](http://www.venturamedical.org) click on MIPS Navigator icon link:

"Easy and affordable solution for your practice."  
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The MIPS NAVIGATOR  
\$49.95  
QH systems

### Featured member benefit

**Insurance Programs:** Through the Health Insurance Program with Mercer, California Medical Association (CMA) members - individual policyholders and members of a group health plan - have access to best-in-class insurance programs that are customized to fit their specific needs. NEW Workers Comp Preferred plan, members receive 5% discount off premium. Many members' savings equal to VCMA/CMA annual dues.

For more information, contact Mercer at (800) 842-3761 or [CMACounty.Insurance.service@mercer.com](mailto:CMACounty.Insurance.service@mercer.com), or visit

[www.CountyCMAMemberInsurance.com](http://www.CountyCMAMemberInsurance.com).

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