

Patient Access to Quality Medical Care

An important and vital issue that ACOFP works toward is **Patient Access to Quality Medical Care**. ACOFP strives to ensure patient safety, monitor developments in quality reporting programs, provide access to health care for the uninsured and underinsured and ensure access to preventive health services, including flu vaccines.

August 2008

Physician Quality Reporting Initiative Update

In 2007, approximately 100,000 physicians and other providers participated in the Physician Quality Reporting Initiative (PQRI) program. Of those who participated, about 50 percent are likely to receive to a bonus payment, according to the Centers for Medicare and Medicaid Services (CMS). By mid-July, PQRI participants for 2007 will have access to online performance reports. Bonus payments are expected to be paid out around the same time. While CMS deems last year's participation rate as a "successful start," the rate is a small percentage of the 630,000 that were eligible to participate.

In addition, the 1.5 percent incentive payment raised concerns about not covering the program's costs, particularly for small physician practices. CMS also is expanding PQRI options for this year as a way to encourage more eligible professionals to participate. For more information on the expansion, go to cms.hhs.gov/pgri.

April 2008

Medicaid FMAP Increase

On February 7, Reps. Frank Pallone (D-NJ), Chairman of the House Energy and Commerce Subcommittee on Health, John Dingell (D-MI), Chairman of the House Energy and Commerce Committee, Peter King (R-NY), and Tom Reynolds (R-NY) introduced legislation that would provide a temporary increase in the Medicaid federal medical assistance percentage (FMAP) enabling states to continue to provide health care assistance to its low-income residents. The bipartisan legislation would:

- Provide a temporary increase of the Medicaid FMAP by 2.95 percent for five quarters, the last two quarters of fiscal year 2008 and the first three quarters of fiscal year 2009 (April 1, 2008 through June 30, 2009.);
- Provide a similar temporary increase of the Medicaid FMAP by 5.9 percent for the territories;
- Protect states against a decline in their Medicaid FMAP during the same five quarters of the 2008 and 2009 fiscal years;
- Require states to maintain their Medicaid eligibility at current levels in order to receive the 2.95 percent temporary increase in the Medicaid FMAP; and

- Require states to adjust payments by localities and counties to the state share to account for additional federal funding.

In 2003, Congress passed and President Bush signed into law an economic stimulus package that included a similar FMAP increase at a cost of \$20 billion.

March 2008

Health Information Technology Update

In 2007, both the House and Senate worked to approve legislation to advance appropriate health information technology. However, neither body was able to do so in the first session of the 110th Congress. The pieces of legislation introduced included the “Healthcare Information Technology Enterprise Integration Act” (H.R. 2406), introduced by the Chairman of that Committee, Rep. Bart Gordon (D-TN). The bill would authorize the National Institute of Standards and Technology (NIST) to increase efforts to integrate the broad use of information technology in America’s health care system.

“The Wired for Health Care Quality Act” (S. 1693) was introduced by Sen. Edward Kennedy (D-MA) and Sen. Mike Enzi (R-WY). The bill attempts to develop a nationwide interoperable health IT infrastructure linked to the development and utilization of quality measures to reduce errors, improve quality, and reduce costs. The physician community and patient privacy groups expressed deep concerns with the legislation due to the public release of quality reporting data that would be required of physicians. This opposition kept the legislation from advancing in the final days of 2007.

In addition, Reps. Anna Eshoo (D-CA) and Mike Rogers (R-MI) introduced “The Promoting Health Information Technology Act” (H.R. 3800). The legislation is the House companion to (S. 1693).