

OPIOID CRISIS IN AMERICA

According to a study of 1.3 MILLION non-cancer patients published in March 2017 by the CDC:



10 Day Opioid Prescription

20% of patients still taking it 1 year later

7 Day Opioid Prescription

12% of patients still taking it 1 year later

5 Day Opioid Prescription

6% of patients still taking it 1 year later

Response to the current opioid addiction crisis in the US is now coming from all directions:

JCAH	2018	recommendatons to include alternative pain therapies eg. acupuncture, chiropractic, cognitive behavioral therapy
Cigna	2018	removes oxycontin from group commercial formulary
CVS Pharmacies	2018	limiting initial opioid prescriptions to a 7-day supply for new patients with acute ailments
Walgreens	2018	focus on teen anti-drug education and expanding access for naloxone OD treatment
UT Center for Addiction Science	2018	offers fellowship training to physicians and other health professionals to diagnose, treat, and prevent addictions as well as focusing multidisciplinary research in this area. accepting new patients for treatment: 901-866-8630
CMS	2019	designates most opioids as "frequently abused drugs" labels patients with extended prescriptions for those drugs as "high risk" limits prescribing for high risk patients to specific providers

MetroCare is using data analytics (from MLH health plan information) supplied by Express Scripts through Camille Hill, Pharm D, to examine the opioid prescribing habits of our network providers.

Watch for more education and resources to help our network address this growing problem.

Have You Given Up On MIPS?

If you do not plan to attest for MIPS in 2017 because you think it is too difficult, there are still easy options for you as a provider in a small group (<15 providers).

In announcing recent updates, CMS has made it clear that data completeness requirements will not apply this year, nor for 2018. (Formerly required 20 Medicare patients for each measure)

If you can report one patient for one measure for 2017, you will receive 3 points credit for your quality score. For 2017, a minimum score of 3 points will protect your fee schedule from the negative adjustment. However, if you do not choose to report anything, there will be a negative adjustment of 4% that will be taken on your 2019 fee schedule.



[This link is for a document](#) that lists the most common primary care measures that are reportable by claims, along with the quality code to be entered on the Medicare claim as it is billed.

MetroCare Annual Meeting

Local Population Health Takes Center Stage

MetroCare's annual meeting provided the backdrop to share national and local population health perspectives.

Dr. Richard Stefanacci, Jefferson College of Public Health and practicing geriatrician from Philadelphia, PA served as the keynote speaker.

He spoke about his personal success, both clinical and financial, with practicing in full risk contracts.

MetroCare physicians Randall T. Huling, MD, Olive Branch Family Medical Center; Morris Kent, MD, Medical Anesthesia Group; and Junaid Zaidi, MD, Mid-South Pulmonary Group provided examples of innovative population health programs they have instituted in their practices.

[Click here to view presentation overviews.](#)



MetroCare Board Election Results

Our board election voting period opened at the Annual Meeting and a link for online voting was emailed to all physician members to allow those not present at the meeting to voice their opinions, as well.

Six seats were up for re-election, three primary care and three specialist physician positions for three year terms.

The following were elected:

Primary Care: John Buttross, MD, Jimmie Mancell MD, Jeffery Warren, MD

Specialists: Neal Aguillard, MD, Salil Parikh, MD, Lisa Young, MD

We thank Dr. Charles Yukon for his many years of service to the board as he chose to retire his seat.

2018 Formulary Updates for Methodist Le Bonheur Healthcare (MLH Associates)

Beginning 01/01/2018, certain medications will be excluded from coverage for MLH beneficiaries and most other patients that use an Express Scripts National Formulary

Full list of excluded products and covered alternatives is included here:

https://www.express-scripts.com/art/pdf/Preferred_Drug_List_Exclusions2018.pdf

Below are the Top 3 changes to be aware of according to recent prescriptions claims data for MLH:

Excluded Product	Therapy Class	Covered Alternative
Minastrin 24 FE Chewable	Oral Contraceptives	Mibelas 24 FE Chewable Noreth-Estrad-FE Chewable
Tribenzor	Hypertension/Heart Disease	Olmsrtn-Amldpn-Hctz
Pristiq ER	Antidepressant	Desvenlafaxine ER

If the excluded medication is otherwise clinically warranted or patients have failed the alternatives:

The prescribing physician or a medical staff member can call Express Scripts **beginning January 1, 2018** and provide clinical rationale regarding why the patient cannot use the covered alternatives.

- **Clinical Exception Phone Number: 1-800-753-2851**

We Are Here to Assist You

Continuing the transition to a value-based healthcare delivery system will require changes for every practice. A dedicated team of professionals are committed to assuring MetroCare physicians have the tools and resources to achieve success.

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