



Governor's Update

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

Dear Colleagues,

I hope everyone is having a wonderful summer and has had the opportunity to spend some time with family and friends. As we look ahead to the fall, I'd like to share a few updates from the West Virginia Chapter of the American College of Physicians.

First, I hope you'll join us for the **West Virginia ACP Annual Scientific Meeting, October 22–24, 2026**, at beautiful Stonewall Resort. Our annual meeting is the highlight of the year for our chapter and a wonderful opportunity to reconnect with colleagues, earn CME, learn from outstanding speakers, and celebrate the impressive scholarly work of physicians, residents, fellows, and medical students from across West Virginia.

Registration, meeting information, chapter news, and important dates can all be found on our chapter website: [Visit WV ACP Website](#)

To make our Scientific Meeting a success, we also rely on the generosity of our members. We're looking for volunteers to judge abstracts, posters, and oral presentations. If you're interested in serving as a judge, I'd greatly appreciate your help. You can sign up here: [Judge Signup](#)

Another important part of our chapter is recognizing the accomplishments of our members. If you know someone who has made significant contributions in teaching, clinical care, leadership, research, advocacy, mentorship, quality improvement, community service, or another area of

excellence, please let me know so we can celebrate their accomplishments. You can reach me at michael.iannetti@vandaliahealth.org.

I also encourage those who are eligible to apply for **Fellowship in the American College of Physicians (FACP)**. Fellowship is an important recognition of your commitment to excellence in internal medicine and service to our profession. If you have questions about the application process, I'd be happy to help.

Finally, I encourage you to participate in ACP's **Grassroots Advocacy Campaign** by contacting your members of Congress in support of legislation that strengthens Medicare physician payment and our physician workforce. Every message helps amplify the voice of internal medicine while supporting our chapter in ACP's national advocacy challenge. ACP has made participation easy by providing sample emails, phone scripts, and other advocacy resources. Additional information was included in a recent email. If you have any questions, please contact ajensen@acponline.org.

Thank you for everything you do for your patients, your learners, and our profession. Whether you're mentoring trainees, volunteering your time, advocating for our profession, or joining us at Stonewall this fall, your involvement helps make our chapter stronger. It is truly an honor to serve as your Governor, and I look forward to seeing many of you in October.

Warm regards,

Michael P. Iannetti, MD, FACP
Governor, West Virginia Chapter
American College of Physicians

Join us in October - 2026 WV Scientific Meeting



Join us **October 22–24, 2026**, at beautiful **Stonewall Resort in Roanoke, WV**, for three days of learning, connection, and time with your West Virginia ACP community.

Enjoy expert speakers, engaging educational sessions, networking with colleagues, and the peaceful lakeside setting of Stonewall Resort. It's the perfect opportunity to step away from the everyday pace, expand your knowledge, and reconnect with colleagues.

Registration is now open! Visit the West Virginia ACP website for registration information, the meeting agenda, and details on the Abstract and Poster Competition..

We hope to see you there!

[WV Scientific Meeting information](#)

WV ACP Earns Gold Level of the 2026 Chapter Excellence Award



I am pleased to announce that our chapter is in receipt of the Gold Level of the 2026 Chapter Excellence Award! The award recognizes truly extraordinary chapters that surpass excellence in chapter management. We are in the company of 69 other outstanding chapters. In order to achieve the Gold Level of the Chapter Excellence Award, chapters must meet 20 Bronze criteria, 12 Silver criteria and a significant number of Gold level activities. Criteria include such activities as having a legislative action plan or agenda, holding a volunteerism/community service activity, holding multiple stand-alone meetings, having revenue sources outside of dues and meeting registration fees, implementing a strategic plan, implementing a formal recruitment and retention plan and measuring outcomes, conducting various activities for Medical Students, Residents and Early Career Physicians. I would like to extend a special thanks to those chapter members who assisted us in all of these endeavors! For their hard work and dedication, we received this award.

**Annals of Internal Medicine: Clinical Cases - Focus on
POCUS Call For Papers**

Annals of Internal Medicine: Clinical Cases invites submissions for a special issue dedicated to point-of-care ultrasound (POCUS) across the full spectrum of clinical care. As a rapidly evolving bedside tool, POCUS is increasingly integral to diagnosis, decision-making, and patient management in diverse clinical settings. We seek submissions that highlight how POCUS informs real-world clinical practice and contributes meaningfully to patient care.

This will be our first special issue focused on clinically relevant topics of interest to the readership of the journal.

Deadline: Oct 31, 2026

Targeted Publication: April 2027

[Read More](#)

Become an ACP Fellow (FACP®)

Fellowship in the American College of Physicians is a peer-reviewed and peer-supported credential that is a public reflection of excellence within the internal medicine profession. FACP signifies an ongoing dedication to the profession of internal medicine, the patients we care for, and the communities we serve.

Why FACP?

The FACP credential signifies professional credibility and helps enhance and advance your career, regardless of your career path as an internal medicine physician. It adds value to your CV, your promotion package, and your applications for career development opportunities. Fellowship in ACP makes you eligible for leadership positions in ACP at both the chapter and national level.

[Learn More & Apply!](#)

Get Involved: Advocacy in Action

Get Involved in Advocacy: Discover ways to make your voice heard on issues affecting internal medicine—from joining AIMn and taking action through

ACP's Legislative Action Center to exploring advocacy toolkits, Leadership Day, and ACP's work in the courts. **Explore ACP's advocacy resources and get involved today.**

[Learn More About Advocacy](#)

ACP Calls for Stronger Regulation of Dietary Supplements to Protect Public Health

A new position paper from ACP, "Modernizing the Regulatory Framework for Dietary Supplements: A Position Paper from the American College of Physicians," published in *Annals of Internal Medicine*, says policymakers must strengthen and modernize the regulation of dietary supplements to protect public health. ACP examines the rapid growth of supplement use and warns that, unlike drugs and food additives, supplements are not evaluated for safety before reaching the market, leaving patients vulnerable to mislabeled products, undisclosed ingredients, and harmful interactions with prescription medications.

There are as many as 100,000 dietary supplements available, and in 2025, the global dietary supplement market was estimated at \$209.5 billion. While some dietary supplements, primarily vitamins and minerals, are thoroughly tested for safety and efficacy and may help ensure the intake of essential nutrients, many others are not supported by strong scientific evidence. Skewed public perception of the safety of supplements and low rates of reporting their use to physicians and other health care professionals only contribute to making the public more at risk for severe adverse outcomes. The recommendations in ACP's paper address how improved regulations can address the problem from a public health perspective.

[Learn More](#)

Proposed Medicare Physician Fee Schedule for 2027 Contains Positive Provisions for Primary Care Physicians

The Centers for Medicare & Medicaid Services (CMS) issued the proposed 2027 Medicare Physician Fee Schedule, which includes several improvements for primary care but does not resolve the longstanding instability in Medicare physician payment.

“Our initial reaction is generally positive, but qualified,” said Brian Outland, ACP director of regulatory affairs. “CMS is clearly trying to better recognize the value of primary care, complex longitudinal care, behavioral health, advance care planning and participation in accountable care models. Those are all important priorities for ACP and our members.”

[Read More](#)

CMS Newsroom Updates

Amending the Indirect Hold Harmless Threshold of Health Care-Related Taxes Proposed Rule (CMS-2452-P)

The Centers for Medicare & Medicaid Services (CMS) issued a proposed rule to implement new statutory limits on health care-related taxes, also known as provider taxes, under the Working Families Tax Cut legislation. Effective October 1, 2026, the law establishes new indirect hold harmless thresholds generally based on taxes enacted and imposed as of July 4, 2025, with new thresholds for most permissible provider classes in Medicaid expansion states beginning October 1, 2027. The rule would define key terms, revise how CMS determines whether a tax was “enacted” and “imposed,” discontinue the 75/75 test that previously allowed some taxes above the threshold to remain permissible, recognize services of health insurers as a permissible tax class subject to CMS oversight, and require states to submit detailed tax data for threshold calculations and enforcement. CMS estimates the proposal would reduce federal expenditures by \$246 billion from 2026 through 2035 and says it is intended to strengthen Medicaid financial integrity. Comments are due September 21, 2026.

CMS News: CMS Announces Nationwide Expansion of Proven Joint Replacement Program

The Centers for Medicare & Medicaid Services (CMS) announced the nationwide expansion of the Comprehensive Care for Joint Replacement model, known as CJR-X, to improve coordination for Medicare patients undergoing hip, knee, and ankle replacement procedures. Beginning in January 2028, most hospitals paid under the Inpatient Prospective Payment System will be required to participate and will be accountable for Medicare spending associated with the surgery, hospitalization, and first 90 days of recovery. The expanded episode-based payment model is designed to encourage hospitals, physicians, and post-acute care providers to work together to improve outcomes, reduce avoidable complications and readmissions, and lower unnecessary costs while preserving patients' choice of providers.

FY 2027 Hospital Inpatient Prospective Payment System and Long-Term Care Hospital Prospective Payment System Final Rule (CMS-1849-F)

The Centers for Medicare & Medicaid Services (CMS) issued a final rule updating Medicare payment rates and policies for inpatient hospitals and long-term care hospitals for fiscal year 2027. The rule increases IPPS payment rates by 2.3% for hospitals that meet applicable quality-reporting and electronic health record requirements, with overall hospital payments expected to increase by approximately \$2.1 billion. It also expands the Comprehensive Care for Joint Replacement model nationwide beginning January 1, 2028, and includes updates related to quality programs, new medical technologies, organ-acquisition payment policies, health information technology standards, and other hospital reimbursement requirements.

Fiscal Year 2027 Hospice Wage Index and Payment Rate Update and Hospice Quality Reporting Program Requirements Final Rule (CMS-1851-F)

The Centers for Medicare & Medicaid Services (CMS) finalized updates to Medicare hospice payments and quality-reporting requirements for fiscal year 2027, including a 2.3% payment-rate increase that is estimated to raise hospice payments by approximately \$755 million. The rule requires hospices to provide all beneficiaries with an election-statement addendum explaining

which conditions, services, items, or drugs are considered unrelated to the terminal illness and are therefore not covered under the hospice benefit. CMS also updated the hospice aggregate payment cap, strengthened oversight of non-hospice spending, and finalized plans to identify hospices on Medicare Care Compare that fail to submit required quality data.

CMS Press Release and Fact Sheet Summaries – find all press releases and fact sheets here: <https://www.cms.gov/about-cms/contact/newsroom>

CDC HAN 532 Risk of Severe Arboviral Disease

The Centers for Disease Control and Prevention (CDC) is issuing this Health Alert Network (HAN) Health Advisory to share information and notify clinicians, public health authorities, and the public about the risk of severe arboviral neuroinvasive disease among patients who are receiving B cell-depleting or B cell-modulating medications, particularly anti-CD20 monoclonal antibodies (mAbs). Patients and their providers should be aware of this risk to help patients [protect themselves against the bites of mosquitoes and ticks](#), which can increase patients' risk of arboviral disease.

[Read Full Article](#)

Attorney Office Hours

The graphic features a white background with green and orange wavy borders at the top and bottom. A large green circle on the right contains a close-up photo of a hand signing a document with a black pen. The text is arranged in a clean, modern layout with various font weights and sizes. Decorative elements include a star icon, concentric circles, and a grid of dots.

ATTORNEY OFFICE HOURS!

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