NCGA Committee Considers Relaxing APRN Supervision Requirements in NC

On February 9, members of the North Carolina General Assembly’s Joint Legislative Oversight Committee on Health and Human Services (JLOC-HHS) heard testimony from Christopher Conover, PhD recommending the relaxation of supervision requirements for all Advanced Practice Registered Nurses (APRNs) in NC. This recommendation was based on a meta-analysis study paid for by the North Carolina Nurses Association (NCNA). The study, which was premised on the expectation of a physician shortage, speculated that APRNs are the solution to the impending physician shortage. The conclusion asserted that relaxing supervision would have a three-fold benefit of (1) improving access, (2) improving quality and (3) lowering cost.

Many of the committee members questioned the assumptions inherent in Conover’s presentation, citing the absence of any physicians on the steering committee charged with studying a physician shortage; no grasp of the cost components embedded in the studies that were used in the meta-analysis; and the lack of comparative quality data in light of the broad spectrum of
practitioners considered APRNs. Both House and Senate committee members suggested that the essence of the problem facing our state is the growing concentration of health care providers in the 14 most populous counties and therefore dwindling access to providers in North Carolina’s rural communities. The committee recommended further discussion at the next meeting in March.

North Carolina Medical Society (NCMS) staff will continue to follow this issue closely and provide you with opportunities to communicate with your legislators about the resources needed to provide care to North Carolina’s rural citizens. A copy of the slides used during the presentation can be found here.

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**Step Therapy to be the Focus of a House Study Committee**

The practice of pharmaceutical step therapy is the focus of a new House study committee. The committee met in December and heard testimony from both the patient perspective and the payer perspective. The committee meets again on Wednesday, February 24. The House Select Committee on Step Therapy was appointed in 2015 to investigate the practice in North Carolina and whether it leads to long-term cost savings. Its formation comes in response to Rep. David Lewis’ (Harnett Co.) bill, HB 821, “Proper Administration of Step Therapy,” which was introduced in April 2015 to establish requirements for clinical review criteria and the process for requesting an override determination.

**Annual Scientific Session, Feb. 26-27 in Greensboro**

There’s still time to register!

The NC Chapter Annual Scientific Session is just two weeks away. Internists from across the state will meet in Greensboro, February 26-27 for two days of continuing medical education,
networking, social events and presentation of Chapter awards. The meeting program features concurrent tracks on Friday in *Outpatient Medicine* and *Inpatient Medicine*. Saturday morning breakout sessions are followed by plenary talks on *Medicaid reform and expansion, asthma and COPD,* and *cardiology.*

- Download the program
- Online registration

**Thanks Doc! Nominations for NC Doctor of the Year Award Now Open**

North Carolinians are invited to nominate physicians for the 2016 NC Doctor of the Year Award. The Award is presented to the physician who garners the most online votes by March 30, and comes with a $5,000 check to be used to further a professional cause or project to help their community. Explore the website, like NC Doctors’ Day on Facebook, and follow the hoopla on Twitter using the #thxdocnc hashtag. You just might see your post on the site!

National Doctor’s Day is on March 30. This is the second year that NC Doctor’s Day is shining a light on our state’s great doctors and grateful patients. Last year’s winner was Dr. Gloria Graham (Morehead City), a dermatologist who has been practicing for over 50 years.

**ACP Leadership Day on Capitol Hill**
May 3-4, 2016  |  Washington, DC

The need for Medicine to make its voice heard in Washington, D.C., has never been greater. Consider joining your colleagues from NC and around the country this year at the 24th annual Leadership Day on Capitol Hill, which will be held on May 3 - 4, 2016 in conjunction with the ACP’s Internal Medicine Meeting in Washington, D.C. This is a great opportunity for ACP and many more of our members to participate in the public policy process.
during a pivotal election year, and to bring greater visibility to important issues affecting internists.

Additional information and online registration for Leadership Day 2016 is available on the ACP Services website. For questions, contact Shuan Tomlinson at stomlinson@acponline.org or 800-338-2746 ext. 4547.

This two-day advocacy event is a great opportunity for the College and our members to increase our presence and bring visibility to issues of concern to Congress. As usual, there will be training sessions and briefings by congressional staff and key government officials and staff on Tuesday, May 3. Attendees will also receive a comprehensive orientation on ACP’s top legislative priorities. A special briefing for Residents/Fellows-in-training and medical students is also provided. Visits to Capitol Hill will take place on Wednesday, May 4.

This event is open to ACP members only. Members interested in participating in Leadership Day 2016 should contact the NC Chapter, ncacp@ncmedsoc.org, to let us know of your interest and to be included in the chapter delegation congressional meetings. Attendance is expected to be greater than usual due to the Internal Medicine meeting occurring that same week so please act early.

Space is limited so the earlier you notify us the better we can plan for your attendance.

**New Clinical Guidelines from the ACP**

**Hematuria as a Sign of Cancer**

In the paper "Hematuria as a Marker of Occult Urinary Tract Cancer: Advice for High-Value Care From the American College of Physicians," published this month in Annals of Internal Medicine, the American College of Physicians (ACP) issued High Value Care advice for the evaluation of blood in the urine, or hematuria, as a sign of urinary tract cancer and to help physicians make decisions about referral of patients for urological assessment. ACP advises that physicians should include gross hematuria in
their routine history review and specifically ask all patients with microscopic hematuria about any history of gross hematuria.

**Major Depressive Disorder Treatment**

The guideline, "Nonpharmacologic Versus Pharmacologic Treatment of Adult Patients with Major Depressive Disorder: A Clinical Practice Guideline from the American College of Physicians" summarizes and grades the evidence on the comparative effectiveness and safety of non-drug treatments and second generation antidepressants (SGAs) - including SSRIs, SNRIs, bupropion, mirtazapine, nefazodone, and trazodone - alone or in combination, for major depressive disorder (MDD) in adults. Evaluated outcomes included response, remission, functional capacity, quality of life, reduction of suicidality or hospitalizations, and harms. Doctors should select cognitive behavioral therapy or SGAs to treat adults with MDD.