

THE REST OF YOUR LIFE

After Cancer, a Second Act

After Dr. Joshua Grossman underwent his second neck dissection for papillary carcinoma of the thyroid gland in 1986, he believed he might not have much time to live. So, at age 45, he decided to audition for a role in a Johnson City (Tenn.) Community Theater production of Irving Berlin's "Annie Get Your Gun."

"I'd always wanted to do community theater," said Dr. Grossman, a Johnson City-based internist. "I got a kick in my fanny from my cancer, and I figured, well, I'll get in a couple of shows, and then I'll croak. I actually thought I was dying."

He was cast as Chief Sitting Bull and went on not only to beat his cancer, but also to earn roles in several subsequent productions staged by area theaters, including Gonzales in Tennessee Williams's "Summer and Smoke," Padre Perez in "Man of La Mancha," and Mario in "Ballroom." All the while serving as a full Colonel in the U.S. Army Medical Corps, from which he retired in 2000.

"When I did 'Annie Get Your Gun,' the night work was being taken over by the interns and residents," recalled Dr. Grossman, who spent most of his career working at a local Veterans Affairs medical center. "The workload was more than 40 hours a week, but it wasn't quite as heavy as a practicing physician's, which is one of the reasons why I was in the VA: so I could spend a little more time with my wife and kids."

In addition to being cast in roles, he has



Dr. Joshua Grossman, with his wife Mickey (far left) and Proud Annie Mystery Theater cast members, began acting after undergoing treatment for papillary carcinoma of the thyroid.

served as a theater usher, worked the lighting and other technical jobs, and helped build and disassemble sets. "I also tidied up the theater so much that one of our late community theater actors and volunteer set builders called me the garbage man," Dr. Grossman said. "I did more than empty our garbage. I would sift through it because angle brackets and other things were mistakenly thrown in there that could be reused in future productions. The community theater has a strict budget. None of the theater members are paid. Only guest musicians and guest directors, who may

drive long distances, are paid."

Along the way he learned to respect the talents of master playwrights such as Tennessee Williams. He and his fellow cast members held frequent discussions in the green room about what message Williams was trying to convey in his plays. "We could never reach consensus as to what he was trying to get at," he said.

He also learned the challenges of sticking to a character. His role as Gonzalez in "Summer and Smoke" called for his character to forcefully grab the shirt of a young doctor, who was being played by a man who had been one of Dr. Grossman's former Cub Scouts when he was a scout leader. "It took many hours of blocking rehearsal before I could do that," said Dr. Grossman, whose most recent role was that of Joey "the Lump" Marzetti in a fall 2007 dinner theater production of "Funeral for a Gangster," penned by playwright Eileen Moushey.

Dr. Grossman said that his brush with

cancer also motivated him to take up another avocation. Prior to starting his undergraduate studies at Johns Hopkins University, Baltimore, he had appeared as a ballroom dancer for 1 week on "The Buddy Dean Show," a Baltimore-based teen dance television program that featured appearances by the Cordettes, Johnny Mathis, and Frankie Avalon, but Western square dancing had always intrigued him. So he and his wife, Mickey, enrolled in classes at a local university to further develop their ballroom dancing proficiency and to learn Western square dancing. They continue to build on their skills by attending Western square dancing events.

Looking back, Dr. Grossman credits his brush with cancer for motivating him to pursue the avocations he'd long wished to take a crack at. "It's fair to say that my cancer gave me a fairly swift kick in my bottom and got me out into my community," he said.

By Doug Brunk, San Diego Bureau

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\$260M in Medicaid Substance Abuse Funds Left Untouched

BY ALICIA AULT

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WASHINGTON — More than \$260 million in Medicaid funds set aside to pay physicians to conduct brief screening and interventions for substance abuse are practically untouched, according to federal experts in the White House Office of National Drug Control Policy.

In January, the Centers for Medicare and Medicaid Services designated the matching funds for states that adopt Medicaid codes for substance abuse Screening and Brief Intervention (SBI). But so far, only nine states (Iowa, Indiana, Maine, Maryland, Minnesota, Montana, Oklahoma, Oregon, and Virginia) have begun using the codes, Bertha Madras, Ph.D., deputy director for demand reduction at the White House Office of National Drug Control Policy (ONDCP), said at a meeting to discuss the program. Wisconsin and Washington are reimbursing for SBI in limited circumstances.

The CMS established G codes for SBI in 2006 and followed with H codes. Last year, the American Medical Association established current procedural terminology codes for SBI; they were published for the first time in the 2008 CPT manual.

For CPT 99408, which involves screening and a brief intervention of 15-30 minutes, the reimbursement is \$33.41. For SBI longer than 30 minutes (CPT 99409), the rate is

\$65.51. (See box.) Dr. Madras did not say how much money has been reimbursed by Medicaid and Medicare, but indicated that the codes are vastly underused.

The ONDCP has been seeking ways to encourage more physicians to conduct SBIs. At the meeting, Dr. Madras cited recently released figures from the Substance Abuse and Mental Health Services Administration showing that 19.9 million people abuse drugs in the United States, but that 93% of those who are addicted are not aware that they have a problem and do not seek treatment.

Dr. Madras said that so far, about 700,000 people have been screened. Almost a quarter were positive for alcohol or drug use; 70% needed a brief intervention and about 16% were referred to treatment, she said. According to self-reports 6 months later, at least a third of those who received treatment said their health status improved.

Citing several recent developments, she said that screening is gaining currency.

At the beginning of 2008, the Federal Employees Health Benefits Plan, which covers 8 million employees and dependents, notified its carriers that the CPT codes for screening and intervention were added and available for use.

In June, the Department of Veterans Affairs directed all VA medical centers to routinely screen for alcohol use and provide brief interventions.

Screening for alcohol intoxication is re-

quired at level I and II trauma centers; patients with positive screens should be offered interventions, according to criteria adopted by the American College of Surgeons' Committee on Trauma. The committee decided to institute SBI because alcohol use is the single most important risk factor associated with serious injury, said Dr. John Fildes, who represented the ACS committee at the meeting.

Health insurer Aetna Inc. is aiming to have more of its participating physicians of-

fer screening and brief interventions, said Dr. Hyong Un, national medical director for behavioral health at the company. Dr. Un said Aetna has the systems in place to pay claims with the SBI codes and that its behavioral health specialists will work with physicians. Aetna will offer training to physicians and office managers, with a goal of starting more widespread screening.

Physicians can also find more information about screening and brief intervention at www.sbirt.samhsa.gov.

Coding for SBI Reimbursement

| Payer | Code | Description | Fee Schedule |
|----------------------|-----------|--|--------------|
| Commercial insurance | CPT 99408 | Alcohol and/or substance abuse structured screening and brief intervention services; 15-30 minutes | \$33.41 |
| | CPT 99409 | Alcohol and/or substance abuse structured screening and brief intervention services; > 30 minutes | \$65.51 |
| Medicare | G0396 | Alcohol and/or substance abuse structured screening and brief intervention services; 15-30 minutes | \$29.42 |
| | G0397 | Alcohol and/or substance abuse structured screening and brief intervention services; > 30 minutes | \$57.69 |
| Medicaid | H0049 | Alcohol and/or drug screening | \$24.00 |
| | H0050 | Alcohol and/or drug service, brief intervention, per 15 minutes | \$48.00 |

Source: Substance Abuse and Mental Health Services Administration