

ON THE COVER—

The 2017 APMA House of Delegates—Ohio Delegation



Journal

OF THE
OHIO FOOT AND ANKLE MEDICAL
ASSOCIATION

VOLUME 59 | NUMBER 2 | SPRING 2017



INSIDE THIS ISSUE

President's Message	2
OHFAMA Member Dr. Brad Wenstrup's Congressional Appointment.....	2
OHFAMA's Radio Campaign Promotes Members.....	3
DPM Mentors Network.....	3
OHFAMA Service Award Winners	5

Mideast Academy Lifetime Achievement Award Winner	5
Sports Injury Clinic Casting Workshop.....	5
Unclaimed Funds: Escheatment	7
TDDD License Information	8-9
Medicare Reimbursement	10
New Opioid Prescription Requirements.....	11

OHFAMA Classifieds	11
Baby Steps	14-15
2017 One-Day Coding and Financial Institute Registration Form	17
Computer Security Report.....	18
Report from WVPMA.....	19

A WORD FROM THE PRESIDENT

On Attending “The Annual” in 2017

I hope all members are looking forward to warmer weather as I am. With the warmer weather, it brings to mind strolling at the



Thomas J. McCabe, DPM

Easton Center shops this June while attending “The Annual” June 8 - 10 at the Columbus Hilton Hotel. Again, this year, the committee and staff have put together an excellent program complete with pathology and cadaver labs, lunch and learns, and a superb faculty. By attending “The Annual” you can earn a maximum 25 CMEs. Thank you to PICA for their corporate support and providing their Risk Prevention Program to our members who utilize their malpractice coverage. PICA’s Ross Taubman, DPM will also be presenting a great new program on Cyber Security and covering the hot topic of Ransom Ware which can hold your office records hostage. Thank you to all our corporate partners and exhibitors who enable us to provide one of the premiere seminars in the country. I remind you to book your stay at the Hilton-Easton sooner rather than later

for the conference as the room block always sells out.

Things are quiet at the Ohio Statehouse as our elected officials are focused on completing the biennial budget. At this time, we don’t anticipate any issues to arise, but we continue to monitor any bill in committees that may affect our profession. Podiatry’s HBOT supervision becomes effective April 6, 2017. I encourage our members that have an interest in adding this privilege to their resume, to complete the requirements listed in Ohio law. A copy of the white paper from the Ohio State Medical Board is available on the OHFAMA website. You may also direct your hospitals to use the OHFAMA website materials regarding this new scope change for podiatry. We were also pleased to have received news in March that the Ohio Department of Medicaid has removed the one visit per month restriction on podiatry for caring for our nursing home patients. This victory has been made possible by our continued cooperation and professional relationship that has been built with the department’s staff.

Finally, I wish to thank the academies that Dr. Rumberg and I have visited this past year. We appreciate your hospitality and collegiality. I look forward to visiting all academies throughout my tenure as your President. I truly enjoy talking personally to our members and listening to their concerns. If there is an issue you wish for us to address, please contact me personally or call our headquarters. Thank you for your support of our profession and the care you provide to our communities throughout Ohio.

Thomas J. McCabe, DPM

President, OHFAMA

OHFAMA Member Selected Chairman of Veterans Affairs Subcommittee on Health

Chairman Phil Roe, MD (R-TN) recently announced the leadership for the House Committee on Veterans Affairs for the 115th Con-

gress, including Congressman Brad Wenstrup, DPM (R-OH) as Chairman of the Subcommittee on Health. The Subcom-



Dr. Brad Wenstrup

mittee on Health has legislative, oversight, and investigative jurisdiction over the Veterans Health Administration including medical services, medical support and compliance, medical facilities, medical and prosthetic research, and major and minor construction.

As a veteran and the only podiatric physician in Congress, Rep. Wenstrup has been a tireless advocate for veterans in his tenure on the committee. His committee will continue to fight to improve the lives of our nation’s veterans as Chairman of the Subcommittee on Health. Rep. Wenstrup’s committee will have oversight and hopefully pass meaningful legislation to reform the Veterans Health Administration.

Source: PM News: January 23, 2017 #5,846-The People’s Defender [1/19/17]



Being in the witness chair at trial, answering questions from a plaintiff's attorney is not a comfortable place to find yourself.

Watch *A Tale of Two Neuromas*

and witness how being cross-examined by a plaintiff's attorney can be one of the most stressful times of your life and career.

youtube.com/PICANetwork 



Some podiatrists believe they will never get a claim.

The truth is, a podiatrist can be sued when he or she least expects it. PICA is the only insurer with defense attorneys and claims specialists who have specialized expertise in defending podiatric malpractice claims. You will not find that anywhere else. Podiatry is not just one specialty among many for PICA. Podiatry is what makes us who we are.

Get a quote from the malpractice insurance provider that has been defending podiatrists for 37 years.

www.picagroup.com • (800) 251-5727



We're with you. Every step of the way.

Radio Campaign Educates Public On Importance of Seeing OHFAMA Member

The Ohio Foot and Ankle Medical Association is continuing to promote foot health and patient visits with OHFAMA member DPMs through an educational radio campaign that has been renewed for 2017. OHFAMA has partnered with the Ohio Society of Executives (OSAE) and the Ohio News Network (ONN) radio division on a public awareness campaign since 2015. The campaign provides an opportunity for OHFAMA to join with other Ohio associations within OSAE to promote OHFAMA membership as well as support members' podiatric practices through a public education campaign with messages targeted to consumers around the state. In 2015, OHFAMA also ran special radio spots that celebrated OHFAMA's 100th anniversary.

OSAE and ONN also teamed up to create a Web page specifically for this radio advertising program, associationsadvanceohio.com. All of the on-air commercials direct listeners to visit the site, where they will find a video about the importance of seeing an OHFAMA member podiatrist and they are then directed to the APMA's "Find a Podiatrist" search feature. The website received 12,957 total hits in 2016.

In addition to the radio advertisements, ONN places banner advertisements online in the target market with a similar message to the radio ad that is running at that time. The banner ads also direct people to associationsadvanceohio.com. In 2016, the banner campaign delivered over 100,000 impressions.

The goal of the radio advertising campaign is to educate the public on how DPMs contribute to a family's healthy life and to encourage patients to ask their podiatric physicians if they belong to OHFAMA.

During 2016 a total of 16,274 commercials ran on ONN stations across the state throughout the year. According to ONN, the

campaign reached more than one million Ohioans during 2016.

ONN is a provider of news, weather, and sports programming for 78 radio affiliates across the state and is owned and operated by The Dispatch Printing Company. ONN radio stations reach more than one million people each week and cover all 88 counties in Ohio.

DPM Mentors Network Successfully Launched

The American Association of Colleges of Podiatric Medicine (AACPM) has recently launched an innovative, interactive DPM Mentors Network. The DPM Mentors Network will assist the placement of pre-health students with mentors for shadowing

opportunities and will support pre-health advisors and counselors from all universities and colleges with locating DPM speakers for on-campus student events.

The AACPM is now enrolling podiatric physicians to participate as a Mentor. Mentoring is an easy way for podiatric physicians to become involved in career awareness and promotion activities in their communities. All practicing podiatric physicians are urged to become mentors; however, podiatric physicians who have practices within 100 miles of a college or university are actively encouraged to sign up.

- Enrollment is free and simple: visit www.dpmnetwork.org to sign up as a mentor/speaker.
- Mentoring is a unique way to engage with the next generation of young physicians.
- Availability for Mentoring and Speaking engagements can be tailored to fit your schedule.
- Mentors will be given access to free tools and resources to use when mentoring/speaking.

bako
Integrated Physician Solutions



**MYCOLOGY
THROUGH
MOLECULAR
GENETICS**

**Precise identification of
T. rubrum and *T. mentagrophytes*
now required by national payors.**

NO MORE WAITING!
PCR IN 24-48 HOURS!

For More Information Contact: ClientServices@BakoCTS.com

855-4BAKO-CTS • www.BakoCTS.com

2017 OHFAMA Service Award Winners Announced

Dr. James Dooley, of the Mideast Academy and Dr. Bruce Saferin, of the Northwest Academy, were selected by the Ohio Foot and Ankle Medical Association's Board of Trustees as the recipients of the 2017 OHFAMA Service Award. Investiture will take place at the 101st Annual Foot and Ankle Medical Seminar on Thursday, June 8 at 3:15 PM in the Regent Ballroom at the Columbus Hilton at Easton.

Dr. Dooley was the recipient of the OPMA Champion of Podiatry Award in 1985 and has served as a past Legislative Chair for OPMA. Dr. Dooley was cited for his zeal in a 1984 Supreme Court victory against the Barberton Citizen's Hospital for staffing privileges for podiatrists. This court case



Dr. James Dooley

opened the door for podiatry in Ohio hospitals and was truly an important landmark of significance for podiatry in Ohio.

Dr. Bruce Saferin is the 1996 OPMA past president and served as a Trustee for 21 years. He served as an APMA Board of Trustees member and is a past recipient of the OPMA Champion of Podiatry Award. Dr.



Dr. Bruce Saferin

Saferin is currently serving as the Supervising Member on the State Medical Board of Ohio and is seeded on several key committees. He was involved with the successful advancement of podiatric supervision of Hyperbaric Oxygen Therapy in Ohio. He is currently the president of the Federation of Podiatric Medical Boards (FPMB).



Pictured with Dr. Ransom is Dr. Russ Sayner.

Mideast Academy

The Mideast Academy presented a Lifetime Achievement Award to Dr. Richard Ransom on March 22, 2017. Dr. Ransom graduated from the Ohio College of Podiatric Medicine in 1972. Dr. Ransom is a past president of the Mideastern Academy. He was inducted into the OCPM Hall of Fame in 2008. Dr. Ransom continues to be involved at the Kent State University College of Podiatric Medicine where he serves on the Advisory Board / Executive Committee as well as the OCPM Foundation's Board. Dr. Ransom, who is recently retired, lives in Wooster, Ohio with his wife Sherry and their three children.

Sports Injury Clinic's Casting Workshop

Dr. Don Tupper was taking "selfies" as he was being casted by students. Tupper was a model patient; the casts were perfect and removed without losing either leg.



EXECUTIVE DIRECTOR'S MESSAGE

The Birthing of OFAMF: A Foundation for OHFAMA

After a year of development and organization, the Ohio Foot and Ankle Medical Foundation (OFAMF) was



Jimelle Rumberg, PhD, CAE

incorporated in the State of Ohio. The effective legal incorporation date was February 24, 2017. So why is this important to you? As you may realize, an educational non-profit, such as our new Foundation,

is recognized by the Internal Revenue Service as a 501(c)(3). This class of entities are dedicated to educational advancement, public outreach and as a charity among other causes. As a (c)(3) Foundation, which has extremely limited lobbying restrictions, OHFAMA may run all educational programming through our Foundation, receive charitable gifting and award scholarships. Gifting and other items, such as educational registration, may be tax deductible for our members. Of course, we recommend that you please consult

with your tax advisor for your personal deductibility.

The Foundation will be the new educational arm of the OHFAMA. It was a strategic business decision to pursue a Foundation in order to maximize member benefits for you and OHFAMA. Several large podiatric states have a Foundation for their education (PA, TX, CA, FL, NJ, NY to name a few). The big plus is the tax exemption status it provides in the State of Ohio for you and our association's educational programming. Luci Ridolfo, the OHFAMA Assistant Executive Director, will serve as the Executive Director of OFAMF, and be "on loan" as staff from OHFAMA to OFAMF. The OFAMF space will be located within OHFAMA. As you can see, the devil was in all the details, but it is now effective. You will see, on the 101st Annual Ohio Foot and Ankle Seminar, the new OFAMF logo on the cover. All programming will be under the Foundation in conjunction with OHFAMA.

OHFAMA is and will remain incorporated as a 501(c)(6) classification with the IRS. That designation (since 1926) gives us the right to lobby as a business league and to represent podiatry concerns legislatively in Ohio. So as we grow, we needed to tactically position ourselves with a Foundation for the best return on your investment of membership in the OHFAMA. Won't you join me June 8-10 for our annual seminar, our 101st year, as we begin our Foundation programming in 2017. See you at the Columbus Hilton at Easton for Podiatry's Pre-Eminent Event of the Year in OHIO.

OPPAC — Politically Poised for Podiatry

In 2016, OPPAC made HBOT a reality for Ohio DPMs by reaching legislators who made it happen! Think OPPAC isn't working for you? Think again! Please consider financial support of our legislative efforts by making a contribution TODAY to the Ohio Podiatric Political Action Committee (OPPAC). One hundred percent of OPPAC money goes to help candidates who support podiatry in Ohio.

Visit www.ohfama.org and print out a form. Personal contributions only if us-

ing a credit card or we prefer a personal check payable to OPPAC (to save those bank fees). Fax back to 614.457.3375 or mail to 1960 Bethel Rd, Suite 140, Columbus, OH 43220. Please know that we may not accept corporate checks or corporate cards. Likewise, any political action contributions are not deductible as contributions for income tax purposes. Check with your tax advisor for your particular situation. For more information contact Dr. Rumberg at jrumberg@ohfama.org or 614.457.6269.



April 12

Stewart Surloff ME Academy Seminar
Akron Wellness Center | Akron

April 13

Budget/Finance BOT
OHFAMA Headquarters | Columbus

April 28

Coding and Financial Institute
Embassy Suites | Columbus

June 8 - 10

The Annual Foot and Ankle Scientific Seminar
Hilton at Easton | Columbus

August 3

Budget/Finance BOT
OHFAMA Headquarters | Columbus

August 24-26

GXMO Training
OHFAMA Headquarters | Columbus

September 30

2017 Quickie Seminar
Hilton Garden Inn | Dayton

October 26-29

Super Saver Seminar
Marriott Cleveland Airport | Cleveland

For more calendar information please visit the Events webpage at www.ohfama.org

FROM THE LEGAL CORNER

Unclaimed Funds: Beware!

Financial pressures have stepped up efforts to collect unclaimed property held by private entities such as medical practices in Ohio. Every state has an “escheat” or unclaimed property statute. It places the burden on those holding such property to deliver it to the state treasury or Department of Commerce if the owner cannot be found. Escheatment is the general rule that abandoned or unclaimed property (of all kinds) becomes the property of the state. Most all states have clauses stating that every business entity must file annual unclaimed property reports with the state and make a good-faith effort to find the owners of their dormant accounts. Ohio’s escheatment statute is Ohio Revised Code, Section 169.

Ohio is now focusing on medical offices to keep everyone up to speed with Ohio’s Unclaimed Funds. Most podiatric physician practices can handle the legal mandates in the usual course of their operations — but they must keep an eye on compliance in this area. In Ohio, for the 11 months through May 2012, the state agency paid 55,338 claims totalling \$55.5 million. Unless 2011/2012 was an unusually high pay-out year, this figure gives an idea of the magnitude of the transfers to and from the state agency.

Unclaimed Property

First, what is “unclaimed property,” and how do podiatric medical practices come to possess it? Overpayments, either by health insurance plans or by the rare patients who have paid upfront are the usual source — except in Ohio and eight other states that recognize a business-to-business exception, under which outstanding balances between business entities may be deemed a duplicate payment. Insurance overpayments for which the patient’s health plan has not requested a refund are not considered “unclaimed property” within the meaning of the statute and do not need to be reported or turned over to the Department of Commerce. (Payer participation agreements, however, may require that all overpayments be refunded.) Most of the state statutes

specifically list “insurance refunds” as one type of property covered. They also cover refund checks that the practice has sent to a patient, but that the patient has not cashed, and other forms of credit balances.

A presumption of abandonment attaches to unclaimed property after a certain period of “dormancy” time that varies for different types of property (although the rightful owner can seek to regain possession even after that time in most cases). A dormancy period is a specified period during which the property owner does not take action on his or her property. The dormancy period, also known as “escheat period,” commences on the date of last activity by the owner.

Under the Ohio statute, an insurance refund held by the practice for the patient is considered unclaimed after three years (ORC Sec. 169.01(L), “Amounts payable pursuant to the terms of any policy of insurance, other than life insurance, or any refund available under such a policy, held or owed by any holder, unclaimed for three years from the date payable or distributable.”) Uncashed bank checks, e.g. refund checks sent to the patient that are returned marked “not at this address” are “unclaimed” after five years. (ORC Sec. 169.01(F)).

Reporting and Transferring the Property to the State

All businesses that are located and/or operate or that hold funds belonging to state residents are required to file an Annual Report of Unclaimed Funds and send the funds to the state agency. Once property has remained unclaimed for the dormancy period, it becomes reportable.

The Ohio law states, in ORC Sec. 169.03 Report of unclaimed funds, “(A) (1) Every holder of unclaimed funds and, when requested, every person that could be the holder of unclaimed funds, under this chapter shall report to the director of commerce with respect to the unclaimed funds as provided in this section. The report shall be verified.” The Ohio Director of Commerce has published a very helpful set of Frequently Asked Questions on unclaimed property.

November 1st of every year is the reporting date for many states, including Ohio; March 1st is the second most common due date. Section 169.11 of the Ohio Revised Code allows for the early reporting of un-

claimed funds for businesses that wish to clear their accounts. There is typically no minimum amount that must be reported and transferred, but unclaimed funds totalling less than \$50 may be aggregated, as is permitted in Ohio. (ORC Sec. 169.07 Holder of unclaimed funds held harmless.)

According to ORC Sec. 169.07(A), “Upon the payment of unclaimed funds to the director of commerce ... the holder will be relieved of further responsibility for the safekeeping thereof and will be held harmless by the state from any and all liabilities for any claim arising out of the transfer of such funds to the state.”

Notice to Patients

Holders of unclaimed funds are required to notify owners that their property is in danger of being transferred to the appropriate government agency. To meet this statutory due diligence requirement, the holder shall send notice to the owner’s address of record, typically not less than 60 days nor more than 120 days, before the time the account becomes reportable.

Preventing Liability

Compliance with escheat laws requires systems that are properly designed, used and documented. Your practice should become familiar with the dormancy periods and procedural requirements, and set up protocols to ensure reporting and turning-over unclaimed funds on time. Your practice should make sure to “check on the check” within one year of sending it to a patient. If it has not been cashed, you should contact the patient to make sure it was received.

Overpayments from insurance carriers represent special risks since the Supreme Court has upheld the Affordable Care Act. It includes the provision that requires overpayments to be refunded to Medicare *within 60 days*. The best policy is to refund all overpayments promptly. At the very least, communicate with the insurance company to resolve the credit. If your practice is not necessarily on top of its obligations on unclaimed funds, your accountant would probably agree that an internal audit would be a good idea! Most states offer an informal amnesty program for voluntary disclosure and compliance. In fact, voluntary compliance reduces your chances of being audited. Contact the Department of Commerce if you have questions, www.com.ohio.gov.

STATE OF OHIO OPIATE ADDICTION INITIATIVE

Information on TDDD License

Since taking office, Ohio Gov. John Kasich has implemented one of the nation's most aggressive and comprehensive approaches to fighting opiate addiction and drug abuse. Ohio has seen encouraging results as the amount for prescription drug opiates being dispensed continues to decrease and fewer individuals are doctor shopping for controlled substances. Prescription opioids remain a significant factor in unintentional drug overdose deaths in Ohio, however, reportedly contributing to nearly half of all injury related deaths in 2014.

A Reform Movement

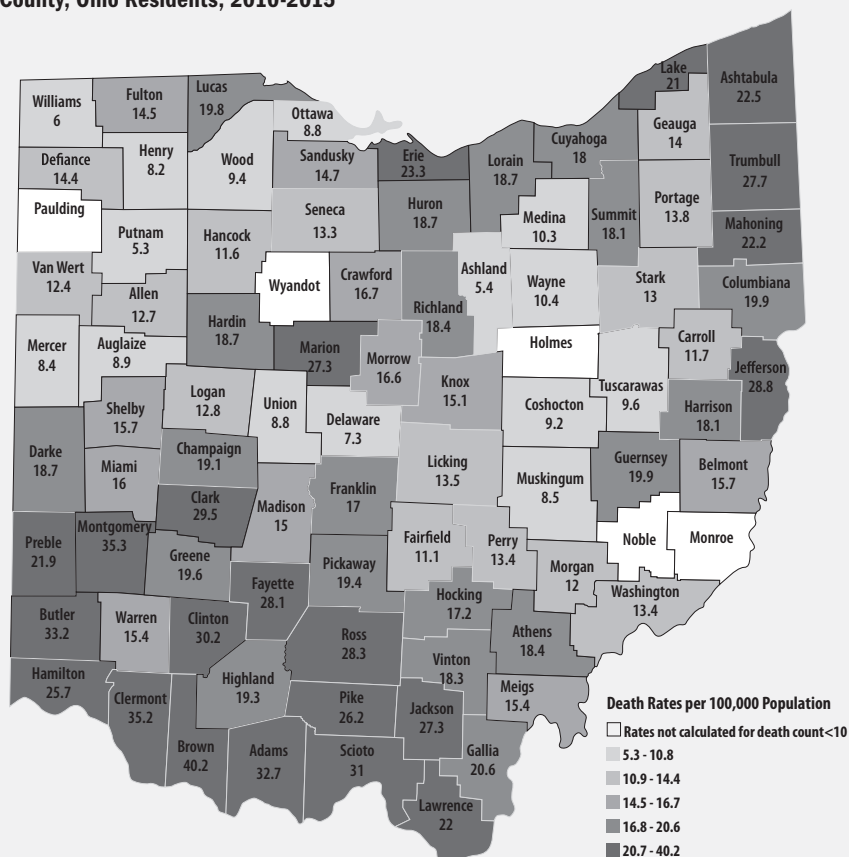
In Ohio's continuing effort to find new strategies to fight opiate abuse, Gov. Kasich's 2016 Mid-Biennium Review (MRB) proposed several new reforms, aimed at tackling opiate addiction, including requiring all prescribers, including DPMs, to be licensed with the Ohio Board of Pharmacy to be able to purchase and distribute controlled substances. The proposal has since been implemented through legislation passed by the 131st Ohio General Assembly and signed into law by Gov. Kasich on Jan. 4, 2017.

Expanding Legislation

Effective April 1, 2017, Ohio law will require DPMs to obtain a Terminal Distributor of Dangerous Drugs (TDDD) license from the Ohio Board of Pharmacy to possess, have custody or control of, and distribute a schedule I, II, III, IV, or V controlled substance. Such TDDD licensees will be responsible for complying with several new regulations, including section 4729-9-14 of the Ohio Administrative Code (OAC), which among other things requires maintaining a record of all controlled substance received, administered, personally furnished, dispensed, sold, destroyed, or used. Licensees also will be responsible for taking an annual inventory, which must contain a complete and accurate record of all controlled substances on hand including the name and quantity of each substance. A separate inventory must be taken and maintained at each place or establishment where controlled substances are located and relevant

Ohio Drug Overdose Data by County

Average Age-Adjusted Unintentional Drug Overdose Death Rate Per 100,000 Population by County, Ohio Residents, 2010-2015



¹ Sources: Ohio Department of Health, Bureau of Vital Statistics; Analysis by ODH Injury Prevention Program; U.S. Census Bureau (population estimates).

² Includes Ohio residents who died due to unintentional drug poisoning (primary underlying cause of death ICD-10 codes X40-X44).

*Rate suppressed if < 10 total deaths for 2010-2015.

records must be kept for a period of three years. Destruction of controlled substances shall be conducted in accordance with applicable state and federal laws. Perhaps most notably, however, is that DPMs will now be prohibited from personally furnishing controlled substances in quantities greater than a 72-hour supply under OAC 4729-5-17.

This most recent legislative development results in an expansion of existing law, which currently only requires DPMs to obtain a TDDD license to possess or distribute dangerous drugs that are compounded or used for the purpose of compounding. While the existing law has been in place since 2011, the Ohio Board of Pharmacy is in the process of updating the accompanying administrative rules to exempt both sterile and non-sterile reconstruction from the board's definition of compounding.

The Role of OHFAMA

OHFAMA actively advocated for exempting those solely engaged in reconstitution from having to obtain a TDDD license and the responsibility of complying with the regulations thereunder.

Podiatrists who are required to have a TDDD license based on possession of dangerous compounded drugs are responsible for complying with several regulations, including:

1. developing and implementing appropriate procedures,
2. overseeing facility compliance,
3. ensuring competency of personnel,
4. ensuring environmental control of the compounding areas, and
5. ensuring compounded drug products maintain their quality and sterility until administered or personally furnished.

(Continued on page 9.)

The specific compliance requirements vary depending on whether the Podiatrist is preparing sterile versus non-sterile compounded drugs and whether the drugs are being prepared for immediate or extended use.

Podiatrists who prepare the low-risk sterile compounded drugs are responsible for complying with specific record-keeping requirements under OAC 4729-16-06, including maintaining all drug orders and records (including logs) related to the compounding of drugs, as well as regulations under OAC 4729-16-04, which require developing and maintaining compliance with a policy and procedure manual regarding the compounding, safe handling, personally furnishing, and administration of compounded drugs. The policy and procedure manual shall include a quality assurance program for monitoring personnel qualifications, training and performance, product integrity, equipment, facilities, and guidelines regarding patient education and is required to be current and available for inspection by a Pharmacy Board agent. Podiatrists who only compound dangerous drugs for immediate use are exempt from these requirements, however, and instead are only responsible for complying with OAC 4729-16-13, which contains fewer regulations and significantly less burdensome facility and equipment requirements. For non-sterile compounded drugs, podiatrists are responsible for complying with Chapter 795 of the United States Pharmacopeia (USP).

The TDDD License and Compliance

Podiatrists who possess a TDDD license, whether based on possession of controlled substances or compounded drugs, are also responsible for complying with several other regulations. OAC 4729-9-11 mandates security protocols and requires licensees to ensure that dangerous drugs are being distributed appropriately by monitoring for suspicious orders, unusual usage, or questionable disposition of dangerous drugs. OAC 4729-9-22 requires licensees to keep a record of all dangerous drugs received, administered, dispensed, personally furnished, distributed, sold, destroyed, or used. PAC 4729-5-17 imposes specific labeling requirements for dangerous drugs personally furnished to patients. Lastly, OAC 4729-9-15 requires physicians to report the theft or loss of dangerous drugs, controlled

substance, and drug documents. Based on the general complexity of these regulations, Podiatrists are encouraged to directly reference the specific rules that may be relevant to their practice.

The Role of the Ohio Board of Pharmacy

The Ohio Board of Pharmacy is responsible for enforcing these regulations. If necessary, you can apply for a TDDD license by visiting <http://www.pharmacy.ohio.gov/Licensing/TDDD.aspx>. The license must be renewed annually by March 31 to avoid a \$55 late penalty. For more information, please consult with an attorney.

DID YOU KNOW?

Opioid prescribing continues to fuel the epidemic

Today, nearly half of all U.S. opioid overdose deaths involve a prescription opioid. In 2015, more than 15,000 people died from overdoses involving prescription opioids.

Each day, more than 1,000 people are treated in emergency departments for not using prescription opioids as directed. The most common drugs involved in prescription opioid overdose deaths include Methadone, Oxycodone and Hydrocodone.

Heroin Use

Heroin-related overdose deaths have more than quadrupled since 2010. From 2014 to 2015, heroin overdose death rates increased by 20.6%, with nearly 13,000 dying in 2015. In 2015, males aged 25-44 had the highest heroin death rate at 13.2 per 100,000, increasing 22.2% from 2014.

More than nine in 10 people who used heroin also used at least one other drug. Among new heroin users, approximately three out of four report having abused prescription opioids prior to using heroin. Increased availability, relatively low price and high purity of heroin in the U.S. also have been identified as possible factors in the rising rate of heroin use. According to data from the DEA, the amounts of heroin confiscated each year at the southwest border of the United States were approximately ≤500 kg during 2000-2008. This amount quadrupled to 2,196 kg in 2013.

[Source: Ohio Department of Health, 2015 Ohio Drug Overdose Data Final Report]

LEGISLATION EFFECTIVE APRIL 1, 2017

TDDD License to possess, distribute controlled substances

The Ohio General Assembly recently passed a law that will require all health care providers to obtain a Terminal Distributor of Dangerous Drugs (TDDD) license from the Ohio Board of Pharmacy to possess, have custody or control of, and distribute a schedule I, II, III, IV or V controlled substance. This requirement goes into effect April 1, 2017.

This law is an expansion of an existing law that required DPMs to obtain a TDDD license to possess or distribute dangerous drugs that are compounded or used for compounding.

DPMs who do not possess, have custody or control of, or distribute a schedule I, II, III, IV or V controlled substance or drugs that are compounded or used for compounding will not need to obtain a TDDD license.

Those DPMs who are required to obtain a TDDD license will be required to comply with several regulations, which include maintaining a record of all controlled substances received, administered, personally furnished, dispensed, sold, destroyed, or used; and taking an annual inventory of controlled substances.

The Ohio Board of Pharmacy will be responsible for enforcing these regulations. Apply for a TDDD license at pharmacy.ohio.gov/Licensing/TDDD.aspx.

MIPS AND MACRA: THE QUALITY PAYMENT PROGRAM

Medicare Reimbursement Transformations: What You Need to Know!

Daniel S. Zinsmaster and Jenna G. Moran

Last October, the Department of Health & Human Services (HHS) issued its Final Rule implementing a landmark new payment system for Medicare clinicians. The Quality Payment Program (QPP), which is part of the Medicare Access and CHIP Reauthorization Act of 2015 (MACRA), reforms how clinicians are paid for Medicare Services by changing the way Medicare incorporates quality measurement into payments. Clinicians will now be rewarded for delivering

high-quality patient care, as opposed to high-quantity patient care.

The QPP offers two tracks for clinicians to participate in.

Track One

Track 1, called the Advanced Alternative Payment Models (APMs), gives clinicians the opportunity to be paid more for participating in innovative payment models like Accountable Care Organizations. When clinicians get better health results and reduce costs for the care of their patients, the clinicians receive a portion of the savings. Clinicians who participate in the Advanced APMs track could earn a 5 percent Medicare incentive payment in 2019. CMS estimates that up to 120,000 clinicians will be eligible for Advanced APMs in the first year.

Track Two

Track 2, called The Merit-based Incentive Payment System (MIPS), gives clinicians the opportunity to earn a performance-based payment adjustment for better care

and investments that support patients. Clinicians who decide to participate in traditional Medicare, rather than Advanced APM, will participate in MIPS. Clinicians who participate in MIPS will see a positive, neutral, or negative payment adjustment of up to 4 percent that will fluctuate depending on how much performance data the clinician submits and the quality results. This adjustment percentage could grow to a potential of 9 percent in 2022. CMS estimates approximately 500,000 clinicians will be eligible for participation in MIPS in the first year.

Clinicians can choose to start collecting performance data anytime between January 1, 2017 and October 2, 2017. Clinicians are then required to send the performance data to Medicare by March 31, 2018. After the performance data is received, Medicare will provide the clinician feedback on their submission. Subsequently, Medicare will begin issuing adjustments on January 1, 2019. Note that if 2017 is the clinician's first year participating in Medicare, they are not required to participate in the QPP.

According to HHS, the QPP Final Rule is "informed by a months-long listening tour with nearly 100,000 attendees and nearly 4,000 comments." With many of the comments relating to small group practices, the QPP provides options designed to make it easier for small group practices to report on performance and qualify for incentives, including a reduced reporting burden, increased usability of technology, and stepped-up technical assistance. In addition, MACRA provides \$20 million each year for five years to fund training and education for Medicare clinicians in individual or small group practices and those working in underserved areas.

In light of the considerable implications of the QPP, clinicians should take the time to review the options and determine which track best fits their particular practice. Among other things, Clinicians should consider their practice size, specialty, location, and patient population.

The Final Rule, which contains over 2,400 pages of guidance, should be reviewed to fully understand the various options and obligations. HHS also suggests that clinicians seeking assistance with the QPP should access HHS's interactive Quality Payment Program website (see: <https://qpp.cms.gov/>).

Exciting new enhancements to Integra's Hindfoot Portfolio

Integra® External Fixation System

Salto Talaris® Total Ankle Prosthesis

NEW

Cadence® Total Ankle System

NEW

Cadence, Salto Talaris, Integra, and the Integra logo are registered trademarks of Integra LifeSciences Corporation or its subsidiaries in the United States and/or other countries. ©2017 Integra LifeSciences Corporation. All rights reserved. Printed in USA. oM 0602498-2-EN

INTEGRA
LIMIT UNCERTAINTY

FROM THE OHIO BOARD OF PHARMACY New Requirements for Opioid Prescriptions

On January 4, 2017, SB 319 was signed by Governor Kasich. This law (effective 4/6/2017) includes the following provisions as they relate to outpatient prescriptions for opioid analgesics:

14-day Prescriptions for Opioid Analgesics: The law generally prohibits a pharmacist, pharmacy intern, or terminal distributor from dispensing or selling an opioid analgesic pursuant to a prescription if the drug is to be used on an outpatient basis and more than 14 days have elapsed since the prescription was issued. Note: 14-day limit does not apply to subsequent refills.

90-day Supply: The law limits the authority of a pharmacist, pharmacy intern, or terminal distributor of dangerous drugs to dispense or sell an opioid analgesic pursuant to a prescription for a drug to be used on an outpatient basis. It prohibits dispensing or selling more than a 90-day supply of

the drug, as determined according to the prescription's instructions for use of the drug, regardless of whether the prescription was issued for a greater amount.

These provisions are set to take effect on April 6, 2017. For questions regarding these

changes, please visit: www.pharmacy.ohio.gov/OpioidRequirements.

February/March 2017 Rules Update: Rule changes taking effect in February and March can be found by visiting: www.pharmacy.ohio.gov/FebMar2017Rules.

OHFAMA CLASSIFIEDS

Associate Needed - Toledo, OH

Single specialty group is searching to add another provider to perform all medical and surgical treatments of the foot and ankle. Hiring due to volume and expansion in Toledo, OH. Please email your CV to dr.mmehta@gmail.com or fax to (740) 596-1577.

Associate Needed - Wooster, OH

The Foot & Ankle Center of Ohio is a rapidly growing foot and ankle clinic located in Wooster, Ohio. The Practice currently has two full time podiatrists and is looking to add a part-time podiatrist (initially 1-3 days a week). We are looking for a person who has their Ohio DPM license, is excellent with

patients, and is a highly-motivated team player. The initial focus will be diabetic and palliative foot care but will also treat a full range of conditions. Competitive compensation will be offered. Please E-Mail your CV to cmathis788@gmail.com or fax to 330-345-7793 and visit our Website to learn more about us at www.footankleldr.com

Associate Needed - Dayton/Springfield, OH

We are looking for a unique podiatrist to join our practice. We have six clinical locations in the Dayton & Springfield area (Ohio). We manage everything away from the clinics in order to provide good customer service and great health care. Please contact Maria Guehl at 937-427- 4073 or email your CV to mariaguehl@gmail.com

Unlock innovation. *Accomplish* more.™

As health care providers continue to discover new paths to innovative care, they still must limit risk and exposure. **Dinsmore is part of the solution**, providing counsel and advocacy for the health care industry through a cross-disciplinary team of attorneys and resources.

Learn more at dinsmore.com/health_care/.

Dinsmore

DINSMORE & SHOHL LLP • LEGAL COUNSEL

21 OFFICES: COAST TO COAST • PROUD TO PARTNER WITH OHFAMA

DANIEL S. ZINSMASER • COLUMBUS, OH • (614) 628-6949

SCHUBYN POWER

PODIATRY CHAIR



MODEL 2P

Tilt + Flatten

\$3995

MODEL 3P

with Up/Down

\$4995

MODEL 4P

with Power Foot Rest

\$5875



MEDICAL EQUIPMENT LLC
(480) 620-5851

306, 6501 E. Greenway Pkwy., Suite 103
Scottsdale, AZ 85254

Plan To Attend The 101st Annual Ohio Foot and Ankle Scientific Seminar — June 8–10, 2017

25 CME Contact Hours

Excellent continuing education sessions will be offered and special guests will be on site Thursday and Friday from APMA's Coding Resource

Center, CMS-Medicare, Medicaid, the State Medical Board of Ohio, OCPM Foundation and KSUCPM. Please take this opportunity to

ask questions and obtain any information that you need. **ONLINE REGISTRATION IS OPEN!**



Schedule at a Glance

Thursday, June 8	Course Title Presenter(s)
7:00 – 9:30 AM	101st Annual Foot and Ankle Scientific Seminar Welcome and Course Introduction President OHFAMA Tom McCabe, DPM Radiology Considerations in Foot and Ankle Surgery and Pathology Presenters: Molly Judge, DPM; Stephen Mariash, DPM; Robert Mendicino, DPM; Richard Rolfes, MD; John Visser, DPM
9:30 - 10:00 AM	BREAK—Exhibit Hall / Easton Grand Ballroom
10:00 - 11:30 AM	Sports Medicine Issues and Considerations in the Athlete Presenters: Jason Diehl, MD; Tom Hospel, MD; Robert Mendicino, DPM; Lance Perry
10:00 - 11:30 AM	Amerx Workshop The Benefits of Using Collagen for Wound Healing: Clinical and Practice Management Overview for Today's Podiatrists Presenter: Alec Hochstein, DPM
11:30 AM - 1:00 PM	Lunch and Learn (Pick up tickets in Exhibit Hall.) Choose from 3 educational presentations
11:30 AM - 1:00 PM	Silver Gavel Luncheon Past OHFAMA Presidents
1:00 - 3:00 PM	Scientific Paper Competition: Presentations from Podiatric Physician Residents in Ohio Chair: Robert Brarens, DPM
1:00 - 3:00 PM	Coding in 2017: Your FAQs Presenters: Jim Christina, DPM; Harry Goldsmith, DPM
1:30 - 3:00 PM	WVPMMA Membership Meeting
3:00 - 3:30 PM	BREAK—Exhibit Hall / Easton Grand Ballroom
3:30 - 5:30 PM	PICA Risk Management Lecture—Till Death Do Us Part: Podiatric Case Studies Presenters: Mike King, DPM; June Baker Laird, Esquire
5:30 - 6:30 PM	PICA Welcome Reception
Friday, June 9	Course Title
7:30 - 8:30 AM	MIPS/MACRA—What You Need to Know Presenter: Michael Brody, DPM
8:30 - 9:30 AM	Interesting Diabetic Cases Presenters: Alan Catanzariti, DPM; Molly Judge, DPM; Lawrence DiDomenico, DPM; Stephen Mariash, DPM; John Visser, DPM
8:30 - 9:30 AM	Cybersecurity, Social Media and Electronic Devices—What Are You Doing Wrong? Presenter: Ross Taubman, DPM

9:30 - 10:00 AM	BREAK—Exhibit Hall / Easton Grand Ballroom
10:00 - 12:00 PM	The Diabetic Foot in 2017 Presenters: Daniel Bachmann, MD; Edgardo Rodriguez-Collazo, DPM; John Steinberg, DPM
10:00 - 12:00 PM	Paragon 28 Workshop
12:00 PM - 1:30 PM	LUNCH—Exhibitors' Marketplace—Easton Grand Ballroom
1:30 - 3:00 PM	Metabolic Issues in the Surgical Patient Presenters: Jennifer Burton, RD, LD, CDE; Kim Hehman, RRT; Robert Mendicino, DPM
1:30 - 3:30 PM	Bako Workshop—Podiatric Dermatology for Today's Lower Extremity Clinician: A "Hands-On" Workshop Presenter: Wayne Bakotic, DO
1:30 - 3:30 PM	Paragon 28 Workshop
3:00 - 3:30 PM	BREAK—Exhibit Hall / Easton Grand Ballroom
3:30 - 5:30 PM	Healthcare Future, Payments, Quality and Contracting: Preparing for Governmental and Insurance Changes Presenters: Alan Cecala; Robert Mendicino, DPM; Kristina Steucher
5:30 - 7:00 PM	OCPM Foundation Reception
7:30 AM - 5:30 PM	Assistants Program
Saturday, June 10	Course Title Presenter(s)
7:30 - 9:30 AM	Pain Management & Opioids Presenters: Luke Dinan, PT; Edgardo Rodriguez-Collazo, DPM; Michael Genci, PT, DPT
9:30 - 9:45 AM	BREAK—Exhibit Hall / Easton Grand Ballroom
9:45 - 11:30 AM	Surgical Trends Presenters: Alan Catanzariti, DPM; Lawrence DiDomenico, DPM; Molly Judge, DPM; Stephen Mariash, DPM; John Visser, DPM
9:45 - 11:30 AM	Creating Solid Foundations, Earning and Maintaining a Valued Reputation, Striving to Provide the Highest Quality Patient Care and Determining the Right Time for Practice Expansion Presenter: Cindy Pezza, PMAC
11:30 AM - 1:00 PM	Lunch and Learn (Pick up tickets in Exhibit Hall.) Choose from 3 educational presentations
1:00 - 1:15 PM	BREAK
1:15 - 3:30 PM	Interesting Cases and Techniques Presenters: Alan Catanzariti, DPM; Lawrence DiDomenico, DPM; Molly Judge, DPM; Stephen Mariash, DPM; Robert Mendicino, DPM; John Visser, DPM

STEPPING INTO SPRING

Baby Steps

Kaiser health news reports that, by law, hospitals now must tell Medicare patients when care is 'observation' only

Susan Jaffe reported that under a new federal law, hospitals across the country must now alert Medicare patients when they are receiving only observation care and why they were not admitted — even if they stay in the hospital for a few nights. For years, seniors often found out about this snag only when they got surprise bills for the services Medicare doesn't cover for observation patients, including some drugs and expensive nursing home care. The notice may cushion the shock but probably not settle the issue, Jaffe reported on March 13. If patients need nursing home care to recover their strength, Medicare won't pay for it because that coverage requires a prior hospital admission of at least three consecutive days. Observation time doesn't count.

Mandatory multi authorization for my CGS

Due to cyber security concerns, my CGS will require Multi-Factor Authorization (MFA) to log into myCGS beginning July 1. Please note: if you are a new physician or have reset your password, each user that has used myCGS should register now (before May 1). My July 1, MFA will be mandatory to enter myCGS.

myCGS is an online portal providing instant information and allowing secure forms and transactions submissions, including:

- Beneficiary Eligibility information
- Claim Submission
- Checking Claims Status
- e-Offset
- View and print Remittance Advices
- Financial Information
- Respond to Medical Review (MR) Additional Documentation Requests (ADRs)
- Submit and check the status of Redetermination Requests
- Submit and check the status of Reopening Requests
- Submit General Inquiries related to a number of topics

OSHA exposure control plan bloodborne pathogen models

Did you know that you are required to have an Exposure Control Plan for the Hazard Communications Standard for OSHA. Exposure to bloodborne pathogens are indeed a problem in office, but do you have a plan? Use this link to develop a model Exposure Control Plan to protect against employee liability and office health exposure concerns such as HIV and Hepatitis. <https://www.osha.gov/Publications/OSHA3186.pdf>

Railroad Medicare

Have you had a Railroad Medicare post-payment review for code 11055? Your office documentation or nursing facility documentation must actually state: 1) when the patient was seen by the physician treating the at-risk condition, and 2) who is the physician. It is not enough to enter the information solely in the billing module. This may be the newest twist to recoup payment.

Section 1557 (Part 2)

OCR is serious about Section 1557 enforcement despite some recent Texas legislative actions. The 2016 enforcement actions against Erie County Department of Social Services (ECDSS) of New York State were followed by 2017 enforcement actions with John Dempsey Hospital's Emergency Department, part of UConn Health.

As a reminder, here is what is required:

- Assign a Civil Rights Coordinator;
- Revise policies and procedures;
- Incorporate a general assessment evaluation into the patient intake process;
- Track all requests for auxiliary aids and services;
- Monitor performance of interpreter services to ensure effective communication;
- Adopt a grievance procedure for your office via policy;
- Post a Notice of Nondiscrimination in the 15 languages sent to you in 2016 by OHFAMA;
- Post a Nondiscrimination Statement; and
- Conduct mandatory training for all staff.

ABN forms

Are you using Medicare Advanced Beneficiary Notices (ABNs). Using these forms are a good way to protect your practice from unforeseen billing obstacles. Services that you expect may be non-covered, or

services that are frequency limited (such as nail care) where you rely on the patient to inform you of their last service, are the perfect occasions to inform your patients of the limitations of coverage for those services and have them sign an ABN indicating their understanding and financial responsibility for those services in the event of a Medicare denial. Be aware that the ABN form is only to be used on *Traditional Medicare claims*, not Commercial or HMO plans. Only Traditional Medicare will accept the ABN form as an agreement.

Changes to UHC PAs

According to a recent release from UnitedHealthcare, prior notification will be required for certain office-based procedures to be covered in a site of service other than a physician's office. The requirement will apply to UnitedHealthcare Commercial members in Ohio and will go into effect for dates of service on or after April 1st, 2017.

Podiatrists will be affected by this requirement when using the following **Dermatologic codes**: 11402, 11422, 1403, 11406

Revised announcement regarding renewal applications for DEA license

Starting January 2017, DEA will no longer send its second renewal notification by mail. Instead, an electronic reminder to renew will be sent to the email address associated with the DEA registration. DEA will otherwise retain its current policy and procedures with respect to renewal and reinstatement of registration. This policy is as follows:

- If a renewal application is submitted in a timely manner prior to expiration, the registrant may continue operations, authorized by the registration, beyond the expiration date until final action is taken on the application.
- DEA allows the reinstatement of an expired registration for one calendar month after the expiration date. *If the registration is not renewed within that calendar month, an application for a new DEA registration will be required.*
- Regardless of whether a registration is reinstated within the calendar month after expiration, federal law prohibits the handling of controlled substances or

List 1 chemicals for any period of time under an expired registration. Visit: <https://www.deadiversion.usdoj.gov/drugreg/index.html>.

New I-9 form now required

The new version of the I-9 form is now required for all hires as of January 22, 2017. The form may be completed online, printed, and signed, or it may be printed and completed manually [<http://www.uscis.gov/i-9>]

Form I-9 is used for verifying the identity and employment authorization of individuals hired for employment in the United States. All U.S. employers must ensure proper completion of Form I-9 for each individual they hire for employment. This includes both citizens and noncitizens. Both employees and employers (or authorized representatives of the employer) must complete the form.

On the form, employee must attest to his or her employment authorization. The employee must also present his or her employer with acceptable documents evidencing identity and employment authorization. The employer must examine the employment eligibility and identity document(s) an employee presents to determine whether the document(s) reasonably appear to be genuine and to relate to the employee and then record the document information on the Form I-9. The list of acceptable documents can be found on the last page of the form. Employers must retain Form I-9 for a designated period and make it available for inspection by authorized government officers.

Completing the form online has many benefits, including auto-filling blanks, pull-down menus, and pop-ups to help avoid many errors. The downside is that the form will not open in many browsers (Chrome, Internet Explorer, etc.). A work-around is to download the form, save it locally and use Adobe to fill it out electronically.

If you are completing the form manually, please note the following common errors: In Section 1 (completed by the employee) ensure:

- That every box is filled in completely with the employee's name, address, and other personal information.
- Only ONE box is checked and that any additional information required with the box checked is completed.
- The employee signs and dates the form and indicates if a translator was used. If

the translator was used, the certification must be completed also (the new form has room for several translator certifications if the form is completed electronically).

In Section 2:

- Fill in the employee's name and the number of the box checked in Section 1 under "Citizenship/Immigration Status" (i.e., 1,2,3 or 4)
- Complete the first day of employment in the blank above the signature block.
- To confirm to the electronic version, employees and employers (in both Sections 1 and 2) should fill any blanks on the form with "N/A." We do not know if failure to do this will result in a violation if the I-9s are audited. Since USCIS has provided no instruction, the best practice is to fill in all blanks.

FDA bans most powdered gloves

The Food and Drug Administration recently released a final rule banning the use of most powdered gloves. This rule went into effect Jan. 18, 2017. The new rule applies to patient examination gloves, powdered surgeon's gloves and absorbable powder for lubrication a surgeon's glove. These gloves may no longer be used.

Medicaid enrollment overview: February 16, 2017

by Director Barbara Sears

Current Enrollment: 3,041,506

- 86% covered by a managed care plan
- Children in Custody, Adopted Children, BCCP Individuals, Medicaid eligible individuals enrolled in BCMH Program are now served by a managed care plan
- Today there are 713,111 covered in the expansion category newly eligible Ohioans in 2014
- All enrolled or enrolling in private managed care plans
- Long-term care: approximately 88,000 served by HCBS waivers; 56,000 living in long-term care facilities

Historical chuckles...

The following was taken directly from past issues of the OPA newsletter. We thought you'd appreciate reading the news from the 1960s, as we find it quite amusing to share.

From June 1963 — "Podiatry Problem Clinic" Edited by John H. Buchan, D.S.C.

QUESTION: I feel that a podiatrist, as a professional man, needs and is entitled to an income of \$15,000 to \$18,000 a year after several years of practice, don't you? How can I attain this?

ANSWER: Yes, sir, I certainly do. The need is apparent, but you are only entitled to what you earn. Now, the big question, how? Very simple, roll up your sleeves and to go work.

First, you must have as your practice base, the philosophy that you will provide every service possible to make your patients feel better, not only for the present, but for as long as they live.

To provide every service possible you must understand every facet of the foot from supporting bone structure to tissue. That means reading every article and book that you can for a deeper understanding; attend every possible recognized seminar, visit the office of every successful practitioner that you can get in.

It doesn't matter how many people you see each day or how much you charge a patient if you provide good conscientious service to each patient and follow each of the steps outlined above, you can reach any goal you set for yourself.

From May 1966

Thursday evening, May 19, can be a very memorable occasion for those checking into Cincinnati for the OPA convention. Advance arrangements have been made for an evening of fun at the Cincinnati Playboy Club — the only one in Ohio.

For only \$5.00 apiece, you will receive several of the club's outstanding drinks, hors d'oeuvres and fine entertainment.

If you have ever wanted to be a Playboy — and who hasn't, this is your golden opportunity. If you plan to attend, please make your reservation early so that proper arrangements can be made with the Playboy Club. Naturally, we will reserve a "Bunny" for you.

Just in case you think the Cincinnati club is different, it isn't. There are BUNNIES, BUNNIES, BUNNIES.



The OHFAMA Journal is published 4 times per year. The advertising deadline is mid-month preceding publication. Portions may be used with permission of the publisher.

PRESIDENT: Thomas McCabe, DPM

PUBLISHED BY:

Jimelle Rumberg, Ph.D., CAE, Executive Director

ADVERTISING:

Luci Ridolfo, CAE, Assistant Executive Director

CONTACT INFORMATION:

1960 Bethel Rd., Ste. 140 | Columbus, Ohio 43220

Phone: 614.457.6269 | Fax: 614.457.3375

Web page: <http://www.ohfama.org>

Email jrumberg@ohfama.org;

lrldolfo@ohfama.org

EDITORIAL DISCLAIMER

The OHFAMA Journal is provided to Association members and Industry Affiliates of the profession as a part of our communications to inform/ update our members on podiatric issues and events. The contents of OHFAMA Journal are intended for general information purposes only and should not be read as specific legal, financial, or business advice regarding specific issues or factual events. We urge you to consult your legal, financial, and professional advisors with any specific questions you may have.

Disclaimer Statement

The information published herein has been prepared for educational and informational purposes only. This information is not intended as legal, podiatry or practice management advice or an opinion on same. Circumstances change from day-to-day and one situation may differ from the next; the authors and publisher cannot assume responsibility for any actions taken based on the information contained herein. This information is not a substitute for expert advice specific to your situation. More specifically, legal or regulatory advice must be tailored to the specific circumstances of each case, and laws are constantly changing. Nothing provided herein should be used as a substitute for the advice of competent counsel. Federal law requires that the authors and publisher let you know that nothing published herein is intended or written to be used, and cannot be used for the purpose of avoiding any penalties under the law. The publication of the information herein is not intended to create, and receipt does not constitute a professional or contractual relationship between the author and the publisher and you. While the publisher tries to provide accurate and helpful information, they do not make any claims, promises or guarantees about the accuracy, completeness, helpfulness or adequacy of the information contained herein. No warranties are made for the information published to be accurate and no other warranties express or implied are made. The information here is presented "as is."



DRS. CENTRAL BILLING, LLC

www.drsbillinginc.com



6200 Pleasant Avenue • Suite 3 • Fairfield, Ohio 45014

A Podiatry Billing Service Exclusively for Ohio Podiatrists since 1995...

Why partner with us?

- Scheduling, Billing, and EMR all in one system
- Over 100 Podiatrists in Ohio as reference
- On-line system that links you live with us
- Full Credentialing Services free to all clients
- Coding reviews to assure maximum insurance reimbursement
- Accounts Receivable Management
- Full Practice Reporting and Real Time Eligibility

Contact Owner: Paul Fehring • PaulF@drsbillinginc.com

1-888-452-0124

Call Today to Boost Your Bottom Line

One-Day Coding and Financial Institute

• MIPS •
• MACRA •



• AUDIT RISK •
• BILLING COMPLIANCE •

2017 Coding and Financial Institute

Presented by the Ohio Foot and Ankle Medical Association

Friday, April 28, 2017 • 7 Category II CME Hours

Embassy Suites Columbus • 2700 Corporate Exchange Dr., Columbus, OH 43231

Register today: www.ohfama.org

ESTEEMED FACULTY:

Michael Brody, DPM • Vincent Buttaci, Esquire

CGS Medicare Speaker Juan Lumpkin • Wayne Bakotic, DO

REGISTRATION FORM

Welcome to the **2017 Coding and Financial Institute**. This seminar has been approved for 7 CME Category II Hours.

**Embassy Suites Columbus | 2700 Corporate Exchange Dr.
Columbus, Ohio 43231**

April 28, 2017 | 8:00 am – 4:30 pm

Full Name _____

Preferred First Name _____

Company/Clinic Name _____

Address _____

City _____ State _____ Zip _____

Business Telephone _____

Fax Telephone _____

E-Mail _____

Please mark one (add \$25 late fee after April 25, 2017)

- | | |
|--|--|
| <input type="checkbox"/> OHFAMA/WVPMA Member: \$125 | <input type="checkbox"/> APMA Member Out of State + 1 Assistant: \$205 |
| <input type="checkbox"/> OHFAMA/WVPMA Member + 1 Assistant: \$175 | <input type="checkbox"/> APMA Member Assistant Only: \$155 |
| <input type="checkbox"/> OHFAMA/WVPMA Member Assistant Only: \$125 | <input type="checkbox"/> Non Member: \$255 |
| <input type="checkbox"/> Student/Resident: \$35 | <input type="checkbox"/> Non Member + 1 Assistant: \$305 |
| <input type="checkbox"/> Additional Assistant(s): \$65 each | <input type="checkbox"/> Non Member Assistant Only: \$255 |
| <input type="checkbox"/> APMA Member Out of State: \$155 | |

Payment Method: (please mark one)

☐ Check payable to Ohio Foot and Ankle Medical Association*

***PREFERRED PAYMENT METHOD**

☐ American Express

☐ Discover Card

☐ MasterCard

☐ VISA

Amount Authorized \$ _____

Account Number _____

Expiration Date _____ Security Code _____

Name (as printed on Credit Card) _____

Billing Address (of Credit Card) _____

Signature _____

Date _____

Please mail or fax form with payment to:

OHFAMA, 1960 Bethel Rd., Ste. 140, Columbus, OH 43220

Phone: (614) 457-6269; Fax: (614) 457-3375; or,

email: Iridolfo@ohfama.org

FRIDAY, APRIL 28, 2017

Spring Cleaning: Don't Forget Your Computer Security

Robert Brzezinski, MBA, CHPS, CISA - BizWit LLC, Columbus, Ohio

Just when you thought you were safe regarding your cyber protocol, below are descriptions of some highly popular malware species recorded within last few weeks by cyber security firms.

1. As you see some are designed to attack Mac computers and the consensus is that we shall expect more of those attempts in 2017. Keep your iOS/ Mac OSX devices updated and install antivirus if possible.
2. Many malware species are delivered within zip files through email or perimeter antivirus detections. Blocking zip and exe file attachments in email is a good idea! If there is a need for transferring large, compressed files – use Cloud storage, preferably business class, so it provides antimalware protection, and send a link to recipient so they can download the zip file.
3. Beware when printer vendors (even the large ones) offer drivers for download over non-encrypted http connection, without file hash signature and sometimes even without signing the drivers (Publisher: Unknown). No wonder most will open files like PrinterInstallerClientUpdater.exe - widely used malware (see below).
4. Many social engineering attacks rely on fake delivery report, UPS notification, purchase or payroll report delivery in .doc or .xls documents with embedded malware.
5. Keep in mind that a simple Trojan malware is just a prelude to additional malware installations ... to e.g. take over your PC and attack others, or to extort money from you by denying you access to your PC or data (ransomware).



6. From compliance and security perspectives – periodically document that your malware protection is in place, is updated and working, and keep track of your malware detections and incidents. Lack of monitoring and documentation is most common issue...
7. Is your best and most expensive antimalware software going to protect you when its turned off, or when it has not been updated for a month? Have you protected your systems with basic antimalware safeguards in March? How are you going to prove your response?

Virustotal lists the most popular malware during last few months as the following examples:

Typical Filename: helperamc
Claimed Product: Advanced Mac Cleaner
Detection Name: OSX.
Variant:AMCZ.19if.1201

Typical Filename:
PrinterInstallerClientUpdater.exe
Claimed Product: Printer Client Updater
Detection Name: W32.AE7327F36A-95.
SBX.TG

Typical Filename: mfon.zip
Claimed Product: Mac File Opener
Detection Name: W32.Trojan.NM

Typical Filename: Danielic
Claimed Product: N/A
Detection Name: OSX.
MAC:Malwaregen.19hh.1201

Typical Filename: BSC_Purchase_Report-T9CUIDOUQU.doc or information.doc
Claimed Product: N/A
Detection Name: W32.8D75AB8C44-100.
SBX.TG

Rule of thumb: If you didn't ask for it, do not download it! Do not click on it! (Brian Krebs)

- a) Keep systems updated (operating systems, applications and antivirus). If you make a mistake, the chance of getting infected is less likely.)
- b) Use free EMET or other anti-exploitation tools; again, if you make a mistake, the chance of getting infected is less likely.

Brian Krebs' Three Basic Rules for Online Safety

1

**If you didn't go looking for it,
don't install it.**

2

If you installed, update it.

3

**If you no longer need it,
get rid of it!**

FROM THE WVPMA PRESIDENT Setting The Agenda

Greetings from WV to fellow WVPMA and OHFAMA members. With elections and changes in state and federal government, there are uncertainties moving forward with insurance regulations. More than ever, we, as a profession, need to band together to protect ourselves and our patients. APMA has launched a member recruitment campaign to assist in efforts to gain more APMA members and the WVPMA has joined in that effort with 50% discounts for new members. I encourage us all to affiliate with fellow DPMs in these times, as we continue to help our patients and stay successful together. Ask a non-member to join today!



R. Andy Dale, DPM

to assist in efforts to gain more APMA members and the WVPMA has joined in that effort with 50% discounts for new members. I encourage us all to affiliate with fellow DPMs in these times, as we continue to help our patients and stay successful together. Ask a non-member to join today!

The WVPMA had a productive video conference meeting on January 18. We met the new APMA board liaison for the OH/WV region and our newly hired West Virginia Lobbyist Group to assist in guarding our interests in the WV Legislature. One new member of WVPMA also participated in our meeting. We will have our next video conference call on April 5 at 7:00 PM. Any WVPMA member can join the meeting through a free app on a camera-enabled tablet, laptop or phone. The internet-based conference system is through Zoom.com. All WVPMA members and other guest non-member DPM's are invited to participate.

The WV Board of Medicine has two DPMs by statute. There are term limits on these appointments. Dr. Rusty Cain's term will expire on September 30, 2017. Dr. Carrie Lakin, who was recently appointed and confirmed by the Senate, will serve until September 30, 2021. She replaced Dr. Curtis Arnold, who was term limited. We plan to submit a nominee for Dr. Cain's upcoming vacancy to Governor Justice. You must be a full-time practicing DPM to be considered. If interested, prepare a complete CV/resume

so that your name may be properly advanced by the association for the position.

A reminder to all WV DPMs: license renewal is June, 2017. A record of 50 hours of CME including a required three (3) hours of instruction on narcotic dispensing is necessary for renewal.

We are looking forward to the WVPMA Annual Meeting on June 8 in Columbus. It was a great time last year! WVPMA members met many helpful OHFAMA and APMA members. We enjoyed the great speakers and educational opportunities at the scientific seminar. I encourage all WVPMA members to attend this year at the Columbus Hilton Hotel at Easton. I wish the best to all WVPMA members. Have a great spring.

R. Andy Dale, DPM, President

The West Virginia Senate confirmed the following appointments for West Virginia Board of Medicine:

- **Carrie A. Lakin, DPM, Charleston for the term ending 9/30/2021**
- **Wes Steele, MD, Fairmont, for the term ending 9/30/2021**



Worried about your Medicare X-Ray cuts?

**From film to CR to DR
Gill has the answers!**

1-800-321-1348

Fax 1-800-432-9445

www.gillpodiatry.com



WE ARE PODIATRY!!



Ohio Foot and Ankle Medical Association
1960 Bethel Road, Suite 140
Columbus, OH 43220-1815

PRSRT STD
U.S. Postage
PAID
Columbus OH
Permit #2609

CHANGE SERVICE REQUESTED

Are you part of the new DPM Mentors Network?

Now Registering New and Former Mentors

- ▶ Enroll at: www.dpmnetwork.org/membership/
- ▶ Tailored to fit your schedule
- ▶ Access free tools to use when mentoring

www.dpmnetwork.org/membership/

Sponsored by the American Association of Colleges of Podiatric Medicine. To inquire, contact network@aacpm.org

15850 Crabbs Branch Way, Suite 320
Rockville, MD 20855



DPM Mentors
Network

