



"The Independent Physicians Association of Nassau/Suffolk Counties is "uniting" physicians and community hospitals to help them remain independent."

EXECUTIVE DIRECTOR'S MESSAGE...



Dear Members:

We have some good news and not-so-good news. Let's start with the not-so-good news. We collected only \$4 million from 54 physicians for Practice Management of America, or "PMA." While that may have been a great start, it was not enough to break escrow for physician majority ownership.

Therefore, we are taking a different route. On September 16th, we will have another offering agreement that will allow all of our physicians, as well as friends and family, to be at the helm of the ever-changing healthcare marketplace.

We thank those who supported this vision, as well as all of the IPA members, as we have grown to become a force to be reckoned with in the marketplace.

Our goal has always been to present an alternative to selling your practice to the billion-dollar healthcare system that puts the benefit of the system over that of the patients. The IPA's goal is and will always be to provide the *Right Care at the Right Place at the Right Time*.

Now the good news... with regards to their shared savings program, Blue Cross Blue Shield just issued a check totaling \$289,000 to the IPA for 2014, which is the first year in that program that included only 40 primary care physicians. Currently, we are working on a formula to divide the savings back to our members. The great news is that 100% of the bonus will be paid to the members who did the work.

We thank you for your continued support in helping execute the vision that lets doctors lead the way for healthcare change on Long Island.

Sincerely,

Michael Guarino
Executive Director

Turning Doctors into Typists

America's doctors are deeply demoralized about practicing medicine, according to nationally syndicated writer Charles Krauthammer. In Krauthammer's opinion, the healing profession they joined is now "plagued by 'incessant interference' from insurers, lawyers, and government." Krauthammer points to the new federal EHR mandates as an example pointing out that now at your doctors' visit, the doctor spends less time listening to your concerns and more time plugging away at a computer. In fact, one study found that emergency room doctors spend 44% of their time filing out forms instead of tending to patients. While a new era may demand new regulations and new electronic standards, Krauthammer believes that this is exacting a huge price on the healthcare industry, turning doctors from healers to typists.



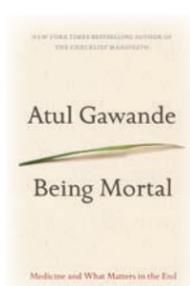
For more information, visit [The Washington Post](http://www.washingtonpost.com) and search for "Charles Krauthammer."

NY-Presbyterian and Athena Health Make a Deal

After purchasing Lawrence Hospital last year and the Hudson Valley Hospital Center in Cortland Manor in January, New York-Presbyterian has formed a new "physician enterprise" called the New York-Presbyterian Medical Groups. This clinically integrated enterprise will collaborate with ColumbiaDoctors and Weill Cornell Physicians, two IPAs associated with New York-Presbyterian, to coordinate care delivery in the region. New York-Presbyterian Medical Groups will initially include Lawrence Medical Associates, Westchester Medical Practice, and New York Queens Medicine and Surgery. After coming to terms with Athena Health on a deal, New York-Presbyterian made the move to clinically integrate themselves using "state of the art" technology that will be provided by Athena. Under the new agreement, the new enterprise and Athena Health will create a clinically integrated, cloud-based technology infrastructure for the physician network.

For more information, visit <http://www.prweb.com/releases/2015/07/prweb12852822.htm>.

Book Club



Moving forward, one of IPANS' main objectives will be changing culture for our physicians on how best to deal with end-of-life scenarios with their patients. In 2011, Medicare published that of the 20% of the healthcare expenditures in the United States that they cover 20% - 28% was spent on the patients last six months of life. Accordingly, our team recommends the book "*Being Mortal: Medicine and What Matters in the End*," written by Atul Gawande, a surgeon who recognized that although medical school prepared him for all types of situations, it

never prepared him to deal with death in a dignifying and practical manner. After all, Gawande reminds his readers that death is a natural part of life, and in most cultures is respected as such. Elders are allowed to die dignified deaths when it is their time.

Conversely, the culture of the current healthcare system has been to placate family members of the elderly by imposing expensive and painful procedures in an effort to marginally prolong a life that is ready to end. To begin a cultural change in how the healthcare community views and understands death, IPANS will be endorsing the "*Five Wishes: Aging with Dignity*" pamphlets and encouraging our primary care physicians to discuss these end-of-life issues with their patients. After all, we believe that since death is the closing chapter of life, the patients should have the right to dictate how their stories end. By engaging in discussion with their physicians, people will be much more comfortable considering the important issues raised in "Five Wishes."



For more information, visit www.medicarenewsgroup.com Actual article link: <http://www.medicarenewsgroup.com/context/understanding-medicare-blog/understanding-medicare-blog/2013/06/03/end-of-life-care-constitutes-third-rail-of-u.s.-health-care-policy-debate>



**PAYORS CONSOLIDATE
Anthem BCBS Acquires Cigna
Aetna Buys Humana**

After denying "a \$47.5 billion offer by Anthem" to buy out Cigna Health Insurance, Cigna has now agreed to Anthem's \$54.2 billion offer....

Read more inside

Save the Date!

**Wednesday, September 16th
5:30 to 9:30 pm at the Watermill
Now is the Time for Action!**

**We Know You Have Heard It...
Now is the Time for Action!
Bring your checkbook**

If you are a member of the Nassau/Suffolk IPA, or the office manager of a physician who is a member, you are cordially invited to join us at The Watermill on Wednesday, September 16th, from 5:30 to 9:30 pm.



Come and learn about **Practice Management of America (PMA)**, a newly formed management services organization (MSO) that offers an exciting opportunity for members of the IPA of Nassau/Suffolk Counties.

In the News...

Cataract Surgery Brings New Vision

Sam Narouz used to be legally blind before he underwent eye surgery earlier this year. Now as he says, he can “really see!” Mr. Narouz underwent bilateral cataract surgery and lens implants with Dr. Vincent Basilice, an ophthalmologist and IPANS member.



Sam Narouz has had to wear glasses since he was 12 years old; however, his vision had gotten noticeably worse over the last 7-8 years. Every doctor he had seen left him without hope, and fearing that he would need glasses for the rest of his life. After finding out about “The Ophthalmic Center of East Setauket,” Sam was introduced to Dr. Basilice, who has changed his life for the better.



Dr. Vincent Basilice noticed that Sam had very progressed cataracts and performed cataract surgery to remove the cataracts and replace them with a lens implant to dramatically improve Sam’s sight. Thanks to Dr. Basilice, Mr. Narouz can now see everything much clearer, including his children’s faces. According to Mr. Narouz, he thanked Dr. Basilice for performing “nothing short of a miracle.”

The End of East End Health Alliance

The East End Health Alliance is no longer “the active parent and co-operator of Peconic Bay Medical Center, Southampton Hospital, and Eastern Long Island Hospital.”

News of the possible end came last month as mergers between Peconic Medical with North Shore-LIJ and Eastern Long Island Hospital with Stony Brook University Hospital were announced.

Eastern Long Island Hospital “dipped into the red in 2014 with a net loss of \$122,608.” They hope their merger with Stony Brook will help create savings and cut costs for patients. However, patients are concerned about “the far-flung geography of the new alliances.”



PAYORS CONSOLIDATE

Anthem BCBS Acquires Cigna

After denying “a \$47.5 billion offer by Anthem” to buy out Cigna Health Insurance, Cigna has now agreed to Anthem’s \$54.2 billion offer, reports Henry Powderly with *Healthcare IT News*.

Just last month in June, members of Cigna wrote to Anthem saying Anthem is “facing a number of major issues...such as the massive data breach they experienced in February” among other topics.

This purchase, along with Aetna’s intent “to buy Humana” will bring the “Big Five” private health insurers to just three.”

For more information visit www.healthcareitnews.com

Actual article link: <http://www.healthcareitnews.com/news/update-anthem-acquire-cigna-54-billion>

Aetna Buys Humana

In an attempt to keep health care costs down and to “capitalize on growing opportunities in the government and individual markets,” Aetna Health Insurance looks “to acquire its smaller rival Humana for \$37 billion,” reports Chad Bray and Reed Abelson with *The New York Times*.

If the merger occurs, which wouldn’t close until “the second half of 2016,” the two health insurance companies would be serving “more than 33 million people,” and would “achieve \$1.25 billion in annual cost savings.”

The news comes just around the time Anthem announced their plans to acquire Cigna Health Insurance.

For more information visit www.nytimes.com

Actual article link: http://www.nytimes.com/2015/07/04/business/dealbook/aetna-agrees-to-acquire-humana-for-37-billion-in-cash-and-stock.html?_r=2

CMS Finds Value in End-of-Life Conversations Through Possible Reimbursement

The Centers for Medicare and Medicaid Services (CMS) have announced a proposal that would allow reimbursement to physicians, nurse practitioners, and physician assistants for having end-of-life conversations with their patients.



A decision on the 2015 proposal will be known on November 1st, and if accepted, payments would begin January 1st, 2016. In the meantime, CMS is asking for public comments on the proposal. The “reimbursement rate paid...and other details will be determined after public comments are received.”

According to the Washington State Medical Association the CPT code that has been proposed for use will be:

- CPT Code: 99497 – covering the first 30 minutes of a face-to-face discussion with a patient, family member, or surrogate about advance directives, including assistance with the completion of the forms.

- CPT Code: 99498 – covering the additional 30-minute intervals for this work.

Most doctors are excited about this proposal, because the conversations will not, as critics say, pressure patients to skip treatment, but instead highlight all available routes from “long-term treatment options” to “advance care planning.”

Each conversation will vary from patient to patient, because some might know what they want, while others do not know and need professional guidance/opinions, but doctors are looking forward to ensuring that their patient’s wishes are documented so they can help “make it easier for physicians...to make decisions.”

For more information visit www.acponline.org

Actual article link: https://www.acponline.org/about_acp/chapters/co/15mtg/olivier.pdf

Gearing Up for ICD-10

In preparation for the roll-out of ICD-10 on October 1st, 2015, the Centers for Medicare and Medicaid Services has dispelled some myths regarding the transition.

A lot has changed with ICD-10, ie number of codes increasing from 9,000 to over 60,000. Just like ICD-9, there will be “an alphabetic index...to help...with code selection.” Physicians with “Medicare fee-for-service providers” will be able to experience a trial run in June. This will make the October transition stress-free and run smoothly.

The IPANS management team will be offering training for the new ICD-10 requirements to help physicians make the changeover easier, starting with our August 6th meeting.

For more information visit www.cms.gov

Actual article link: <http://www.cms.gov/Medicare/Coding/ICD10/Downloads/ICD10FiveFacts.pdf>

Is Telemedicine the Future

Leaving your home to see the doctor for a diagnosis and prescription may become a thing of the past with the use of Telemedicine, reports Jesse O’Shea with *KevinMD*.

Telemedicine “involves the transfer of medical information across various telecommunications” while aiming to ensure safety and be “cost effective” for patients in the comfort of their own home.

However, more needs to be done to make Telemedicine more mainstream. For example, Texas law “requires...an in-person visit...before” making a diagnosis. Critics say these added obstacles mitigate the cost effectiveness of telemedicine.

For more information visit www.kevinmd.com Actual article link: <http://www.kevinmd.com/blog/2015/05/telemedicine-is-medicines-sexiest-new-field-but-why-arent-we-ready-for-it.html>



Doctor Created Insurance Company Adds Competitive, Personable Touch

As consumers look for more insurance possibilities in an ever-changing healthcare world, a group of doctors in New York have created their own insurance company to add to the mix, reports Melanie Evans with *Modern Healthcare*.



Crystal Run Healthcare is accepting the risks needed to start an insurance company from scratch, but the doctors are confident they can garner “the expertise to run a health plan and develop the marketing and other necessary business services [to succeed].”

By accepting that they’ll never “dominate the market,” their “focus on customer service” will help ensure “enrollment growth” as well as a competitive and personable alternative to large insurance companies.

For more information visit www.modernhealthcare.com

Actual article link: <http://www.modernhealthcare.com/article/20150602/NEWS/150609980>



Capitation End Goal for New Hampshire ACO

Susan Morse with *HealthCare Finance* reports that Dartmouth-Hitchcock Medical Center in New Hampshire is a prime example of a group “excelling as an accountable care organization.”

Recent trends in healthcare have shown a shift from fee-for-service payment models to value-based payment models and Dartmouth-Hitchcock hit “all 33 [of Medicare’s] quality benchmarks.”

Currently, it looks to go even further by reaching “capitation, planned for 2017 or 2018.” Dartmouth-Hitchcock CFO Robin Kilfeather-Mackey says this move “is a natural evolution...not sharing the risk, but taking on the risk.”

By utilizing capitation, “the payer [pays]...up front...[and]...the hospital then decides how to best spend it.”

For more information visit www.healthcarefinancenews.com

Actual article link: <http://www.healthcarefinancenews.com/news/dartmouth-hitchcock-aco-excel-pioneer-attitude-towards-payments>

IPA of Nassau/Suffolk Counties welcomes our new members:

Integrated Medical Professionals
Urology - Radiology, Melville
89 Physicians

Total Orthopedics
Orthopaedics, Mausepequa
Luis Alejo, MD

Karen Avanesov, DO
Aristide Burducea, DO
Vadim Lerman, DO
Richard McCormack, MD
Elizabeth Morrison, MD
Paul Pipitone, DO
Charles Ruotolo, MD
Brett Spain, DO
Hiroyuki Yoshihara, MD

Brookhaven Heart, PLLC
Cardiology, East Patchogue
Deepu Alexander, MD
Travis Bench, MD
Satheesh Joseph, MD
Dhavel Patel, MD

NEW INDEPENDENT PHYSICIANS:

Eyad Ali, MD
Gastroenterology, Hampton Bays

Hersham Atwa, MD
General Surgery, East Setauket

Dorit Ben-Moha, MD
Family Medicine, Plainview

Lance Berlin, DPM
Podiatry, Islip

Alex Czira, MD
Family Medicine, Huntington

Richard Davis, MD
Ophthalmology, Huntington

M. Jennifer DeMarco, DO
Family Medicine, Amityville

Stefan Dinulescu, MD
Internal Medicine, East Meadow

Hal Feldman, MD
Orthopaedics, Huntington Station

Jorge Gardyn, MD
Internal Medicine, Amityville

Louis Guida, MD
Allergy / Immunology, Bay Shore

Reinaldo Gutierrez, MD
Internal Medicine, Hicksville

Akbar Khan, MD
Internal Medicine, Jackson Heights

Nitin Kamdar, MD
Internal Medicine, Center Moriches

Vinay Kapoor, MD
Endocrinology, Bayside

Adrian Lombardi, MD
Family Medicine, Islip

Santosh Mathen, MD
Orthopaedics, Plainview

Thomas Mathew, MD
Internal Medicine, New Hyde Park

Colleen McCloy, MD
General Surgery, East Setauket

Justin Mirza, DO
Orthopaedics, Smithtown

Meciko Muharemovic, MD
Internal Medicine, Hampton Bays

Greg Rosenn, MD
Neurology, Plainview

Kenneth Rosenthal, MD
Internal Medicine, Port Jefferson Sta.

Randall Schragar, MD
General Surgery, East Setauket

James Tardi, DPM
Podiatry, West Islip

Charles Thompson, MD
General Surgery, East Setauket

Carl Weiner, MD
Pain Management, Stony Brook

Mitchell Weinstein, DO
Internal Medicine, West Islip

William Weissinger, DPM
Podiatry, Huntington

Andrew Zeniou, MD
General Surgery, East Setauket