

## **MGMA Survey Outlines Top Medical Practice Challenges in 2010**

The Medical Group Management Association (MGMA) released their new survey data for this year, which they collected from 1,798 medical group practices. The top issue in 2009 survey results—dealing with rising operating costs—remained the top issue in 2010. The additional top 10 challenges of 2010 are managing finances amidst uncertainty of Medicare reimbursement rates; selecting and implementing an electronic health record; maintaining physician compensation levels; recruiting physicians; collecting from patients with high-deductible plans or health savings accounts; negotiating contracts with payers; managing interoffice dynamics among physicians; modifying methods of physician compensation; and participating in the Physician Quality Reporting Initiative from Centers for Medicare and Medicaid Services. For more information, visit [http://www.mgma.com/WorkArea/mgma\\_downloadasset.aspx?id=33964](http://www.mgma.com/WorkArea/mgma_downloadasset.aspx?id=33964) and <http://www.aafp.org/news-now/practice-management/20100727mgmasurvey.html>.

## **Internal Medicine Organizations Support Reform for GME Financing**

The Alliance for Academic Internal Medicine, which is a consortium of five specialty organizations, developed principles and recommendations for graduate medical education (GME) system reform. Their principles outline the shortfalls of the current financing system and propose recommendations about the physician shortage, the inadequacy of GME payments, the need for Medicare GME support for all training time for residents and fellows, and the need to expand Medicare-funded GME positions. One recommendation is for Congress to increase the number of Medicare-funded physician training positions specifically for primary care specialties. For more information, visit <http://www.aafp.org/news-now/resident-student-focus/20100726internmed-gmereform.html>.

## **AAFP Criticizes NBME for Comparing Physicians with Advanced Practice Nurses**

The American Academy of Family Physicians (AAFP) strongly opposes recent policies from the National Board of Medical Examiners (NBME) that equate primary care physicians with graduates of clinical advanced practice nursing and physician assistant master's programs based on their scopes and depths of practice. The AAFP sent the NBME a response letter that urges their prompt reconsideration and notes that the NBME agreed to cease making

such statements when AAFP leaders met with NBME representatives in September 2008. The AAFP letter points out that the NBME is suggesting that the services provided by a nurse with as few as 1,000 hours of clinical training is equivalent to those provided by a primary care physician with more than 14,000 hours of clinical training. For more information, visit <http://www.aafp.org/news-now/professional-issues/20100811nbmeletter.html>.

## **Student Loans to Attend Foreign Medical Schools Need More Oversight, Report Says**

The U.S. Government Accountability Office (GAO) released a report on the performance of international medical graduates, whom the GAO defines as U.S. citizens and foreign nationals enrolled in foreign medical schools. The report makes recommendations to the U.S. Department of Education about the schools' lack of consumer data and the oversight of pass rates at foreign schools whose students take the U.S. Medical Licensing Examination. One requirement of such schools participating in the loan program has been that 60 percent of their students who take the licensing examination must pass it. However, Congress recently increased that to 75 percent of students. Most of the foreign schools have met the 60 percent requirement, but only 11 percent would likely meet the new 75 percent pass rate, the GAO estimates. The report notes the U.S. Department of Health and Human Services' concern about how the new pass rate would decrease federal loan availability for these students, who comprise a large percentage of U.S. primary care residents. For more information, visit <http://www.gao.gov/new.items/d10412.pdf> and <http://www.aafp.org/news-now/resident-student-focus/20100809gao-loans.html>.

## **GAO Report Critical of Results from Consumer-Marketed Genetic Tests**

Direct-to-consumer genetic tests provide results that are misleading and of little or no practical use, according to a report from the GAO, which was presented during a recent hearing of the House Committee on Energy and Commerce Subcommittee on Oversight and Investigations. The GAO testified during a 2006 hearing that some direct-to-consumer genetic tests make medically unproven disease predictions. Congress then asked the GAO to investigate these products. In response, the GAO tested the accuracy of results they received from 40 such tests, which they purchased from four different companies. They found contradictory results, depending solely on the company it was sent to for analysis, for tests that used identical DNA.

Investigators also found deceptive marketing claims made by these companies (e.g., a customer's DNA could be used to make individualized, disease-curing supplements). The U.S. Food and Drug Administration (FDA) has observed similar problems with such tests in recent years, and is currently working to regulate these products. For more information, visit <http://www.aafp.org/news-now/health-of-the-public/20100811gaoreport-genetictests.html>.

### **Advisory Panel Rejects FDA's Plan for Controlling Inappropriate Use of Opioids**

FDA advisory committee members voted against a proposed Risk Evaluation and Mitigation Strategy from the FDA about extended-release and long-acting opioids after deeming the plan insufficient to stop opioid abuse. John Jenkins, MD, director of the Office of New Drugs in the FDA's Center for Drug Evaluation and Research, said the FDA's plan focused on the legitimate medical use of opioids, but the committee members focused much of their discussion on nonmedical use of these drugs. The plan called for physicians who prescribe opioids to complete a voluntary training program, but many committee members wanted it to be mandatory. Jenkins said FDA officials previously considered mandatory training, but decided it might place an undue burden on the health care system because more than 700,000 physicians are authorized to prescribe extended-release opioids. He said there was no timeline for the FDA to make a decision about the plan. For more information, visit <http://www.aafp.org/news-now/health-of-the-public/20100803fdarejects.html>.

### **FDA Warns Physicians and Consumers Against Using Unapproved IUDs**

The FDA recently released a warning about risks associated with the use of unapproved intrauterine devices (IUDs) and intrauterine systems. The FDA said that the warning includes products not approved for use in the United States, and unapproved versions of FDA-approved products such as levonorgestrel-releasing intrauterine system (Mirena). According to the FDA, these unapproved products could be unsafe and ineffective, and physicians should not insert such a product furnished by a patient who may have purchased it online without verifying that it is an FDA-approved product from a licensed U.S. supplier. Legitimate Internet pharmacies are licensed by state pharmacy boards and display the National Association of Boards of Pharmacy's Verified Internet Pharmacy Practice Sites seal. Information regarding the distribution of unapproved products can be reported anonymously online to the FDA's Office of Criminal Investigations at <http://www.accessdata.fda.gov/scripts/email/oc/oci/contact.cfm>. For

more information, visit <http://www.aafp.org/news-now/health-of-the-public/20100728unapprovediuds.html>.

### **Studies Link Vitamin D Levels with Cognitive Ability in Older Adults**

Two recent studies indicate that vitamin D intake can have a significant effect on the cognitive abilities of older adults. Results from one study of more than 3,000 older adults found those with significant vitamin D insufficiencies were four times more likely to have cognitive impairment. The other study used data from more than 800 older adults in Italy, in whom blood test results were assessed in relation to results of three cognitive evaluations. Test scores were significantly lower in those who were vitamin D deficient, and more than one half of participants with dementia were severely vitamin D deficient. For more information, visit <http://archinte.ama-assn.org/cgi/content/short/170/13/1135> and <http://www.aafp.org/news-now/health-of-the-public/20100727vitamind-cognition.html>.

### **NFID's S.T.O.P. Meningitis! Program Offers Free, Updated Resources**

Free resources for physicians with adolescent patients are available from S.T.O.P. (Share. Teach. Outreach. Protect.) Meningitis!—an initiative of the National Foundation for Infectious Diseases (NFID). Susan Rehm, MD, NFID's medical director and an infectious disease specialist at the Cleveland Clinic in Ohio, said that physicians have not done an adequate job of educating patients about the seriousness of meningococcal disease, resulting in suboptimal vaccination rates. Rehm said the program's materials are designed to help ensure that appropriate patients get vaccinated. For more information, visit <http://stopmeningitis.nfidinitiatives.org> and <http://www.aafp.org/news-now/health-of-the-public/20100722stopmeningitis.html>.

### **The Society of Teachers of Family Medicine Provides HIPAA Resources for Students**

The Society of Teachers of Family Medicine, in collaboration with the AAFP, has developed an online resource about Health Insurance Portability and Accountability Act (HIPAA) rules for students and other persons who shadow family physicians in their offices. It includes information on patient confidentiality and privacy, as well as protocols to follow when using electronic health records. For more information, visit <http://www.fmdrl.org> and <http://www.aafp.org/news-now/resident-student-focus/20100723stfmhipaatoools.html>.

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