



## Governor's Update

WEST VIRGINIA GOVERNOR,  
MICHAEL P. IANNETTI, MD, FACP

Dear Colleagues,

I hope everyone is enjoying the start of summer. I want to begin by reflecting on ACP's Internal Medicine Meeting 2026, held in San Francisco. It was a wonderful opportunity to learn, reconnect, and celebrate the strength of our internal medicine community. I especially enjoyed spending time with colleagues from across West Virginia and seeing our chapter so well represented on the national stage.

Congratulations to the Marshall University Doctors Dilemma team for advancing to the second round of the national competition. We are proud of your hard work, teamwork, and outstanding representation of our chapter. I also want to congratulate all of the medical students and residents who presented posters and scholarly work at the national meeting. Your dedication to scholarship reflects the very best of the future of internal medicine in West Virginia.

In addition, our chapter was represented on the national faculty stage by Laura Davisson, who delivered a Meet the Professor session on case-based management of obesity, further highlighting the expertise and leadership of West Virginia internists. Furthermore, I want to congratulate our members who were recognized with advancement to Fellowship in ACP (FACP). The FACP designation recognizes excellence in internal medicine, leadership, and service. For eligible members, I encourage you to consider applying for Fellowship as well.



*Pictures from ACP's Internal Medicine Meeting 2026*

Beyond the national meeting, I wanted to highlight ACP's Leadership Day in Washington, DC. Leadership Day remains one of ACP's most important advocacy efforts, giving internists, residents, and students the opportunity to speak directly with legislators and their staff about issues affecting our patients and our profession. A special thanks to Dr. Ryan McCarthy for his excellent work leading and representing the West Virginia Chapter during this important event.

Looking ahead, please mark your calendars for the 2026 West Virginia ACP Annual Scientific Meeting, October 22–24, 2026, at Stonewall Resort in Roanoke WV. This meeting remains one of the highlights of our chapter year, bringing together physicians, residents, and students from across the state for education, scholarship, and collegiality.

Finally, thank you for all that you do for your patients, learners, colleagues, and communities. I am grateful for the opportunity to serve alongside such a dedicated group of internists across West Virginia.

Sincerely,  
**Michael Iannetti, MD, FACP**

## Reflections from ACP Leadership Day in Washington DC

As part of this year's ACP Leadership Day in Washington, DC, members of the West Virginia Chapter had the opportunity to join colleagues from across the country in advocating for issues important to internal medicine, physicians, trainees, and patients. Below are reflections from members of the West Virginia delegation on their experience representing the chapter and participating in this important advocacy effort.

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*Ryan McCarthy, MD*

*Internal Medicine Residency Program Director, WVU School of Medicine*

It was tremendously exciting to participate in the American College of Physicians (ACP) Leadership Day 2026. As the largest medical specialty group in the US, ACP engages in an annual lobbying campaign to improve healthcare, support physicians, and promote science-based healthcare that is equitable. This year, our focus was on stabilizing payments to primary care physicians, ensuring freedom of choice for vaccines, and deferring student loan interest during residency.

I was honored to lead the West Virginia state delegation, which included Drs. Courtney Struthers; Abdul Muhsen Abdeen (fellow in critical care medicine, Marshall University); Efeturi Okorigba (PGY2 IM resident, Morgantown); and Laurentia Ogoli (MS4 student, Avalon University). Between us, we represented all levels of medical education from student to faculty!

ACP brought in top political intelligence from *National Journal*, and their briefings alone were worth the trip. Their analysis of the "threats to healthcare from every corner of the blogger sphere" was sobering and impactful, graphically showing the confluence of misinformation, bad actors, and agendas tearing apart public health. Our work is cut out for us, and technology is making it harder.

We were also addressed by Representatives Frank Pallone (D, NJ); Dr. Kelly Morrison (D, MN); and Dr. Raul Ruiz (D, CA) who shared his story of growing up in poverty in the Coachella Valley to currently representing this district and building its first community-based health clinic. We also met Senators Tim Kaine (D, VA) and Lisa Blunt Rochester (D, DE) at the PAC event, both of whom delivered personal stories of healthcare workers in their families and why everyone deserves access to affordable healthcare.



*Senator Lisa Blunt Rochester speaking to our PAC*

On Wednesday, over five hundred internal medicine doctors hit The Hill and, in our group, Courtney played tour guide, sharing details of the city with our colleagues as we walked between the Senate and House, pointing out famous locations and landmarks. We had appointments at the offices of Senators Justice and Capito, and Representatives Moore and Miller.



*West Virginia's ACP delegation with Rep. Carol Miller in her office.*

We were warmly received at each of our appointments, but Rep. Miller, who welcomed us onto her couch and sat and talked for forty-five minutes, wins the hospitality prize. Her common sense understanding of healthcare and her practical approach to many of West Virginia's problems were encouraging and left me hopeful that some of our problems can, in fact, be made better.

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*Efeturi Okorigba, MBBS*

*Resident PGY2, West Virginia University Internal Medicine, Morgantown*

ACP Leadership Day was a surreal, inspiring, and deeply gratifying experience, one that reminded me of why I chose this path in the first place. There was something powerful about being surrounded by physicians and trainees who shared the same commitment to patients, and the sense of camaraderie that came with it. Too often, the demands of clinical life keep us confined to the walls of our hospitals and clinics, heads down, focused on the patient in front of us and, at times, blaming the system for poor outcomes beyond our control. Leadership Day allowed me to break the status quo and advocate both effectively and systematically. It is indeed one thing to speak up for a single patient at the bedside; it is another thing entirely to stand up for thousands who will never know your name.

Advocacy, at its core, is not about politics; it is the covenant we hold with our communities, and a responsibility we carry far beyond the clinic.

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*Laurentia Ugoji*

*Medical Student MS4, Avalon University School Of Medicine*

When the topic is about divine opportunities, I'll take the mic and talk about God leading me to Leadership Day.

My heart couldn't hold in how surreal it felt to be a medical student in a room filled with Internal medicine physicians, residents, fellows, and other like-minded medical students from 49 states in the country. One idea that really stuck with me at the meeting was: if you find something you're really passionate and interested in doing, you'll always find a way, a how, and what to do. Being in this room, I see advocacy in health care not just as an act to hold the pillars of the system but a necessity to ensure that the core of what we uphold as physicians; providing the best care possible to patients isn't left to chance and time but an intentional effort to honor the principles and uphold the standards that make a difference behind the closed door of a doctor-patient encounter.

I've learned to see beyond just providing care but actively advocating for every person who has trusted us with a big part of their lives and their health. That for every individual, trusting our decisions would be for their good; we show up in and outside the four walls of a hospital, pushing for a better present, future assurance, and continuity of the expectations that they are seen and honored in every little way - using the words from Leadership Day "atomic advocacy."

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## 2026 WV Scientific Meeting - Registration is Open!



### Registration is now open for the 2026 West Virginia ACP Scientific Meeting!

Join us September 22–24, 2026, at beautiful Stonewall Resort in Roanoke, WV, for three days of learning, connection, and time away in a peaceful lakeside setting.

This annual meeting is a wonderful opportunity to step out of the everyday pace, hear from expert speakers, connect with colleagues, and enjoy a setting that makes the whole experience feel a little more refreshing.

We hope you'll make plans to join us for educational sessions and time together with your West Virginia ACP community.

[Visit our meeting hub to register](#)

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## Book Club

The **DC Chapter of ACP** invites you to **join Book Club** — a great opportunity to connect with colleagues, reflect together, and grow professionally and personally. Books selected for this year include:

- **September 16, 2026** – *Slow Productivity: The Lost Art of Accomplishment Without Burnout* by Cal Newport
- **December 16, 2026** – *Dopamine Nation: Finding Balance in the Age of Indulgence* by Anna Lembke, MD

[Learn More About Book Club Here](#) and sign up to receive invites to the discussions.

[Join Book Club](#)

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## Interested in ACP Fellowship?

ACP Fellowship is a peer-reviewed credential that recognizes excellence and ongoing dedication within the internal medicine profession. The FACP designation reflects a physician's commitment to their patients, communities, and continued professional growth. Fellowship also adds professional credibility and may support advancement, leadership opportunities, and career development within ACP and beyond.

[Learn more about ACP Fellowship and eligibility requirements](#)

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## ACP Resource - Mini But Mighty Skills

ACP offers a variety of short videos and multimedia resources designed to help physicians learn actionable skills in just 10–15 minutes. These resources are created to support learning needs and ongoing professional growth, with practical topics that can apply to systems, organizations, and individual practice. Whether you are an early career physician, mid-career clinician, or retired physician looking to stay engaged, ACP has resources available to support members at every stage of their professional journey.

[Learn More](#)

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## ACP Calls for Increased Review of Private Equity in Health Care to Protect Patients and Physicians

A new position paper from ACP, "Regulatory Framework for Private Equity and Corporatization in Health Care: A Position Paper from the American College of Physicians," published in *Annals of Internal Medicine*, says policymakers must establish stronger oversight of private equity investment in health care to protect patients and preserve physician autonomy. ACP examines the rapid growth of corporate investment in the health care sector and its implications for clinical independence, care quality, costs, and equity.

The paper recommends that policymakers establish safeguards ensuring physicians retain control of patient care and that profit-driven incentives do not override patient-centered priorities. ACP calls for greater transparency from private equity firms, including mandatory disclosure of patient

outcomes data, and urges regulatory oversight to prevent inappropriate self-referrals, excessive reliance on non-physician clinicians, and consolidation that reduces competition. It also recommends increased examination of investment practices that disproportionately affect vulnerable and underserved communities, and stronger enforcement of the False Claims Act against firms that engage in fraud or kickbacks.

ACP calls for enhanced oversight of private equity entities receiving federal program funding through Medicare and Medicaid and urges further research into how these investments affect enrollment, spending, and health equity. They also recommend examining whether private equity investment could support access in rural communities or advance value-based care models.

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## Healthcare Coalition for Firearm Injury Prevention Webinar: "Beyond Reinjury" The Value of HVIPs and How to Create One

The Healthcare Coalition for Firearm Injury Prevention (HCFIP) is hosting its quarterly webinar on **Tuesday, June 23rd, at 2:00 PM EST/1:00pm CST**. ACP is a founding member of HCFIP, a coalition of medical and public health professional organizations collaborating on non-partisan firearm injury prevention initiatives. This webinar will be a presentation from Fatimah Loren Dreier and Dr. Rochelle Dicker focused on the essential nature of long-term equitable care for victims of violence through Hospital Based Violence Intervention Programs (HVIPs) and how to start and sustain a HVIP. The webinar is open to all ACP members.

[Register Here](#)

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## New Position Paper from ACP Calls for Policy Changes to Make Telemedicine More Equitable and Effective

A new position paper from ACP, "Telemedicine Policy and Practice: A Position Paper from the American College of Physicians," published in *Annals of Internal Medicine*, says telemedicine can improve health equity and expand access to care, but meaningful policy changes are essential for lasting benefits. ACP issues recommendations for policymakers, regulators,

and health systems on strengthening telemedicine integration in ways that are equitable, evidence-based, and complementary to in-person care.

ACP recommends that telemedicine be integrated into hybrid care models based on patient needs and clinical appropriateness — reinforcing, not replacing, in-person care. Physicians should retain decision-making authority over whether telemedicine is clinically appropriate, and regulators should work with physicians to establish clear, evidence-based national standards.

ACP also urges policymakers to align reimbursement with clinical value, streamline interstate licensing pathways, maintain coverage for audio-only services when appropriate, and invest in the infrastructure needed to support equitable access, including broadband, device access, and digital literacy support.

Finally, ACP calls for more research on the operational and workforce implications of telemedicine to guide policies that protect physicians, sustain telemedicine integration, and strengthen the practice of medicine.

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## ACP Announces Next Executive Vice President and Chief Executive Officer

ACP is pleased to [announce](#) that LeRoi Hicks, MD, MPH, MACP has been appointed by the Board of Regents as the next Executive Vice President and Chief Executive Officer of ACP. The selection was made based on a national search and recommendations from a search committee appointed by the ACP Board of Regents. Dr. Hicks will assume the position on July 6, 2026. With this appointment, he becomes the first African American physician to serve as EVP and CEO of ACP. Dr. Hicks will succeed Darilyn Moyer, MD, MACP, ACP's current Executive Vice President and Chief Executive Officer, and the longest-serving female physician to lead a medical specialty society in the U.S.

A seasoned administrator and board-certified internal medicine physician, Dr. Hicks is currently President of ChristianaCare's Wilmington Campus, a major health care hub in Delaware, where he oversees the hospital's overall strategic vision, financial health and day-to-day operations. Dr. Hicks has built a national reputation for advancing equity in health care, with a strong focus on addressing health care disparities and the social determinants of health.

Prior to joining ChristianaCare, Dr. Hicks served as division chief of Hospital Medicine at the University of Massachusetts Chan Medical School. Dr. Hicks is a past president of the Society of General Internal Medicine (SGIM), the professional home for academic general internal medicine physicians.

Dr. Hicks graduated from Howard University in 1991 and earned his medical degree from the Indiana University School of Medicine. He completed his residency at Mount Auburn Hospital, where he served as chief resident.