

January 2015

2015 Meetings & Events

Fifth Annual Medical Service Awards January 16, 2015

6:00 p.m. Social Time

7:00 p.m. Dinner

7:50 p.m. Program

Installation of 2015 LCMS & Alliance Officers

Annual Medical Service Awards

Lexington Country Club

16257 Willowcrest Way

Fort Myers, FL 33908

Entertainment by:

Boz & Bon Togetha Forevah Band

\$25 per attendee

RSVP Required

RSVP to: Lee County Medical Society
13770 Plantation Road, Ste 1
Fort Myers, FL 33912
Tel: 936-1645 • Fax: 936-0533
Email: Valerie@lcmsfl.org

Kiwanis Club of Fort Myers

Thomas Alva Edison Kiwanis

Science & Engineering Fair

Saturday, February 7, 2015

Alico Arena

Email Tim Jones at

Cobra64@comcast.net

or call 239-940-5903 for information
on judging the Science Fair

Inserts:

2014-2015 Influenza Season Recommendations for
Health Care Providers

Kiwanis Science and Engineering Fair

January Meeting Notice

Leading Edge, Insurance Open Enrollment

The Doctors Company – Risk Management

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"Lemon Shark, Jupiter, Florida." Photo by: Dirk Peterson, M.D.

LEE COUNTY MEDICAL SOCIETY
BULLETIN

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PRINTERS

The Print Shop

Lee County Medical Society Mission
Statement & Disclosure Policy

The purpose of the LCMS is to unite the medical profession of Lee County, FL, into one compact organization; extend medical knowledge and advance medical science; elevate the standards of medical education; strive for the enactment, preservation and enforcement of just medical and public health laws; promote friendly relations among doctors of medicine and guard and foster their legitimate interests; enlighten and alert the public, and merit its respect and confidence.

All LCMS Board of Governors and Committee meeting minutes are available for all members to review.

MEMBERSHIP NEWS

RETIRED

Pedro Marcucci, MD
Charles McCurdy, MD



NEW APPLICANTS



Carlos A. Cerruto, MD – Dr. Cerruto received his MD degree from Universidad Mayor de San Andres, La Paz, Bolivia in 1996. He completed residencies at Georgetown University Medical Center, Washington, DC from 1998-1999 and Washington Hospital Center, Washington, DC from 1999-2004. Dr. Cerruto completed a fellowship in Surgical Oncology/GI Pathology at Washington Hospital Center, Washington, DC from 2004-2005 and a fellowship in Dermatopathology at the University of Texas Southwestern Medical Center, Dallas, TX from 2005-2006. He is board certified in Anatomic/Clinical Pathology by the American Board of Pathology and in Dermatopathology by the American Board of Dermatology. Dr. Cerruto is in group practice with Associates in Dermatology, 8381 14 North Del Prado Blvd, Ste 201, Cape Coral, FL 33909 Tel: 239-242-1955.

FMA NEWS

**John Armstrong, M.D., reappointed state Surgeon General**

The FMA congratulates member John Armstrong, M.D., who was reappointed state Surgeon General and Secretary of the Florida Department of Health. "On behalf of the more than 20,000 physicians represented by the Florida Medical Association, we are thrilled to congratulate Dr. John Armstrong on his reappointment by Gov. Rick Scott to serve as Florida's Surgeon General and DOH Secretary," said FMA Executive Vice President Timothy J. Stapleton. "A longtime member of the FMA, Dr. Armstrong's continued commitment to the health, safety and welfare of all Floridians under Gov. Scott's vision serves as an incredible example not only of his leadership, but also of his understanding of emerging trends in health care policies and emergency preparedness. Congratulations, General Armstrong."

Recruit three new members in a year and your next year's dues will be free of charge.

HAPPY NEW YEAR



LCMS MEMBERSHIP DUES

You should have received your 2015 Dues Statement by now; they were mailed mid September.

Please remit your dues by December 31st to keep them from becoming past due. Your quick response would be appreciated if you have not remitted your payment. Thank you to all of you who have sent your payment in already.

Recruit three new members and your 2016 dues will be free of charge!



PRESIDENT'S MESSAGE

by Andrew Oakes-Lottridge, M.D.

Welcome to 2015!

Welcome to 2015! Who would've thought that I would be writing this as the incoming president of the Lee County Medical Society. ☺

Also kicking in this year is the long anticipated and controversial implementation of ICD-10. Much lambasted and criticized, ICD-10 has been claimed to bring with it a cost of almost \$80,000 for a small practice to convert from ICD-9. I never quite understood where that cost came from in the 2008 report referenced by the AMA, and it now appears that if like me you had doubts about the cost, then we are not alone.

Even a concierge practice like ours at Private Physicians of Southwest Florida, has to worry about and deal with ICD-10. One help guide that I found online 1st recommends assembling a team for your conversion. You should then have a leader appointed and hold weekly meetings with the team. The meetings are for education, motivation, and to address problems as they come up. Then you need to assess your documentation process and educate your payers so they know how to pay you with the new codes. Highlight your workflow and calculate training costs. There will be 68,000 new codes! Don't wait, get started now! Since you can't hear my voice, that's sarcasm dripping between the lines. Sorry, but I've got to cry "malarkey" at this point.

It now appears that these initial estimates were grossly overestimated in that the conversion to ICD-10 should be far less costly and much simpler than anticipated, less than \$5000 for a small practice defined as 3 physicians. You may need to invest in a coding book and for some training for your affected office personnel. Some web-based training for the providers is also a good idea, which shouldn't be more than a few hundred dollars. There is even an ICD-10 iPhone app for \$1.99.

If your office already uses an EMR, then there is a very good chance that conversion to ICD-10 is already included in your software updates at no additional cost. In fact two thirds of EMR vendors already have ICD-10 versions up and running. In researching EMR's for our office this year, every single one that made it to my top-5 list was already ICD-9 and ICD-10 compatible.

The additional documentation requirements and loss of productivity accounted for a large portion of that initial cost estimate of conversion. However that estimate was based on inpatient hospital settings. The truth is that if you use an EMR you may have to do some online training to understand any changes you'll have to make in your documentation, but it should be pretty seamless. If like us, you still use paper charts, then you may need to redo your super bill and a few other office forms. However, even redoing the forms shouldn't take more than a few hours of a staff member's time.

It's also important to remember the reason behind ICD-10 implementation. I am certainly no fan of bureaucracy and wasted time. But with the ongoing needs of public health monitoring, quality of care measurements, and pay-for-performance, it is important to get as much detailed healthcare data as possible. The increased specificity of diagnosis codes will help a great deal. It may even increase revenue for physicians. A report by the office of Inspector General at the U.S. Department of Health and Human Services found that Medicare saved \$1.8 billion in 2010 because physicians failed to document and bill for the full value of our services.

So yes ICD-10 is finally coming for real. No, there is no reason to be fearful or expect any dramatic costs or changes. If I turn out to be wrong then I promise not to run for reelection next year ☺. Happy New Year!

LCMS WELCOMES NEW EXECUTIVE DIRECTOR



Julie Ramirez

It is my pleasure to introduce to you, Julie Ramirez, as your new Executive Director of the Lee County Medical Society. Julie, a Michigan native, has lived and worked in Fort Myers since 2000. Julie has a Bachelor of Business Administration in Management and Associate of Arts in Science. She has more than 10 years of experience in management including the last 5 years as the Health and Wellness Director of Senior Friendship Centers. Her key strengths include empathy, patience, organization and hard work. She is the proud wife of Jesse Ramirez, a Fort Myers native, and mother to Grace age 5 and Joshua age 3. Please welcome Julie to our medical family.

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- STAT reporting

To receive more information or to sign up for DocBookMD, please give the Medical Society at call at 239-936-1645. We will get you registered with DocBookMD and be able to give you a special code to use when you download the App to your mobile phone or computer.



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From left: Kate Wagner, O.D.;
E. Trevor Elmquist, D.O.; Nina Burt, O.D.

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Mon. - Fri. 9 a.m. to 5 p.m.

McCourt Scholarship Fund Sent Five Children to Diabetic Camp in 2014!

In 2014 the McCourt Scholarship Fund of the Lee County Medical Society financially supported five youths to Florida's Diabetes Camp. Children are recommended for camp by their physicians.

Since 1982, physicians in the Lee County Medical Society have donated \$ 71,077 to the scholarship fund. Using the interest and extra donations, the Scholarship fund has sent 112 youths to the Florida's Diabetes Camp for Children and Youth totaling \$46,185.

November 4, 1982, Jerome P. McCourt, M. D., his wife, Donna and their four children were returning from a visit to Orlando when their plane crashed near Arcadia, FL. Dr. McCourt was the first endocrinologist in Lee County. A scholarship was set-up in his family's name by the Lee County Medical Society Members to send children and youth with diabetes to camp to learn how to live a normal life with this disease.

This Camp helps these young people to adjust to this disease providing for a fun camping experience in a medically supervised environment. They learn diabetes management and receive important psychological support from professionals and especially from their peers. They come away knowing they can accomplish any goal to which they set their minds; that there are many others with the same disease, and they establish a large support system.

The McCourt Scholarship Fund, in honor of the McCourt Family, is pleased to be a part of this life changing experience for our youth.

Recently received letter from one of the camp attendees:

Dear Ms. Wilke:

RE: Justin Lafenetre

Thank you so very much for awarding our son, Justin, with the McCourt Memorial Scholarship from the Lee County Medical Society. We are so happy to have this wonderful gift presented to us so that Justin will be able to attend the Florida Diabetes Camp this summer.

Justin is looking forward to being a part of this camp and learning more about how to handle and deal with his diabetic condition. He is especially excited to be going with other diabetic teenagers who share the same illness. He attends high school at this time, but mostly feels like an outcast when it comes, to his diabetes, and this will certainly help him understand that he is not the only young person with this disease. He is also looking forward to having a wonderful time as he loves all sports!!

We are so very grateful for this wonderful gift, We cannot thank you enough!

With Sincerity... thank you again,

Mr. & Mrs. Henri Lafenetre

Please mark your calendar!

The 58th Thomas Alva Edison Kiwanis Science and Engineering Fair will be held on

**Saturday, February 7 , 2015
at the Alico Arena on the
FGCU Campus.**

If you will be able to help us this year, please email as soon as you can with your confirmation and please be sure to specify the categories in which you would be comfortable judging, in order of your preference. ***Please see insert for more information or contact:***

**Tim Jones 239-940-5903 or
email: Cobra64@comcast.net**



STEVEN ROSENBERG, M.D., ELECTED BOM VICE CHAIR

The FMA congratulates member Steven Rosenberg, M.D., who was elected Vice Chair of the Florida Board of Medicine during the December BOM meeting in St. Petersburg. Dr. Rosenberg, a West Palm Beach dermatologist, was first appointed to the BOM in 2006 by Gov. Jeb Bush and was reappointed in 2007 by Gov. Charlie Crist. Gov. Rick Scott appointed Dr. Rosenberg in 2013. He has served as Chairman of the Rules and Legislative Committee and as Chair of Probable Cause for the BOM.

LEE COUNTY MEDICAL SOCIETY ANNUAL HOLIDAY PARTY

The LCMS annual holiday party was held Monday, December 8, 2014 at the Gulf Harbour Yacht & Country Club. Thank you to FineMark National Bank & Trust and to The Doctors Company for their generous sponsorship. We would also like to thank Valarie Hoffman of Valarie Hoffman Photography and Colleen Cannon for taking photos and donating the proceeds to the LCMS Alliance Foundation as well as awarding a raffle ticket winner a free 16 X 20 portrait setting.



PRESCRIPTION DRUG MONITORING PROGRAM

By: Florida Board of Medicine

In 2009, the Florida legislature adopted a new law to address the state's growing problem with prescription drug abuse and diversion. Chapter 893.055 established new guidelines for operating pain management clinics and approved development and utilization of a Prescription Drug Monitoring Program ("PDMP") database to collect controlled substance prescription records from dispensers.

Prior to passage of the law, the Federal Centers for Disease Control labeled Florida the epicenter of prescription drug diversion because it had weak regulatory oversight of pain management practices, limited regulation of physician dispensing habits and, most importantly, no prescription drug monitoring program. Florida became known as the "Pill Mill" capital of the country.

According to DEA statistics, the state had over 900 unregulated pain management clinics in 2010. The data also showed that these clinics employed 90 of the top 100 oxycodone dispensing physicians in the country. Of the top 50 oxycodone dispensing clinics in the U.S., 49 were located in Florida and were selling more than 1 million oxycodone pills a month. Before new regulations were enacted by the Florida legislature, it was projected from state medical examiners reports that about 10 persons each day died of prescription drug overdose, primarily due to oxycodone abuse.

Florida's prescription drug monitoring program, E-FORCSE (the Electronic-Florida Online Reporting of Controlled Substances Evaluation), began operation in 2011. The database is managed by the Department of Health, and its yearly \$500,000 operating budget is raised through a non-profit, tax exempt, Direct Support Organization foundation whose board of directors is appointed by the State Surgeon General.

Because of the new PDMP law, dispensers of controlled substances must report all transactions within seven days. The law also permits all licensed health care practitioners including physicians, dentists, osteopaths, podiatrists, pharmacists, physician assistants, ARNPs and optometrists to register and use the database in treatment planning prior to prescribing a controlled substance. Law enforcement agencies may also access the system for information to assist in investigation of active cases.

Since E-FORCSE became fully operational the oxycodone death rates have been reduced by 41%. Practitioners who use the database have the ability to check patients prescription history which can help prevent over-prescribing and identify those persons who may be doctor shopping.

As of July 1, 2014 over 112 million dispensing records have been collected by the PDMP. Also, more than 25,000 practitioners have registered for the program of which 12.4% of all licensed MDs or 8,259 are utilizing E-FORCSE. Of this total, 5,773 MDs queried the program with over 2.8M queries. The registration records show that 32% of all users are MDs.

For more information about E-FORCSE visit its website at www.e-forcse.com. For technical assistance call (877) 719-3120. To obtain information on how to support the program contact the PDMP Foundation at executive.director@flpdmpfoundation.com.



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HOLD THE DATE – MEETING DATES

Holiday Party – December 7, 2015

LCMS BOARD OF GOVERNORS MEETINGS

January 20, 2015
February 17, 2015
March 17, 2015
April 21, 2015
May 19, 2015
September 15, 2015
October 20, 2015
November 17, 2015

GENERAL MEMBERSHIP MEETINGS

January 16, 2015
March 19, 2015
May 21, 2015
September 17, 2015
November 19, 2015
December 7, 2015

IT'S FUNNY HOW LIFE WORKS

Chelsey Scheiner, D.O., Resident Physician, LMHS Medical Residency Program

I can see my high school from the window at my desk in the FSU Family Medicine Residency Clinic. I can see the parking lot I parked in every morning and the tennis courts I practiced on after school. During my OBGYN rotation at HealthPark a few months ago, I scrubbed in on a c-section with the same OB physician who delivered me twenty-eight years ago at Lee Memorial Hospital.

As a kid, although I always loved being from Fort Myers, I never wanted to live here “when I grew up”. Yet for as much as I talked about moving away, living up north, and how I couldn’t handle the Florida heat, I never actually made it very far from home. The furthest away I lived was Miami for college and Fort Lauderdale for medical school, and both places were still easy drives for a lunch date with my mom. Then my residency, urology, and a far-away land called Detroit.

A lot of things happened during that intern year of urology residency. I experienced my first winter that, ironically, coincided with the 2013 Polar Vortex - the worst winter weather Detroit has seen in generations. I embarked on a surgical residency, which was more intense and challenging than medical school ever led me to believe. And I also got both engaged and married to my most perfect man, and Delta’s number one customer, who would commute as much as possible from our home town of Fort Myers.

As the year went on, my priorities seemed to shift. The rigorous surgical lifestyle became less appealing to me. I wanted to experience marriage and live with my husband. I wanted the option to start a family sooner rather than later. I missed my family and friends. But I was conflicted because I loved medicine and still wanted to fulfill my dream of becoming a physician.

Then the universe presented an opportunity that I couldn’t resist. I received word that there was an open position in the FSU Family Medicine Residency Program in Fort Myers. It was a really difficult decision to leave a surgical subspecialty after successfully completing the internship, but the program back home was a perfect fit. I am now happily settling into a new world of family medicine. This is the first residency program that Southwest Florida has ever seen, so it is really quite exciting. I feel proud to be a part of something so groundbreaking, especially because it’s happening in my hometown. It’s funny how life works. Sometimes right back where you started from is right where you belong.

FMA (FLORIDA MEDICAL ASSOCIATION) DOCTOR OF THE DAY PROGRAM

Decisions made at the state Capitol and in Congress have a *major impact* on medicine, making it vitally important for physicians to be engaged in the political process. First and foremost, you can get involved by **joining the FMA (Florida Medical Association) and the FMA PAC today**. Physicians from across the state also come to Tallahassee during the Legislative Session (*March 3 – May 1st*) to testify on behalf of pro-medicine bills, and to speak against those that are detrimental to patients and physicians. Finally, the **Doctor of the Day program** is a means for physicians to interact closely with lawmakers during session and provide them with care while they are away from their home districts.

Since the 1960s, the Florida Legislature’s Doctor of the Day program has provided lawmakers with medical care during Legislative Session while serving to strengthen physician-legislator relations. Two physicians — one for the House of Representatives and one for the Senate — provide any necessary care to legislators, their staff members, and others at the Capitol. If the House or Senate is in full session on a day when a physician is volunteering, either the House Speaker or the Senate President will introduce the Doctor of the Day. Within the House or Senate Chambers, the physician may sit with his or her local delegation.

If the House and Senate are not in session, physicians are encouraged to attend committee meetings and/or visit legislators’ offices. Your participation not only provides a valuable service, but also continues a noble tradition. Please call the Florida Office of Legislative Services (850) 488-6803 for more information on how to volunteer.

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ALLIANCE NEWS

By Lisa Tritel, LCMS Alliance President-Elect

I am honored as President Elect to announce the 2015 LCMS Alliance Installation of Officers. This year will be the first time the Alliance will hold its Installation of Officers with the Medical Society's Installation of Officers. These events along with the Annual Medical Service Awards will be held Friday, January 16, 2015.

I would like to thank our outgoing President, Brian Kelley and board members Joann Ellis, and Juli Bobman for their work with the Alliance in 2014.

I'm happy to announce the incoming board members for the Alliance. President, Lisa Tritel; President-Elect, Vicki Sweet; Recording Secretary, Mary Macchiaroli; Corresponding Secretary, Amanda Bokor; Treasurer, Angela Abu Shahin.

Our goals for this year are to increase Alliance membership by hosting events with our past President's, Mommy or Daddy and Me play dates, and to bring back the Charity Ball.

Follow the link below to the Alliance Facebook group:

<https://www.facebook.com/groups/lcmsalliance/>

Please login and check out our upcoming events for 2015. The Alliance would like to say thank you to Valarie Hoffman and Colleen Cannon for the holiday portraits. They raised \$415.00 for the Alliance.



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- A new Physician to Practice
- A physician leaving or retiring from the Practice.
- The Practice has moved or opened a satellite office.
- The Practice has a phone number or fax number change.
- There have been changes in Administrators or Office Managers.
- If you would like to update your physicians photo.

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DATA BREACH NOTIFICATION LAW: WILL FLORIDA LEAD?

Jeff Scott, FMA Attorney

HIPAA–FIPA (Florida Information Protection Act of 2014)

Florida's stringent new breach notification law might encourage lawmakers to finally enact a federal standard.

Many have argued the federal government should pass a single breach notification law that levels the playing field to protect consumer privacy for businesses that accept sensitive, personally identifiable information. So far Congress has been reluctant to do so, and as a result more than 40 states now have their own versions of this law, some of which have gone beyond what the federal government requires in other statutes, such as the Health Insurance Portability and Accountability Act (HIPAA).

California, for instance, has a five-day reporting requirement for in-state entities when there is a breach. Texas passed a comprehensive law last year affecting folks both inside and outside the state. Massachusetts has a more comprehensive breach law that goes beyond simply addressing notifications. Wisconsin has a more stringent law relating to misdirected faxes, and Minnesota is rumored to be considering laws based on the California system.

Then there's Florida. Florida's new law, which went into effect on July 1, is worth watching. This law fundamentally changes the playing field in terms of what information is protected and who the law applies to. It also affects the notification schema and does not distinguish between small and large breaches. To top it all off, it does not replace HIPAA -- it is an addition to HIPAA. This means healthcare organizations and business associates (BAs) must meet two separate breach standards with two very different timelines. The six million dollar question: What, if any, impact will Florida's new law have on other states that are contemplating their own breach laws to protect consumer information?

[For more on the Florida Information Protection Act of 2014, see [Florida Law Aims To Tighten Data Security](#).]

To understand the potential implications of the new law better, it's helpful to clarify the differences between the Florida Information Protection Act (FIPA) and HIPAA. First, Florida's statement regarding the applicability of the statute is far broader, listing both government and private institutions that collect personally identifiable information as covered entities. So while HIPAA is very specific to the types of organizations it applies to, FIPA does not discriminate.

The second big difference is the law's treatment of large versus small breaches. Once again, FIPA does not differentiate -- all breaches, large or small, are subject to notifications. FIPA, like HIPAA, stipulates civil monetary penalties (CMPs), but unlike HIPAA, Florida's CMPs are rolled out on a much different schedule. They are initially assessed daily, then weekly -- and finally, there is an annual limit of \$500,000.

The law includes the most comprehensive set of breach notification requirements for both covered entities (CEs) and BAs. Notification requirements are based on the number of individuals impacted. When 500 or more individuals are impacted, notification must be made to the State Attorney General (SAG) and to all individuals involved. For breaches affecting more than 1,000 individuals, the entity must notify all credit agencies in addition to the SAG and individuals involved. Breaches involving fewer than 500 records require notifications only to the individuals affected. Covered entities are responsible for the actions of their subcontractors and agents.

Finally, the rule also provides for the CE to notify and include local law enforcement in the decision to notify. The questions remain: Will Florida's new law influence other states to follow suit? And will the government finally issue a common breach notification law so we don't end up with multiple versions across different states?

Jeff Scott, FMA Attorney

CS/CS/SB 1524 creates the "Florida Information Protection Act of 2014." The bill requires notice be given to affected customers and the Department of Legal Affairs (DLA) when a breach of security of personal information occurs. The bill requires such notice to be given within 30 days of the discovery of the breach or belief that a breach occurred, unless delayed at the request of law enforcement for investigative purposes or for other good cause shown. The bill provides enforcement authority to the DLA under the Florida Deceptive and Unfair Trade Practices Act to civilly prosecute violations. A violator of the bill's provisions may also be subject to civil penalties, similar to current law, if breach notification is not provided timely. State governmental entities are required to provide notification of security breaches to the DLA, but are not liable for civil penalties for failure to timely report the security breaches. The bill provides exceptions for those entities that comply with breach notifications as required by the appropriate federal regulator.

The bill requires the DLA to submit an annual report to the Legislature, by February 1 of each year, detailing any reported breaches of security by governmental entities or their third-party agents for the preceding year, along with any recommendations for security improvement. The report must also identify any governmental entity that has violated the breach notification provisions.

The bill requires customer records, both physical and electronic, to be disposed in a manner that protects personal information from being disclosed. This provision does not apply to governmental entities. The bill repeals s. 817.5681, F.S., which contains the current law requirements for breach notification.

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By: First Coast Service Options

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How many 'SPOT' accounts will you need?

The SPOT is one of several Web-based applications hosted through Individuals Authorized Access to the CMS Computer Services (IACS), and IACS registration is required to obtain access to SPOT.

Who needs to register? Any individual in your organization who requires access to the Medicare information provided through the SPOT must have a **separate** IACS account.

The Centers for Medicare & Medicaid Services' (CMS) security guidelines specify that **accounts may not be shared** -- even among individuals belonging to the same organization. Violation of those guidelines may result in the permanent deactivation of your account.

Prepare for success: Check PECOS first

Most applications are denied as a result of a misunderstanding regarding the information required. For example, the provider-specific information (NPI, PTAN, TIN, and Practice Official's identity/role) submitted in your application should be based upon how your organization bills Medicare and how that information is listed in the official enrollment record in the **Provider Enrollment Chain and Ownership System (PECOS)**. When you submit your application, the information submitted is compared to the official enrollment record. If any of the information does not match the official record, the application will be denied.

Find your 'SPOT': Register today!

Are you ready to get started? It's easy. Review our [step-by-step registration instructions](#) to learn how to submit a successful application for your very own SPOT account.

It will only take a few minutes to complete and if your application is approved, IACS support will email your official user ID and temporary password within 48-72 hours. If you require assistance during registration, you may email FCSOSpotHelp@fcso.com or call 855-416-4199



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