



INDIANA PODIATRIC MEDICAL ASSOCIATION

# Forward

ISSUE ONE | SPRING 2021

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## PRESIDENT'S MESSAGE

BRIAN DAMITZ, DPM | IPMA PRESIDENT

I hope everyone is staying healthy and safe and is enjoying the beginning of spring and the warmer weather. I am excited to begin my second term as IPMA President. I appreciate the continued support of the IPMA membership as we hope to have a more normal year in 2021.

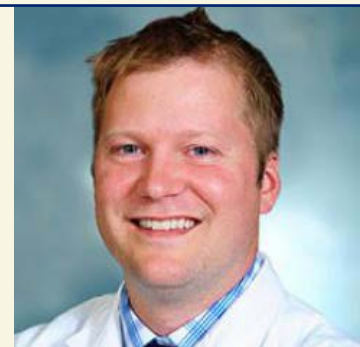
This year the APMA House of Delegates will be held virtually. I look forward to representing the IPMA in the proceedings and will be joined by a great team—Dr. Patricia Moore, Dr. Sandy Raynor and Dr. Zahid Ladha. We are disappointed to not participate in making the rounds on Capitol Hill with Indiana's Congressional Delegation, but will have a report on the House of Delegates for you in the next newsletter.

Our association remains in a strong financial state. Despite the challenges of 2020, the IPMA finished the fiscal year with an operational loss of just \$3,500. When considering our investment accounts, the association made a profit of nearly \$6,000.

I want to thank everyone who supported the association through their membership and participation in 2020. And I ask for your continued support as we start to return to normal. The IPMA needs you to be involved and engaged to make change happen for podiatrists, our patients, and our practices. As always, we encourage all members to invest your time and talents in order to remain a strong organization. If you are interested in getting involved, please do not hesitate to contact me or the IPMA office.

I am excited to report that we are full steam ahead with planning our in-person 2021 Annual Fall Convention. I think the event will be a great culmination of a challenging time when we can get together in Indianapolis. For more information, see [page 5](#).

If you have any thoughts, concerns or suggestions regarding the activities of the IPMA, please do not hesitate to contact me. 🦶



# APMA WORKING FOR YOU IN 2020: ADVOCACY VICTORIES

APMA celebrated many major advocacy accomplishments protecting and enhancing podiatric medicine in 2020. [Download the handout of APMA's 2020 advocacy wins!](#)

## COVID-19 RELIEF LEGISLATION INCLUDES VICTORIES FOR PODIATRISTS

APMA has been aggressively advocating for podiatric physicians and surgeons in COVID-19 relief legislation since the early days of the pandemic. In late December Congress passed a \$900 billion COVID relief package. As a result of APMA's efforts, the bill includes significant victories for podiatry:

- The bill provides for a one-time, one-year, **3.75-percent increase in the Medicare Physician Fee Schedule** to provide relief during the COVID-19 public health emergency. With this increase and other changes included in the legislation, **podiatry is expected to see an overall 5-percent increase** in Medicare reimbursement in 2021 rather than an expected 1-percent decrease.
- Congress also issued a three-year moratorium on HCPCS Code G2211, and prohibited CMS from making payments prior to January 1, 2024, for this inherent complexity add-on code. HCPCS Code G2211 was finalized in the CY 2021 Medicare Physician Fee Schedule, and APMA had previously urged CMS and Congress to postpone implementation of this code (formerly referred to as GPC1X). APMA, along with AMA and other medical specialties, stated that this code was not clearly defined, and CMS over-estimated its assumption on the utilization, which negatively impacted the conversion factor and in turn caused a decrease in other codes as a result of Medicare's budget neutrality requirements.

Congress also **extended Sequestration relief** for three months. The CARES Act suspended the Medicare Sequestration cuts for all Medicare fee-for-service claims until the end of the year, and the latest COVID-relief extends the suspension. APMA appreciates this short-term relief and will continue its long-term advocacy efforts to end the Sequestration cuts.

APMA succeeded in including a **non-discrimination provision in Surprise Billing provisions** to prevent provider discrimination. Surprise Billing provisions also include a 30-day open negotiation period for providers and payers to settle out-of-network claims. If unable to settle, the parties may access binding arbitration. Visit [www.apma.org/COVID19](http://www.apma.org/COVID19) for all of APMA's COVID-19 resources.

## TRICARE REGULATIONS UPDATED TO ALLOW DPMs TO REFER FOR PT/OT SERVICES

TRICARE released a final rule fixing its outdated regulations to allow DPMs to refer TRICARE patients to Physical Therapy and Occupational Therapy Services (PT/OT) as well as speech pathology. The enforcement of the rule caused significant issues for podiatrists and their patients because podiatrists had to send patients back to their primary care provider for a referral. To fix this outdated rule, the APMA Health Policy and Practice Department engaged in advocacy efforts that included direct conversations and letters with Department of Defense (DOD) officials and worked with APMA's Legislative Advocacy department obtain support from Rep. Brad Wenstrup, DPM (R-OH). [READ MORE.](#)

## AUC IMPLEMENTATION DELAYED TO 2022

In August CMS announced it is delaying full implementation of the Appropriate Use Criteria (AUC) requirements for advanced imaging orders to 2022. APMA expressed significant concerns over the readiness of this program since 2019, and had asked for delay or cancellation of the program entirely throughout the COVID-19 public health crisis. [READ MORE.](#)

## NCCI ERRONEOUS EDIT CORRECTION VICTORY

APMA led a joint effort with AAOS and AOFAS that resulted in the National Correct Coding Initiative (NCCI) correcting an erroneous NCCI edit related to CPT 28296 and CPT 28289. Previously, the NCCI edit that pairs these two codes places CPT 28289 in Column 1 and CPT 28296 in Column 2, implying the work involved with CPT 28296 is a component of CPT 28289 when these procedures are both performed at the same site. NCCI reversed that listing with the update reflected in the next quarterly procedure-to-procedure (PTP) edit update. [READ MORE.](#)

## CPT WIN FOR NOVITAS PROVIDERS

In 2019, three new CPT® codes were released (CPT 20932–20934) that deal with allograft use. Novitas, a Medicare Administrative Contractor (MAC) responsible for 11 states and Washington DC, did not allow payment to podiatrists when these codes were submitted. Following an initiative led by Maryland and DC region Carrier Advisory Committee (CAC) Representative David Freedman, DPM, Novitas has now updated its procedure file to allow payment to all podiatrists for these codes. [READ MORE.](#)

## DPMS DESIGNATED ESSENTIAL CRITICAL INFRASTRUCTURE WORKERS IN COVID-19 RESPONSE

After months of APMA's advocacy, the US Department of Homeland Security Cybersecurity & Infrastructure Security Agency (CISA) explicitly included podiatric physicians in its definition of physicians classified as essential critical infrastructure workers during the COVID-19 public health emergency. [READ MORE.](#)

## CMS CONFIRMS AAP LOAN RECOUPMENT DELAY

CMS is holding off on garnishing Medicare providers' payments related to the Coronavirus Aid, Relief, and Economic Security (CARES) Act Medicare Accelerated and Advance Payment Program (AAP). APMA expressed its significant concerns in August—specifically that the repayment terms are overly strict and would cause additional, unnecessary financial burdens for providers. [READ MORE.](#)

## VICTORY! NCCI UPDATES POLICY MANUAL FOR MEDICARE, USE OF -59 MODIFIER!

As a result of APMA's advocacy efforts, the National Correct Coding Initiative (NCCI) updated Chapter I of the NCCI Policy Manual for Medicare Services in Section E.1.d.(3), Example #2, to reflect a [prior determination](#) by CMS specifying that use of Modifier 59 or X[ESPU] is acceptable if the procedures described by CPT® 11720 and 11055 are conducted on lesions that are anatomically separate from one another—even if on the same digit.

Effective January 1, 2021, the [NCCI Policy Manual Chapter I](#) now includes an example that reads as follows:

- Example 2: The Column One/Column Two code edit with Column One CPT code 11055 (Paring or cutting of benign hyperkeratotic lesion (eg, corn or callus); single lesion) and Column Two CPT code 11720 (Debridement of nail(s) by any method(s); one to five) should not be reported together for services performed on skin distal to and including the skin overlying the distal interphalangeal joint of the same toe. Modifiers 59 or -X{EPSU} should not be used if a nail is debrided on the same toe on which a hyperkeratotic lesion of the skin on or distal to the distal interphalangeal joint is pared. Modifiers 59 or -XS may be reported with code 11720 if 1 to 5 nails are debrided and a hyperkeratotic lesion is pared on a toe other than 1 with a debrided toenail or the hyperkeratotic lesion is proximal to the skin overlying the distal interphalangeal joint of a toe on which a nail is debrided.

- This victory ensures the NCCI Policy Manual language is consistent throughout and accurately reflects CMS policy.
- APMA's 59 Modifier Workgroup was formed last year to address this discrepancy and develop a Routine Foot Care and -59 modifier toolkit. The toolkit includes educational materials and resources to help members when Medicare Advantage plans, Medicaid Managed Care Organizations, or other commercial plans deny covered nail care (CPT® 11720/11721) when callus care (CPT 11055-11057) is provided on the same date.


The workgroup is pleased with this victory and will now work towards the coverage of nail debridement without any restrictions related to callus paring or cutting. For more information visit [www.apma.org/59toolkit](http://www.apma.org/59toolkit).

## WPS WOUND CARE LCD VICTORY

APMA's formal reconsideration request to Wisconsin Physician Services (WPS) to correct its problematic Wound Care Local Coverage Determination (LCD) led to several changes. WPS released Future Local Coverage Determination (LCD): Wound Care (L37228) on December 26, 2019. In it, WPS approved and implemented many of the changes APMA requested, including:

- Listing of diabetic foot ulcer as an ulcer type covered by this LCD
- Listing of Stage 2 pressure ulcer as an ulcer type covered by this LCD
- Allowing debridement of all partial skin thickness ulcers (CPT 97597/97598)
- Removal of NPWT criteria in the LCD which conflicts with DME criteria. [READ MORE.](#)

## DMEMAC SURGICAL DRESSING LCA VICTORY

In March, the DMEMACs modified the Surgical Dressing LCA to state that the person who performs the weekly evaluation required for patients in a nursing facility and patients with a wound that is heavily draining or infected may have no financial relationship with the supplier. APMA expressed concern that this may lead to unintended consequences for physician prescribers who were also the suppliers, as occurs when podiatrists both prescribe and dispense DME. After this effort, the LCA was revised to add the following sentence: "This prohibition does not extend to treating practitioners who are also the supplier." 

# MIDWEST PODIATRY CONFERENCE GOES VIRTUAL

The 2021 Midwest Podiatry Conference Goes 100% Virtual. After overwhelmingly positive feedback from 2020 attendee surveys, and after careful considerations of the COVID guidelines set by the city of Chicago, the Midwest Podiatry Conference (MPC) will now take place virtually Thursday June 17th through Sunday June 20th. The theme for this year's conference is "DPM: Discover. Perform. Master."

Podiatrists, assistants, and other key practice members are invited to join the Midwest to discover innovations in podiatric medicine, network with industry professionals, and learn about new, exciting offerings in our virtual Exhibit Hall.

Because the 2020 Virtual MPC was a huge success, the MPC team plans to build on key takeaways from last year's event for an even bigger and better conference in 2021. Last year, the MPC's educational sessions received a "good/excellent" rating from over 70% of surveyed attendees, while the variety of educational sessions offered, and speakers received a "good-excellent" rating from over 80% of attendees!

The majority of attendees participated in MPC last year for Continuing Education programs; the 2021 agenda is being carefully and thoughtfully planned out so attendees are presented with diverse topics that cover the most important cases, concerns, and innovations the industry currently faces. Content this year is sure to exceed expectations; sessions topics

will include, but are not limited to: Medicine, Infectious Disease, Pediatrics, Practice Management, Sports Medicine/Biomechanics, Radiology, Diabetes, Surgery, Practice Requirements, Surgical Review, Demonstrations and Debates. Conference content is led by Scientific Co-Chair Kathryn LaViolette, DPM (under the guidance of previous Scientific Chair John Grady, DPM).

The MPC team took a close look at the post-conference surveys and are implementing attendee feedback. While last year's conference was received positively, suggestions for improvement were taken into consideration as we continue our shift to another fully virtual event.

We look forward to virtually gathering podiatrists, assistants, and other key practice members and are excited to welcome back virtual attendees from the Midwest, while continuing to expand MPC's reach around the globe. Our virtual conference will allow us the opportunity to share our content with other regions and expand networking opportunities among our attendees. To register and for more details on this year's conference as it becomes available, please visit our website: <http://midwestpodconf.org>. For additional updates, follow MPC on Twitter ([twitter.com/midwestpodconf](https://twitter.com/midwestpodconf)) and LinkedIn ([linkedin.com/company/midwestpodconf](https://linkedin.com/company/midwestpodconf)). 🦶

*Companies interested in exhibiting should contact Kelly Coates by emailing [meetings@midwestpodconf.org](mailto:meetings@midwestpodconf.org).*



**THE 2021 MPC WILL BE HELD VIRTUALLY:**  
**THURSDAY, JUNE 17TH - SUNDAY, JUNE 20TH**



**REGISTER TODAY!**

*The early bird registration rate deadline has been extended!*

\*Early Bird Discount is only available until March 26th.

**[www.midwestpodconf.org](http://www.midwestpodconf.org)**

Connect with MPC on social media: [Twitter](https://twitter.com/midwestpodconf) [LinkedIn](https://linkedin.com/company/midwestpodconf) /midwestpodconf








Save the Date   
[www.indianapodiatric.org](http://www.indianapodiatric.org)

Annual Fall Convention   
**October 14-17, 2021**

 Ascension St. Vincent William K. Nasser, MD,  
Healthcare Education and Simulation Center | Indianapolis

# LATEST ON INDIANA'S VACCINATION PLAN

The vaccination of Hoosiers against COVID-19 has begun. Any Indiana resident age 50 and older is now eligible to schedule a vaccination appointment, as are long-term care residents, first responders (firefighters, police officers and sheriff's deputies, emergency medical services, reservists and correctional officers) who are regularly called to the scene of an emergency to give medical aid, and licensed and unlicensed healthcare workers who have in-person contact with patients or infectious material in any healthcare setting.

Hoosiers age 50 and older can schedule a vaccination at the link in the red bar above or by calling 211 if they do not have access to a computer or need assistance registering. Eligible professionals must also live in Indiana and should have received an invitation and registration link from their employer, professional association, or the State of Indiana (Indiana Department of Health, Professional Licensing Agency, Family & Social Services Administration, Department of Homeland Security, or another state agency). If you are eligible and haven't received an invitation, please ask your employer.

Indiana is using an age-based strategy for vaccine eligibility to have the greatest impact on preventing hospitalizations and death from COVID-19. Please be patient, as vaccine supply is limited. Additional groups will be eligible as soon as vaccine supplies permit.

## WHO IS ELIGIBLE TO RECEIVE VACCINE?

If you are an Indiana resident and answer yes to any of these questions, you are eligible to receive the COVID-19 vaccine:

- **Are you age 50 or older?**
- **Do you work or volunteer in healthcare and have (physical or close) contact or face to face interactions with patients?** Examples include:
  - Inpatient, outpatient, provider office setting, nursing homes, residential care facilities, assisted living facilities, in-home services
  - This includes all clinical and non-clinical positions: clinicians, dietary, environmental services, administrators who have direct contact with patients, clergy who see patients in the healthcare setting, non-clinicians who assist in procedures, transportation staff, etc.
  - This also includes local health department staff who interact with patients at test sites, health clinics or provide direct patient care
- **Do you have exposure to COVID-19 infectious material?** (Examples include cleaning of rooms or material from COVID-19 patients, performing COVID-19 testing, other exposure to infected tissue, performing autopsies or other post-mortem examinations of COVID-19 patients)
- **Are you a first responder** (firefighter, police officer and sheriff's deputy, emergency medical services, reservist and correctional officer) **who is regularly called to the scene of an emergency to give medical aid?**

Initial groups of patients at highest risk of severe illness from COVID-19 who are identified by their healthcare provider are also eligible. These individuals will receive a unique registration link by text or email, or may call 211 **after** receiving the notification:

- Active dialysis patients
- Sickle cell disease patients
- Down syndrome
- Post-solid organ transplant
- People who are actively in treatment (chemotherapy, radiation, surgery) for cancer now or in the last three months, or with active primary lung cancer or active hematologic cancers (lymphoma, leukemia and multiple myeloma)

Please contact your healthcare provider if you think you are eligible but haven't yet received notification. [Click here for a list of who is eligible to receive the COVID-19 vaccine.](#) If you are eligible, [click here](#) to register and make an appointment. Proof of eligibility will be required at the time of vaccination. The timeline for additional phases of vaccine administration is yet to be determined. Received the vaccine? Make sure you sign up for the [v-safe after vaccination health checker](#). [Click here](#) if you are fully vaccinated and need a vaccination certificate. 🦋

## List of COVID-19 Vaccinating Clinics (A - Z)



County	District	Site Name
Adams	3	Adams Memorial Hospital
Adams	3	Kroger Pharmacy, 929 S. 13 <sup>th</sup> St., Decatur
Adams	3	Adams County Local Health Department
Allen	3	Allen County Local Health Dept. (at Allen County War Memorial)
Allen	3	Lutheran Hospital
Allen	3	Parkview Mirro Center
Allen	3	Neighborhood Health Clinics, Inc. (S. Calhoun St.)
Allen	3	Neighborhood Health Clinics, Inc. (E. Paulding Rd.)
Allen	3	Kroger Pharmacy, 10230 Chestnut Plaza Dr., Ft. Wayne
Allen	3	Kroger Pharmacy, 1125 W. State Blvd., Ft. Wayne
Allen	3	Kroger Pharmacy, 218 E. Pettit Ave., Ft. Wayne
Allen	3	Kroger Pharmacy, 4120 N. Clinton St., Ft. Wayne
Allen	3	Kroger Pharmacy, 5725 Coventry Lane, Ft. Wayne
Allen	3	Kroger Pharmacy, 6002 St. Joe Center Rd., Ft. Wayne
Allen	3	Kroger Pharmacy, 601 E. Dupont Road, Ft. Wayne
Allen	3	Kroger Pharmacy, 6310 E. State St., Ft. Wayne
Allen	3	Kroger Pharmacy, 7008 Bluffton Rd., Ft. Wayne
Allen	3	Kroger Pharmacy, 821 Lincoln Hwy., Ft. Wayne
Allen	3	Meijer Pharmacy, 6309 Lima Rd., Ft. Wayne
Bartholomew	8	Columbus Regional Hospital
Bartholomew	8	Bartholomew County Local Health Department
Bartholomew	8	Walmart Pharmacy, 2025 Merchant Mile, Columbus
Bartholomew	8	Walmart Pharmacy, 735 Whitfield Dr., Columbus
Bartholomew	8	Sam's Club, 2715 Merchant Mile, Columbus
Bartholomew	8	Kroger Pharmacy, 3060 National Rd., Columbus
Benton	4	Benton County Local Health Dept. (Patient Care Services, The Annex)
Blackford	4	IU Health Blackford Hospital
Blackford	6	Blackford County Local Health Department (at Elks Lodge #625)
Boone	5	Boone County Local Health Dept. (at Boone County Fairgrounds)
Boone	5	Meijer Pharmacy, 6650 Whitestown Pkwy, Zionsville
Boone	5	Kroger Pharmacy, 10679 N. Michigan Rd, Zionsville
Boone	5	Kroger Pharmacy, 5 Boone Village, Zionsville
Boone	5	Kroger Pharmacy, 2420 N. Lebanon St., Lebanon
Brown	5	Walmart Pharmacy, 2440 N. Lebanon St., Lebanon
Carroll	8	Brown County Local Health Dept. (at Brown County Music Center)
Carroll	4	Carroll County Local Health Department
Carroll	4	The Family Health Clinic of Carroll County

[CLICK HERE FOR A LIST OF COVID-19 VACCINATING CLINICS](#)

# COVID-19 VACCINE

## Latest Updates & Resources



March 3, 2021

### New age group eligible: **50+**

Hoosiers age **50 and older** can now make an appointment at [OurShot.IN.gov](https://ourshot.in.gov). Be sure to read our updated [eligibility guidelines](#).

### Vaccinating those at highest risk

Initial groups of patients identified by their healthcare provider as highest risk of severe illness from COVID-19 will receive a unique registration link or may call 211 after receiving the notification:

- Active dialysis patients
- Sick cell disease patients
- Down syndrome
- Post-solid organ transplant
- People who are actively in treatment (chemotherapy, radiation, surgery) for cancer now or in the last three months, or with active primary lung cancer or active hematologic cancers (lymphoma, leukemia and multiple myeloma)

*Other eligible groups will be added as more vaccine becomes available.*

### NEW J & J Vaccine receives authorization

Distribution has begun for Johnson & Johnson's vaccine and will be allocated proportional to the state's population. Johnson & Johnson is a single dose vaccine that is up to 85% effective at preventing serious illness from COVID-19. It is a viral vector vaccine that helps teach our bodies how to fight infection. Read the U.S. FDA's [list of FAQs](#) or [information](#) on viral vector vaccines from the Centers for Disease Control and Prevention.



To date, **608,638** Hoosiers have been fully vaccinated!



### The Greatest Spectacle in Vaccination

**Indianapolis Motor Speedway is hosting a drive-through, mass vaccination clinic 8 a.m. to 10 p.m. March 5 – 7.**

[Eligible Hoosiers](#) need to make an appointment and [search for the ZIP code 46222](#) to pull up this clinic, or call 211.

#### Additional mass vaccination clinics:

**8 a.m. – 8 p.m., March 12 – 13**

Ivy Tech Community College  
8204 County Road 311,  
Sellersburg  
(Search by ZIP code 47172 [here](#))

**8 a.m. to 8 p.m., March 26 – 27**

University of Notre Dame,  
Compton Family Ice Arena  
100 Compton Family Ice Arena,  
Notre Dame 46556  
(Search by ZIP code 46556 [here](#))

*Note: You must be an Indiana resident and show proof of age. That can be a photo ID or other document, such as a utility bill, bank statement, lease agreement or record from your doctor with your address and date of birth.*

### Age lowered to **18+** for enrolled veterans

**at the Richard L. Roudebush VA Medical Center in Indianapolis**

Effective March 1, if you are an enrolled veteran patient 18 or older, call 317-988-4899 (Mon – Fri, 8am – 4pm) to schedule an appointment. **NO walk-in appointments allowed.** Veterans who are not enrolled or do not currently receive care at VA can visit VA's [eligibility page](#) to learn more.

### Helpful Resources

- Register for a vaccination appointment and stay up to date at [OurShot.IN.gov](https://ourshot.in.gov) (Chrome or Firefox). Call Indiana 211 or 1-866-211-9966 if you have difficulty registering online.
- Ask a question on our [FAQ page](#). It's updated daily.
- [Learn about V-Safe](#) COVID-19 after-vaccination health checker.
- [Indiana Areas on Aging](#) and AARP offices are assisting seniors make their vaccine appointments.
- Report any adverse effects from any vaccine to the [Vaccine Adverse Effect Reporting System \(VAERS\)](#).



# APMA VIRTUAL CODING SEMINAR: APRIL 10

The Virtual Coding Seminar, presented by APMA, is a half-day online seminar providing attendees with a deep dive into foot- and ankle-specific coding issues. Jeffrey D. Lehrman, DPM, and Sarah Abshier, DPM, will instruct participants on a variety of topics to enhance processes and better serve patients.

The virtual seminar will be held Saturday, April 10, 2021 from 10:00 a.m. to 3:00 p.m. EDT. CE points will be available in the following areas:

- Doctors of Podiatric Medicine: 4.0 CECH
- Podiatric Medical Assistants: Seeking 4.0 CME
- AAPC Certified Professional Coders: 4.0 CEU

[Click here](#) to learn more and to register. 🦶

*APMA is approved by the Council on Podiatric Medical Education as a provider of continuing education in podiatric medicine. This activity has been approved for a maximum of 4.0 continuing education contact hours. Note: You must attend the live event to earn your CECH. Check with your state licensing board to confirm approval of these sessions toward your license renewal.*



## AAPPM VIRTUAL CONFERENCE: CODING & COMPLIANCE SATURDAY, APRIL 17, 2021

Visit [aappm.org](http://aappm.org) for more  
information and to register.



# STUDENT RECRUITMENT TOOL KIT

In March 2018, the APMA House of Delegates approved resolution 9-18, which directed the association to devote significant funding and staff resources to student recruitment. APMA conducted a massive market research effort among current and prospective students and developed a [strategic recruitment plan](#) based on the outcomes of that research. APMA is spearheading a profession-wide recruitment effort, Step Into Podiatry, designed to attract more and better-qualified students to our schools.

APMA's research confirmed what many in the profession had long suspected: Firsthand exposure to podiatry plays a significant role in generating interest in careers in podiatric medicine. Students who have received care from a podiatrist or who shadow a podiatrist are more likely to apply to podiatric medical school. On this page, members and other stakeholders will find a wealth of resources

## STEP INTO PODIATRY

designed to help them take an active role in recruiting students and promoting the profession. Here are a few things you can do to promote podiatry.

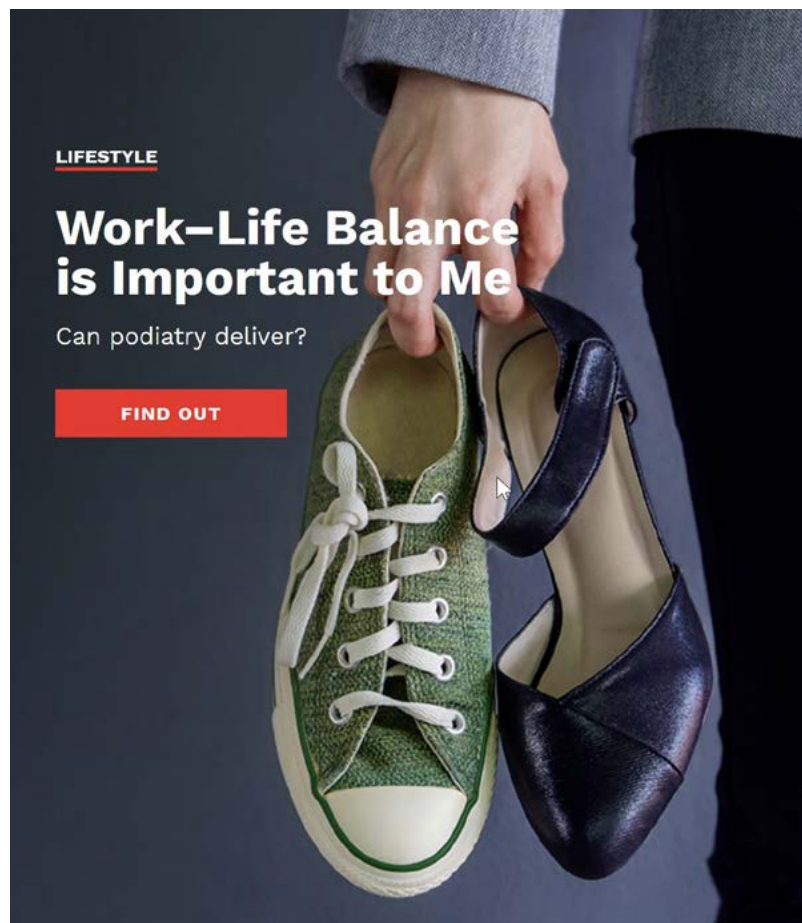
### BECOME A MENTOR IN THE MENTOR NETWORK

No one is better suited to talk about the benefits of a career in podiatry than current podiatrists. APMA is asking you to do your part for student recruitment by joining the Mentor Network. You can now opt-in through your account profile on [APMA.org](#), making the process easier than ever:

- Log in to [APMA.org](#)
- Click "My Account" on the top of the screen
- Click "Update Contact and Mentor Info"
- Scroll down; select the box next to "Become a Podiatry Mentor"
- Click "Save"

### PROMOTING STUDENT RECRUITMENT ON SOCIAL MEDIA

Social media is critical to student recruitment, as it's where our recruitment messaging has the potential to reach a number of



prospective students interested in a career in medicine. And who better to share that messaging than current podiatric medical students, and members of the profession! Organic social media content highlighting the profession already exists, and helping to share it goes a long way in featuring our current members of the profession while appealing to our ideal target audience.

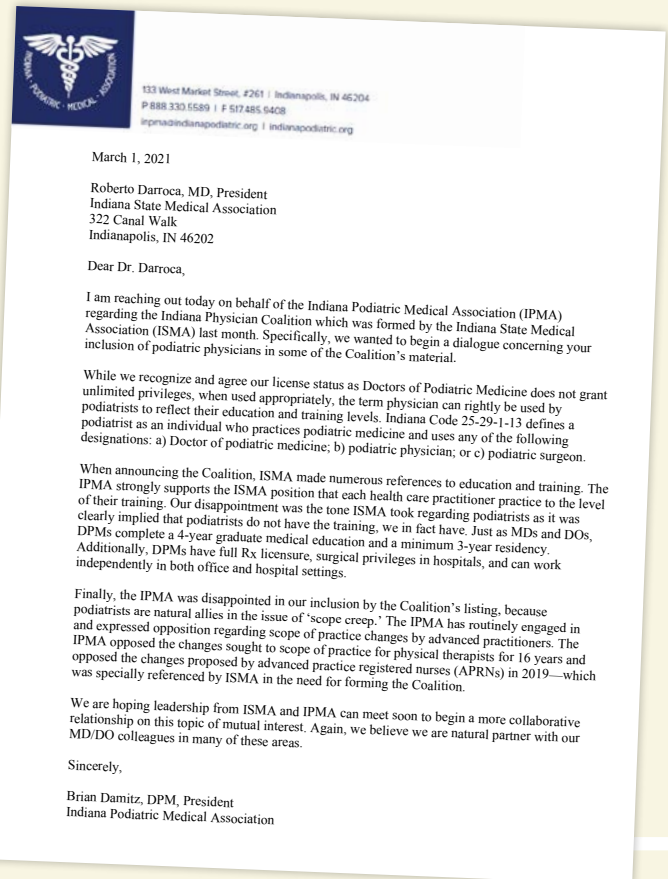
- [Social media best practices for student recruitment](#)
- [Sample recruitment posts for social media - February 2021](#)
- [Sample recruitment posts for social media - March 2021](#)

[Click here](#) to look at all of APMA's student recruitment advertising & marketing campaign material. 🦶

## IPMA RESPONDS TO INDIANA STATE MEDICAL ASSOCIATION'S NEW INDIANA PHYSICIAN COALITION

In January, the Indiana State Medical Association (ISMA) launched a new alliance of medical associations and specialty societies known as the Indiana Physician Coalition. The group was launched in part from a grant awarded by the AMA to help fund scope of practice partnerships at the state level. The purpose of the coalition was to advocate against an inappropriate scope expansion.

The material released by the new coalition makes specific reference to podiatrists and categorizes podiatrists in an “advanced practitioner” category. IPMA leadership strongly disagrees with ISMA's categorization based on the education and training of podiatrists. The IPMA has sent a response letter to the ISMA President and has requested a meeting to further discuss this issue and how to better collaborate between the MD, DO, and DPM communities. 🏥



## CMS RE-OPENS THE MIPS COVID-19 HARDSHIP EXCEPTION APPLICATION FOR 2020

On February 25, CMS announced it was applying an automatic exception to certain MIPS-eligible clinicians in addition to those who previously identified as located in a CMS-designated region affected by an extreme and uncontrollable event (such as a Federal Emergency Management Agency [FEMA]-designated major disaster) during the 2020 MIPS performance period. CMS is also re-opening the MIPS 2020 performance year COVID-19 Extreme and Uncontrollable Circumstances (EUC) exception application for certain MIPS eligible clinicians. Read the [CMS Fact Sheet](#).

If you are not a clinician in a CMS-designated region affected by an extreme and uncontrollable event, use the below chart to identify if you are eligible for either an automatic application

of the EUC, if you need to proactively submit an application, or if you are ineligible for this MIPS 2020 COVID-19 EUC. For clinicians/groups eligible for the automatic exception, nothing else needs to be done if you would like to receive a neutral payment adjustment. For groups and virtual groups that need to submit an application, you must do so by March 31, 2021.

If you are submitting data through the APMA MIPS App, and have questions related to this exception, please contact APMA Registry Manager Richard Schwarz at [RLSchwarz@apma.org](mailto:RLSchwarz@apma.org). 🏥

For more information about this re-opening and extension of this EUC exception related to COVID-19 for the 2020 performance year, visit <https://qpp.cms.gov/resources/covid19>.

	Individual Clinicians	Groups	Virtual Groups
No data submitted	Automatic exception	Automatic exception	<b>Must</b> proactively submit an EUC application for all 4 performance categories by 3.31.21
Data already submitted for single performance category (quality measures submitted via Medicare Part B claims)	Automatic exception	<b>Must</b> proactively submit an EUC application for all 4 performance categories by 3.31.21	<b>Must</b> proactively submit an EUC application for all 4 performance categories by 3.31.21
Data already submitted for 2 or 3 performance categories	<b>Ineligible</b> to apply for the COVID-19 MIPS EUC, you will only be scored on performance categories for which data is submitted	<b>Ineligible</b> to apply for the COVID-19 MIPS EUC, you will only be scored on performance categories for which data is submitted	<b>Ineligible</b> to apply for the COVID-19 MIPS EUC, you will only be scored on performance categories for which data is submitted

# APMA, OTHER SOCIETIES, MEET WITH ANTHEM TO ADDRESS TROUBLESOME GUIDELINES

Representatives from APMA, AAOS, ACFAS, and AOFAS (specialty societies) held a virtual meeting with Anthem and its subsidiary AIM on March 3 to discuss our concerns with their [Clinical Appropriateness Guidelines for the Musculoskeletal Program, Appropriate Use Criteria: Small Joint Surgery](#) (Clinical Guidelines) and provide our suggested changes.

In October 2020, APMA along with the other specialty societies [wrote to Anthem/AIM](#) detailing our concerns. APMA also formed an internal workgroup led by APMA Trustee Lawrence Santi, DPM, that is tasked with reviewing the guidelines and coordinating efforts with the other stakeholders.

On the call, representatives from the specialty societies addressed the problems with Anthem/AIM's process for obtaining prior authorizations including requesting a peer-to-peer review, and AIM acknowledged these problems and assured us that they resolved them.

Anthem/AIM agreed to address some of our concerns with their ankle reconstructions guidelines. Specifically, ankle arthroplasties, including implants, will now be added to the clinical guidelines if the arthrodesis has failed and

there is now a non- or mal-union. The patient must be symptomatic. Progressive peripheral neuropathy and immune-suppressed patients will be recommended to be removed from the exclusions for ankle arthroplasties if the patients are symptomatic.

Anthem/AIM partially addressed our concerns with the implant arthroplasty for hallux limitus/rigidus. It was recommended that the double-stemmed silastic implants (Swanson design) be removed from the exclusions. Cemented implants, however, will continue to remain under the exclusions. Anthem/AIM stated that more literature is needed from the specialty societies regarding the efficacy of other types of implants such as hemi-implants and implants made of other materials.

Anthem/AIM and the specialty societies agreed to future meetings to address concerns with Anthem/AIM's guidelines for percutaneous osteotomies and intramedullary fixation and hammertoe repairs, and in the interim, Anthem/AIM will consider written comments.

APMA's Anthem Workgroup is scheduled to meet again later this month to plan our strategy going forward. 🏥

## INDIANA PASSES BILL PROTECTING BUSINESSES FROM COVID-19 LAWSUITS

Legislation was signed by Governor Holcomb that would provide civil liability protections for businesses from COVID-related lawsuits. Senate Bill 1 in Indiana provides businesses with a reasonable level of civil immunity from alleged damages arising from COVID-19 except in cases in which "clear and convincing evidence" can illustrate gross negligence or willful or wanton misconduct.

The bill seeks to protect businesses that have followed public safety guidelines to keep employees, customers, and vendors safe from the virus. The protections apply to a wide range of different business types and organizations, and special protections are afforded to businesses that have produced PPE throughout the pandemic. Senate Bill 1 is retroactive to March 1, 2020. 🏥





# GETTING MORE DONE IN LESS TIME

BY PETER WISHNIE, DPM

There have been loads of books, articles, podcasts, and blogs that talk about time management. The reason for this is because it is a huge problem. However, it seems there are so many people who get so much done while there are others who constantly complain about the lack of time.

There are many reasons for this but for the sake of this tip, I just want to talk about The Law of Priorities. This can be found in John Maxwell's book, "The 21 Irrefutable Laws of Leadership."

In this law, Maxwell discusses prioritizing. To prioritize means to think ahead. This means you will need to plan your days, weeks, and months. You even should plan your daily hours. I understand that it seems this constant planning will make you rigid and some want to be free spirits. The only way you can be free, both physically and mentally, is to plan your days. You might feel you can do what you want and when you want, but trust me, if you have things hanging over your head, you will not be mentally free. This is when anxiety and possible depression can come about.

When you prioritize you want to ask yourself three things:

1. What is required? What must you do that no one else can do? Obviously, it is seeing and treating the patients. It can also be making videos for your social media or website. You can have someone else do that for you, but no one can explain plantar fasciitis better than you and making your own video will help develop relationships with your patients.

2. What gives the greatest return? Work in your areas of greatest strength. Make a list of items that you do not like to do or things you don't get around doing, but you must do. A lot of times, this is the same thing. If you don't like to do something, you will usually put it off. Some of these items will probably be filling out forms, chart documentation, and maybe training your staff. Whatever it is, try to get most of them off the list by finding people who can do these things for you. The goal here is to manage your energy. When you have increased energy, you are more productive, develop better relationships, and make more money. So, don't worry that you might have to hire a scribe or add technology to your business. It will be well worth it.
3. What brings the greatest reward? Where does your passion lie? Maybe you love wound care but people say there is no money in it? The same goes for surgery. Here is the true secret to making more money. Always do what you love to do. If you love it, you will make money doing it. Life is short. Enjoy it and stay passionate.

Like I said, there has been so much written on time management. I could write all day, but I am sure you don't have the time to read it all. No matter how you manage your time, it all starts with knowing your priorities. 🦋

*Dr. Peter Wishnie is the founder of Family Foot and Ankle Specialists in New Jersey. He is the author of "The Podiatry Practice Business Solution". He is also the Director of Physician Programs and Practice Management Consultant for Top Practices Virtual Practice Management institute. You can find out more about Top Practices Management Programs at [www.TopPractices.com](http://www.TopPractices.com).*





# ONLINE LIMITED PODIATRIC RADIOGRAPHY EDUCATIONAL PROGRAM

The Indiana State Department of Health (ISDH) requires all podiatric medical assistants who take x-rays to be licensed as a limited podiatric radiographer.

The IPMA wants to remind the membership of its new limited podiatric radiography program that meets the ISDH requirements and is designed to instruct the podiatry assistant in the safe and effective use of x-rays in the podiatric practice.

Content includes:

- History of the x-ray
- Risks and safety measures associated with radiography
- Image production and film development
- Principles of CT Scan, MRI, and Bone Scan
- Anatomy of the foot and ankle
- Positioning and x-ray machine placement

## PROGRAM STRUCTURE

The program consists of four online content modules, each with a final exam, one attestation module, a student manual, and an x-ray log. A Certifying Physician must guide the applicant in the clinical portion of the program and the completion of the x-ray log. The podiatry assistant must document competency by demonstrating the proper performance of 60 x-ray views in the podiatrist's office.

At the successful conclusion of the program, the applicant will have the proficiency and skill necessary to obtain the limited podiatric radiography license and will receive a Certificate of Completion. The Certificate, the completed Application for Proficiency Certification for Limited Radiographer and signed x-ray log should be sent to the IPMA. 🏠

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[To learn more about this program or to register, click here.](#)

## IPMA MEMBERSHIP RENEWAL

As a reminder, membership dues invoices for the 2020-2021 membership year were mailed in the fall. Due to the economic impact of COVID-19, the APMA and IPMA have decided to offer a dues reduction to help offset the economic hardship you have all faced. APMA members renewing for 2020-2021 receive a 25% dues reduction of full dues rate. This is the equivalent of complimentary dues for the first quarter of the fiscal year. Additionally, your IPMA Board of Directors understands and appreciates the difficulties many practices are experiencing as board members are experiencing the same challenges. The IPMA Board is making a 25% dues reduction available to members should they need it as a result of COVID-19. The Board is respectfully requesting members pay the full dues if financially feasible.

Please also note that the first payment due date was adjusted from June 1 to September 1 for this current membership year.

If you have any questions or to request an additional copy of your IPMA/APMA membership dues invoice, please contact the [IPMA office](#). Thank you for continued support of IPMA and the podiatric profession in Indiana.

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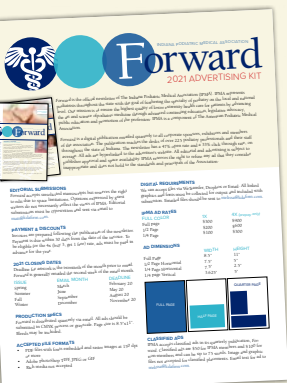
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## ADVERTISING WITH THE IPMA



*Forward* is the official publication emailed quarterly to all corporate sponsors, exhibitors and members of IPMA. The publication reaches the desks of over 225 podiatry professionals and their staff throughout the state of Indiana. It also boasts an open rate of 43%, on average. Plus, all ads are hyperlinked to the advertiser's website.

Contact Melissa Travis for an ad kit today!

### 2021 CLOSING DATES

ISSUE	EMAIL MONTH	AD DEADLINE
Summer	June	May 20
Fall	September	August 20
Winter	December	November 20

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