

DISCLOSURE

Mr. Porte has declared no conflicts of interest related to the content of his presentation.

LEGISLATIVE & REGULATORY UPDATE

NAMDRC

36th Annual Educational Conference

San Diego, CA

March 21-23, 2013

THE NEW ENVIRONMENT IN HEALTH POLICY

- *Democrats vs
Republicans*
- *Medicare expenditures
slowing*
- *COPD Readmissions*
- *Ongoing Issues*
- *Pulmonary Medicine
Health Policy Summit*

DEMOCRATS & REPUBLICANS

- *The vitriol is very real*
- *Even “leaders” want others to lead*
- *Political maps (Congressional districts) make 90+% of districts “safe”*

MEDICARE EXPENDITURES SLOWING

- *August 2010 CBO projection*
 - *\$6.5 trillion 2012-2020*
- *Most recent CBO projection*
 - *\$6.1 trillion 2012-2020*
(exceeds \$300B in savings)
 - *Economy*
 - *ACA*
 - *??*
- *Political will to tinker diminishing*

COPD READMISSIONS

- *Likely to be implemented in one of next two cycles*
- *Heavy penalties to hospitals*
- *Medicare creates baseline for each hospital based on historical data*
- *“Dinging” the hospitals easier than “dinging” the physician who manages the patient*

COPD READMISSIONS (CONT'D)

- *Capitated systems have notably greater leverage*
- *Some institutions okay with financial hit*
- *Clinical considerations*
 - *COPD vs other diagnoses*
 - *Multiple co-morbidities*
 - *Patient compliance with plan of care*
 - *Role of remote monitoring, call centers, etc.*

ONGOING ISSUES

- *COPD Readmissions*
- *Home trachs*
- *Competitive bidding*
 - *Oxygen, Sleep, Nebulizers, Part B drugs*
- *Audits, documentation*
 - *Pulm rehab*
 - *Supervision*
 - *DME*
 - *Physician notes, EMR, look back, etc.*
- *\$\$ for pulmonary rehab*

INTERACTIVE QUESTION # 1

- *Considering a list of issues, where should NAMDCRC focus its attention?*
 1. *COPD readmissions*
 2. *Shifting landscape of payment models*
 3. *Payment for pulmonary rehab*
 4. *Audits, documentation, EMR issues*

**PULMONARY
MEDICINE
HEALTH
POLICY
SUMMIT**

- *Joint effort of NAMDRRC, ACCP, ATS, AARC, NHOPA, COPD Foundation*
 - *Address issues all societies agree can be addressed by legislative and/or regulatory actions*
 - *Address issues unique to pulmonary*
 - *(NOT addressing SGR)*
- *Overlap understandable, unavoidable*

SUMMIT ISSUES

- *EHR/EMR, Documentation, Audits*
- *Telehealth/Telemedicine*
- *Oxygen Payment Reform*
- *PQRS, P4P, Value Based Purchasing*
- *COPD Research*

FORMAT OF CONFERENCE

- *Two days of discussion on the five identified issues*
- *Participation of societies + policymakers and corporate interests*
- *Behind closed doors attempt to create roadmap(s) for action*
- *Hopefully embraced by all societies, and published*

INTERACTIVE QUESTION #2

- *IF NAMDRC could eliminate one recurring headache, it would be:*
 1. *The unknowns associated with SGR*
 2. *The shift away from fee-for-service medicine*
 3. *Overnight/weekend coverage*
 4. *Not enough time in the day to do what needs to be done*