



Governor's Corner

Dear Members:

During this time of health care reform, the College and the Chapter have never been busier. The Office of the Health Insurance Commissioner has mandated an increase in spend of premium dollars from the present 5.5 percent to 10.5 percent over the next five years to primary care. The Patient Centered Medical Home will be a means to achieve the increase in payment. The PCMH summit is just one of many planned activities of the Rhode Island Chapter. Please plan on attending this conference.

We are interested in expanding the Executive Council. If you are a Member/Fellow/or Master of the College, I encourage you to participate in this chapter activity. We meet twice yearly to discuss various issues and plan activities for our Chapter. It is a good opportunity to connect with others in the medical community and help shape College policy.

The Chapter would like to expand the Health and Public Policy, Hospitalist, Laureate and Chapter Awards committees. If you are interested please contact me or Nancy Baker-Hobin.

The Council of Young Physicians is also looking for members and is planning a meeting soon. Please let **Dr. Sarita Warriar, Nancy Baker-Hobin** or me know of your interest.

The Chapter won a seventh straight Chapter Excellence Award from the College. The Chapter finances are in the best shape in years. We have been able to run a profitable Annual meeting, controlling expenses, increase in membership and will realize profit from the Patient Centered Medical Home Summit. We need the funds to conduct future programs.

Rebekah Gardner, MD gave the Council an update on currentcare (the health information exchange for Rhode Island). They are interested in enrolling thousands of patients through physician offices and offer payment for the enrollment work. They have signed up over 23,000 patients to date. For more information check info@currentcareri.com or Dr. Gardner at rgardner@riqio.sdps.org.

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Congratulations to the Fellows elected from July 1, 2008 to September 30, 2009:

Joseph J. Campbell, MD, FACP- Lincoln
Pamela A. Harrop, MD, FACP- Bristol
Anthony J. Kazlauskas, MD, FACP-Warwick
Raymond B. Maxim, MD, FACP-Warwick
Suzanne McLaughlin, MD, FACP-Providence
Edward Stulik, MD, FACP-East Providence

Sybil Cineas, MD, FACP- Providence
Peter A. Hollmann, MD, FACP-Cranston
Michael B. Macko, MD, FACP-Providence
Paul F. McKenney, MD, FACP-Warwick
Mark I. Schwager, MD, FACP-Providence
Richard B. Turner, MD, FACP-Providence

Finally congratulations to **Yul Ejnes, MD, FACP** for being elected Chair-Elect Designate of the American College of Physicians Board of Regents. I cannot think of a more worthy person who reflects well on our state and ACP Chapter. With **Michelle Cyr, MD, FACP** as a member of the Board of Regents, we have significant leadership from our small state.

BOARD OF GOVERNOR'S FALL MEETING

The Board of Governor's met recently in Scottsdale, Arizona with a robust College agenda. The overarching theme was implementing and reviewing the goals of the College, in the form of policy development, membership service, patient care and political advocacy.

The meeting is divided into Resolutions discussion, the finances of the College and political advocacy. Here are a few highlights from the meeting:

Resolutions are created by members, College committees, Chapter Councils or Governors for adoption by the College as policy. Once submitted, there is an involved and iterative process of research, modification and final vote by the Board of Governors at its Fall or Spring meetings. The Board of Governor's is advisory to the Board of Regents, which has fiduciary responsibility for the College. The Board of Regents has the final vote on any resolutions.

Here are some important Resolutions that have been adopted or sent to the Board of Regents for adoption which are of general interest to the membership.

- **Resolutions submitted in the Fall 2008 meeting that have become College Policy:**

- A. RESOLVED, that the Board of Regents seeks federal policy to direct the Center for Medicare and Medicaid Services (CMS) to begin immediately, and complete by January 1, 2010, rebalancing the disparity between reimbursement for evaluation and management (E & M) codes and procedural codes.
- B. RESOLVED, that the Board of Regents seeks legislation requiring Durable Medical Equipment (DME) companies to provide patients, for whom DME has been prescribed, with information on costs as well as purchase and rental options; and be it further RESOLVED, that the Board of Regents seeks legislation requiring DME companies to supply patients with equipment prescribed by their physician and to obtain approval from the prescribing physician if a substitution is required.
- C RESOLVED, that the Board of Regents seeks federal legislation or regulation that requires Medicare coverage for home infusion of antibiotics, including medication, administration and monitoring services.
- D RESOLVED, that the Board of Regents
 - a. Clarify the process whereby sub-specialists will function within the medical home.
 - b. Advocating for payment for services described by existing Current Procedural Terminology (CPT) codes that support care coordination, e.g. telephone services, for which Medicare and other payers do not cover;
 - c. Modeling possible payment scenarios involving extensive care coordination and co-management of patients;
 - d. Developing a specialist recognition tool by working with the National Committee for Quality Assurance (NCQA) and the subspecialties;
 - e. Attempting to include sub-specialists in a PCMH test project(s); and
 - f. Encouraging that the evaluation of PCMH test projects assess the impact on sub-specialists.
- E RESOLVED, that the Board of Regents adopts policy to support community rating for health insurance as the most appropriate model for commercial health insurance and opposes experience-rating in selling health insurance; and be it further RESOLVED, that the Board of Regents advocates for community insurance rating in both national and state legislative forums, and encourages other medical organizations to join ACP in promoting legislation that requires community rating of health insurance policies.

- **Dispositions of Resolutions from the Fall 2009 meeting sent to the Board of Regents:**

- a. RESOLVE that the Board of Regents promotes patient and physician education campaigns, develops policy and supports legislation that addresses the prevention, diagnosis and treatment of diet-related diseases and makes a healthy diet more familiar to, more desired by, more available to and affordable for the U.S. population.

- b. RESOLVE that the Board of Regents supports restrictions that no minor should be permitted to use tanning devices, support restrictions that a Surgeon General's warning should be placed publicly in all tanning establishments which states at the very least that ultraviolet radiation can cause skin cancer and support restrictions that no facility should advertise the use of any UVA or UVB tanning device using wording such as "safe", "safe tanning", no harmful rays, "no adverse effects" or similar wording or concept.
- c. RESOLVE that the Board of Regents implement steps to eliminate the use of the term "provider" and "prescriber" in lieu of "physician" or "clinician" if used to refer to physicians or other health care professionals who provide direct care to patients, in all publications, advertising for courses and communications it sponsors alone, or in affiliation with other organizations.
- d. RESOLVE that the Board of Regents updates the College's position paper on tobacco and considers endorsement of the "smoke free movie" campaign.
- e. Reaffirmation of ACP policy with regard to current health care reform strategies that: while a proposed "commission on best practices" may supply useful information to practicing physicians, they cannot dictate what is the only "standard of care" approach to treatment in a specific individual patient and that ultimately there must be an allowance for physicians to treat their patients as individuals based on scientific evidence with recognizable differences for age, patient choice, multiplicity of illnesses and psychological considerations.
- f. RESOLVE that the Board of Regents will continue to oppose the dissemination of physician efficiency rankings that fail to prominently disclose to the recipient the complete formula, including the use of the physician's cost to the health insurance plan, through which rankings were achieved.

Call for spring 2010 Board of Governors resolutions

The deadline for submitting new resolutions to be heard at the April 2010 Board of Governors Meeting is Friday, December 18, 2009. As discussed above, initiating a resolution provides ACP members an opportunity to focus attention at the ACP national level on a particular issue or topic that concerns them. Members must submit resolutions to their Governor, **Nitin S. Damle, MD, FACP** at nsdamle@scim.necoxmail.com

FINANCES OF THE COLLEGE

The 2009-2010 Budget was presented to the Governors in the context of delivery of quality care, reforming the U.S. healthcare delivery system, excellence in education and making the ACP a unifier of the internal medicine community. The budget was built with these general themes in mind:

- a. Improved access to care and universal coverage
- b. Promote effective models of health care delivery like the Patient Centered Medical Home.
- c. Increase and retain membership as the lifeblood of the organization.
- d. Develop and deliver innovative educational resources in all fields of internal medicine.

The budget allows for a three percent decrease in revenue but a six percent decrease in expenses, primarily through a freezing of staff salaries and benefits.

The budget will decrease capital expenditures by 1.7 million dollars and will decrease its bond debt to a more comfortable bond to debt ratio.

The major savings will occur in the form of salary and benefits, Governance expense, printing and distribution and real estate expense.

New sources of revenue will include affinity partnerships, grants, education and practice management services

The financial future of the College has many unknowns and risks including, decline in industry support, a volatile financial market, decline in dues revenues and increase competition for College services.

The challenges include:

1. Increasing revenues
2. Controlling expenditures
3. Nurturing innovation and creativity in this tight budgetary environment
4. Allocating resources
5. Balancing the budget to meet the fiduciary responsibility of the College.

POLITICAL ADVOCACY

Health Care Reform was discussed at length. There are four principles that the College considers "top priorities":

- Provide all Americans with access to an affordable health insurance plan that does not exclude or discriminate against those with pre-existing conditions.
- Create incentives to reverse a growing and catastrophic shortage of general internists and other primary care physicians.
- End the annual cycle of Medicare doctor payment cuts due to the flawed Sustainable Growth Rate (SGR) formula that will create enormous access problems for beneficiaries.
- Reform the medical liability system and the enormous costs associated with frivolous lawsuits and defensive medicine.

The details of the ACP positions can be found at www.acponline.org/advocacy. The next meeting of the Board of Governors is in April 2010 in Toronto Canada.

ACP PUBLICATIONS COMMITTEE UPDATE

As the Vice Chairman of the Publications Committee I offer the following report:

- **Dr. Christine Laine** is the new Editor in Chief of the Annals of Internal Medicine. Her vision for the journal includes more practice defining studies, reviews in primary care medicine, hospital and subspecialty medicine. Also more content that is engaging and provocative, though not directly related to practice. She envisions an evolving website, customizable electronic content in various portable formats and more interaction between readers and authors in the form of real time CME quizzes, platforms for reader interaction and "suggestion box" for future topics.
- The Annals of Internal Medicine, The Hospitalist and ACP Internist along with MKSAP are the flagship publications of the College. These journals have significant challenges with a decrease in revenue from pharmaceutical and classified advertising. New sources of revenue are being explored, including the introduction of non-medical advertising to the pages of the journals.
- The committee discussed the introduction of an "In the Hospital" article series, similar to the "In the Clinic" series. There was also discussion about more video content for the Annals.
- The Patient Centered Medical Home Summit is being held on November 21st 2009. Register today.

EXECUTIVE COUNCIL UPDATE

- **The EXECUTIVE COUNCIL met on October 21, 2009. Highlights of the meeting are as follows:**
 - a. The Council is interested in recruiting new members. Please let me or **Nancy Baker-Hobin** know of your interest. You may be a member, Fellow or Master to participate in the Council. It is an exciting time to be involved locally and nationally in shaping the health care picture.
 - b. The Chapter won a "Chapter Excellence Award" from national ACP for the seventh straight year.
 - c. Leadership Days will be held on May 18-19th 2010. This is wonderful opportunity to get involved in the poli-

- tics of health care. We had a contingent of three members attend last year and we anticipate five to six attendees this year. Please let me or Nancy know of your interest. The Chapter will cover your trip costs.
- d. The ACP RI Chapter Annual meeting will be on May 13th 2010. We have an exciting program including topics in hospital medicine, Laureate Awards, Associate presentations, and a keynote address.
 - e. The Chapter finances are in better shape than in years. We achieved this through one meeting per year, controlling expenses, increasing membership and attendance at the Annual meeting and sponsorship of the PCMH Summit.
 - f. The Chapter will again present four Senior Medical Resident Awards to third year Residents with an interest in Primary care at the Annual meeting.
 - g. The Council of Young Physicians has a robust agenda and is Chaired by **Dr. Sarita Warriier**. Please contact Dr. Warriier or **Nancy Baker-Hobin** if you would like to participate. They are planning a breakfast meeting in the fall 2009.
 - h. **Tom Bledsoe, MD, FACP** as Chairman of the Primary Care Advisory Committee gave the council a report on the framework for increased funding to primary care in Rhode Island. As you may know the Office of the Health Insurance Commissioner has mandated an increase from 5.5 to 10.5 percent of premium dollars allocated to primary care. This will mean an additional 120 million dollars over five years. The structure and requirements were well outlined and further information can be obtained on the OHIC web site. Please contact Dr. Bledsoe or me, with other questions.

2009 ACP GOVERNOR ELECTION

The ballots for the current Governors-elect election have been mailed. Members can vote via telephone at 1 800 218 4026 (US only), online (<http://www.vres.us/acp.html>) or mail. You will need your mailed ballot for your ACP Number and PIN in order to make a vote.

Below are the bios and vision statements of the candidates that are running in this election. The deadline for submitting ballots is November 26, 2009 at 12 midnight CT. Please be sure to vote!

Thomas A. Bledsoe

YEAR/PLACE OF BIRTH: 1960, Dubuque, Iowa;

EDUCATION: Dartmouth College AB 1982, Biology, Dartmouth Medical School 1984-1986 Brown University Program in Medicine MD, 1986-1988;

POST DOCTORAL TRAINING: Primary Care Internal Medicine, 1988-1991 Chief Medical Resident, 1991-1992, Rhode Island Hospital/Brown University;

CERTIFICATION: Internal Medicine;

PRESENT POSITION: Primary Care Physician, University Medicine Foundation; Clinical Associate Professor of Medicine, Alpert Medical School of Brown University; teaching associate, Center for Biomedical Ethics, Alpert Medical School;

ACP ACTIVITIES: Member since 1991, Fellow 7/2000;

HOSPITAL/COMMUNITY SERVICE: Chair, Rhode Island Hospital Ethics Committee; Chair and ACP representative, Primary Care Physician Advisory Committee (PCPAC), Rhode Island Department of Health; co-chair, Chronic Care Sustainability Initiative (Patient-Centered Medical Home pilot project) steering committee; past Chair and coordinator, Schwartz Rounds, Rhode Island Hospital; educator, ethics seminars for medical students in core clerkships; preceptor, residents' clinic, Rhode Island Hospital; attending physician, teaching service, Rhode Island Hospital; Scoutmaster, Troop IV Barrington Boy Scouts; Warden, S. Stephen's Episcopal Church, Providence;

AREAS OF PROFESSIONAL INTEREST/EXPERTISE: Primary Care, Medical Ethics, Medical Education, Professionalism, Medical Informatics and Information Technology, end-of-life care

Vision Statement

After years of watching the current health care "system" fail in so many ways, fail the profession, fail the patients, fail the payers and fail the purchasers, I believe the time for change has arrived. Directing this change will require knowledge, creativity and commitment. The American College of Physicians is well-poised to play a pivotal role in health care reform over the coming months and years. A deep commitment to medical professionalism from medical school to the end of one's career, flexibility to try new models of care and a firm commitment to the welfare of our patients and our society ground that commitment. As medical professionals, our involvement in the current health care reform discussion for the purpose of patient welfare and the welfare of the profession is our responsibility and our privilege. The days of finger-pointing are over and the days of cooperative problem-solving are ahead. Let's go!

Kelly A. McGarry

YEAR/PLACE OF BIRTH: 1965, Providence, RI;

EDUCATION: 1983–1987 – Undergraduate – Brown University, 1988–1992 – Yale University Medical School;

POST DOCTORAL TRAINING: (General Internal Medicine) 1992 – 1993 – Internship – Rhode Island Hospital/Brown Medical School, 1993 – 1995 – Residency – Rhode Island Hospital/Brown Medical School, 1995 – 1996 – Chief Medical Resident – Rhode Island Hospital/Brown Medical School; CERTIFICATION: 1996 – Board Certified in Internal Medicine, 2006 – Board Re-certified in Internal Medicine;

PRESENT POSITION: Associate Professor of Medicine – The Warren Alpert Medical School of Brown University, Program Director – General Internal Medicine Residency/The Warren Alpert Medical School of Brown University;

ACP ACTIVITIES: 2007 – Moderator, American College of Physicians (ACP) Associates' Forum Competition. ACP Regional Conference, Warwick, RI, June 13, 2007. 2006 – present – Mentor, American College of Physicians (ACP) Mentoring Program for medical students, physicians in training and early career physicians, 2004 – present – Abstract Reviewer, National Abstract Board, 2000 – present – "Getting Through the Match." Workshop leader with Michele G. Cyr, M.D. and Dominick Tamaro, M.D., American College of Physicians – American Society of Internal Medicine Annual Sessions;

HOSPITAL/COMMUNITY SERVICE: 2002 – present – Volunteer for Rhode Island Free Clinic, Providence, RI, 2004 – Participant in the Brown Medical School Physician Shadowing Course for high school students, 2003, 2005, 2007 – Participant in Ride Far – 5 day, 500-mile bike ride benefiting local, national and international HIV/AIDS organization;

OTHER APPOINTMENTS: 1998 National Advisory Committee for Removing the Barriers, The Mautner Project, Mary Helen Mautner Project for Lesbians with Cancer, 1998 – 2002 Board Member, Rhode Island Medical Women's Association, 1998 – 2002 Medical Consultant, Professional Advisory Committee, Capitol Hill Home Care Network, Inc., 2001 – present Graduate Medical Education Committee, Brown Medical School, 2001 – 2003 Board Member, University Medicine Foundation, 2002 – 2003 Member of Advisory Group, Office of Women in Medicine, Brown Medical School, 2005 – 2008 Education Director for the National Center of Excellence in Women's Health, Brown University and Women & Infants Hospital, 2009 Board Member, University Medicine Foundation;

AREAS OF PROFESSIONAL INTEREST/EXPERTISE: Medical Education, Women's Health, specifically in osteoporosis, substance abuse and lesbian health care.

Vision Statement

I will consider my time as Governor of the ACP a success if I am able to accomplish the following: 1) I hope to continue the push for the Patient-Centered Medical Home. Through the appropriate recognition of the primary care provider as central to a patient's well-being through prevention and early recognition of illness and avoidance of costly hospitalizations, primary care be reassigned its rightful position in medicine and primary care as a career option will be revitalized. 2) I hope to engender more involvement in the local and national ACP

amongst both the medical students and the medical residents in the Brown training programs. I feel that my position as a program director and my involvement with the medical students puts me in position to accomplish this goal. I bring to my time in the ACP energy and enthusiasm for the tasks before me. Thank you for your consideration.

PLAN TO ATTEND UPCOMING EVENTS

PATIENT CENTERED MEDICAL HOME SUMMIT

NOVEMBER 21ST 2009, Crowne Plaza, Warwick RI

REGISTER TODAY- http://www.acponline.org/about_acp/chapters/ri/news_meet.htm

INTERNAL MEDICINE 2010

April 22-24, 2009, Toronto Convention Center, Toronto, ON

REGISTER TODAY -

http://www.acponline.org/meetings/internal_medicine/2010/attendees/

ANNUAL CHAPTER SCIENTIFIC MEETING

May 13th 2010, Crowne Plaza, Warwick RI

ACP LEADERSHIP DAY

May 18-19th 2010, Washington DC