Lichstein Elected as Governor-Elect

Congratulations to Peter Lichstein, MD, FACP on his election as Governor-Elect of the NC Chapter. His term as Governor-Elect will begin in April 2014, at the conclusion of the ACP Annual Meeting followed by a four-year term as Governor beginning the following year.

Dr. Lichstein is Professor of General Internal Medicine at the Wake Forest University School of Medicine. He is graduate of the University of Michigan Medical School and completed his residency in internal medicine at the UNC School of Medicine. Following his residency, Dr. Lichstein proceeded to the University of Rochester for a fellowship in medicine and psychiatry. He has been an ACP member for 25 years.

The ACP Board of Governors (BOG) consists of over 80 Governors who represent College members throughout the United States, Canada, Central and South America, Japan, Saudi Arabia, and Southeast Asia. The Board also includes the Chair-elect, Council of Resident/Fellow Members (CRFM), the Vice Chair, Council of Student Members (CSM), the Vice Chair, Council of Subspecialty Societies (CSS), and the Chair-Elect, Council of Early Career Physicians (CECP).

Nationally, the Board of Governors serves in an advisory capacity to the Board of Regents, the policy-making body of the College. Governors provide a critical link between members, headquarters and the Board of Regents and are responsible for coordinating local College activities - such as scientific meetings, programs for Associates and medical students, and representing the College at public forums. The BOG meets twice yearly - in the spring, immediately prior to the College's Internal Medicine meeting, and in the fall for a two and a half day conference.

The Chapter thanks Dr. Lichstein for his leadership and dedication to medicine.
Governor’s Message

NC Chapter Issues Grants to Support Upcoming Internal Medicine Education Innovation Projects

At our 2013 Annual Scientific Session, the NC,ACP Council and membership approved allocating funds for innovative projects to promote the goals of the ACP in medical student and residency education. Priority was given to educational projects that: 1. Encourage medical student selection of careers in internal medicine; 2. Support initiatives in high quality, cost conscious care; 3. Promote habits of evidence-informed practice; 4. Improve safety in transitions of care, and 5. Stimulate acquisition of bedside clinical skills. With the able assistance of Council member, Dr. Peter Lichstein, requests for funding proposals were sent to North Carolina’s four medical schools and seven internal medicine residency programs. Grants of up to $5,000/year were offered with the stipulation that all awardees present a progress report at the 2014 Annual Scientific Session scheduled for February 28 – March 1 in Greensboro, NC.

I am pleased to announce that the following nine proposals have been selected for funding.

<table>
<thead>
<tr>
<th>Project</th>
<th>Institution</th>
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<tr>
<td>“Improving Quality Improvement Residency Education and Provider Performance Through a Shared Online Experience”</td>
<td>Duke University Medical Center</td>
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<tr>
<td>“A Resident Curriculum on Nutrition Counseling and Wellness”</td>
<td>Wake Forest Baptist Medical Center</td>
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<tr>
<td>“STAR (Safe Transitions Across CaRe): A Resident Curriculum”</td>
<td>Wake Forest Baptist Medical Center</td>
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<tr>
<td>“Resident Education in Reducing Preventable Readmissions: A Continuous Feedback Loop”</td>
<td>Wake Forest Baptist Medical Center</td>
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<tr>
<td>“Evidence-Based Medicine and Education Prescriptions in the Duke Med-Peds Primary Care Clinic”</td>
<td>Duke University Medical Center</td>
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<tr>
<td>“Impressions of Internal Medicine, Before &amp; After the 3rd year Clerkship”</td>
<td>Wake Forest Baptist Medical Center</td>
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<tr>
<td>“Changed Forever”</td>
<td>Wake Forest Baptist Medical Center</td>
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<tr>
<td>“Medical Education Innovation Inpatient Unit (MedIU)”</td>
<td>Brody School of Medicine at East Carolina University</td>
</tr>
<tr>
<td>“What does the heart sound like?”</td>
<td>Wake Forest Baptist Medical Center</td>
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</table>

We look forward to the hearing more about the implementation and results of these projects in the coming months.

The Chapter owes a debt of gratitude to our colleague, Dr. Lichstein, for his leadership in getting this funding initiative up and running. The NC,ACP treasures its relationships with our state’s academic programs and is pleased to be able to invest in the future of our profession.
2013 Legislative Session Summary


The 2013 legislative session of the North Carolina General Assembly (NCGA) got off to a unique start in January with Republican leadership in both the House of Representatives and the Senate as well as a Republican in the Governor’s office. Additionally, over half of the General Assembly’s members were in their first or second terms of office. With so many new faces in both chambers, medicine’s legislative efforts, led by the NC Medical Society, focused a lot on relationship building and educating legislators on key issues impacting the medical profession and patients.

As the new administration took shape within the first weeks of session, the state’s Department of Health and Human Services (DHHS), particularly the Medicaid program, quickly assumed center stage in budgetary and policy debates.

Key issues in the 2013 session included:

- Budget/Medicaid
- Tax Reform
- Certificate of Need
- Abortion
- Pulse Oximetry
- Protection of Tort Reform gains
- Scope of Practice
  - Lay Midwives (Licensure/Homebirth)
  - Nurse Midwives (Independent Practice)
  - Pharmacists (Immunizations)
  - CRNA (Physician Supervision)
  - Naturopathy (Licensure)

The NC/ACP encourages its members to get involved and stay involved in political and legislative advocacy activities. Opportunities include:

- NCMS PAC (http://www.ncmedsoc.org/pages/advocacy_govt_affairs/medpac.html)
- White Coat Wednesday (http://www.ncmedsoc.org/pages/meetings_and_events/white_coot_wednesdays.html)
- Local Meetings with Legislators

The NC/ACP partners with the NC Medical Society on these and other advocacy initiatives. Physician participation in these efforts is vital to their success. Information to participate can be accessed at the links provided, or contact the NC/ACP (ncacp@ncmedsoc.org).
Medicare SGR Fix – We Need to Hear From You

For the past several years, the American College of Physicians and the North Carolina Chapter/ACP have implored Congress to fix the flawed **Sustainable Growth Rate (SGR)** that determines Medicare reimbursement rates. This effort has, unfortunately, been tagged as the “**Doc Fix,**” implying that repeal and adjustment to the formula would benefit physicians. Our message to Congress has been that the fix would be an “**Access Fix,**” giving greater assurance that there will be physicians available to provide care for an ever-growing Medicare population.

If you need a refresher on the SGR formula, information is available at:  

In the past year the federal government has **reduced the projected cost of a “fix” from $380 billion to $138 billion,** which has given some hope that Congress would seize the opportunity to address the SGR to take advantage of the reduced fiscal impact. That was our message to Congress when we were on Capitol Hill back in May during the ACP’s annual Leadership Day.

Unfortunately, the current window of opportunity to fix the SGR during this year’s congressional session is closing. We are still hopeful that the issue will be taken up, but with the current and growing partisan discord in Congress, our hopes are fading.

As we make a final push on the SGR fix, one thing we would like to convey to North Carolina’s members of the US House and Senate is what the impact of inaction will likely be in our state. We have heard repeatedly from many NC/ACP members that they would consider or are considering a modification of their practice if there is no improvement in the Medicare situation. We would like to quantify that impact of inaction to the extent we can, so we are asking our membership to respond to a **brief survey.**

You can access the survey at:  [http://www.surveymonkey.com/s/DFKV8P7](http://www.surveymonkey.com/s/DFKV8P7)

The questions, if you’d like to give them some thought in advance, are:

What is your age?

What is your practice setting?

- Private/Community Practice
- Academic Practice
- Other - __________

If the SGR formula is not fixed, how will your practice change?

- I will retire.
- Number of Medicare patients that will be impacted: __
- I will not accept any Medicare patients.
- I will not accept any new Medicare patients.
- I will reduce the # of Medicare patients I see.
- Number of Medicare patients that will be impacted: __

Thank you for taking the time to respond.
NC/ACP Hosts Event for Duke Residents

NC/ACP Council member Sharon Rubin, MD recently organized a free event for Duke internal medicine residents to discuss planning for their professional future. The August 2nd dinner meeting, entitled “How to Prepare for a Professional Job Interview,” was sponsored by the Chapter and featured panelists who addressed preparation for job interviews and what lies ahead beyond residency. The audience included future hospitalists, generalists and specialists.

The event also provided an opportunity to inform residents of the many benefits of ACP membership, to encourage involvement in the young physicians council, and to encourage pursuit ACP Fellowship. A total of eight residents and seven attendings participated. Along with Dr. Rubin, panelists included:

- Dr. David Gallagher
- Dr. Lalit Verma
- Dr. Jonathan Bae
- Dr. Saumil Chadgar
- Dr. Amy Rosenthal

ACP Recognizes Dr. Jim Stackhouse

The ACP Awards Committee has announced that W. James Stackhouse, MD, MACP, of Goldsboro, NC will be the 2014 recipient of the Alfred Stengel Memorial Award for Outstanding Service to the American College of Physicians. This special award was established by the ACP in 1947 and recognizes
exceptional service and loyalty to the ACP. It further recognizes outstanding influence in maintaining and advancing the best standards of medical education, medical practice, and clinical research.

The late Dr. Alfred Stengel is a former Regent and two-term President of the ACP.

The NC Chapter congratulates Dr. Stackhouse on this recognition and applauds his steadfast dedication to the ACP, the NC Chapter and the medical profession. His leadership has contributed greatly to the Chapter’s growth and success.

Mark Your Calendar

Information is available online at: http://im2014.acponline.org/

ACP INTRODUCES “SMART MEDICINE”

The American College of Physicians has released ACP Smart Medicine, a web-based clinical decision support tool developed specifically for internal medicine physicians containing 500 modules that provide guidance and information on a broad range of diseases and conditions.

Integrated with content from Annals of Internal Medicine, ACP JournalWise, and ACP’s clinical practice guidelines with a display that automatically adjusts to desktops, smartphones, and tablets, the clinical recommendations in ACP Smart Medicine are evidence-based and rated based on the quality of the underlying evidence. Information is continually updated through triggered updates with new, relevant content and guidelines. Additionally, ACP High Value Care recommendations identify care activities that offer little benefit to patients.

ACP Smart Medicine also offers easy access to submit for CME credit. Physicians can select modules from the list of content areas they have reviewed, answer a question, and submit for CME credit.

ACP Smart Medicine is available as a free benefit to ACP members and can be purchased by non-members.
Mark Your Calendar

May 21-22, 2014
Washington, DC

ACP Announces New Leadership Academy

The ACP Leadership Academy is ACP’s new leadership development program designed to provide early-career internists with the skills and knowledge necessary to become leaders in medicine.

The program's first offerings will be live and online courses offered in partnership with the American College of Physician Executives (ACPE), the nation's largest health care organization for physician leaders. These courses are eligible for CME credit through the ACPE and were selected to provide episodic leadership training for members wanting to brush up on a specific content area. Participants can put these courses toward earning a nationally recognized leadership certificate from the ACPE and can also roll course credits into advanced degree programs from accredited universities. ACP members will receive a 15% discount on approved courses.

In addition to these courses, in coming months, the ACP Leadership Academy will begin offering additional, informal leadership development opportunities via other College-wide vehicles to enhance the formal coursework.

The new ACP Leadership Academy replaces ACP’s Leadership Enhancement and Development (LEAD) program.

Thank you for your support of the NC/ACP