

IPA of Nassau/Suffolk Counties welcomes our new members:

HUNTINGTON MEDICAL GROUP:

Family Practice

Lisa Baker, MD
Michele Baltus, MD
Clark Gentil, DO
Edward Strogach, MD
Internal Medicine
Andrew Patane, MD
Ruthan Perillo, MD
Steven Wishner, MD

Pediatrics

Alisa Altman, MD
Bruce Gerberg, MD
Lauren Kupersmith, MD
Thomas McDonagh, MD
Sara Siddiqui, MD
Joel Siev, MD

Cardiovascular Disease

Ramanjit Bagga, MD
Raman Bhasin, MD
Dermatology
Todd Coven, MD
Erin Schoor, MD

Gastroenterology

David Gabbazadeh, MD
Jay Steinberg, MD

Hematology/Oncology

Birjis Akhund, MD

Nephrology

Rachita Reddy, MD

Neurology

Andres Gonzalez, MD

Obstetrics & Gynecology

Sharon Cote, MD
Elisa Felsen-Singer, DO
Mitchell Kramer, MD
Karen Moriarity-Morris, MD
Gerald Siegel, MD

Oncology, Medical

Abu Ahmed, MD

Ophthalmology

Adis Diaz, DO
Evan Held, MD

Otolaryngology

Anthony Cornetta, MD
Michael Slippen, MD

Podiatry

Adam Keslonsky, DPM

Psychology

Susanne Cooperman, PhD

Pulmonary Disease

Aman Hourizadeh, DO

Radiology

Albert Pradeep, MD

Radiology, Diagnostic

Diane Moriarity, MD
Mark Wax, MD

Surgery

Faisal Siddiqui, MD

Surgery, Orthopedic

James Gurtowski, MD
Thaddeus Spak, MD

Urology

Thomas Spears, MD

NEW INDEPENDENT PHYSICIANS:

Piya Ghosal, MD

Internal Medicine
Amityville

Ronan Monsef, MD

Family Medicine
Farmingdale

Christopher Ng, MD

Family Medicine
Setauket

Durga Maddineni, MD

Family Medicine
Sunnyside

Kanokporn Tangsuan, MD

Internal Medicine
Deer Park

Diane Cymerman, MD

Allergy/Immunology
Stony Brook

IPA of Nassau/Suffolk Counties Mourns the Loss of Emrick Milligan, MD

A beloved physician and respected member of the St. James community, Emrick Richard Milligan, MD, passed away on March 20, 2014. He initially practiced Emergency Medicine after completing his residency at the University Hospital at Stony Brook. He then became a Family physician. He is survived by his three children, Victoria, Craig, and Cassandra.

IPA Board of Director Members

John L. Franco, MD
President & Medical Director

Mohammed Azaz, MD
Family Practice

Edward Lipinsky, MD
Otolaryngology

Robert Lazar, MD
Gastroenterology

Steven Parry, MD
Family Practice

John Muratori, MD
Family Practice

Richard Schoor, MD
Urology

Michael Shanik, MD
Endocrinology

IPA Executive Administration

Michael A. Guarino
Executive Director

John L. Franco, MD
President/Medical Director

Francis J. DiMotta
Chief Operations Officer

JoAnn Marino
Marketing Director

Quality Care Committee Members

John L. Franco, MD
President & Medical Director

Mohammed Azaz, MD
Family Practice

Michael Shanik, MD
Endocrinology

Anthony Spadaro, MD
Pulmonology

Executive Director Michael Guarino made a presentation in Nashville, Tennessee, this May at the Ambulatory Surgery Center Association Annual Meeting. He spoke about the changes that are occurring under the Affordable Care Act and how accountable care organizations have not borne fruit as the President promised. Many doctors who became employed are not re-signing once their contracts are up for renegotiation. The changing healthcare climate is causing a furor, as evidenced by the high attendance and the questions the members asked.



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The Independent Physicians Association of Nassau/Suffolk Counties is "uniting" physicians to keep them independent, utilizing "clinical integration" while its members receive fair compensation.

PRESIDENT'S MESSAGE...

To the person holding the hammer, everything looks like a nail.

Rumor has it that the government and payers have gone to the home centers and secured ownership of all the hammers. As if the abattoir wasn't enough, we physicians must now face the unyielding arms of the hammer-wielding autocrats.

No! We will not be still and wait for the senseless pounding that will drive us into a place where we will not be seen or heard.



Our IPA has been very busy working at a number of projects to keep the independent physicians (our members) alive, fairly compensated, happy, and eager to continue in their noble profession.

Contract negotiations with two major networks and development of a managed service organization (MSO) have been our priorities.

The future of healthcare does include the independent physician as an essential component of the structure in a system that provides outstanding care.

Just not the nail!

John L. Franco
John L. Franco, MD
President

Insanity:

Doing the same thing over and over again and expecting different results.

- Albert Einstein

We Welcome the Huntington Medical Group

The IPA of Nassau/Suffolk Counties is delighted to welcome the Huntington Medical Group to our membership. This physician group has been serving Long Island for three quarters of a century, with over 40 physicians practicing a full range of medical specialties and many other medical professionals on staff. We are pleased that the leadership of the group shares our vision for physician independence and quality of care. The practice's main office is located at 180 East Pulaski Road in Huntington Station, and the satellite office is at 2171 Jericho Turnpike, Commack. 631-425-2121.



**HUNTINGTON
MEDICAL
GROUP, P.C.**

EMPIRE BLUE CROSS BLUE SHIELD SHARD SAVINGS:

Dr. Franco and I would like to thank our primary care members who have allowed us to come into their offices to explain and implement the transformation process of the Empire BCBS Enhanced Personal Health Care (EPHC) program.

As we all know, Empire BCBS has partnered with the IPA of Nassau/Suffolk Counties from the IPA's inception and has continually worked with us to bring value to our members. The EPHC program gives our primary care physicians the potential for shared savings if certain metrics of care are achieved.

With the understanding and cooperation of IPA primary care physicians, we believe this program will succeed and our physicians will ultimately exceed performance standards.

Dr. Franco and I look forward to meeting with all our primary care physicians as we continue to expand the EPHC program.

Jo Ann Marino
Jo Ann Marino
Nurse, Clinical Liaison

Local News

Low-Level CO Poisoning a Danger

The death from carbon monoxide poisoning of the manager of Legal Seafood in Huntington Station likely could have been prevented if there had been CO detectors on the premises. But low-level CO poisoning is also a danger, which is why Suffolk County Legislator William R. Spencer, MD, has written to the IPA to ask us to help spread the word. Physicians need to know that the symptoms, including headache, memory deficits, fatigue, and nausea, can masquerade as other health problems, and the correct diagnosis can be missed. They also need to know that CO detectors with digital readouts are available and affordable; these devices measure and display CO levels that are too low to trigger an alarm but will cause illness. It is important that homes and businesses install these more sophisticated devices.

Find out more at carbonmonoxidepolicy.org or longislandgreenhomes.org/CarbonMonoxide.html.

NY State News

"New York Curbs Medical Bills Containing Surprises"

Every year thousands of New Yorkers receive an unpleasant surprise in the mail: a bill, commonly from an anesthesiologist, radiologist, or pathologist, who was involved in a medical procedure (e.g., a colonoscopy) but was not on the patient's insurance plan. "These surprise bills are very prevalent around the country," according to Benjamin Lawsky, supervisor of New York State's Financial Services Department, who is quoted in an article by Anemona Hartocollis in the March 30 issue of the New York Times. A provision in the state budget will require that they receive a reasonable amount of notice if they will be treated by an out-of-network doctor, and if they get stuck with a surprise bill they will be responsible only for what their co-pay would be if the doctor were in network.

IPA Members Can Save 10 to 40% on Malpractice Insurance

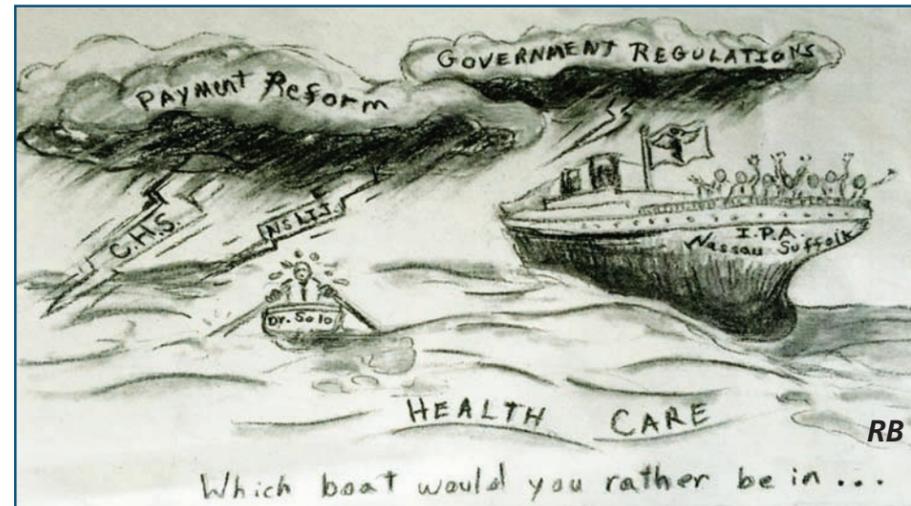
One of the primary objectives of the IPA of Nassau/Suffolk Counties is to decrease the cost of malpractice insurance for its 350-plus members. While the New York State market is distinguished by a lack of competition and overregulation, roughly 10% of members are already benefiting from purchasing their medical malpractice with Cornerstone/CPLC Insurance Brokerage, most through A++-rated MedPro RRG, the nation's oldest medical malpractice insurance carrier. But the best news is that the more members who sign up, the more all will save!

For more information contact Frank DiMotta at 631-698-1900 or Scott Palde at 267-218-4536 or spalde@cornerstoneplc.com.

National News

"Medicine's Top Earners Are Not the MDs"

Doctors may be the most highly trained in the field of health care, but they are not the highest paid, according to an article in the May 17 issue of the New York Times by Elizabeth Rosenthal. The base pay of insurance executives, hospital executives, and even hospital administrators often exceeds that of physicians. And the gap is probably even wider since executives often also receive significant nonsalary compensation, such as stock options. Doctors may be dismayed by the army of business people around them, but hospitals maintain that large pay packages are required to attract administrators who can handle the complexities of health care in the U.S. today.



"How Being a Doctor Became the Most Miserable Profession"

Nine out of 10 doctors today would discourage anyone from entering the profession. And by the end of the year, 300 physicians will commit suicide. This is according to Daniela Drake, MD, writing in the Daily Beast ("Why Your Doctor Hates Her Job," 4/14/2014). Medical students are choosing lucrative specialties in order to retire as soon as possible, according to Dr. Drake, an internist in private practice in Los Angeles. The web site Drop-Out-Club, which connects doctors with hedge fund and venture capital employment opportunities, and physician MBA programs, which will give doctors a path to administration, are flourishing.

"A Doctor's Declaration of Independence"

When do physicians stand up and say damn the mandates and requirements from bureaucrats who are not in the healing profession? That is what orthopedic surgeon Daniel F. Craviotto Jr. demands to know. Because of mandated electronic health record entry, he spends two hours a day dictating and documenting when he could be caring for his patients. He cites board recertification in various specialties as "time consuming, expensive...and a convenient way for our specialty societies and boards to make money."

Read his "Declaration of Independence" in its entirety in the Wall Street Journal online (4/24/2014).

"Hospitals' Purchase of Doctors Leads to Higher Prices, Spending Study Finds"

A new study supports the long-held belief of many that hospital prices rise and privately insured patients pay more when hospitals buy physician practices. The study was published in the journal Health Affairs in May 2014. According to Phil Galewitz, writing in Capsules, the Kaiser Health News blog, hospitals argue that buying physician practices helps them coordinate care and control costs; insurers and economists counter that negotiating higher prices with insurers and building referrals are their chief motivations. Predictably, the American Hospital Association called the study outdated and said it only looked at hospital spending and pricing, not physicians'.



"Transparency Is Here, and It's Hunting Season on Doctors"

Medicare payments to individual doctors have long been a closely guarded secret, but a federal judge ruled last year that the information could be made public. The data for 2012 has just been released, and it reveals that a tiny portion of doctors who take Medicare accounted for nearly a quarter of the approximately \$77 billion paid out. Only 100 doctors received a total of \$610 million. The release of the data was reported in the New York Times on April 4, 2014, in an article by Reed Abelson and Sarah Cohen, and the Times has even made available a database, searchable by doctors' names, at nytimes.com. As researchers and fraud investigators continue to pore over the data, there are more revelations to come.



"New Health Cost Controls Get Go-Ahead from Feds"

Insurers and employers have been given the go-ahead from the Obama administration to use a new cost-control strategy that puts a hard dollar limit on what a health plan will pay for a given procedure, for example, hip or knee replacement. The example given in the Associated Press report, dated May 15, is a \$30,000 limit. If a provider hospital that charges \$40,000 is chosen, the patient is on the hook for \$10,000 plus whatever cost sharing his or her plan covers. And the \$10,000 is treated as an out-of-network expense so it doesn't count toward the plan's annual limit on out-of-pocket costs. Some say the strategy will result in "surprise" bills patients are responsible for; others argue that it will reduce costs and help check premiums.

"Cutting Federal Healthcare Spending Requires Physician Input"

Melissa Young, MD, an endocrinologist, muses about the vagaries of Medicare on the blog PhysiciansPractice.com (April 28, 2014). For example, a diabetic patient on an insulin pump must be seen every three months, not four or six, even if he is well controlled, or Medicare won't pay for his pump. Medicare won't cover



diabetes education for the pre-diabetic patient. Once the patient has diabetes, however, they will (usually) pay for it, according to Dr. Young. She concludes the article with "Your tax dollars at work."

World News

"Fury over Top Cancer Doctor's Call to Ration Drugs for the Elderly"

People in their prime should receive expensive cancer drugs preferentially over the frail elderly, according to British oncologist Karol Sikora, formerly with the World Health Organization. But this suggestion has been called "blatant age discrimination" by many. The elderly could not withstand some cancer treatments, according to Dr. Sikora, but some of the gentler drugs cost as much as 90,000 pounds (about 150,000 U.S. dollars) a year. Many expensive drugs prolong life for only a few months, and he was quoted in the Mail Online on May 4, 2014, in an article written by science correspondent Fiona MacRae, as stating, "Three months of life extension for someone in their 90s has got to be less useful than for someone in their 30s or 40s."

"Top 5 Challenges Physicians Face in 2014"

According to Lou Goodman, PhD, president of the Physicians Forum and CEO of the Texas Medical Association, they are as follows:

1. The trend toward consolidation carries danger of monopolization
2. The regulatory burden is growing
3. The launch of health insurance exchanges has created high level of confusion
4. There is a lack of interoperability of health information technology (HIT) systems
5. Critical issues such as a permanent Medicare physician payment fix are stalemated

Read the full article, authored by Madelyn Kearns, at MedicalPracticeInsider.com.