Dear Colleagues:

It is hard to believe the Holidays are upon us -- please accept my best wishes to you and your families for a wonderful holiday season and a joyous, healthy New Year! We had a successful FIT event where the FIT’s had an opportunity to sit with young career physicians, in lighting rod sessions, to get information on physicians in different employment models.

Our CCA Symposium this fall was also very successful with a focus on the entire cardiovascular team. We already have our date for 2015 which is November 7, 2015.

Our Practice and Patient Management Planning Committee is working on the agenda and speakers for our Annual Meeting, May 29th at the Hyatt Lodge in Oak Brook. Please mark your calendars for this event.

Our FIT poster presentation will be March 2nd at the InterContinental in Chicago. This is always a great event for our fellows-in-training.

We have several councilor positions opening up in March and if you are interested in running for a position, please contact me or Nancy Mueller at nmueller@cardiacmgmt.com.

Happy Holidays!

Marc Shelton, MD, FACC
Governor, Illinois Chapter ACC
**HOT TOPICS**

**ACC’s Cardiovascular Summit: Solutions for Thriving in a Time of Change**

Seeking to improve patient outcomes and experiences through the delivery of high quality, cost effective care? Attend the ACC’s Cardiovascular Summit: Solutions for Thriving in a Time of Change, Jan. 22 – 24, 2015 in Orlando, FL, to develop a customized plan of action and learn about value-based care strategies and tactics, optimization of health care data, and effective leadership skills to ensure your practice thrives during these rapidly changing times. A course for the entire cardiovascular team, the Cardiovascular Summit will utilize dynamic teaching methods and feature small group workshops for all skill levels and practices. Read a recent post on the [ACC in Touch Blog](https://www.acc.org) by C. Michael Valentine, MD, FACC, co-director of the Cardiovascular Summit on the value of attending. [Register today](https://www.acc.org).

**Stand with Your FACC Colleagues at Convocation: Advance to AACC**

As a cardiovascular team member of the ACC, you have already demonstrated your commitment to quality care. Now, gain recognition for being among those providing the highest level of cardiovascular care by advancing to Associate of the ACC (AACC). The designation recognizes cardiovascular team members of the ACC who have shown their commitment through advanced education, training and professional development, and have been members of the College for at least two years. Stand with FACC colleagues and accept the AACC designation at Convocation in San Diego at ACC.15. Over 200 cardiovascular team members have already been selected for advancement. [Join them by submitting an application today!](https://www.acc.org) The deadline for applications is 1/15/15 to be considered for participation in.

**Chronic Care Codes**

As we begin to transition to this new value driven environment - CMS is realizing the complexity and the time it takes to take care of our patients throughout the cardiovascular continuum. 1/1/15 the new chronic care codes will be available for use. The best news is they have removed the direct supervision requirement for billing this “incident to” - meaning our APP’s (Advance Practice Practitioners) can bill for this under general supervision! The key elements in this code include: 1) identify your chronic care patients who have two or more chronic conditions expected to last at least 12 months, or until death, that place the individual at significant risk of death, acute exacerbation/ decompensation, or functional decline, 2) Only one provider can bill for the chronic care management code in a 30-day period, 3) you must have an EHR that has a care plan that can be accessed 24/7, and 4) You must have a signed agreement with the patient allowing you to bill for these services and detailing cancellation rights, copayments and types of service. [You can receive further information on Fact Sheets here](https://www.acc.org).

Of note -- CMS also removed the direct supervision requirement for the transitional care codes for the non-face to face time!

**Value-Based Payment Modifier**

For information on Value Based Payment Modifier.

**Appropriate Use Criteria**

There are important changes coming in this area also. As a reminder the bill that passed in 2014 that provided SGR relief contained language that mandated the implementation of Appropriateness Criteria for advance imaging (Nuclear, CT, PET, and MR). More information can be [found here](https://www.acc.org). The essence of the law is that by 4/1/15 the process will need to be published and the final rules published by 11/1/15. Implementation is scheduled for 1/1/17 -- beginning then the ordering physician must identify the AUC criteria they are referencing in ordering the test, the decision support software they are using - both elements on the bill as well as the ordering and rendering physician's NPI number. From this data outliers will be identified and a % identified and mandated to begin using RBM's for their Medicare patients undergoing these imaging studies in 2020. More to come - but stay tuned for the details as this will NOT be an easy implementation!
SCIENCE and QUALITY

Check Out ACC Coverage of the Hottest Science from AHA 2014
The ACC provided full coverage of the latest science from the American Heart Association (AHA) Scientific Sessions in Chicago, IL. For news coverage, trial summaries, slide presentations, video interviews, and more, visit the AHA Meeting Coverage Page on CardioSource.org. Also check out daily video coverage on the ACC in Touch Blog.

ACC Takes Guidelines on the Go With New Guideline Clinical App
The ACC’s new Guideline Clinical App is the mobile home of clinical guideline content and tools for clinicians caring for patients with cardiovascular disease. To download the free App, search “ACC Guidelines” in the iTunes or Google Play app stores. Learn more about the App. Help the ACC find new and better ways to deliver guideline content to clinicians by sharing your feedback.

ACC Names Final Round of Patient Navigator Program Hospitals
The final 20 hospitals have been named as participants in the ACC Patient Navigator Program, bringing the total number of participants to 35. The first of its kind in cardiology, the program supports national efforts to reduce unnecessary patient readmissions related to heart attacks and heart failure. Read more on CardioSource.org.

Physicians Can Track Care with Confidential CathPCI Physician Dashboard
Did you know that ACC members affiliated with NCDR CathPCI Registry hospitals can use the CathPCI Registry Physician Dashboard to take advantage of registry data to track and improve the quality of care provided to patients? The free dashboard, which can be accessed securely via the ACC’s CardioSource.org website, allows physicians to privately view their registry data including appropriateness of percutaneous coronary interventions, volume of cases treated, observed and expected mortality, door-to-balloon times and vascular complications. It also allows comparisons to other CathPCI Registry physicians in aggregate. In addition to raising awareness of performance, the dashboard can also help physicians earn Maintenance of Certification Part IV credit. Learn more at NCDR.com/CathPCIPhysicianDashboard.

New NSTE-ACS Guideline
The ACC and AHA released the new 2014 Guideline for the Management of Patients With Non–ST-Elevation Acute Coronary Syndromes (NSTE-ACS). The guideline has a new name and new terminology that reflect current ways of thinking about this frequent and serious cardiac condition, and is the first full revision since the 2007 ACC/AHA Guideline or the Management of Patients with Unstable Angina and Non–ST-Elevation Myocardial Infarction (NSTEMI) and subsequent focused updates. Read more.

ACC/AHA Release Recommendations for Congenital and Genetic Heart Disease Screenings in Youth
Health care professionals should use a 14-element checklist when evaluating healthy, young individuals ages 12-25 for congenital and genetic heart disease vs. initial screening using electrocardiograms (ECGs), according to a new scientific statement released by the ACC and the American Heart Association and published in the Journal of the American College of Cardiology. Read more about the recommendations on CardioSource.org.
**Regulations Finalized for 2015 Medicare Fee Schedule and Hospital Outpatient Services**
The Centers for Medicare and Medicaid Services has released two final regulations of note to cardiovascular professionals. For details on important proposals for cardiology contained in the rules and resources to help you navigate the changes, visit [CardioSource.org](http://CardioSource.org).

**Your Guide to 2015 Cardiovascular Coding**
You can breathe a sigh of relief! Changes to existing CPT codes for cardiology were kept to a minimum for 2015. Next year will see CPT codes for newer technology and procedures. Key categories with updated language and new codes in 2015 include subcutaneous implantable defibrillators, transcatheter mitral valve repair, implantable cardiac device evaluations, advanced care planning and extracorporeal membrane oxygenation. Get a detailed summary of next year’s coding changes on [CardioSource.org](http://CardioSource.org). You can also review a recent webinar on CPT changes for cardiology in 2015.

**Avoid PQRS Penalty**
Physicians who do not report to the Physician Quality Reporting System (PQRS) in 2014 will receive a 2 percent penalty on all 2016 allowable charges. Avoid the penalty by reporting through the ACC’s PQRSwizard, an easy to use online tool to help you quickly and easily participate in the program. The price per individual professional is $249. Groups of 10 or more providers are eligible for a group discount. Visit [CardioSource.org](http://CardioSource.org) for more information on navigating PQRS.

**ACC’s MOC Hub**
The College is continuing our efforts to educate our members about the new requirements and provide them the tools and resources necessary to help them meet these requirements as efficiently as possible. The ACC has created an MOC Hub with details about ABIM’s current MOC program to inform and help ACC members navigate the changes. [Learn more here](http://CardioSource.org).