

UPDATE 2012

Late breaking news on
medical-legal developments
affecting physicians and
health care providers.

A publication of:

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Second Round: Physician-Pharmacist Drug Therapy Collaboration: The NJ State Board of Medical Examiners and the NJ Board of Pharmacy are jointly re-proposing new rules that establish standards of practice for physicians and pharmacists who wish to enter into collaborative practice agreements for the management of patients' drug related therapies. The Pharmacy Practice Act authorizes the Boards to jointly promulgate rules that allow physicians and pharmacists in the State to enter into written agreements for the cooperative management of a patient's drug, biological, and device-related health care needs. The Boards received numerous comments on their initial proposal, the majority of which expressed concern regarding the specific training required of pharmacists to participate in collaborative practice agreements. After soliciting and receiving input from members of the regulated community concerning the type of training that should be required of pharmacists for collaborative practice, the Boards revised their proposal. To see comments and Board responses to the initial proposal, as well as the full text of the re-proposed rule, go to: http://www.njconsumeraffairs.gov/proposal/pharmpro_031912.htm.

NJ Acts to Ban Synthetic Marijuana: NJ's Director of the Division of Consumer Affairs has issued an order to place synthetic cannabinoids in Schedule I under the state's Controlled Dangerous Substances Act. Synthetic cannabinoids are chemical compounds marketed and sold in the state and throughout the country over the Internet and in retail establishments—such as tobacco and smoke shops, drug paraphernalia shops, and convenience stores—as herbal mixtures, potpourri, or incense, with brand names such as “Spice,” “K2,” “Blaze,” and “Red Dawn X.” Despite carrying a “not for human consumption” label, such products are produced for the sole purpose of mimicking the effects of marijuana, a Schedule I CDS, when smoked or ingested. Manufacturers have repeatedly changed ingredients to get around previous state and federal bans on the drugs. The February 28th order remains in effect for 270 days or until a regulation is adopted, whichever occurs first. A public hearing will be held May 10, 2012; written comments are accepted until May 4, 2012. State legislation (A446) is also pending that would make certain synthetic cannabinoids Schedule I CDS. For more information, go to: <http://www.njconsumeraffairs.gov/press/02292012.htm>. For the status of NJ's Medicinal Marijuana program, see: <http://www.state.nj.us/health/medicalmarijuana/index.shtml>.

FAIR Health Launches Medicare Compare: FAIR Health, an independent, not-for-profit corporation created to establish and maintain a new database to help insurers determine their reimbursement rates for out-of-network charges, and provide patients with a clear, unbiased explanation of the reimbursement process, has launched FH Medicare Compare, a free web-based tool designed to help consumers better understand their out-of-pocket medical costs if their insurers base out-of-network reimbursement on the Medicare fee schedule. The tool is available on the FH Medical Cost Lookup webpage: www.fairhealthconsumer.org/medicalcostlookup. Many private health plans base out-of-network reimbursement rates on a percentage of Medicare fees, generally 110% to 140% of Medicare fees. If an insurer switches from a reimbursement methodology based upon usual, customary and reasonable (UCR) to Medicare-based rates, consumers may be confused and unaware of the financial implications. Using a Medicare-based reimbursement method often means that the insurer's reimbursement will decrease, and the consumer will have to pay more out-of-pocket costs. The Medicare Compare feature enables consumers to look up Medicare-based reimbursement for a specific procedure and “compare” Medicare and UCR-based amounts side by side.

2011 NJ Hospital Performance Report Released: The NJ Department of Health & Senior Services has released New Jersey's *2011 Hospital Performance Report*. The Report, which reflects mixed performance of New Jersey hospitals, scores hospitals in three general categories: patient safety, healthcare-associated infections, and the percentage of time hospitals delivered the recommended treatment for specific health conditions. A link to the Report can be found at: <http://web.doh.state.nj.us/apps2/hpr/>.

For more information on any of the above items, contact us at 1-800-445-0954.