



AAFP News: AAFP Edition

Policy and Health Issues in the News

Allopathic, Osteopathic Graduate Medical Education Systems Merging in 2015

U.S. allopathic and osteopathic medical communities have announced that they will transition to a single graduate medical education accreditation system. In a joint press release, the Accreditation Council for Graduate Medical Education (ACGME), the American Osteopathic Association (AOA), and the American Association of Colleges of Osteopathic Medicine said the move to a single system would help ensure that Americans have access to safe, high-quality health care. The new system will be phased in over five years beginning July 1, 2015. During the transition process, AOA-accredited programs can apply to receive ACGME recognition and accreditation. As a plus for newly graduated physicians, MD- and DO-trained physicians who have met prerequisite competencies will be able to transfer between accredited programs without having to repeat coursework. The merging of the two accreditation systems will put an end to dually accredited or parallel-accredited allopathic and osteopathic medical residency programs. AOA President Norman Vinn, DO, noted that nearly 60% of graduates in osteopathic medicine go into primary care, and said that number is not expected to change. For more information, go to <http://www.aafp.org/news/education-professional-development/20140228gmeaccredmerge.html>.

Study Finds Online Physician Ratings Only Somewhat Important to Patients

Public awareness of online physician ratings is lower than that of online ratings for other products or services unrelated to health, according to the results of a recently published survey. Of the more than 2,100 respondents, 41% said online ratings were unimportant in their decision process, whereas 19% considered them very important and 40% said they were somewhat important. Online ratings were considered less important when choosing a physician than other factors, such as insurance plans accepted, a convenient location, word of mouth from friends or family members, and years of experience. Among respondents who said they used an online ratings site, 35% said they chose a physician based on positive ratings, and 37% avoided a physician with poor ratings. For more information, go to <http://jama.jamanetwork.com/article.aspx?articleid=1829975> (subscription required).

AAFP, Others to Determine Best Practices for Prescribing Controlled Substances

The American Academy of Family Physicians (AAFP) has joined 12 other health industry stakeholders in issuing a consensus statement outlining steps to ensure responsible and effective patient care when prescribing and dispensing controlled substances. The agreement reached by the 13 organizations, which represent physicians, pharmacists, pharmacies, regulatory boards, wholesalers, manufacturers, and government agencies, acknowledges the need to work collaboratively to address the prescription drug abuse epidemic in the United States and to help health care professionals comply with their legal responsibilities for prescribing, dispensing, and distributing controlled substances. The organizations plan to develop two consensus documents. The first will identify red flags for prescribers and pharmacists that will alert them to the need to review the legitimacy of a patient's presenting symptoms, as well as the appropriateness of a controlled substance prescription. The second document will outline actions to ensure that these red flags are addressed in compliance with federal and state laws. For more information, go to <http://www.aafp.org/news/health-of-the-public/20140305prescriptconsensus.html>.

"Road to 10" Resource Can Help Physician Practices Transition to ICD-10 System

The Centers for Medicare and Medicaid Services has released a free online resource aimed at helping small medical practices transition to the ICD-10-CM code sets for outpatient diagnostic coding. The Road to 10 tool, created with guidance from physicians in small practices, allows physicians to build ICD-10 action plans tailored for their practice needs and to look at the transition as a deliberate step-by-step process. The Road to 10 website includes a special ICD-10 section for family physicians with a list of diagnostic codes related to common conditions seen in their practices, a primer for clinical documentation, and clinical outpatient-focused scenarios, as well as additional training and educational resources. For more information, go to http://www.roadto10.org/?page_id=215.

— AAFP AND AAFP NEWS STAFF

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