

Lawmakers' Decisions Affect Healthcare

Texas Rural Physician Winter 2011

82nd Texas Legislature and Medicine

Interested in how your TMA intends to approach this year's legislative session? The TMA website lists [policy briefs](#) for nearly every topic that will be addressed this session.

TMA's legislative priorities that are of particular interest to rural health advocates:

- [Corporate practice of medicine](#): Physicians should work for the patient, not the insurance company, hospital, or anyone else who might have incentives contrary to the patient's best interests. Direct employment of physicians by corporations is divisive to local medical communities by setting up dynamics that favor the business interests of the corporation over the medical needs of the community. Tools currently exist for counties to recruit physicians to their communities without compromising the physician's independent medical judgment or eliminating the private practice of medicine. These include (1) the formation of a nonprofit healthcare organization where physicians, and only physicians, supervise medical care and physician services, and (2) the physician loan repayment program, which encourages physicians to practice in medically underserved and rural communities by helping them repay their staggering medical school loans.
- [Establish an appropriate payment system for Medicaid/CHIP](#): Medicaid and Children's Health Insurance Program (CHIP) payments to physicians still lag far behind other payment rates, even after the 2007 increases. To ensure access to a medical home for Medicaid and CHIP patients, legislators must continue to improve continuity of care and payments through Medicaid for adults' and children's services.
- [Graduate Medical Education Funding](#): Texas has a shortage of physicians, both primary care physicians and specialists. The state currently ranks 42nd out of 50 states and the District of Columbia in physician-to-population ratio for patient care. The shortage is acutely evident in rural areas of the state. Even though medical liability reforms have brought more than 21,000 new physicians to Texas, we still don't have enough physicians to keep up with the state's robust population growth.

Save Medicine: Come to First Tuesday

One of the most effective lobbying tools in organized medicine's arsenal is back.

[First Tuesdays at the Capitol](#) brings physicians, medical students, and Texas Medical Association Alliance members to Austin on the first Tuesday of each month during the legislative session to put a personal face on the healthcare issues debated by Texas lawmakers. Since there are unique issues facing rural medicine, it's important that legislators hear from rural doctors about the challenges facing your patients and your practice.

If you missed the Feb. 1 program, the remaining First Tuesdays at the Capitol are:

- March 1
- April 5
- May 3

To register for First Tuesdays, or just to get more information, click on the First Tuesday link.

Sign up now for TMA's Legislative News Hotline

Want to stay fully informed of the latest dealings in the Texas Legislature this year? Then subscribe today to the *TMA Legislative Hotline*.

The *Hotline* is a daily newsletter for TMA members only delivered to you via e-mail that will track issues affecting medicine and report on the latest actions of the legislature. The hotline is delivered each legislative day before noon beginning Jan. 1. A weekly recap, delivered each Friday, is also available.

To subscribe to the hotline, use the "[MEMBER LOG-IN](#)" and then go to "Update Your TMA Demographic Information (including newsletter subscriptions and preferences)"

EHR Incentives and Subsidies for Rural Physicians

Federal incentives are available to all physicians who are meaningfully using an electronic health record (EHR) in 2011-12. Physicians practicing in a health professional shortage area (HPSA) will qualify to receive an additional ten percent Medicare bonus, for a total of up to \$48,400 under Medicare and up to \$63,750 under Medicaid.

On-site help is available for existing EHR users or for those looking to purchase and reach meaningful use from the Texas Health Information Technology Regional Extension Centers (RECs). Federal subsidies allow the RECs to charge only \$300 for consulting valued at \$5,000. Texas RECs are open for business and ready to help you with the difficult decisions you may be facing in selecting and implementing an EHR. The Texas RECs are focused on helping you:

- Select or upgrade your EHR,
- Optimize your workflow,
- Achieve meaningful use, and
- Qualify for EHR incentives.

Federal incentives for consulting and EHR use are unprecedented and will not last long. Now is the time to begin this process. Learn more about the Texas RECs, eligibility, meaningful use, and available incentives by visiting www.texmed.org/rec. Still have a question? Contact the TMA Health Information Technology helpline at (800) 880-5720, or e-mail HIT.

Medicaid Managed Care Expansion

The Texas Health and Human Services Commission (HHSC) proposes several changes to Texas Medicaid and Children's Health Insurance Program (CHIP) managed care services. The proposals are contained in the HHSC budget request and are contingent on approval by the Texas Legislature.

Among the proposals is the expansion of Medicaid managed care to counties contiguous to existing service areas. The proposal will take effect in September.

To determine if your county is affected, visit the HHSC website.

Help is Available for PCCM Providers with No-Show Clients

Primary Care Case Management (PCCM) providers can request free client education for clients who frequently miss appointments and can also schedule a community health education program in their office. Providers can call the PCCM and Personal Care Services phone line or fax a referral form to request assistance for PCCM clients.

The Texas Medicaid and Healthcare Partnership (TMHP) has a Community Health Services (CHS) program that can assist physicians by educating clients on the importance of keeping their appointments, helping clients schedule transportation to medical appointments, and providing other care coordination services. CHS coordinators, located in PCCM counties throughout the state, can direct clients to local services. Providers also can refer clients to CHS for medical education about their diagnoses and other health-related issues.

For more information for physicians who are interested in PCCM Community Health Services, visit the TMHP Website.

Rural Health Payments Increase

The Centers for Medicare and Medicaid Services (CMS) increased the upper payment limit per visit for rural health clinics (RHC) from \$77.76 to \$78.07 on Jan. 3. The upper payment limit for Federally Qualified Health Centers (FQHC) increased from \$125.72 to \$126.22.

For more information, visit the CMS website.

Rural Health Open Door Forum

The Rural Health Open Door Forum, sponsored by the Centers for Medicare & Medicaid Services, addresses Rural Health Clinic Community Access Hospital and Federally Qualified Health Center issues, as well as some inclusion of

other questions and concerns that occur in clinical practice pertaining to other CMS payment systems that also extend into these settings.

For more information, visit the [CMS website](#).

NRHA Annual Conference in Texas This Year

The National Rural Health Association (NRHA) annual conference will be held in Austin May 3-6.

For more information, visit the [NRHA Web site](#).

Save the Date!

- TexMed 2011: May 13-14, Houston
- TMA 2011 Fall Conference: Oct. 21-22, Austin

Rural Grants Available

Visit the [Texas Department of Rural Affairs](#) (formerly ORCA) website for more information about the many [grant opportunities](#) offered by TDRA. TDRA is a state agency that works to strengthen rural communities by focusing on rural issues, monitoring governmental actions that affect rural Texas, and coordinating rural programs among state agencies.