

Rhode Island Medical Society Council

Meeting of Monday, August 2, 2010

Meeting Highlights

Tufts Health Plan Three vice presidents of Tufts were guests for the first part of this Council meeting. Tufts is “very pleased” with its experience in Rhode Island since its reentry into the RI market in January 2009. Tufts’ departure from RI, New Hampshire and Maine at the end of 1999 was precipitated by losses in the northern states, not by any adverse conditions specific to Rhode Island.

Tufts believes it can compete successfully with BCBSRI and UnitedHealthcare of New England in Rhode Island by holding administrative costs to 8.5% of premiums collected (exclusive of commissions paid to brokers) and by differentiating Tufts on the basis of superior service to subscribers and doctors. With some 16,000 Rhode Islanders covered to date and some 92% of Rhode Island’s 2500 practicing physicians enrolled in Tufts’ network (on a fee-for-service basis), Tufts says it is exceeding its goals.

The Tufts spokesmen acknowledged inter- and intra-state variations in payment rates to physicians and hospitals but said that the range of difference is substantially greater among physicians and hospitals in Massachusetts than it is in Rhode Island. Tufts’ own payments to Rhode Island physicians overall are roughly 3% lower than Massachusetts payments, and Tufts’ payment variations within Rhode Island exist but were characterized as “very small.”

Provider tax Judge Parraglia’s schedule of briefing deadlines foresees a decision in October 2010. RIMS has financed the effort to date with four waves of fundraising from the medical community since June 2007. In addition the AMA Litigation Center has provided two contributions (in 2008 and 2010) totaling twenty thousand dollars. A fifth wave of fundraising is in preparation.

State-imposed surgical volume thresholds Dr. De Palo provided an update on discussions with state authorities regarding institution-specific minimum volume thresholds for certain esophageal and pancreatic surgeries. Community discussion will continue, led by RI-ACS.

National health system reform On July 14, U.S. Senator Sheldon Whitehouse hosted some ninety Rhode Island health care leaders at the Hart Senate Office building for a high-level, half-day seminar on the new national reform legislation. Individual states will apparently have opportunities to exercise initiative and leadership in shaping their own health care systems within the framework and resources provided by the complex new federal law.

PA training in Rhode Island Both the University of Rhode Island and Johnson & Wales University continue independently to pursue the establishment of training programs for Physician Assistants on their respective campuses. Rhode Island remains

the only New England state without at least one such program. The Rhode Island Medical Society has actively encouraged both schools in their plans for PA training programs.

Non-FDA approved IUDs As this unfortunate and complex situation continues to unfold, it is to be hoped that the disruptions in the lives of the well-regarded physicians and innocent patients will be minimal. In one of its facets, this matter highlights some of the perverse contradictions of government regulation and market forces in medicine.

Annual member banquet New RIMS leadership (elected by the Council in June) will be installed in office on October 2 at the Squantum Association. Gary Bubly, MD, will become 2010/2011 President of RIMS. The 2010 Hill Award recipient will be David Ettensohn, MD. The 2010 Rakatansky Award recipient will be Caroline Troise, MD.

The **RI Society of Anesthesiologists** holds three educational meetings a year for its seventy-two actively practicing members (another 30 members are retired) and is working on tri-state meetings with Massachusetts and Connecticut.

The Society is also working with a coalition of Rhode Island entities on issues related to pain management and on strategies for the safe recovery of opiates from the community to avoid ground water contamination, etc.

The **RI Society of Eye Physicians and Surgeons** secured two grants, which enabled it to equip an ophthalmological examination space within the Rhode Island Free Clinic. Volunteer ophthalmologists staff the space weekly on Wednesday evenings.

RISEPS is also committed to mentoring students and residents on the importance of active participation in organized medicine and in public advocacy for enlightened policy in health care. RISEPS recently sponsored two residents in a round of face-to-face meetings with Rhode Island's congressional delegation in Washington, D.C.

RISEPS' membership includes 90% of Rhode Island ophthalmologists. RISEPS works closely with its counterparts in CT and MA, and with the American Academy of Ophthalmology.

Dr. Robert Janigian will succeed Dr. Rizzuto as RISEPS' President this fall.

RI Society of Otolaryngology - Head & Neck Surgery holds quarterly educational meetings for its twenty-six members. Otolaryngology has no residency program in Rhode Island, but a few residents from Tufts train at Rhode Island Hospital.

Concerns of Rhode Island otolaryngologists include disparities in inter- and intra-state payments from third parties and the burdens associated with securing payer pre-authorizations for imaging studies and pharmaceuticals.

Dr. Mark Andreozzi is the current President of RISO-H&NS.