

# **IGNORE MACRA GORILLA - PRACTICE MEDICINE OUTSIDE THE CAGE**

MACRA is the new 800 pound gorilla in the room. The good news is that you can protect your patients and practice by putting the MACRA gorilla in a cage. Lock him up and throw away the key. In that cage will be all the physicians who agreed that the gorilla should control their manner of practice, decide how much they get paid and authorize that gorilla to exact punishment upon them for non-compliance. Sadly there will be patients in the cage – brought in by their physicians all seeking an old rotten banana from the gorilla if only they deny bananas to their patients.

Just how do you ignore the MACRA gorilla? First you have to realize that the dangers of living in the cage far outweigh the alleged benefits. Yes, life outside the cage can be more difficult at times since the government and insurance companies are trying to herd all patients into the cage where they also seek to place all the bananas. Thankfully, most patients have far more common sense than the government, insurance companies and doctors who seek cages. They will be looking for an alternative: independent, free physicians can provide that alternative.

MACRA (the Medicare Access and CHIP Reauthorization Act) passed Congress with broad bipartisan support and endorsement of the AMA and the Florida Medical Association. The Feds are preparing to pass a 962 page rule (MIPS) that will penalize doctors who don't practice according to the government cookbook or don't ration care. Those doctors who follow the rules will receive a "bonus" which is really just a penalty for those who don't comply. The "Merit Based Incentive Program" (MIPS) is budget neutral - the only way to fund the socalled bonuses is to take the money from penalized doctors. Doctors who don't comply can face up to a 27% payment cut in a few years. Participating will require adoption of expensive and intrusive EMR's with regular data reporting to the government and continuous audits of compliance. Doctors participating in such programs have generally done poorly. But the government has found another excuse to stop spending money it doesn't have while labelling the doctor as "low quality and inefficient". While this is a Medicare program, insurance companies continue to adopt these pay for performance models.

So how to best maintain your practice when the gorilla is raging in the cage? The answer is simple -Don't participate.

Don't comply. Save the money and the administrative burden.

Continued p. 2.

## AAPS-FL Comments on MACRA to CMS

Excerpts from 6/24/16 letter (see at Flaaps.org).

"...the proposed rules are an invalid exercise of delegated parliamentary authority...written in an arbitrary and capricious fashion and violate applicable administrative and other law. They...will cause harm to physicians and their patients... by 1) causing physicians to alter practice patterns to satisfy the rules to achieve a bonus, avoid a penalty or avoid other harm to their practices and 2) interfering with the ability to practice medicine independently and in the best interest of their patients. The rules will cause substantial and unacceptable unfunded expenses and burdens on physician practices and deprive physicians of their time with patients since they must instead be coerced to spend time on onerous compliance activities.

"There is a glaring and obvious violation of the law. The rule states that all MIPS eligible clinicians "MUST" submit data and more. The law authorizing these rules (HR2, 114th Congress, "MACRA") specifically denies the ability of any agency of the government to require submission of any data under MIPS."

"...the rule harms access to care by Medicare patients by creating compliance protocols that are primarily based on cost of care and administrative factors. These rules specifically refer to a budget neutrality goal. The rule refers to withholding "incentives" from doctors who do not obtain arbitrarily defined budget and spending goals that can only amount to a rationing of medical care."

## FLORIDA AAPS STATE CHAPTER ANNUAL MEETING SATURDAY 1/28 - ORLANDO. SEE INSIDE & FLAAPS.ORG.

## AAPS to Take Lead to Stop Mandatory MOC in Florida

MOC (Maintenance of Certification) is the bane of existence for many physicians and surgeons. Doctors obviously have no problem continuously learning as part of their profession - it was actually part of the attraction of medicine. However the onerous MOC requirements have proven to be expensive distractions from practice designed to enrich those in charge. MOC is meant to ensure that medical practice is bent to the will of politicians and insurance companies seeking to ration care and impose cookbook medicine.

Thankfully, hope has arrived as the AAPS Florida chapter is working to have legislation introduced in Florida to ban MOC as a condition of licensure, hospital credentialing and insurance contract participation.

Continued p. 2.

#### From p1. MACRA Gorilla...

Take care of your patients based on proper standards of medical care and your professional integrity. That means facing the penalties, but it also means not spending money on the EMR and compliance activities. A Weill Cornell Medical College study found that complying with these programs costs each doctor \$40,000 per year (http://tinyurl.com/gmj7cju). In addition, not reporting and complying saves doctors from the dangers as being publicly labelled in the newspaper and elsewhere as a "1 star" or "inefficient" doctor. Not participating in the MACRA program may mean more "direct primary care" relationships with patients paying cash. Primary care doctors are in the best position to pursue practice outside the MIPS system. Their regular visits are relatively low cost and affordable to patients who prefer to pay cash for independent doctors. Specialists can also ignore these rules and simply take the penalty. Doctors may need to plan for other means to replace the lost revenue, perhaps through expert witness work, consulting and non-medical activities. However, they may discover that focusing on the patient, cutting costs for collection and compliance may be more rewarding. Doctors may find this is the final straw that finally makes them leave standard Medicare to become "non-participating". "Opted out" or "Disenrolled" http://tinyurl.com/zjz897s). However many will discover that staying as a "participating" Medicare doctor and accepting the penalty for non-compliance is the best option for them and their patients.

As we grow, the Florida Chapter of the AAPS would like to publicly highlight those doctors who give their patients an option that doesn't involve being dragged into the cage with the MACRA Gorilla. Our chapter seeks to spread the word: Florida AAPS doctors care more about you than getting a banana from the zoo keepers.

#### From p. 1 MOC...

Oklahoma famously passed an MOC ban last year and similar bills are percolating in Michigan, Missouri and Kentucky. The bill would prevent hospitals from requiring doctors to participate in MOC be on the medical staff. It would forbid insurance companies and the state medical board from making MOC mandatory as well. There have been many recent revelations about how the MOC industry is corrupt, well highlighted at the Dr. Wes Blog (http://tinyurl.com/jps5o6x). For instance ABIM was found to use MOC revenue to buy a \$2.3 million condo with a Mercedes limo, a multimillion offshore account, a big retirement nest egg for the doctor administrators, illegal expenses hidden from the IRS and even a convicted bad cop as a "security" enforcer to intimidate doctors into compliance with ABIM requirements.

We will need each AAPS-Florida Doctor to help us pass this ban in Tallahassee by emailing, calling and visiting legislators in the state capitol in the spring. If doctors want to get rid of MOC, they are going to have to put their back into it - the hill will be a steep one to climb, but the peak is easily within reach.

Stay Tuned to AAPS-Florida Emails for updates!

## The WEDGE of Health Freedom for Patients and Doctors

#### By Twila Brase

(Executive Director, CCHF and Keynote Speaker for AAPS Florida Chapter Meeting 1/28/17, Orlando!)

What if you could escape the controls of government-run programs and managed care contracts — and patients could still find you? Welcome to The Wedge of Health Freedom ("THE WEDGE") recently launched by Citizens' Council for Health Freedom.

Calling it "THE WEDGE", CCHF branded the free-trade zone operating today that is mostly invisible to the American public. In these practices, free from costly bureaucratic and regulatory requirements, the insured, uninsured or governmentsubsidized patient pays cash, check, or charge or uses a Health Savings Account or out-of-network coverage. CCHF launched THE WEDGE to capture the public's attention, show the affordability, confidentiality and patient-centeredness of these "Wedge practices" and grow THE WEDGE into an unstoppable force for health freedom.

The rise of deductibles under the Affordable Care Act and skyrocketing membership in cash-based, health-sharing organizations have made "Wedge practices" more attractive to patients. The Wedge website provides a meeting place for patients and doctors. Today, 140 practices in nearly 40 states are listed online, and patients and doctors report that patients are already finding these Wedge practices.

CCHF is asking all cash-based and Direct Primary Care practices to join THE WEDGE by simply making an online request. CCHF also wants patients and doctors to introduce every doctor they know to THE WEDGE —to plant the seeds of freedom— even among those still trapped in contracts and government programs. The Wedge website (jointhewedge.com) includes eight simple principles and downloadable overviews for sharing THE WEDGE with others. Together, patients and doctors can escape into health freedom.

JointheWedge.com



## Eye surgeon: Political Prisoner, Medical Missionary, Inspiration and AAPS Legal foundation Success Story!

Dr. Jeff Rutgard has performed over 14,000 free eye surgeries around the world for years. He also spent four years in a federal prison as a political prisoner over false charges of Medicare Fraud (initiated by his competitors). Dr. Rutgard, a La Jolla (CA) ophthalmologist, spoke to the national meeting of the AAPS in Oklahoma City and was an inspiration for all in attendance. He is a case study of a doctor selflessly serving humanity, a government run amok in an unjust quest to "set an example" and of the incredible value of the AAPS in fighting for physicians in ways that establishment organized medicine (AMA and FMA) refuse to do.

Dr. Rutgard showed dozens of pictures of patients with cataracts and other treatable eye disorders he treats through his mission work. He and his team (including his wife and 5 children) travel to the poorest areas of the world. They bring an operating microscope, lens implants and all the supplies/ equipment they need. He told stories of a young woman bringing her blind Nigerian father 5 hours on foot for surgery. The restoration of his sight after 14 years of blindness meant a life for both him and her. A 4 year old boy blind in both eyes from congenital cataracts gleefully bounded around the clinic seeing everything for the first time - including his parents. He routinely sees sheer joy on the faces of elderly patients who have their cataracts removed and young men and women - once outcasts - now able to work and live after surgery! All of this is without a single dime of compensation. He never tells any patient his name, merely telling them that the restored sight is a "gift from God" (learn more at eyeambassador.com & contribute at IsightMissions.ngo).

Dr. Rutgard could easily be a bitter man. 20 years ago he went to San Diego and began performing a novel surgical technique for cataracts that caused his competitors to lose business. It is now a standard of care. His competitors caused a federal prosecution over an alleged \$65,000 in claims that were not billed "appropriately" and not "medically necessary." The incredibly unjust court proceeding included a judge coming off the bench to shake the hand of the government expert and jurors who said they thought him innocent but didn't want the government to have to spend more money on another prosecution. Dr. Rutgard was shipped across the country to spend four years in federal prison - intentionally to separate him from his family.

Ultimately his conviction on most charges was overturned by the 9th District federal court - setting some key precedents that benefit physicians. These include preventing the "extrapolation" of data by the federal government to increase the alleged dollar amount of "fraud", and decriminalizing an allegation of "medically unnecessary" treatment if another expert testifies to the contrary. The AAPS and its general counsel Andy Schlafly were key in overturning his conviction and setting him free. The Amicus brief filed by the AAPS and Schlafly set important precedents from the 1997 ruling, overcame an injustice and allowed the amazing work of Dr. Rutgard to this day.

What is most amazing is how this man, despite the injustice he suffered at the hands of his own government, still works for his fellow man and attributes all success to Jesus. He even taught prisoners how to read during his incarceration! Dr. Rutgard is a full time missionary ophthalmologist and was never able to return to the practice of medicine in the USA due to the political persecution he endured. He has provided the 14,000 eye surgeries to the poorest parts of the world without any monetary compensation, but says he received compensation in human joy and spiritually.

Please contribute to the AAPS's American Health Legal Foundation today at http://tinyurl.com/jdva87j

## Florida Board Member Discusses Malaria Re-Emergence Following Faulty Ban on DDT (Presented at AAPS National Meeting).

By Caryl Hyland, M.D, Secretary, Florida Chapter

The use of DDT has rid much of the world of infectious diseases transmitted by arthropod vectors. Of these, malaria (transmitted by the Anopheles mosquito) has been the leading cause of death on a global basis. DDT had been liberally and safely used for over 30 years, saving millions of lives.

It is the repellant properties of DDT that make it so effective in controlling mosquito populations and preventing disease. If it is sprayed around entryways, mosquitos either do not even come in or leave without biting anyone, and they cannot reproduce without a blood meal.

Therefore, very small amounts of the compound are needed and spraying only once or twice a year suffices to prevent malaria and other mosquitoborne diseases.

Tremendous progress was made by the 1960's in eradicating malaria across the globe, including parts of Africa. However, this came to a screeching halt by the end of that decade after the publication of Rachel Carson's fictional book, *Silent Spring*, which launched the environmental movement. Carson's book was loaded with sensational propaganda against the use of pesticides.

The subsequent environmentalist campaign against DDT was fierce, and frequently made use of biased, faulty, or fraudulent research by governmental biologists to advance the cause. Some of the widely quoted papers were not peer reviewed studies, had non-reproducible results, and displayed data inconsistency, extrapolation errors, and lack of cause and effect evidence. Variables and controls were sometimes faulty, such as associating DDT with thinning eggshells in chickens that were fed 20% less calcium than necessary for healthy shells. The media were complicit in the process of vilifying DDT and perpetuated various myths that were later disproven. Data supporting the safety of the chemical were suppressed.

The environmentalists were joined by population control advocates such as Paul Ehrlich, Jacques Cousteau, and some Sierra Club leaders. As they saw it, DDT was allowing too many people (especially in poor countries) to survive the onslaught of infectious diseases and consume too many resources. In 1970, Richard Nixon launched the EPA and appointed William Ruckleshaus as its director. This was immediately followed by intensive and lengthy hearings on the safety and environmental impact of DDT, which totally exonerated the compound from harming humans or wildlife. However, two months after the close of these hearings, Ruckleshaus unilaterally banned DDT without having attended any of the hearings and reportedly never read the transcripts.

As exports of DDT from the US were halted and financial support for spraying programs was removed, a global resurgence of malaria predictably followed and deaths soared to 1.5 to 2.5 million deaths annually. USAID (US Agency for International Development) recently declared that almost half of the world's population is at risk for malaria, including areas where it had been eliminated. Therefore, in the case of the DDT ban, the political ideology of environmentalism has caused the loss of human life – whether unintentionally by some, or intentionally by those who have said publically that poor nations should reduce their populations.

In view of the massive surge in malaria deaths worldwide and a potential Zika epidemic in the US, it's time to take another look at DDT. It has been 40 years since they banned this cheap, easily produced compound, and they have yet to find anything better.

[References available upon request]

## Florida Chapter Board Meets - Sets New Mission Statement

The Board met on June 25, 2016 at the Heart of Florida Regional Medical Center in Polk County. Many issues were discussed including chapter growth strategies, lobbying and legislation, and public education.

**State Representative Julio Gonzales** also met with the Board and encouraged our efforts. Dr. Gonzales is an Orthopedic Surgeon and AAPS member. He recommended that we actively engage in Tallahassee to stand up for physicians. He reminded our chapter that we represent thousands of doctors who want to practice autonomously of third party control and serve the best interests of our patients.

**State Chapter Mission:** After months of reflection and significant discussion at the Chapter board meeting, we adopted the mission statement for our new chapter: **"Protecting Freedom and Choice in the Practice of Medicine"**. Our Board will work to ensure that the medical practice of our members is based on liberty and oriented to the choices of the patient and the doctors who practice medicine for the benefit of the patient.

## SHAM PEER REVIEW—TIPS to Manage

Hospitals who seek to remove physicians for economic and non-medical reasons may inappropriately use the peer review process to harm the physician. If you are facing a sudden call to "show up" for a discussion on some controversy or clinical issue, be aware that this could be an ambush sham peer review and be prepared. Here are some tips to prepare you, but make sure you read more at the link provided.

- Beware of so-called friendly, informal meetings that are called on an urgent basis without understanding what the meeting is about and who will attend.
- Assume that all meetings (even "informal" ones) are part of the peer review process. Review your medical staff bylaws so you are familiar with the process and your rights, and consider taping the meeting covertly if legal in your state.
- You have right to compel a witness against you to appear for examination in a peer review session, but may need a court order to do so.
- The Illinois Supreme Court has recognized that Sham Peer Review is a real problem - outside of the appropriate peer review process.
- The AAPS has a hotline to help members: 1-800-635-1196
- Learn more about Sham Peer Review based on the important work of AAPS leader Dr. Larry Huntoon http://tinyurl.com/h82w7y8

## Join AAPS National to Grow Florida Chapter Membership

All members of the AAPS national organization who reside or practice in Florida are full members of the Florida chapter of the AAPS. No additional dues are required for state chapter membership, and we rely on your donations.

If you have received the AAPS Newsletter in the past without paying dues, it was because a dues-paying AAPS member had it sent to you for free. You may be receiving this chapter newsletter for the same reason. Those Florida doctors who have yet not joined AAPS are encouraged to do so in addition to any donation they make to the chapter. Join AAPS at aapsonline.org or Mail \$350 with your name and address to AAPS, 1601 N Tucson Blvd Suite 9, Tucson, AZ 85716.

#### AAPS-FL thanks our donors!

The AAPS-FL Donor's circle is our chief means of raising funds. Please help our chapter grow with your contribution today. Funds will be used for purchase of lobbying tools and perhaps a lobbyist, educational activities, communication and those activities that fulfill our mission.

Make your contribution today!

Founders Circle: \$10,000 and more. Torchbearers Circle: \$2,000 to \$9,999 Physicians Leader Circle: \$1,000 to \$1,999 My Doctor Circle: \$500 to \$999 Platinum Circle: \$250-\$499 Gold Circle: \$100 - \$249 Silver Circle: \$50 - \$99

AAPS-FL is a 501c6, Professional Association. Please consult your accountant for tax deductible status.

> Make donations to Florida Chapter, AAPS and send to: AAPS-FL,1955 1st Ave. N., #101, St. Petersburg, FL 33703

## Inaugural Annual Meeting of the Florida Chapter—Orlando, 1/28/17

The Florida chapter will soon hold its first annual meeting. Exact details for the 1/28/17 Orlando meeting will be announced soon. The meeting will include:

- An overview of Florida Laws and Legislation impacting doctors.
- An update on the activities of our chapter.
- An interesting Educational program.
- Discussion of policy directions for our chapter.
- Elections of Board members.

#### KEYNOTE SPEAKER: Twila Brase of The Citizens Council on Health Freedom. Will discuss the Wedge Program and Market-Based Medicine!

#### Florida Chapter Board

President, David McKalip, M.D., St. Petersburg

Vice-President, Joseph Gauta, M.D., Naples

Secretary, Caryl Hyland, M.D., Pensacola

Treasurer, Joel Franck, M.D., Clearwater

<u>Board members (one year Term)</u>: Mirand Sharma, M.D., Celebration; Jim Coy, M.D. Fruitland

<u>Board members (two year Term)</u>: Patrick Abuzeni, M.D., Miami; Larry Gorfine, M.D., Lake Worth

<u>Board members (three year Term):</u> Lee Alice Goscin, M.D., Clearwater, John Littell, M.D., Ocala

## Florida Chapter Leadership Opportunities, Committees

The Florida chapter needs you to help us grow and best represent physicians in Florida. Committees will be forming to help on issues like legislation, public advocacy and chapter growth. No experience is needed! Please contact Chapter President David McKalip at dmckalip@neuro3.net