



CDC Report

Board Meeting ~ Oakland

May 2010

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Below is a brief report from the California Dialysis Council's Closed Board Meeting held May 20, 2010 in Oakland, California. For **CURRENT NEWS** regarding the ESRD community, please visit our web site news page at: <http://www.californiadialysis.org/news.html>

• LEGISLATIVE REPORT

Michael Arnold delivered the following legislative report: Regarding the Governor's budget: In April the predictions were off by 3 billion dollars. The state still faces a 19.1 billion dollar deficit. The Governor plans to eliminate some welfare programs. State assisted childcare may also be eliminated. 2.5 billion dollars are predicated to be saved by these eliminations. The budget proposes to make changes that may affect the dialysis community. These changes include eliminating over the counter drugs such as acetaminophen and durable medical equipment. It limits "lifesaving drugs" to no more than 6 per month. It limits prescriptions to no more than 6 per month. Drugs for hemophilia patients will not be included. It limits the number of clinic and physician visits to 10 per year and add co-payments of \$5 for patient office visits and dialysis treatments. There may also be a \$50 co-pay on emergency room visits and \$100 co-pay in other services. It proposes to enroll seniors and persons with disability into Medi-Cal managed care. A number of patient groups in Sacramento are opposing these proposed changes. Also there are proposals regarding the coordination of Medi-Medi benefits. We are still researching what the administration has in mind and will get back to the Board and membership when more information is available.

The Medi-Cal 10% rate cut was restored by appeals court decisions. States' attorneys have appealed this decision. Since there are some cash flow issues at state level it has been proposed to move 15,000 felons from

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State Prison to County Jails and make severe cutbacks in mental health programs. There are a number of ugly budget scenarios floating around, not to mention 200 million dollars in red light camera programs. The legislative office will be participating fully in these discussions.

The Legislative Status Report is available on the CDC website by [clicking here](#). Accessing in this manner allows you to link directly to the whole bill.

• REGULATORY REPORT

Karen Dyer gave the following report: The issue regarding nutritional and dietary, i.e.: Should dietitians be able to write prescriptions? Discussion regarding the role of dietitians ensued. Should they be able to take on this role and do they have the education? Mike Arnold suggested that we could ask for an opinion from Legislative Counsel about what the dietitian's role is. It was agreed that whoever we ask would probably have a restrictive view about what dietitians can do. It was agreed that this is really outside of the scope of the Council, except that we have an obligation to state our position.

Karen gave a brief update on the Patient Protection and Affordable Care Act (PPACA).

- Section 6402: Overpayments must be reported (written explanation) and re-paid within 60 days of discovery (or when cost report is due) or subject to False Claims Act liability (3X damages and subject to Qui Tam reporting).
- Section 6404: Maximum period for submitting a claim cannot be more than 12 months.
- Section 6401: Corporate compliance programs are mandatory.
- Section 6401: \$500 application fee for new providers - but not for individual- (in addition to existing fees) to pay for enhanced screening for fraud & abuse.
- Section 6002: Annual reports beginning March, 2013 to HHS of payments or transfers of value to MDs or teaching hospitals from drug, device, biological or medical supply companies. To be included are name, date of payment, business address, specialty, NPI, amount/form of payment and a description of the nature of payment. This information will become public information.

Karen also provided information about the new CMS reporting requirements: (CR 6782 - March 17, 2010) Dialysis Adequacy, Infection & Vascular Access Reporting ~ Effective with 7/11/2010 billings:

- Kt/V monthly for in-center hemodialysis, each 4 month minimum for PD and home hemodialysis.

- Infection: peritonitis- related to PD catheter, bacteremia- related to hemodialysis access
- Vascular access: catheter (alone or with any other vascular access), graft (or other vascular access not including catheter), AVF only (in use with 2-needles).

• PCT EXAM REPORT

Mike Paget reported that yesterday, May 20th, 118 PCTs took the exam in Oakland, making a total of 1,689 exams administered since the start of the program in November, 2009. It is forecasted that now the April 15th deadline has passed, the number monthly exams administered will decrease.

• FEDERAL ISSUES REPORT

Marc Chow reported that the final ESRD PPS rule is still pending although initially it was supposed to come out at the end of May or early June. The latest thinking is that release of the final rule may slip into mid-June and possibly even to early July.

The Kidney Care Partners (KCP) took the lead on raising concerns about a number of issues with the proposed ESRD bundled payment. A major concern was the inclusion of oral medications without IV equivalents in the bundle slated to begin in 2011. The industry as a whole is hoping that CMS takes the time to have better and more accurate data so that we are fully funded. The GAO has been charged to do a one year impact study about the inclusion of oral medications in the bundle. Other concerns include case mix adjusters, lab tests, lab co-insurance, and a race adjuster.

It appears that both Capwiz and working with specific legislative offices has been helping, since a number of letters, both individual and group, have been submitted to CMS raising some concerns, especially on the oral medication issue.

• MEDICARE REPORT

Misha Palecek stated nothing additional to report, other than the issues already reported.

• MEDI-CAL REPORT

Dr. Thomas Paukert stated nothing additional to report, other than the issues already reported.

• GRASSROOTS REPORT

Sean Graham reminded everyone that in preparation for the potential need to challenge any budget cuts/changes that may affect our patients that we need to invite legislators to our clinics so that they are familiar with our industry and the needs of our patients.

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• PROGRAM REPORT

Dr. Peter Crooks stated that a post meeting conference call was held to review the meeting evaluations and set the stage for 2011. This year's meeting had one of the highest attendances on record, with a large number of on-site registrations. Next year's conference will be from April 14th to 16th 2011 at the Palm Springs Renaissance Hotel.

- **OTHER BUSINESS**

All future Board Meeting materials will be emailed to registered participants the Wednesday before the meeting. Only the agenda will be provided on site. Options exist to print and bring paper copies or bring a personal computer and review the documents during the meeting. This will cut down on the copies, many of which are just left on the table after the meeting.

- **NEXT BOARD MEETING**

June 18, 2010 ~ Los Angeles

For more information, on-line registration and hard copy registration forms, please visit our web site at:
www.californiadialysis.org/next_board_meeting.html

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