• Trial attorneys are attacking MICRA. Come hear the latest update on the campaign to defeat the MICRA initiative.
• Legislation was introduced to require physicians and hospitals to report outcomes for PCI procedures.
• As a result of a successful pilot program which studied six CA hospitals performing elective PCI procedures without onsite surgical backup legislation (SB 906) was introduced to allow hospitals to perform elective PCI procedures without having onsite surgical backup.

8:30 am: Breakfast
9:00 am: Legislative Issues Briefing
10:00 am - Noon: Legislative Visits
12:15 pm - 1:00 pm: Lunch

No cost for CA ACC members coming to get involved. Just RSVP and show up. We will set appointments, educate you and take care of everything. Join us!
Notes from the ACC Board of Governors’ Meeting
President, John B. Gordon, MD, FACC

What’s in store for the House of Cardiology in 2014? Little more needs to be said about the roll out of the Affordable Healthcare Act, which will no doubt provide both opportunities and challenges for cardiologists and our patients. Repeal of the SGR remains a top advocacy issue for the ACC, as do preservation of the in-office ancillary services, tort reform, and funding for the NIH. The Board of Governors has wrestled with how to approach the scope of practice controversy, wondered if private practice is really dead, pondered how to manage “big data”, and debated the utility of Maintenance of Certification (MOC).

The American Board of Internal Medicine (ABIM) has implemented major changes in the process for certification beginning January 1, 2014. These changes apply to all certified cardiologists, including those previously “grandfathered” out of recertification exams. Details of the program are available at www.moc2014.abim and CardioSource.org/MOC.

March 31, 2014 is the deadline for enrolling in MOC. The AIBM will begin reporting whether or not physicians are meeting MOC requirements after that date. On December 31, 2015, cardiologists must have earned 100 MOC points and completed the ABIM’s new patient safety and patient survey requirement. Note that a proctored exam will be required every 10 years for everyone. No “grandfathers”.

Why is the AIBM changing the MOC program? The AIBM believes continuous MOC will ensure that cardiologists stay up to date with the latest science and best practice. David May, chair of the Board of Governors, has argued that “MOC is not for us but for our patients, the secure examination perhaps flawed but reassuring measure of our competence for the real customer here…our patients and their families that trust us with their very lives”.

Lloyd and O’Gara (1) note that there has been considerable debate over the value of this process. A majority of cardiologists do not believe the benefits outweigh the cost and effort. Less than 1% of the grandfathered physicians have taken the recertification examination. Most agree that lifelong learning is useful but have concerns about the validity of the MOC process and the cost burden. Is the required proctored examination an accurate measure of competence that improves the quality of care? There is little evidence to support this notion.

Fortunately, the ACC is committed to helping members navigate the new changes. An update has been published in JACC (2), there is an online resource center on CardioSource. The ACC’s new online Lifelong Learning Portfolio is designed to help members achieve MOC requirements while minimizing the discomforts. ACC leaders are committed to working with the AIBM to make MOC a relevant, efficient, and effective means of improving patient care.


Everything You Need to Know About ABIM’s MOC Changes

In response to new and significant changes to the American Board of Internal Medicine (ABIM) Maintenance of Certification (MOC) requirements, the ACC’s Education Quality Review Board (EQRB) released a special report in the Journal of the American College of Cardiology (JACC) outlining the changes and EQRB efforts to help ACC members both understand and meet the new requirements. The new MOC requirements, which became effective on Jan. 1, apply to all certified physicians and require specific proactive steps on the part of physicians between now and the end of March, as well as over the next two years. Also, be sure to take a look at JACC commentary by Steven Lloyd, MD, PhD, FACC and ACC President-Elect, Patrick O’Gara, MD, FACC which illustrates ACC’s promise and plan on mastering MOC changes. For more MOC resources from the ACC, visit these:

- Understanding Maintenance of Certification Requirements
- MOC Tracker
- ACC’s MOC Educational Activities
- ACCF’s Maintenance of Certification Modules
- A Three-Pronged Strategy to New MOC Requirements (Cardiology, Fall 2013)

The American College of Cardiology (ACC) exclusively endorses The Doctors Company, the nation’s largest physician-owned medical malpractice insurer. This malpractice insurance program through the ACC is the first to focus on general cardiologists, interventional cardiologists, cardiothoracic surgeons, and pediatric and adult congenital cardiologists. Together we identify areas for improvement in the treatment of people with heart disease, educate members about clinical events identified as high risk, and provide members with patient safety tools and programs. The Doctors Company offers ACC members a unique combination of coverage features, aggressive claims defense, superior protection, and unrivaled rewards, including the Tribute® Plan, a financial benefit that rewards doctors for their loyalty and their dedication to superior patient care. More benefits for ACC members include:

- ACC program discount and credits of up to 15 percent.
- Additional claims-free credit of up to 25 percent for eligible members.

To take advantage of these exclusive savings, call (888) 312-8571.
News You Can Use

ACC Working for You
JACC President’s Page (February): A Lesson in Partnerships, Member Values, and Patient Education
In a recent President’s Page in the Journal of the American College of Cardiology, ACC President John Gordon Harold, MD, MACC, discusses how the ACC is working with other societies, federal agencies, international health groups and patient organizations on a number of fronts to highlight the importance of prevention and the need for public health policies and programs at the state, national and global levels. Harold also highlights how the College continues to fight for policies at both the state and national level that improve patient access to cost-effective, evidence-based cardiovascular care.

SGR Battle Continues, Contact Congress
After 11 years since the first sustainable growth rate (SGR) patch was passed into law, the medical community continues to battle to permanently repeal the flawed formula and replace it with a new Medicare payment system that rewards high quality, evidence-based care. With the House and Senate recently advancing a bill that would eliminate the SGR, a permanent solution is closer than ever. However, passage of the legislation is not a done deal and another temporary patch is still a possibility. Contact your members of Congress and urge them to complete work on permanent SGR repeal.

In Memoriam - Walter A. Flieg, MD, FACC
Walter A. Flieg was born in Berlin on October 9, 1921, the only child of Dr. Hans Flieg and the former Ella Lewy. His parents fled Nazi Germany with him early in the regime that transported the rest of their families to concentration camps. They relocated first to Amsterdam, then to Pittsburgh, and finally to Los Angeles, where he graduated from Hollywood High. He received a B.A. in Zoology from UCLA before attending medical school at USC, followed by residency at the V.A. in Westwood and further training in cardiology. During the Korean War he served as a Captain in the U.S. Army Medical Corps in Germany. When he returned to Los Angeles, he began his private practice in cardiology. Among his more renowned patients were Alfred Hitchcock and Benny Carter, who also became close personal friends. Like Hans, his physician father, he was associated for many years with Cedars-Sinai Medical Center, where he was elected to Fellowship in the American College of Cardiology. Even after retirement from active practice, he remained an emeritus member of the Cedars-Sinai medical staff. He died at home in Los Angeles on January 6, 2014. He was 92.
UPCOMING EVENTS
Check out our website at www.caacc.org for details on all events.

March:
26th: CA ACC Risk Assessment for Cardiovascular Disease (UB), 5:30 pm - 8:30 pm, San Diego
29th-31st: ACC ’14, Washington D.C.

April:
2nd-4th: Vascular Interpretation Preceptorship (VIP), San Francisco
5th: 18th Annual Heart Failure 2014: Update on Diagnosis and Therapy, Los Angeles
25th: 8th Annual Women and Ischemic Heart Disease Symposium, 7:45 am - 5:15 pm, Los Angeles
25th-26th: Best of ACC. 14: Take Home Messages for the Clinician, Los Angeles
29th: CA ACC 8th Annual Legislative Day, 8:30 am - 1:15 pm, Washington D.C.

May:
2nd-4th: Clinical Advances in Arrhythmias and Cardiovascular Disease, La Jolla
9th: Cardiology Update 2014: Conventional Wisdom and Beyond, 7:00 am - 5:00 pm, Torrance

June:
7th: 20th Annual San Diego Heart Failure Symposium: Advances in the Recognition & Treatment of Heart Failure, San Diego

The NEW ACC College-Wide Mentoring Program is now live!

We need mentors - not just academic, but private practice, researchers, and every other type of cardiologist and cardiothoracic surgeons. Click above to to sign up and encourage early career members in your states to sign up as mentees. It only takes 4-5 minutes to sign up!