



POLICY & PRACTICE

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Reminders Boost Screenings

Automated telephone reminders can increase colon cancer screening rates by 30%, according to a study from the Kaiser Permanente Center for Health Research. The study looked at nearly 6,000 patients who were overdue for screening. Half the patients received up to three reminder calls stressing the importance of screening. The phone calls also offered patients an in-home kit to detect blood in the stool. Within 6 months, more than 22% of people who received calls ordered and completed a stool card test, compared with only 16% of those who didn't receive the phone calls but may have been reminded of testing during a physician visit.

FDA to Share Drug-Risk Findings

The Food and Drug Administration said it will post on its Web site summaries of postmarketing safety analyses on recently approved drugs and biologics, including brief discussions of steps being taken to address identified safety issues. The new summaries will cover side effects that might not become apparent until after a medicine becomes available to a large, diverse population. The initial reports will contain information on drugs and biologics approved since September 2007, including several drugs for infections, hypertension, and depression, the agency said.

State Expands Medicaid to Adults

Connecticut has added low-income, childless adults to its Medicaid program under the nation's new health care reform law. It's the first state to take advantage of the law's incentives to expand "permanent" coverage to such individuals, who could previously be covered only under Medicaid waivers. Connecticut said it initially will cover about 45,000 childless adults who make up to 56% of the federal poverty level, or \$6,650 per year. Health care reform requires states to cover all low-income individuals in Medicaid starting in 2014, but also allows states to get federal funding to enroll them early. The law will provide federal funding for Medicaid for people earning up to 133% of the federal poverty level.

U.S. Invests in Primary Care

The Department of Health and Human Services said it will invest \$250 million to increase the number of primary care health providers and strengthen the primary care workforce. The investment, which Congress approved as part of health care reform legislation, will provide \$168 million to train more than 500 new primary care physicians by 2015. In addition, \$32 million will go toward training 600 physician assistants, \$30 million will help nursing students attend school full-time, \$15

million will support 10 nurse-managed health clinics, and \$5 million will go to states for strategies that expand their primary care workforces by up to 25% over the next decade.

First-Year Compensation Up

Guaranteed first-year compensation for primary care physicians hired by group practices has increased by more than 17% since 2006 while shrinking about 2% for specialists, according to the Medical Group Management Association. Primary care physicians reported a median first-year guaranteed compensation of \$160,000 in 2009, while specialists reported \$230,000. At multispecialty practices, pay for first-year primary care physicians increased about 14% since 2006, the MGMA said. Hospital-owned practices offered more in guaranteed first-year compensation in 2009 to both primary care and specialty care physicians, which could be driving more physicians to such practices, the MGMA said.

Men Less Likely to Get Care

Men are much less likely than are women to seek routine medical care: Just over half of U.S. men see a doctor, nurse practitioner, or physician assistant for routine care, compared with nearly three-quarters of women, according to the Agency for Healthcare Research and Quality. Only about 35% of Hispanic men and 43% of black men made routine appointments, compared with 63% of white men, and uninsured people were only about half as likely as those with private insurance to make a routine care appointment, the agency said. About three-quarters of respondents who said they were in excellent health reported making an appointment for routine medical care, compared with only half of those who said their health was fair or poor.

Avandia Suspected in Deaths

Type 2 diabetes drug rosiglitazone (Avandia) accounted for 1,354 patient deaths in 2009, more than any other prescription drug, according to a report from the Institute for Safe Medication Practices. However, the institute blamed publicity about the drug's cardiovascular safety risks in part for the large number of fatalities reported to the FDA. "The manufacturer, GlaxoSmithKline, told us earlier that it believed many of the adverse drug event reports for rosiglitazone were associated with possible lawsuits against the company," the report said. The institute excluded reports it knew were associated with legal claims but said it couldn't rule out the bad publicity as the reason for increased reporting of cardiovascular events and deaths associated with rosiglitazone in 2009.

—Jane Anderson

IMPLEMENTING HEALTH REFORM

Closing the Doughnut Hole

One of the first provisions of the Patient Protection and Affordable Care Act to take effect is the \$250 rebate for Medicare beneficiaries who fall into the Part D doughnut hole.

The first rebate checks were mailed on June 10. The rebates are the first step in a multiyear effort to trim drug costs for seniors and other Medicare beneficiaries.

Next year, patient cost sharing for brand-name drugs will be cut in half, and the doughnut hole will be closed completely by 2020.

Just as checks started hitting seniors' mailboxes, the administration launched a \$1 million radio ad campaign designed to help patients protect themselves from fraud, as criminals launch scams targeted at the new benefits.

Marilyn Tavenner, acting administrator for the Centers for Medicare and Medicaid Services, answered questions about how the new benefit will be implemented.



that will help reduce their costs. In addition, under the new law, the actual coverage gap will get smaller and smaller every year, until it completely disappears in 2020.

IM NEWS: Physicians in all specialties spend a lot of time helping patients find affordable medications. How will these changes decrease the burden on doctors?

Ms. TAVENNER: Physicians are on the front lines in helping seniors obtain medications that are not only successful

'The \$250 rebate is immediate relief that marks the first step in completely eliminating the doughnut hole.'

MARILYN TAVENNER

in treating the patient, but are also affordable. By closing the coverage gap, and making care more affordable, Medicare beneficiaries will be able to get the care they need and deserve.

And starting next year, patients with Medicare can get free preventive care services like colorectal cancer screening and mammograms. Medicare also will cover an annual physical, where they can work with their physician to develop a personal prevention plan based on current health needs.

IM NEWS: How many Medicare beneficiaries will fall into the doughnut hole this year? Will they all get checks this summer?

Ms. TAVENNER: About 8 million Medicare beneficiaries are expected to reach the prescription drug coverage gap that we call the doughnut hole this year. Of those, 4 million will be eligible to get a tax-free, one-time rebate check. The remaining beneficiaries already receive assistance through Medicare Extra Help.

Beneficiaries who hit this coverage gap do not need to fill out any form, or make any phone call, to receive this benefit under the Affordable Care Act. The one-time \$250 rebate checks will be mailed automatically to seniors' homes from Medicare when they enter the doughnut hole.

The first rebate checks were sent in June, and checks will be sent each month throughout this year as more beneficiaries enter the doughnut hole.

IM NEWS: Will the \$250 rebate have a significant impact on patients' out-of-pocket drug costs this year?

Ms. TAVENNER: The \$250 rebate is immediate relief that marks the first step in completely eliminating the doughnut hole. This year's rebate will help put money back in the pockets of seniors who are too often forced to choose between paying for their groceries or for their medications. Next year, seniors who reach the coverage gap will get a 50% discount on brand-name drugs

IM NEWS: How can physicians help their patients to take advantage of this new benefit?

Ms. TAVENNER: Doctors can continue to help their patients by educating them about the Affordable Care Act so they can take full advantage of its new benefits.

If patients have questions on their rebate checks, they can call 1-800-Medicare or visit www.medicare.gov. And to receive updates on the health reform law as it is implemented, they can visit www.healthreform.gov.

One important note: Along with the additional benefits provided by the Affordable Care Act come increased threats of fraud.

Such threats are precisely why we're working with the Department of Justice to crack down on scam artists who are trying to procure personal information from Medicare beneficiaries by promising them rebate checks and other benefits under the law.

Patients should never give their Medicare ID number to anyone promising benefits or discounts under the new law. For fraud-fighting tips, visit www.stopmedicarefraud.gov. ■

MARILYN TAVENNER is acting administrator for the Centers for Medicare and Medicaid Services, which administers the Part D Medicare benefit and will be responsible for implementing many elements of the new health reform law. She previously served as secretary of health and human resources for Virginia.