

## Physician Advisory Committee Meeting Summary

### April 20<sup>th</sup>, 2007 – Las Vegas, Nevada

<b>PAC Members in Attendance:</b>	
Sam Nussbaum, M.D.	Alan London, M.D.
Robert Berenson, M.D.	Mitchell Miller, M.D.
Verna Gibbs, M.D.	Richard Tuck, M.D.
Hector Flores, M.D.	David Welsh, M.D.
<b>PAC Members unable to attend:</b>	
David Blumenthal, M.D.	
Jeffrey Linzer, M.D.	
Theodore Mazer, M.D.	
Simeon Schwartz, M.D.	
<b>Other Support</b>	
Victoria Kalicki, Project Administrator, WellPoint, Inc.	
Lisa Latts, MD, VP Programs for Clinical Excellence, WellPoint, Inc.	
Christina McGovern, PMP, Sr. Project Manager, WellPoint, Inc.	
Dave Prugh, VP Reimbursement & Contracting Strategy, WellPoint, Inc.	
Amy Sansbury, Associate General counsel, WellPoint, Inc.	

#### Topics and Discussion:

##### I. **Review of Preliminary Meeting:**

Dr. Nussbaum opened the meeting. A debrief from the PAC pre-meeting the day before was held. The pre-meeting was open to all PAC members. Attendees included Verna Gibbs MD, Alan London MD, Mitchell Miller MD, Sam Nussbaum MD, and David Welsh MD, as well as Lisa Latts MD, Dave Prugh, Victoria Kalicki, Christina McGovern, and Amy Sansbury.

The purpose of the meeting was to address specific claim and reimbursement issues in detail. However, to the extent an issue was regional or national, arising from or related to the relationships and interactions between and among physicians, their patients, and WellPoint, the issue would then be brought to the PAC. These issues may include, but are not limited to: (a) improvement of health care and clinical quality; (b) improvement of communications, relations and or cooperation between physicians and/or WellPoint; and/or matters of a clinical or administrative nature that impact the interaction between physicians and WellPoint. During this pre-meeting, the following items were discussed:

- Agenda setting: All PAC members need to be more involved in setting meeting agendas. Requests for topics will be circulated at least 30 days in advance of the meeting.
- Meeting schedule: The parties are considering 1½ days, possibly on Friday/Saturday and meetings will be scheduled farther in advance.
- Some topics from the Ohio State Medical Association (OSMA) were raised by Dr. London regarding contract addendums, provider audits and service.
- Drs. Miller and Welsh raised issues/questions regarding specific edits, i.e., ear wax removal and modifier 25, modifier 79 for post-surgery complications, having the same diagnosis code coupled with the E/M and modifier 25.
- We discussed the NQF list and 'never pay' concept.

A formal recommendation was made by the PAC for WellPoint to have a committee in each state where it has a concentration of membership, whose role is to help improve relationships (e.g., a "state PAC") whose minutes would be shared with the enterprise PAC.

WellPoint agreed for the next meeting to describe its current committee structures throughout the organization that already utilize physicians from the community and would propose a structure.

**II. Old Business**

The group discussed the results of WellPoint's follow-up to open items from the December, 2006 PAC meeting. These topics include efforts toward administrative efficiencies, first pass approval rates for radiology services, time-based codes and the appropriateness of a modifier 22, enterprise wide efforts toward consistent claims editing, analysis of after-hour codes and multiple surgery reimbursement.

A formal recommendation was made that WellPoint support codes for extended hours, and propose a strategy how to accomplish this.

**III. Vaccination Reimbursement**

In response to the recommendation made by the PAC regarding vaccine reimbursement at the December, 2006 meeting, WellPoint shared its proposal that would enable physicians to purchase vaccines at a cost that would be not greater than the fee for such vaccine. This would also include margin for waste and storage. Further information was requested from WellPoint regarding the proposal.

WellPoint committed to providing the PAC with the formal strategy and implementation timetable in the next 60 days.

**IV. Conversion Factors**

A brief discussion was held regarding conversion factors. The PAC agreed to provide WellPoint with examples of fees for which conversion factors differ between primary care and specialty care physicians resulting in higher payment to specialists for the same services. WellPoint acknowledged that an individual or group/practice rate might vary based on contracted rates but not by specialty.

**V. New Business:**

The PAC discussed WellPoint's Member and State Health Index.

The PAC discussed Advanced Medical Home payment considerations.

The PAC discussed Centers of Excellence and Value Networks.

**Pay for Performance**

An update was given regarding Pay for Performance.

The PAC was asked to advise WellPoint which specialty societies are developing quality standards and/or registries. The WellPoint Foundation may be able to offer financial assistance to the societies to help underwrite the cost of these quality initiatives.

**VI. Medical Policy Changes**

1<sup>st</sup> quarter Medical Policy additions/changes were distributed to the PAC

**VII. Tabled:**

**Pharmacy & Therapeutic (P&T) Process**

**VIII. Next Meeting Date and Location:**

**TBD**