

New Jersey Academy of Otolaryngology-Head & Neck
Surgery

New Jersey Academy of Facial Plastic Surgeons

Monthly Report - April 2012

[REGISTER NOW!](#)

29th Annual Symposium

with 4.75 AMA PRA Category 1 Credits

April 25, 2012

7:30 am- 3:15 pm

PNC Bank Arts Center

Holmdel, NJ

[Registration Form Attached](#)

Upper Eyelid Blepharopexy: An Alternative to Brow Lifting

Sigmund L. Sattenspiel, MD

Use of Intratympanic Steroids for Sudden Hearing Loss

Sujana Chandrasekhar, MD, FACS, FAAO HNS

Legislative Update

Sujana Chandrasekhar, MD, FACS, FAAO HNS

Sublingual Immunotherapy: An Alternative to Injection Immunotherapy

Diego Saporta, MD

Cochlear Implants and Implantable Hearing Devices

Michael J. Ruckenstein, MD, M.Sc, FACS

**HPV Related Throat Cancer: An Epidemic: What the Otolaryngologist
Should Know**

Eric M. Genden, MD

Orbital Decompression Surgery

Soly Baredes, MD

Advances in Endoscopic Skull Base Surgery

Jean Anderson Eloy, MD, FACS

From the Statehouse

Advocacy and Management Group

NJ Senate and Assembly Meet to Review Budget

The Senate Budget and Appropriations Committee as well as the Assembly Budget Committee are conducting hearings through May with each state department and committee regarding the Governor's proposed budget. These hearings allow the Committees to

investigate proposed spending in order to make revisions before the budget is voted on by both houses. The final budget must be passed by both the Senate and the Assembly by midnight on June 30th, at which point Governor Christie will sign the fiscal year 2013 budget.

There are currently 5,022 bills introduced in the Senate and Assembly. Minimal routine legislation will take place during the budget break from March through May 2012. The Advocacy & Management Group will closely monitor the budget hearings and will report on any significant decisions made by the Committees.

Governor to Reallocate Charity Care Spending in Hospitals

Governor Christie announced a plan in which hospitals across the state will share \$675 million in charity care payments to help treat the working poor and uninsured. According to the Health Commissioner, about 90% of the funding will maintain the current compensation levels. The remaining \$67 million will be reallocated to hospitals that treat the highest number of uninsured patients. These hospitals include Jersey Shore University Medical Center, Neptune (\$301,292), Saint Joseph's Regional Medical Center, Paterson (\$267,264), and Robert Wood Johnson University Hospital, New Brunswick (\$265,654). Through the reallocation of funding, the following hospitals are slated to lose the most state funding: Hackensack University Medical Center (\$437,847), University Hospital, Newark (\$347,141), and Saint Michael's Medical Center, Newark (\$248,933). A complete list of charity care funding can be found at: www.state.nj.us/health/documents/hf_budget2013.pdf.

NJ Health Insurance Exchange Update

Governor Christie has stated that he will not sign the Health Insurance Exchange bill unless it is deemed constitutional by the U.S. Supreme Court. The legislation was approved by both the New Jersey Senate and the Assembly earlier this month, although no Republicans in either house voted in favor of the proposal. The U.S. Supreme Court is currently holding hearings regarding President Obama's Health Insurance Exchange, which would require states to adopt an exchange program by 2014. Although the Supreme Court is not expected to declare a verdict until July, Governor Christie will have to take a stance on this issue by May.

Legal Report

Kern Augustine Conroy & Schoppmann, PC

Surgical Practice Registration Critical April 16 Deadline Looms:

For three years, surgical practices have been on notice of the registration requirement enacted into law March 21, 2009. Despite legislative proposals, and delayed but adopted regulations, the law remains effective as enacted. As a result, the notice goes out once again: All surgical practices currently in operation are required to register by April 16, 2012, or cease operations as a surgical practice. It appears that the Department of Health and Senior Services is not waiting until April 16th to seek out and shut down practices performing surgery but which do not qualify for registration. The finality of the law was reiterated in a March 2012 announcement (see: <http://njconsumeraffairs.gov/bme/Surgical2012.pdf>) emanating from the New Jersey Board of Medical Examiners:

All surgical practices currently in operation are required to register

with the Department of Health and Senior Services (Department) by April 16, 2012. Surgical practices not yet open that met the statutory filing deadline in N.J.S.A. 26:2H-12 must register prior to offering services. A new surgical practice is not permitted unless building plans have been submitted prior to September 19, 2009.

. . . .

Please be aware that pursuant to statute, N.J.S.A. 26:2H-12, this is an outright ban on new surgical practices, and also does not permit existing surgical practices to make changes in their current operating room that would change the scope of services. If you are currently doing IV or conscious sedation in a surgical practice, you cannot add general anesthesia. If you are currently doing procedures under local anesthesia, unless you submitted building plans prior to the statutory deadline [September 19, 2009], you cannot become a surgical practice because of the statutory ban on new surgical practices.

Here is further description of the applicable timeframes:

Surgical practices in operation as of January 17, 2012 (the regulations' effective date) and that were in operation as of March 21, 2009 (the date the 2009 legislation was enacted) must apply for registration with the Department by April 16, 2012, or cease operation by such date.

Surgical practices in operation as of January 17, 2012, but which had not commenced operation prior to September 17, 2009, must register by April 16, 2012. However, in order to be eligible to register with the Department, such a practice must have filed its plans, specifications and/or any other required building, zoning or construction documents with the municipality in which the surgical practice is located prior to September 17, 2009 (the six-month deadline established by the 2009 law).

Surgical practices that have not commenced operations by January 17, 2012, but which filed the required municipal documentation prior to September 17, 2009, must register with the Department prior to commencing operation. Such practices must apply to the Department for registration within two years of receiving municipal approval to operate.

Note that a medical office that has a room designed to perform procedures, such as endoscopies, but the construction of the room would not permit surgery to be performed in the room, is not required to register with the Department. All medical offices and all registered surgical practices continue to be subject to State Board of Medical Examiners regulations regarding the practice of medicine, including the Board's regulations governing surgical and anesthesia services in the physician office setting.

The Department's registration regulations, registration application, and instructions for completing and filing the application are available at: <http://nj.gov/health/healthfacilities/industrynews.shtml>. The Department

contact person for questions related to the registration process is Eugene Brenycz, Department of Health & Senior Services Regulatory Officer, 609-292-5960. For assistance with the process, contact Kern Augustine Conroy & Schoppmann, P.C., at 800-445-0954.

- **2011 NJ Hospital Performance Report Released:**

The New Jersey 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 the Department's Hospital Performance Report webpage: <http://web.doh.state.nj.us/apps2/hpr/>.

- **Caution Urged in Reassignment:**

The Office of Inspector General for the U.S. Department of Health & Human Services recently alerted physicians that they should use caution when reassigning their Medicare payments. Reassignment by form CMS-855R authorizes Medicare to forward reimbursement for a physician's services to another entity, such as an employer. However, the reassigning physician could be liable for false claims submitted by that entity using the physician's number, such as filing claims for services not rendered. Physicians should do sufficient due diligence on any such entity, before making a reassignment, to be sure it is a legitimate provider. In addition, by law, a physician has unrestricted access to claims submitted by an entity for services that the entity billed using the physician's reassigned provider number, to provide added assurances that the services for which the entity billed Medicare were, in fact, performed and were performed as billed.