

# ***New Approaches to Common Conditions***

*Maryland ACP Chapter  
Meeting 2026*



## Good news and happenings!

Gold Level for third year in a row

Membership growing, despite challenges

- 2199 members, nearly 25% are FACP!

New state advocacy efforts and chairs Drs. Kravet, Sisson, Deepak, Tarasco, Sood

- State Advocacy Day March 12 in Annapolis
- Leadership Day May 12 and 13 in Washington DC

IM 2025 in San Francisco, April 16-18, 2026

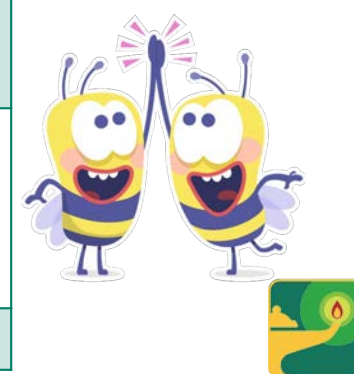
- Master: Dr. Steven Kravet
- Many new FACPs; Speakers from MD: Dr. Tim Niessen and Dr. Mahir Patel
- Chapter reception Thursday, April 17th



## New FACP's over the past year

Christopher Mulla	Sumanth Bandaru	Fern Jeffries	Gino Freeman	William Queale	Nicholaus Christian
Durotimi Ayodeji	Chaitanya Mishra	Lolita Nidadavolu	Thomas Laskow	Antoinette Newman	Sama Alreddawi
Adrien Janvier	Danielle Baek	Gregory Lucas	Aaron Charles	Michael Serlin	Elizabeth Menachery
Mahyar Toofantabrizi	Charu Maheshwary	Corina Nava Suarez	Farhan Shah	Iris Leviner	Jennie Law
Claudiu Austin	Lakshmi Meenakshisundaram	Farah Hasin	Sheena Moorthy	Hasan Imanli	Lauren Berninger

FACP  
info



## Leaders in our chapter: Say hello and get engaged!

Program Committee:  
Drs. Sisson and  
Afrookteh

Membership: Dr. Julie  
Chen

Early Career Physicians:  
Drs. Sood and Bukhari

Volunteerism  
Committee: Drs.  
Gummadi and Saini

Health and Public Policy:  
Drs. Sisson, Kravet,  
Terasco, Sood

Women in Medicine:  
Drs. Muganlinskaya and  
Thomas

CRAB: Drs. Paudel,  
Butani, and Jung

DEI: Dr. Adkins

Hospitalists: Dr. Ponor

IMG: Drs. Sood and  
Bajwa

Awards: Dr. Chow

Wellness: Dr. Devkota

Students: T. Gifix, A.  
Kumar, D. Ryder, R Chen,  
U Chowdhury, A Singh, A  
Forsberg, K Gandhi

WISE: Drs. Newman,  
Williams, and Brennan

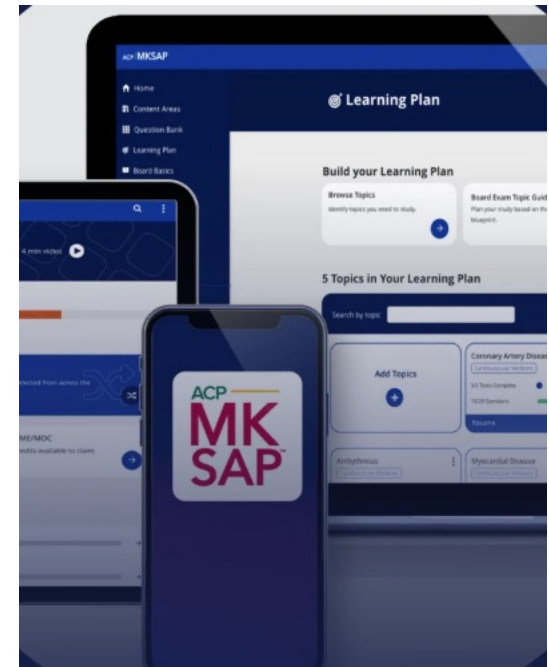
Officers: Treasurer Dr.  
Steve Kravet; VP: Dr.  
Aseem Sood; Governor  
elect: Dr. J Deepak;  
Secretary: Dr. S Kuehl



## Continuous Professional Learning Resources

### ACP MKSAP: All-digital version of the Medical Knowledge Self-Assessment Program (MKSAP)

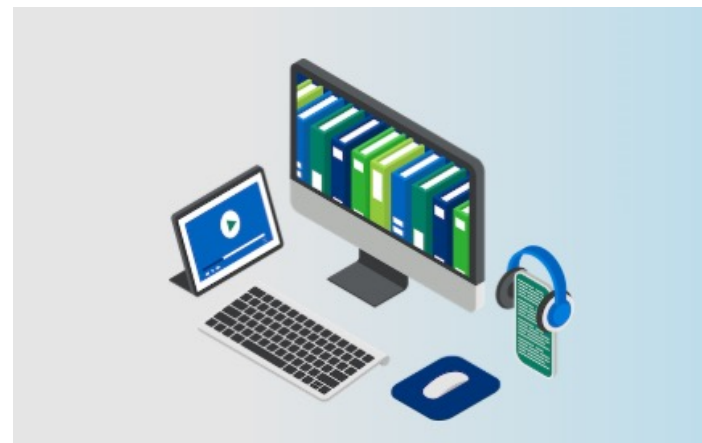
- 16 content sections for expanded coverage of the breadth of internal medicine
- A single, robust, continually updated question bank with over 2,000 multiple choice questions at launch
- Enhanced custom quiz features including preset quiz templates or filters to individualize quizzes to meet your specific learning needs
- More multimedia enhancements to reinforce key concepts and address a variety of learning styles
- Confirmation of Relevant Education (CORE) Questions that challenge you with additional questions, opportunities to earn achievement badges and a CORE certificate



## Online Learning Center

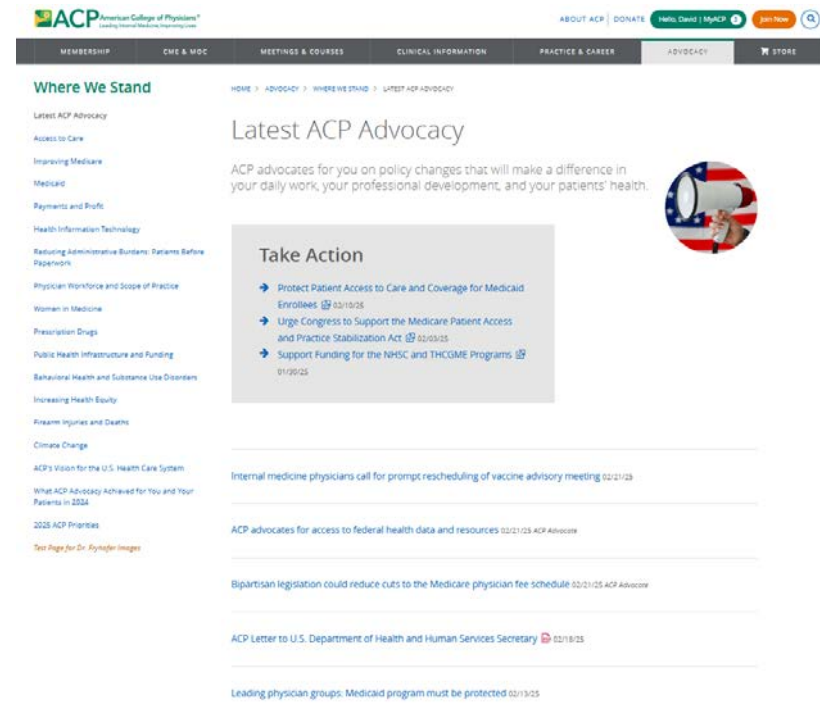
Hundreds of curated CME and MOC activities including journal articles, podcasts, videos, and interactive multimedia.

- **Continuous Glucose Monitoring (CGM) modules** – Two-part series offers tips for integrating CGM into clinical practice, including how to select the right CGM device based on patient needs and medication use
- **New version of ACP's Intimate Partner Violence program**
- **Obesity Management Curriculum** - Newly updated content including videos, cases, and practice questions to help you assist patients with managing obesity
- **Online Interactive High Value Care (HVC) Case Modules** - Four high value care case modules featuring two to three brief interactive cases that can help you practice individualized, high-value, patient-centered medicine.
- **Promoting Health Equity Through Excellence in Diagnostic Decision Making** - A three-part learning series offers practical strategies clinicians can use to mitigate the effects of unconscious biases, enhance diagnostic decision making, and improve patient outcomes.



## ACP Advocacy Activities: New Section on Latest ACP Advocacy

- ACP advocates for you on policy changes that will make a difference in your daily work, your professional development, and your patients' health
- For the latest advocacy efforts from ACP, visit our new one-stop collection featuring articles, statements, and ways you can take action on various campaigns.



The screenshot shows the ACP website's 'Latest ACP Advocacy' page. The header includes the ACP logo and navigation links for 'MEMBERSHIP', 'CME & WOC', 'MEETINGS & COURSES', 'CLINICAL INFORMATION', 'PRACTICE & CAREER', 'ADVOCACY', and 'STORE'. The main content area is titled 'Where We Stand' and lists various advocacy topics such as 'Latest ACP Advocacy', 'Access to Care', 'Improving Medicare', 'Medicare', 'Payments and Profit', 'Health Information Technology', 'Reducing Administrative Burdens: Patients Before Paperwork', 'Physician Workforce and Scope of Practice', 'Women in Medicine', 'Prescription Drugs', 'Public Health Infrastructure and Funding', 'Behavioral Health and Substance Use Disorders', 'Increasing Health Equity', 'Firearm Injuries and Deaths', and 'Climate Change'. A 'Take Action' section highlights three key initiatives: 'Protect Patient Access to Care and Coverage for Medicaid Enrollees' (02/15/25), 'Urge Congress to Support the Medicare Patient Access and Practice Stabilization Act' (02/03/25), and 'Support Funding for the NHC and THCGME Programs' (01/29/25). Below this, a list of recent advocacy articles is displayed, including 'Internal medicine physicians call for prompt rescheduling of vaccine advisory meeting' (02/21/25), 'ACP advocates for access to federal health data and resources' (02/21/25 ACP Advocate), 'Bipartisan legislation could reduce cuts to the Medicare physician fee schedule' (02/21/25 ACP Advocate), 'ACP Letter to U.S. Department of Health and Human Services Secretary' (02/18/25), and 'Leading physician groups: Medicaid program must be protected' (02/13/25).



# Strategically Using ACP's Organizational Voice

- Leading advocacy efforts on vaccine-related issues
- Taking Legal Action
- Speaking out against pulling vaccine funding, ending vaccine requirements, turmoil/disruption at CDC
- Emphasizing importance of evidence-based process and recommendations
- Stressing impact on patient/public health

## American College of Physicians Calls for Removal of Secretary Kennedy at HHS

Statement attributable to:  
 Jason M. Goldman, MD, MACP  
 President, American College of Physicians

WASHINGTON September 10, 2025— The American College of Physicians (ACP), representing 162,000 internal medicine physicians, calls on President Trump and Congress to replace Robert F. Kennedy, Jr. as Secretary of the Department of Health and Human Services (HHS) to protect public health. Secretary Kennedy's actions have undermined and destabilized our public health infrastructure, shown a blatant disregard for decades of evidence-based, proven science, and have spread dangerous medical misinformation, sowing chaos and confusion and replaced with

## Leading Medical Professional Societies, Patient Sue HHS, Robert F. Kennedy, Jr. for Unlawful, Unilateral Vaccine Changes

AAP, ACP, APHA, IDSA, MPHA, and SMFM Join Together to Stop Assault on Public Health.

BOSTON – July 7, 2025 – Today, the American Academy of Pediatrics (AAP), American College of Physicians (ACP), American Public Health Association (APHA), Infectious Diseases Society of America (IDSA), Massachusetts Public Health Alliance (MPHA), Society for Maternal-Fetal Medicine (SMFM), and a pregnant physician, filed suit in *American Academy of Pediatrics v. Robert F. Kennedy, Jr.* in the U.S. District Court for the District of Massachusetts to defend vaccine policy, and to put an end to the Secretary's assault on science, public health and evidence-based medicine.

Plaintiffs in the case are suing the U.S. Department of Health and Human Services (HHS) and Secretary Kennedy for acting arbitrarily and capriciously when he unilaterally changed Covid-19 vaccine recommendations for children and pregnant people. Secretary Kennedy has also unjustly dismissed 17 members of the Centers for Disease Control and Prevention's (CDC) Advisory Committee on Immunization Practices (ACIP) and appointed replacements who have historically espoused anti-vaccine viewpoints. This committee has proceeded to undermine the science behind vaccine recommendations. The lawsuit asks for preliminary and permanent injunctions to enjoin Secretary Kennedy's rescissions of Covid vaccine recommendations and a declaratory judgment pronouncing the change in recommendations as unlawful.

## Update to Medical Societies Lawsuit Against HHS, Secretary Kennedy for Unlawful, Unilateral Vaccine Changes

The statement below is issued by the American Academy of Family Physicians, the American College of Obstetricians and Gynecologists, the American College of Physicians Association, and the American Osteopathic Association. The updated complaint filed in July to defend vaccine policy and put an end to the assault on science, public health, and evidence-based medicine. The updated complaint asks the court to require Secretary Kennedy to reconstitute the ACIP with all new members in good faith, in accordance with the law, and to assure that ACIP members were not appointed based on credentials or expertise, and failed to capture a range of perspectives such that the committee is "fairly balanced" and not "inappropriately influenced" by the appointing official. Our organizations, representing over 500,000 physicians and medical students, are disappointed in Secretary Kennedy's decision to halt most federal investment in mRNA vaccine research. This act stifles scientific research and our ability to react swiftly to future pandemics and public health emergencies—putting millions of Americans at risk. Sustained research funding is essential to developing the next generation of tools that protect Americans from infectious diseases.



June 20, 2025

The Honorable Bill Cassidy, M.D.  
 Chair  
 Senate Committee on Health,  
 Labor & Pensions (HELP)  
 Washington, DC 20510

The Honorable Brett Guthrie  
 Chair  
 House Committee on Energy & Commerce  
 Washington, DC 20515

Dear Chairs Cassidy and Guthrie and Ranking Members Sanders and Pallone,

On behalf of the American College of Physicians (ACP), I am writing to urge Congress to quickly pass bipartisan legislation to strengthen our country's public health by codifying the role of the Advisory Committee on Immunization Practices (ACIP) and to hold committee hearings to examine the recent actions taken by Robert F. Kennedy, Jr., the Secretary of the Department of Health and Human Services (HHS), regarding ACIP.

### Protect Evidence-based Vaccine Recommendations

Please urge your members of Congress to support legislation that would protect the scientific process for vaccine recommendations and coverage.

#### Background

On June 9, 2025, Secretary of Health and Human Services (HHS) Robert F. Kennedy, Jr. dismissed all 17 members of the Advisory Committee on Immunization Practices (ACIP), the scientific body responsible for advising the Centers for Disease Control and Prevention (CDC) on vaccine recommendations and coverage. In response, House Energy and Commerce Ranking Member Rep. Frank Pallone, Jr. (NJ-06) and Rep. Kim Schrier, M.D. (WA-08) introduced the Family Vaccine Protection Act, H.R. 3701, which would codify the role of ACIP in providing evidence-based vaccine recommendations and require the CDC Director and HHS Secretary adopt such recommendations. ACP has endorsed H.R. 3701 and [www.acponline.org](https://www.acponline.org).

Compose Your Message

• CC Recipients  
 • CC Requested

Please review the message content before sending and do not include any personal or confidential information.

Subject: [Empty]

Send Link

Message Body

As you contribute



For immediate release: August 7, 2025  
 Media contacts: AAFP: Julie Hirschhorn ([jhirschhorn@aafpu.org](mailto:jhirschhorn@aafpu.org))  
 AAP: Devin Mazzilli ([dmazzilli@aap.org](mailto:dmazzilli@aap.org))  
 ACOG: Kate Givons ([kate.givons@acog.org](mailto:kate.givons@acog.org))  
 ACP: Jacquelyn Blaser ([jblaser@acponline.org](mailto:jblaser@acponline.org))  
 AOA: Ernst Lamotte, Jr. ([elamotte@osteopathic.org](mailto:elamotte@osteopathic.org))

#### Statement from Leading Physician Groups on HHS Decision to Pull mRNA Vaccine

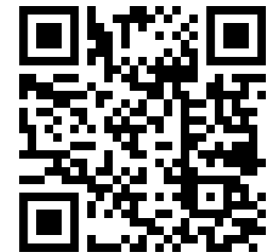
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## ACP Member-Exclusive Physician Peer Coaching Service

**For group and individual coaching services, opportunities to become a trained coach, eligibility requirements, and pricing.**

Why Choose ACP Peer Coaching:

- Physician coaches
- Personalized Approach
- Career Advancement
- Leadership Development
- Well-being and Professional Fulfillment
- Practice Improvement



# Additional Resources to Support Your Practice and Profession

## Resolve

**A financial member benefit created by ACP and Resolve, a physician compensation benchmarking and contract review company.**

A financial member benefit created by ACP and Resolve, a physician compensation benchmarking and contract review company.

**Member exclusive resources include:**

- A current and accurate internal medicine physician salary and contract details
- A Contract Scoreboard: To rate your contract against fellow internal medicine physicians who practice within your specialty and region
- Updates on current J-1 waiver cycle
- Several contract review and negotiation packages with expanded salary data

## Coding for Clinicians

**Coding for Clinicians is a 14-part module series developed for internal medicine physicians by internal medicine physicians.**

**The series includes:**

- Inpatient coding based on updated medical decision-making guidance
- New unified hospital inpatient/observation evaluation and management code set
- New time-based coding thresholds and prolonged service coding
- Changes to inpatient and outpatient consultation coding
- CME/MOC is available
- Guidance on outpatient coding, critical care, pediatric care, and more

## Financial Well-being Program

**The program includes tools and resources on:**

- Physician Compensation
- Saving for your future (webinar)
- Basic financial planning concepts – personal and retirement
- Paying off medical student loans
- Debt repayment calculator
- Budgeting and saving tools
- Tax strategies
- Women physicians’ financial preparedness: 2021 Report



## DynaMedex™

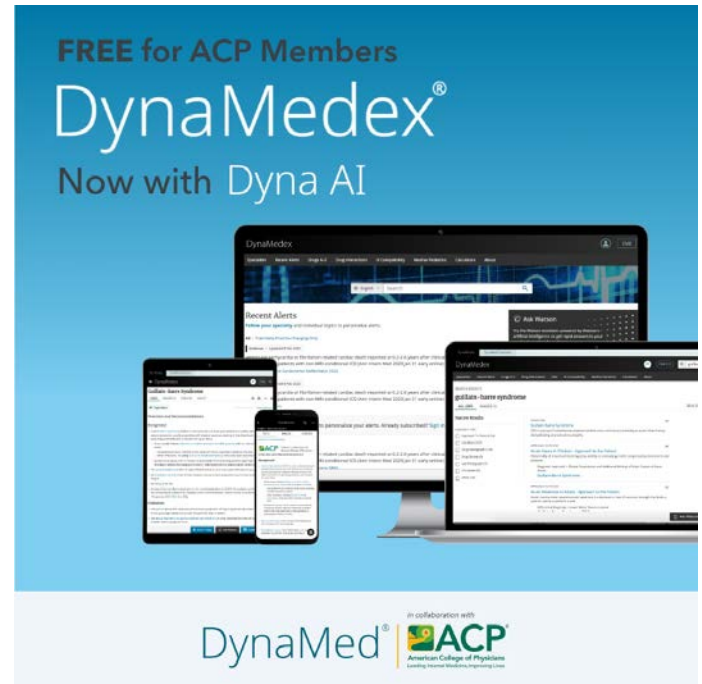
- DynaMed® is collaborating with ACP to provide ACP members free access to DynaMedex®—a powerful point-of-care tool that combines expert clinical content from DynaMed with comprehensive drug information from Micromedex®.

### New Assistant Tool - Dyna AI

- Now featuring Dyna AI, a cutting-edge artificial intelligence search tool, DynaMedex delivers fast, expert-curated, evidence-based answers to natural language queries

Content-sourced from DynaMedex including:

- Study summaries
- Clinical guidelines
- Expert commentary to guide you



# Register Now for Internal Medicine Meeting 2026: Mastering Medicine Together

- Internal Medicine Meeting 2026  
San Francisco, CA  
**April 16-18**  
Pre-Meeting Courses are **April 14-15**
- Refresh your clinical skills with unmatched hands-on learning opportunities
- Make inspiring, lifelong connections at receptions and networking events
- Earn CME credit and MOC points
- Learn from world-class faculty in the scientific and practice-related sessions



To find out more information on the 2026 meeting and to register now.



Join us!

State  
Advocacy Day  
in Annapolis:

- Thursday, March 12,  
8am-1pm



National  
Leadership  
Day in D.C.:

- Tuesday and  
Wednesday, May 12 & 13



### The Problem

Tobacco use remains the leading cause of preventable death and disease in the United States. In Maryland, approximately 17.8% of adult Medicaid enrollees smoke, around 290,000 individuals. Maryland spends an estimated \$619.7 million annually in related healthcare costs for Medicaid patients. Despite declining smoking rates overall, Medicaid enrollees have not experienced the same improvements and continue to smoke at almost twice the rate of the general population (17.8% compared to 9.6%). One reason for this lack of progress is that Maryland's Medical Assistance program has multiple administrative barriers that the state has already eliminated in other areas, such as in the state's employee health plan.

### The Solution

Proposed legislation would eliminate prior authorization and step therapy requirements for tobacco cessation treatments in Maryland's Medical Assistance program. Removing these administrative barriers would ensure Medicaid patients can access the effective medications and counseling services the program already covers, benefiting patient health and lowering the state's healthcare spending.

### Impact of Barriers

Prior authorization and step therapy reduce the likelihood of smokers accessing and completing cessation treatment. These administrative barriers make patients wait for additional approvals before beginning treatment or require patients to fail on less effective medications before trying more effective options. Removing such barriers is associated with higher treatment uptake and quit rates.

34 states and DC have already eliminated step therapy for tobacco cessation in Medicaid, while 24 states and DC have already eliminated prior authorization requirements.

### Cost Savings Potential

An independent evaluation of Massachusetts' tobacco cessation program found that by removing barriers and investing in tobacco cessation, the state achieved significant savings. **For every \$1 the state invested, it saved \$3.12.** When accounting for inflation, the state achieved net savings of \$575 per user. These savings reflected only near-term reductions in cardiovascular-related hospitalizations, not longer-term savings related to other health effects like cancers or COPD, so real cost savings could be even higher.

Maryland's tobacco cessation program would deliver substantial financial returns. If 15% of current Medicaid-covered smokers uptake cessation treatment, the state would spend approximately \$11.8 million while saving approximately \$25 million for net savings of \$13.2 million. If uptake rises to 25%, net savings for Maryland would be approximately \$22 million.

### Call to Action

Support legislation to remove barriers to tobacco cessation for Maryland Medicaid. This policy will save lives, reduce healthcare costs, promote health equity, and align Maryland with national best practices.

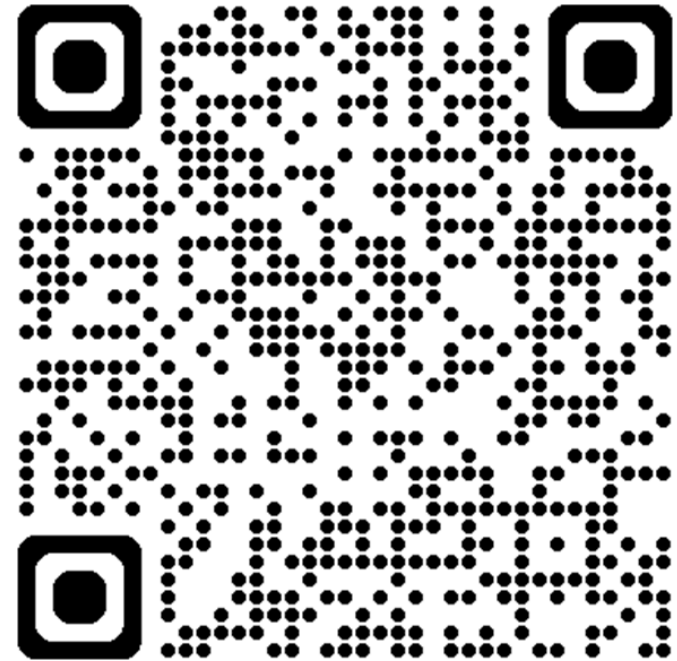
## 2026 state advocacy work

HB1264/SB798

Legislation has been introduced in Maryland that would require the Maryland Medical Assistance Program to cover individual and group counseling aimed at helping people quit smoking. The ACP Maryland chapter proposed and secured the support of Senator Clarence Lam and Delegate Terri Hill for the introduction of these bills and needs your help in getting it passed.

Please contact your Maryland state representatives and urge them to support SB 798 and HB 1264, Public Health - Maryland Medical Assistance Program - Tobacco Cessation.

[Learn More and Take Action Now!](#)



## We are collecting donations for the Helping Up Mission

### What they do

- “We're a community of hope – leading the fight against substance abuse, poverty, and homelessness in Greater Baltimore. Whether it's meeting someone's immediate needs for food and shelter or giving them ongoing care to rebuild their lives, we work to restore hearts and hope.”

### What we are collecting (see box at registration table)

- Shampoo
- Conditioner
- Body Wash
- Deodorant
- Towels and washcloths
- OTC medications (ibuprofen, allergy or cold medications, acetaminophen, hydrocortisone cream)



## PROGRAM COMMITTEE

- Ali J. Afrookteh, MD, MACP, Co-Chair
- Stephen D. Sisson, MD, MACP, Co-Chair
- Melvin Blanchard, MD, MACP
- Marie-Alberte Bousquet, MD, FACP
- Julie Chen, MD, FACP
- R. Dobbin Chow, MD, MBA, MACP
- Colleen Christmas, MD, FACP
- Manaki Deepak, MBBS, FACP
- Gino Freeman, MD, FACP
- Erica Johnson, MD, FACP
- Steven Kravet, MD, MACP
- Mary M. Newman, MD, MACP
- Asha M. Thomas, MD, FACP
- David S. Weisman, MD, FACP

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