I have come to the conclusion that politics are too serious a matter to be left to the politicians.
— Charles De Gaulle, President of France (1890 - 1970)

This month, I want to discuss a very important issue that will affect (and is already affecting) many Texas physicians. This issue is the current change in Medicare-Medicaid Dual Eligibility rules that were put into effect this year in place of reducing the Medicaid/CHIP physician fee schedule.

“Dual-eligible” patients are generally elderly and/or very ill and require frequent medical visits and multiple medications. Until January of this year, Medicare paid 80% of a doctor’s visit for these patients. The state Medicaid program then paid the Medicare deductible. Under the new changes, Texas Medicaid will no longer pay the Medicare part B deductible (approx. $140) if the payment for the service exceeds Medicaid’s allowable. Medicaid will no longer pay the physician the 20% coinsurance remaining after Medicare picks up the 80%, as it used to in the past.

The Legislature has estimated that these changes will help save the state up to $1 billion, but they have not addressed the ramifications of this change on patients and physicians. Many physicians here and around the state, in primarily poor inner city, rural and border communities, are already feeling the pinch of the changes. Some physicians have not yet received any Medicare payments in 2012. If these physicians are not paid appropriately, they will have 2 options: 1) close their practices to Medicare/Medicaid patients or 2) continue to see these patients, but eventually acknowledge that their practice will fail.

As stated in the letter to the editor, if physicians go out of business or close their doors to the most needy patients, these patients will end up sicker and knocking on the doors of our hospitals.

Please read the attached Letter to the Editor by Dr. Foote and read more about this issue on the TMA website, www.texmed.org. Call your legislator and sign