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MEET KMA PRESIDENT NANCY SWIKERT, M.D.

FOR FLORENCE PHYSICIAN, IT’S ALL ABOUT FAMILY

When Nancy Swikert, M.D., was considering themes for her year as KMA President, she settled on one that seems a natural fit for her philosophy, medical practice and life – the Family of Medicine.

A native of Franklin, Ky., Dr. Swikert comes from a close-knit family – many of whom attended her installation as president of KMA and the KMA Alliance in September. She started her practice in family medicine with her husband, Don Swikert, M.D., and her children, Kevin and Montine, were often at the office.

Her belief in family extends to organized medicine. That’s one reason she agreed to be President of the KMA Alliance in the same year as serving as KMA President. She also sees a strong familial connection with other parts of organized medicine in Kentucky – from local medical societies to the American Medical Association, and from the Kentucky Physicians Political Action Committee (KPPAC) to the Kentucky Foundation for Medical Care, of which she is a member of the board.

Family, of course, starts with one’s roots.

Dr. Swikert’s parents, Kenneth and Pauline Crawford, instilled a strong work ethic and an ambition for education. Both only completed eighth grade, Dr. Swikert said, but wanted their three children “to get out of that rut,” so college was always in the cards for Dr. Swikert and her brothers, Rick Crawford, who’s a family physician in Evansville, Ind., and Randy Crawford, a pharmacist who now owns the family farm in Franklin.

While Dr. Swikert had planned on becoming a biology teacher, a college adviser sparked her interest in medicine. She took an aptitude test and passed it. When she broached the prospect of a career as a physician, her parents were supportive.

In the mid-1970s, Dr. Swikert, a student at Western Kentucky University, applied to medical school, a time when students had to supply some of the equipment they needed for science classes. “Dad had to sell a milk cow so he could buy a microscope,” she said. They traveled from their Franklin home to Louisville to purchase it at Bausch and Lomb.

Family members of 2016-17 KMA President Nancy Swikert, M.D., front row right, including her husband Don Swikert, M.D., a former KMA President, attended her installation Sept. 10. Dr. Swikert had been installed as president of the KMA Alliance earlier in the day.

Photo by David Knapp
While she had the aptitude for medicine, women at that time needed something more, Dr. Swikert said. Her adviser told her she needed to stand out when applying to medical school. So she graduated college in three years. She also worked part time as a ward clerk in a Bowling Green hospital on the weekends. Those efforts paid off. She was accepted at the University of Louisville Medical School before her 21st birthday, and started classes in 1973.

Her medical school class had around 120 students, 30 percent of whom were women, which was a high percentage at that time, Dr. Swikert said. A member of that class was Don Swikert, her husband. The couple independently decided on a path to family medicine and matched as a couple at St. Elizabeth Hospital in northern Kentucky.

When they finished residency in 1980, the Swikerts opened an office together in Florence. The office wasn’t exactly finished, and Dr. Nancy Swikert said they moonlighted at the hospital to pay off the investment.

In the early years of their careers, the Swikerts realized the importance of organized medicine. Dr. Don Swikert was more involved at that time, but the couple soon started taking their young children to the meetings of KMA and AMA.

“We thought organized medicine was so important, we paid for it out of our pocket,” she said. “We have learned and gained much more than we’ve ever spent.”

Organized medicine, she said, provides “a glimpse into the future. Things start in California and work their way across the country.”

Getting an early exposure to coming change, she said, allowed them to “tailor it to our practice so we could be ready for it … Organized medicine for us was looking into a crystal ball to see what’s coming.”

But it also has given the couple the opportunity to meet people and develop lifelong friendships, which helps when dealing with all the changes that have come along in health care.

“You find out you’re not the only one fighting these battles,” she said.

Dr. Swikert said she and her husband believe strongly that people should give back. Dr. Don Swikert served as KMA President in 2002-03. The Swikerts are the first couple to have both served as president of a state medical association.

Dr. Nancy Swikert served as Speaker of the KMA House of Delegates for 10 years. She also has served as President of the Kentucky Academy of Family Physicians, the KMA Alliance and the Southern Medical Association Alliance, as well as Councilor of the Southern Medical Association; she has also served as a member of many national committees. She is a member of the 2015 class of KMA Community Connectors.

As she begins her year as KMA President, Dr. Swikert said the Kentucky Family of Medicine will play a large role in whether she achieves her goals.

“You don’t think of yourself as a leader,” she said. “You think of yourself as a part of the team.”

She intends to use her positive attitude and belief in the Family of Medicine to engender success in both KMA and the KMA Alliance.

“It goes back to stepping up and doing your job … helping others to do more,” she said.

She believes that’s what a family is all about and illustrates the importance she places on family.

“All of my life, it’s been all of my life,” Dr. Swikert said of family.
Achieving the position as President of any organization is quite an honor and an opportunity not to be missed. It entails the love and encouragement from both immediate and extended personal family; the support of colleagues, both in medical practice and in organized medicine; mentorship from previous presidents; and the support of lots of friends along the way. My road to this goal was the same. I am very grateful to Dr. Ted Miller for all his leadership and help this past year.

Every new president starts off their year with a mission (job to do now) and a vision (desired result over time). Our mission this year is to focus on better health awareness for the people of Kentucky and continue to shape the future for a new generation of physicians. Our vision for KMA is threefold: a) to improve health outcomes for the citizens of our Commonwealth, b) to forge a generation of physicians prepared to meet the needs of our 21st century health care system, and most important, c) to restore the joy in medicine and enable physicians to spend their time where it matters most – helping patients.

Now, these are lofty goals, and achieving them will not be easy. But, nothing worthwhile ever is. I was drawn to organized medicine because I realized that the only way to take on big problems is through working with others. The phrase “Together we are stronger” is powerful and true.

All of us know that what we do in medicine is difficult and usually complicated. Plus, we practice medicine in a world with obstacles,

... where politicians and bureaucrats have unreasonable promises to fulfill,
... where bean counters cannot understand why health care is not easily segmented onto spreadsheets,
... and where lawyers stand ready to armchair quarterback with the benefit of hindsight.

Many of us believe there will always be physicians who navigate these obstacles to preserve humanism in medicine and ensure that the sacred bond between patient and physician endures, much like families.

Each of us has several “families” in our lives. Let’s consider some of those “families” that we will use this year.

1. Our “KMA family” is working tirelessly together with us on our vision through several venues:
   a) Our Commit to Quit program, championed by leaders like Dr. Shawn Jones, promoting smoking cessation,
   b) Our efforts in reversing the opioid epidemic program supported by multiple leaders. For the past 20 years, public policies have compelled doctors to treat pain more aggressively for the comfort of our patients. They had good intentions but we now know were flawed. Today’s drug abuse crisis plainly tells us we must be much more careful about how we prescribe opioids. Leaders like Lexington physician, Dr. Steven Stack, Immediate Past President of the AMA, are leading the way. He encourages all of us to limit the amount of opioids prescribed by using the lowest dose for the shortest time.
   c) Our “Kentucky Foundation for Medical Care Family” is funding our new leadership initiative called LEED – Leadership through Education, Experience and Development. LEED is the umbrella for four programs to date designed to provide leadership training from physicians-in-training to experienced physicians. These four programs are:
      • The KMA Community Connector Leadership Program (CCLP) initiated by Dr. Fred Williams,
      • The Kentucky Physicians Leadership Academy, leadership training at the Annual Meeting of KMA,
      • The KMA Medical Student Outreach and Leadership Program (MSOL) Medical Students more about business, political, social and economic issues in the health care system, and
      • The Kentucky Physicians Leadership Institute (KPLI) to launch in 2017 in collaboration with Butler University.

These programs encourage doctors to take leadership roles in their hospitals, clinics, and communities – giving back.

d) Our expanding and very successful Advocacy team, led by Dr. Don Swikert, Dr. John White and Dr. Shawn Jones, with lobbyists, Cory Meadows, Bill Doll and John Cooper. The success of this committee is spreading like a wildfire across our Commonwealth, reaching many grass root physicians who have become politically involved in the health of Kentucky.

2. Our “KPPAC family,” chaired by Dr. Bob Couch, is tuned to advocacy leadership development and follows the politics of Kentucky closely.

Some other “families” have taken up our vision through the years.

3. Our “Alliance Family” with leaders like Kim Moser, President-
Elect of the AMA Alliance and also running for the Kentucky legislature, Patty Pellegrini, our outgoing President, and many other Alliance volunteers working in communities and schools on health projects in the county, state and national level.

4. Our “Legislator Family”—with physicians like Sen. Ralph Alvarado, M.D., Rep. David Watkins, M.D., Rep. Bob Deweese, M.D., (recently retired), and our very own Kentucky Supreme Court Justice, the Honorable Michelle Keller (Alliance) and other grass root legislators who have become our friends like the two who attended my installation, Sen. John Schickel and Rep. Dennis Keene, both of northern Kentucky.

5. Our “AMA Family” is also working by changing federal policies governing electronic medical records through programs like the Break The Red Tape campaign, championed by Dr. Steven Stack, Dr. Bruce Scott (AMA Vice Speaker), Dr. Ardis Hoven (AMA Past President), and Dr. Bill Monnig (OMSS Past Chair). A new AMA study based on analysis of a variety of settings and type of practices found a staggering 50 percent of physician time was devoted to the keyboard—imagine 50 percent! And actually only one-third of their time was free to interact with patients. But even worse, physicians are also spending two hours each evening on the keyboard finishing the data entry from the office day at HOME, using hours that used to be spent with their families relaxing and trying to decompress.

Yes, physicians have become the most expensive data entry workforce on the face of the planet.

6. Our “Physicians in Training Families” are working to support medical students, residents and their families in their early career journey to eliminate barriers and, when necessary, to help them channel their frustrations to make positive changes by creating a healthier lifestyle for physician families thereby lessening physician suicide and burnout.

7. Our “Specialty Families,” like my “KAFP (Kentucky Academy of Family Physicians) Family” and “Southern Medical Association Family” and so many other families on the county, state and national level that we could not mention them all.

Yes, it takes all of us to make a difference! Each one of us has a role to play. Each one of us contributes something the other cannot, a vital part to the puzzle. When it comes to something as important as shaping a better, healthier future, it will take every single one of us. But, too often our hope for tomorrow is undermined by our pessimism about today. So let’s reflect. Just think for a minute back to the reason you applied to medical school. There is great joy in the practice of medicine. None of us doubt the value of our work or the nobility of the cause.

And, let me tell you what I also hear. I hear incredible stories of optimism and hope about the future of medicine. There is tremendous energy around new technologies and innovations that are transforming our work. I see medical students excited about leaving their mark on the profession, just like you and I had years ago.

And I come across physicians who, when I talk about the challenges ahead, tell me it’s still the best job in the world and they wouldn’t want to do anything else.

Engaging with these dedicated professionals who revel in what they do by spreading joy and hope reminds us why the work we are engaged in with our KMA and AMA families is so important. There is a powerful force for good.

We all know it is no small thing to be tasked with improving America’s health care system. But then, it is no small thing to stand over a critically ill man, woman, or child, and find a way to save them.

As physicians, achieving the impossible is something we are called to do every day. With our unwavering commitment, we can and we will create a future where physicians and patients thrive, and the doctors of tomorrow have the support and training they need to meet any challenge.

We can and we will create a better, healthier future for the people of this great commonwealth.

We can and we will make a difference … One by One …

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2016 KMA HOUSE OF DELEGATES ELECTION RESULTS

**PRESIDENT-ELECT (1 year)**
Maurice J. Oakley, M.D., Ashland
R. Brent Wright, M.D., Glasgow
Danesh Mazloomdoost, M.D., Lexington

**VICE PRESIDENT (1 year)**
Bruce A. Scott, M.D., Louisville

**SPEAKER (3 years)**
Alan J. Thorner, M.D., Madisonville

**DISTRICT 3**
K. John Yun, M.D., Elizabethtown
District 12
David L Brabon, M.D., Wilmore
District 14
Jayotin V Chandarana, M.D., Hazard

**TRUSTEES**
District 1
Carolyn S. Watson, M.D., Paducah

**DISTRICT 2**

**DISTRICT 4**
John A. Godfrey, M.D., Elizabethtown

**DISTRICT 5**
Ron Waldridge Jr, M.D., Shelbyville

**DISTRICT 6**
Douglas Crutcher, M.D., Cynthiana

**DISTRICT 7**
Naren James, M.D., Stanford

**DISTRICT 8**

**DISTRICT 9**

**DISTRICT 10**

**DISTRICT 11**

**DISTRICT 12**

**DISTRICT 13**

**DISTRICT 14**

**DISTRICT 15**

**ALTERNATE TRUSTEES**
District 1
Evelyn Montgomery Jones, M.D., Paducah

**DISTRICT 3**
James M. Donley, M.D., Madisonville

**DISTRICT 4**
John A. Godfrey, M.D., Elizabethtown

**DISTRICT 5**
Ron Waldridge Jr, M.D., Shelbyville

**DISTRICT 6**
Douglas Crutcher, M.D., Cynthiana

**DISTRICT 7**
Naren James, M.D., Stanford

**DISTRICT 8**

**DISTRICT 9**

**DISTRICT 10**

**DISTRICT 11**

**DISTRICT 12**

**DISTRICT 13**

**DISTRICT 14**

**DISTRICT 15**

*Partial term vacated by another Alternate Trustee

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From success in passage of legislation important to physicians to a robust public health campaign, the Kentucky Medical Association’s commissions and committees have worked the past year to improve the health care environment in the Commonwealth. This report was presented to delegates to the 2016 KMA Annual Meeting held in early September.

Commission on Legislative and Political Advocacy
Donald J. Swikert, M.D., Chair

The Commission on Legislative and Political Advocacy worked cooperatively with the KMA Legislative Quick Action Committee to organize and oversee a very successful legislative session, likely the Association’s best in 15 years. Because the Commission developed an advocacy agenda focused on issues important to physicians and patients, the following KMA priority bills were passed by the General Assembly.

Maintenance of Certification/Licensure: Senate Bill 17, sponsored Sen. Ralph Alvarado, M.D., prohibits the state from requiring initial board certification or recertification in order for physicians to obtain or retain their medical license. Board certification in a specialty is, and always has been, voluntary in Kentucky. KMA proactively fought to keep it that way.

Fair Contracting: Senate Bill 18, also sponsored by Sen. Alvarado, changes current law and requires insurers to follow a new and fairer set of procedures before changing an existing agreement with a provider. Changes include 90 days notice for a material changes that must be made by certified mail or marked in special envelopes, an opportunity to discuss material changes and an opportunity to object to the changes.

State Licensure Board Appointments: Senate Bill 19, also sponsored by Sen. Alvarado, stipulates that appointees for the Kentucky Board of Medical Licensure (KBML) shall come from names submitted by the Kentucky Medical Association. This legislation ensures a non-political, professional vetting process for individuals seeking appointment to the state’s medical licensure board.

Independent Appeals Process for Medicaid Claims: Senate Bill 20, also sponsored by Sen. Alvarado, is a measure that addresses the concerns of patients, physicians and hospitals about the difficulty associated with appealing coverage denials and nonpayment of claims by Medicaid managed care organizations. SB 20 will allow providers who have exhausted an internal appeals process of a Medicaid managed care organization to be entitled to an external, independent third-party review, as well as an administrative appeals hearing through the Cabinet for Health and Family Services.

Despite KMA’s recent success, there are still priorities,
including medical liability reform and smoke-free initiatives, that must be addressed by the General Assembly going forward. KMA looks forward to working with state policymakers prior to and during the 2017 regular session to make these priorities a reality.

KMA’s legislative team was also active on the federal level throughout 2016. KMA representatives attended the AMA National Advocacy Conference in Washington, D.C. In past years, KMA spent time speaking exclusively to Kentucky’s congressional delegation about the need for a SGR fix. With the passage of the Medicare Access and CHIP Reauthorization Act, otherwise known as MACRA, those days are behind the Association. The Washington visit, however, remains necessary because it is essential for Congressmen and Senators to hear from physicians on a wide range of issues, including opioid abuse, EHR issues and Graduate Medical Education funding. Collectively, the KMA representatives were able to meet with nearly all of the Kentucky federal delegation regarding these items.

Commission on Long Range Planning
Michael Kuduk, M.D., Chair

The Long Range Planning Commission met several times throughout the year and continued its work on evaluating KMA’s organizational structure and activities. The commission reviewed a proposed physician leadership program being considered by the Kentucky Foundation for Medical Care and provided constructive comments about its design.

The commission also conducted a thorough review of the KMA bylaws and looked for provisions that appear to be outdated, no longer in force, or do not fit with current operations. Two provisions stood out. First was the use of a nominating committee that is elected by the House of Delegates and charged with reviewing the credentials of candidates for office within the association. The commission believes the formal election and use of such a body is outdated, and recommended a possible by-laws change to the Board of Trustees.

The commission also reviewed the existence of a Judicial Council, which has not met in over 20 years, but continues to be elected by the House of Delegates. Legal counsel provided information that raised concerns about action that might be taken by the Judicial Council possibly creating liability for the association. It was also noted that much of the function of the Judicial Council has been ceded to the Kentucky Board of Medical Licensure over the years, negating the need for such a body within the association. The commission recommended to the Board of Trustees that it study discontinuing the existence of the Judicial Council over the coming year.

Commission on Medical Economics
Robert H. Couch, M.D., Chair

The Commission on Medical Economics focused on priorities related to costs, administrative efficiency and behaviors that impact health, with primary goals to promote correct coding and awareness of change with reimbursement models.

As physicians prepare to transition to the new Medicare Merit-Based Incentive Payment System, known as MIPS, the Commission is using a series of Web-based articles, resource guides, social media posts and presentations for physician staff through the American Academy of Professional Coders (AAPC) Kentucky coding chapters to provide education on this topic. MIPS will remain a priority for the Commission in 2017.

The Commission worked closely with the Commission on Legislative and Political Advocacy, the Medicaid Physician Technical Advisory Committee, the Kentucky Academy of Family Physicians and the Kentucky Coalition of Nurse Practitioners to outline specific issues that Kentucky providers were experiencing with correct coding of complex office services. As a result, three of the five MCOs serving Kentucky now reimburse both 99214 and 99215 without limitations.

The Commission also joined forces with both the Commission on Public Health and the Medicaid Physician Technical Advisory Committee to bring attention to reimbursement problems when physicians provide both smoking cessation and evaluation and management (E&M) services on the same day. As a result of this collaborative effort, all five MCOs now cover both the evaluation and management service on the same day as smoking cessation counseling, if the E&M service on the same date is identified as a significant, separately identifiable E&M service.

To promote correct coding, the commission used social media and prepared Web-based physician resources guides on Evaluation & Management and ICD-10 coding for Tobacco Use/Abuse/Dependence.

The Commission once again worked with the Medicaid Physicians Technical Advisory Committee and was successful in implementing uniform prior authorization form for medical services for all five MCOs.

Commission on Physician Licensure and Workforce
Tamella B. Cassis, M.D., Chair

The Commission on Physician Licensure & Workforce received an update on Senate Bills 17 (Maintenance of Certification/Licensure), 18 (Fair Contracting), 19 (State Licensure Board Appointments), and 20 (Independent
Appeals Process for Medicaid MCO Claims) from KMA’s Director of Advocacy and Legal Affairs, Cory W. Meadows.

Following a presentation by Laura Hartz, KMA’s KPPAC and Policy Administrator, the Commission reviewed the current KMA Board policy on the KBML Nomination process and discussion, the Commission recommended that the KMA Board of Trustees broaden current policy and incorporate specialty group consideration in selecting nominations for service on the KBML.

The Commission also recommended the KMA Board of Trustees move forward with conducting a public education campaign on prescription drug abuse, possibly with the Kentucky Bar Association and the KBML.

Commission members discussed the types of articles they would like to see in the KBML section of the KMA Communicator and included House Bill 1 and House Bill 157 CME requirements.

Commission on Public Health
John M. Johnstone, M.D., Chair

The Public Health Commission has targeted its focus to specific needs during the past year. Members have met several times to review and discuss priority issues and to review and make recommendations on resolutions for the KMA House of Delegates.

The top public health priority for KMA and the Commission in 2016 has been smoking cessation. The Public Health Commission supported the Commit to Quit campaign, sponsored by KMA with funding from the Kentucky Foundation for Medical Care and other partners. Commission members in February 2016 suggested several ways to promote the health benefits of quitting or not starting smoking. In addition to Commit to Quit, the Commission suggested public service announcements using athletes from the University of Kentucky and University of Louisville to reach young people about smoking and an online public health social media campaign, getting medical students and residents involved in the effort. Members also suggested a partnership with the Kentucky Smoke-Free Coalition and continued efforts to get a statewide indoor smoking ban. The Commission believes a multi-pronged approach is necessary to help reduce the number of smokers in the Commonwealth.

The Commission also looked at two future public health priorities, diabetes and prescription drug abuse, both of which are becoming increasingly critical to address.

With an obesity rate that puts the Commonwealth at #12 in ranking by state, the Public Health Commission believes innovative thinking will be necessary to address the problem. One suggestion involved efforts to remove carbonated beverages from hospital campuses. Commission members discussed the possibility of having a subcommittee present information to the Kentucky Hospital Association with a message that this would be one way to model better eating practices for patients.

Commission members also recognized that the prescription drug abuse epidemic has become more urgent than anticipated. Because many people believe a chemical solution can help to make life pain-free, members suggested a public health campaign to educate Kentuckians about what an opioid does and problems that can arise with their use. Members said a problem comes with CMS surveys for patients leaving a hospital; pain is a part of those surveys and, if patients are prescribed something for pain, that question can affect the hospital rating. Individual commissioners plan to file resolutions for consideration at the House of Delegates regarding issues surrounding prescription drug abuse.

Commission on Young Physicians and Physicians in Training
Sarah E. Parsons, M.D., Chair

The Commission reviewed results from the first year of the Medical Student Outreach and Leadership Program, which was developed in 2015 to promote community involvement and to teach students more about the political, social and economic issues in the health care system. There were 116 total participants for the first year, with 45 of those from the University of Kentucky and 71 from the University of Louisville. Twenty-three students have completed the program—nine from UK and 14 from UofL. The Commission discussed how the program could be improved and expanded, as well as additional ways to recognize students who complete the program.

KMA’s Medical Business Advocacy Manager Lindy Lady spoke to the Commission about the shift in focus by the Centers for Medicare and Medicaid Services and private payers from treatment to prevention. Commission members also discussed the uncertain future of the Medicaid expansion in Kentucky, as well as the state’s poor ranking in many public health indicators.

Monalisa Tailor, M.D., and Danesh Mazloomdoost, M.D., represented KMA at the AMA Young Physicians Section Annual Meeting in June.

Resident and Fellow Section Governing Council
Anil P. George, M.D., Chair

The Resident and Fellow Section Governing Council received an overview from Lindy Lady, KMA’s Medical Business Advocacy Manager, of the KMA Commit to Quit
KMA, 2016 For the Record

Campaign, Smoke-Free Kentucky legislation and important changes with the U.S. Preventive Services Task Force on smoking.

Jonathan Moore, M.D., represented KMA as the Delegate to the AMA Resident Fellow Section at the June meeting.

KMA participated in the 2016 New Resident Orientations, with David J. Bensema, M.D., addressing UK on June 20 and G. Randolph Schrodt, M.D., addressing UofL on June 30.

CME Committee and CME Council
John L. Roberts, M.D., Chair; James L. Borders, M.D., Chair

The CME Committee and the CME Council continued their educational support to accredited providers in a variety of ways. One-on-one training and consultations were offered through KMA staff and were very successful in training new employees in continuing medical education. KMA Director of Education Miranda Mosley participated as a speaker at the inaugural Tri-State CME Symposium in Indianapolis. More than 100 CME professionals attended this event, and KMA staff has been asked to speak at the 2016 event. More than 20 health systems receive accreditation through the KMA and, over the last 12 months, six CME providers across the state were surveyed for reaccreditation to provide local CME. In support of reaccreditation, KMA received the decision of the ACCME to award KMA's CME program a six-year Accreditation with Commendation term, a term awarded to only 25 percent of providers nationwide.

KMA developed focused education on physician leadership. These offerings began with the 2015 KMA Annual Meeting, at the Kentucky Physicians Leadership Academy, featuring speaker Kevin Pho, M.D., of kevinmd.com, who discussed social media and the role it plays in medicine. Other speakers included representatives from CMS, who discussed the Physician Compare website and how that information will potentially affect physician reimbursement in the future.

Through a grant from The Physicians’ Foundation and financial assistance from KMA’s charitable arm, the Kentucky Foundation for Medical Care, KMA offered local leadership education at KentuckyOne London and featured speakers on the Myers-Briggs Personality Assessments and effective communication with peers and patients. KMA Past President Shawn Jones, M.D., shared his personal leadership journey and KMA Past President Fred Williams, M.D., provided crucial information on the public health ramifications of diabetes.

KMA’s leadership development will continue at the KMA Annual Meeting, which will feature speakers on physician burnout and “blue zones” areas of the world where people live longer than the average expectancy.

KMA continues to expand its educational offerings for members and has partnered with a variety of organizations to jointly provide CME, including Kentucky Allergy Society, the Lexington Medical Society, The Healing Place and the Kentucky Physicians Health Foundation. Other educational activities include development of education on emerging payment models and other pertinent issues affecting medicine.

Committee on Physical Education & Medical Aspects of Sports
Michael J. Miller, M.D., & Phillip B. Hurley, M.D., Co-Chairs

The Committee on Physical Education and Medical Aspects of Sports pursued its mission to improve the overall health of the school-age child by building stronger bodies, both mentally and physically, and seeking to eliminate and/or correct matters that might be detrimental to the health of the student athlete. During that process, KMA continued its long-standing relationship with the Kentucky High School Athletic Association. This partnership allows KMA significant input on matters related to the student athlete. Specifically, the Committee, in cooperation with the KHSAA, finalized the update to the online sports safety course. This course is mandatory for all high school and middle school coaches in the Commonwealth and is a valuable resource that helps ensure the safety of student athletes.

The Committee would like to congratulate James (Pete) Bowles, M.D., former Chairman of the Committee on Physical Education and Medical Aspects of Sports, on his induction into the Dawahare’s/Kentucky High School Athletic Association Hall of Fame Class of 2016.

Budget Committee
David J. Bensema, M.D., Chair

The Budget Committee reviewed proposed expenditures and income for KMA’s coming fiscal year and prepared a budget that was approved by the KMA Board of Trustees. The committee noted that staff changes, retirements and a planned move to new office space will save significant money for the association beginning in fiscal year 2017.

Medicaid Physician Technical Advisory Committee
Donald R. Neel, M.D., Chair

The Medicaid Physician Technical Advisory Committee, known as the TAC, focused on Medicaid priorities and made recommendations that would improve access to care, reduce administrative burden and provide appropriate reimbursement. The TAC was successful with the following recommendations:
Sports Physicals: Four of the five managed care organizations, or MCOs, now cover sports physicals as a separate service from the annual well child visit.

Annual Payment Limitation: Three of the five MCOs reimburse both 99214 and 99215 without limitations.

Smoking Cessation: All five MCOs cover both the evaluation and management (E&M) service on the same day as smoking cessation counseling, if the E&M service on the same date is identified as a significant, separately identifiable evaluation and management service.

Consistent Prior Authorization Form: All five MCOs now use a uniform prior authorization form for medical services.

Some Kentucky primary care physicians who received enhanced primary care payments or incentives for Medicaid in 2013 and 2014 were asked to return a portion of those payments—in some cases, thousands of dollars. KMA immediately prepared a “Procedure for Challenging Medicaid Claims” for members and requested that the Cabinet for Health and Family Services delay recoupment until physicians could gather appropriate data to dispute the overpayments.

Other states continue to closely monitor what is happening in Kentucky, and KMA provided critical input to the Urban Institute for the final report, “Medicaid Manage Care in Kentucky.” The input included improving access to care in behavioral health, removing barriers to care, reducing administrative burdens, improving data collection and improving transparency with the MCOs.

Kentucky Foundation for Medical Care
James F. Beattie, M.D., Chair

The KFMC provided funding for the “Commit to Quit” smoking cessation campaign, which was launched in January. Partners include local medical societies—Greater Louisville Medical Society, Lexington Medical Society, Madison County Medical Society, Northern Kentucky Medical Society and Warren County Medical Society—as well as health care groups—Baptist Health, KentuckyOne and St. Elizabeth HealthCare.

The focus of this campaign is to get patients to talk with their physicians about their efforts to quit. Studies show that when a physician is involved, people are more likely to stick to their efforts to quit smoking. This campaign offers resources for the patients, but urges them to talk with their physician regularly to help them quit. It also serves to show that physicians and KMA and KFMC are supportive of the smoke-free efforts but recognize there are other ways to help decrease the number of smokers in Kentucky.

The campaign has included a website, social media outreach, op-ed pieces and advertising. Resources on the website include talking points and suggested questions for patients to ask their physician, as well as a video for physicians to play in their offices and supporting hospitals to play on their websites to encourage smokers to talk with their physicians about quitting.

Other states continue to closely monitor what is happening in Kentucky, and KMA provided critical input to the Urban Institute for the final report, “Medicaid Manage Care in Kentucky.” The input included improving access to care in behavioral health, removing barriers to care, reducing administrative burdens, improving data collection and improving transparency with the MCOs.

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The KFMC also funded, through a grant from The Physicians Foundation, a Local Physicians Leadership Symposium in London, which was attended by about 20 people. Local physicians who attended the Kentucky Physicians Leadership Academy during the 2015 KMA Annual Meeting could apply to hold the symposium in an area of their choosing.

As part of the KMA Community Connector Leadership Program, the KFMC awarded two grants to charitable organizations that work with a KMA Community Connector. Recipients of the grants this year were Supplies Over Seas and Hospice of the Bluegrass.
KMA AWARDS

Sen. Alvarado, M.D., Receives Community Service Award

The Kentucky Medical Association presented its Community Service Award to Sen. Ralph Alvarado, M.D., of Winchester during the Kentucky Physicians Leadership Academy Saturday afternoon, Sept. 10.

The award, given annually during the KMA Annual Meeting, recognizes a physician who has made significant contributions to his or her community. Sen. Alvarado was selected for his extraordinary dedication to the medical community and to Kentuckians and for his tireless efforts on behalf of the body of medicine. His determination and drive helped to ensure passage of several key pieces of legislation during the 2016 legislative session.

“It’s an honor for me. Almost anybody here would probably be a person to be eligible to get that award,” Sen. Alvarado said. “Every doctor serves their community in so many different ways. ... To me it’s an honor for my colleagues to recognize me in that way. I’m humbled. You can almost pick any doctor who shows up at these KMA meetings and they would have a reason to receive this award as well.”

Sheldon Bond, M.D., Receives Educational Achievement Award

The Kentucky Medical Association presented its Educational Achievement Award to Sheldon Bond, M.D., FACS, of Louisville during the Kentucky Physicians Leadership Academy Saturday afternoon, Sept. 10.

Dr. Bond is the assistant dean, Clinical Education for the University of Louisville School of Medicine. The KMA Educational Achievement Award is given each year to a physician who has made contributions in all areas of teaching, research, clinical application in medical practice and patient education.

Dr. Bond has been a member of the faculty of UofL since 1991. From 2005 to 2006 he was the associate director of Student Education and in 2006 was appointed director of Surgical Student Education in the Department of Surgery, a position he currently retains. He has served as the assistant dean for Clinical Education since 2010. He is responsible for educating medical students in the practice of surgical excellence. In these roles, he completely renovated the student program in the Department of Surgery.

Dr. Toni Ganzel, dean of the UofL College of Medicine, said in the nomination letter that Dr. Bond is well-liked by all. “General surgery residents give testament that ‘his ability to find teachable moments each day and in all settings’ is renowned by those he teaches. He is definitely a favorite among students.”

Shawn Jones, M.D., Receives KMA Distinguished Service Award

Shawn Jones, M.D., a Paducah otolaryngologist, was recognized Saturday, Sept. 10, with the Kentucky Medical Association Distinguished Service Award during the Leadership Dinner at the 2016 KMA Annual Meeting.

“I am humbled beyond words,” Dr. Jones said. “To be honored by your peers in such a manner is truly incredible. I feel as though the doctors of Kentucky provide patients with distinguished care every day, so to win this award from them is just extraordinary.”

Dr. Jones, who served as KMA president in 2011-12, has long been active in the organization. He’s vice president of KMA’s charitable arm, the Kentucky Foundation for Medical Care, and serves as the face of the KFMC Commit to Quit public health campaign aimed at helping people quit smoking. He also has been named chair of the KMA/KFMC Kentucky Physicians Leadership Institute, a new program aimed at helping Kentucky physicians become better leaders.

KMA Recognizes Students who Lobbied for Smoking Ban

KMA recognized students from Middlesboro who participated in the 2014 Destination Imagination team that successfully lobbied city officials to implement a public smoking ban in their community. Team members were Bryce Bowling, Chloe Burchett, Kaylea Martin, Haylee Mills, Sabrina Sparks, Ryann Tong and Jack Yoakum. Their coaches were Kelsey Massengill and Tonya Martin of Middlesboro Elementary School.

Photo by David Knapp
HOUSE OF DELEGATES ROLL CALL

HOUSE OF DELEGATE MEETING / SEPT. 11, 2016

The names in bold cast votes during the House of Delegates meeting; the names in orange are those who are represented in other categories for voting purposes.

OFFICERS
President – Theodore H. Miller, M.D., Edgewood
Vice President – R. Brent Wright, M.D., Glasgow
President-Elect – Nancy C. Swikert, M.D., Florence
Secretary-Treasurer – Linda H. Gleis, M.D., Louisville
Chair, Board of Trustees – G. Randolph Schrodt Jr., M.D., Louisville
Vice Chair, Board of Trustees – Dale E. Toney, M.D., Lexington
Speaker, House of Delegates – Bruce A. Scott, M.D., Louisville
Vice Speaker, House of Delegates – Maurice J. Oakley, M.D., Ashland

TRUSTEES
District 1 – Carolyn S. Watson, M.D.
District 2 – Paul E. Moore, M.D., Henderson
District 3 – James A. Donley, M.D., Madisonville
District 4 – Corazon Veza, M.D., Elizabethtown
District 5 – G. Randolph Schrodt, M.D., Louisville
District 6 – Wayne Hendrix, M.D., Bowling Green
District 7 – Benjamin Kutnicki, M.D., Carrollton
District 8 – Neal J. Moser, M.D., Crestview
District 9 – Donald R. Wilson, M.D., Maysville
District 10 – Dale E. Toney, M.D., Lexington
District 11 – Michael K. Kuduk, M.D., Winchester
District 12 – Naren James, M.D., Stanford
District 13 – John R. Potter, M.D., Ashland
District 14 – H. Michael Oghia, M.D., Jackson
District 15 – Truman Perry, M.D., Corbin

ALTERNATE TRUSTEES
District 1 – Vacant
District 2 – Charles E. Bea, M.D., Owensboro
District 3 – Alan J. Thorner, M.D., Madisonville
District 4 – K. John Yun, M.D., Elizabethtown
District 5 – Russell A. Williams, M.D., Louisville
District 6 – William C. Thornbury Jr., Bowling Green
District 7 – Vacant
District 8 – Mark A. Schroer, Cold Spring
District 9 – Vacant
District 10 – Thomas Kirk Slabaugh Jr., M.D., Lexington
District 11 – John M. Johnstone, M.D., Richmond
District 12 – David L. Brabon, M.D., Wilmore
District 13 – Ishmael W. Stevens, M.D., Ashland
District 14 – Jyotin V. Chandarana, M.D., Hazard
District 15 – Vacant

AMA DELEGATES
District 10 – David J. Bensema, M.D., Lexington
District 5 – Frank R. Burns, M.D., Louisville
District 9 – J. Gregory Cooper, M.D., Cynthiana
District 5 – Bruce A. Scott, M.D., Louisville
District 8 – Donald J. Swikert, M.D., Union

AMA ALTERNATE DELEGATES
District 6 – James F. Beattie Jr., M.D., Bowling Green
District 5 – Robert H. Couch, M.D., Louisville
District 1 – Shawn C. Jones, M.D., Paducah
District 8 – William B. Monnig, M.D., Covington
District 8 – Robert A. Zaring, M.D., Louisville

PAST PRESIDENTS
Shawn C. Jones, M.D., Paducah
David J. Bensema, M.D., Lexington
Gordon R. Tobin Jr., M.D., Louisville
Fred A. Williams Jr., M.D., Louisville
William C. Harrison, M.D., Owensboro

DISTRICT 1
Graves County – Patricia M. Elliott-Williams, M.D., Mayfield
Ballard, Calloway, Carlisle, Fulton, Graves, Hickman, Livingston, McCracken, Marshall counties – No delegates reported.

DISTRICT 2
Daviess County – Bruce E. Burton, M.D., Owensboro, Shirish Patel, M.D., Owensboro
Hancock, Henderson, McLean, Ohio, Union, Webster counties – No delegates reported.

DISTRICT 3
Pennyrile (Caldwell, Christian, Lyon, Todd & Trigg counties), Crittenden, Hopkins, Muhlenberg counties – No delegates reported.

DISTRICT 4
Grayson County – Gay Fulkerson, M.D., Leitchfield
Hardin County – Anthony E. Abang, M.D., Elizabethtown, John A. Godfrey, M.D., Elizabethtown, Syed R.P. Quadri, M.D., Elizabethtown
Marion County – Lynval T. Reynolds, M.D., Lebanon
Taylor County – Eugene H. Shively, M.D., Campbellsville
Breckenridge, Bullitt, Hart counties – No delegates reported.

DISTRICT 5

DISTRIBUTION

DISTRICT 6
Monroe County – Kimberly Y. Eakle, M.D., Gamaliel
Warren County – Marie Michelson, M.D., Bowling Green, David Ciocchetty, M.D., Bowling Green, Janice Bunch, M.D., Bowling Green
Adair, Allen, Barren, Butler, Edmonson, Logan, Metcalfe, Simpson counties – No delegates reported.

DISTRICT 7
HOSS (Henry, Oldham, Shelby & Spencer) Counties – Ronald Waldridge, M.D., Shelbyville
Anderson, Carroll, Franklin, Gallatin, Grant, Trimble counties – No delegates reported.

DISTRICT 8

DISTRICT 9
Bourbon County – Nathan L. Moore, M.D., Paris
Harrison County – Douglas C. Crutchler, M.D., Lexington
Bath, Bracken, Fleming, Mason, Nicholas, Pendleton, Scott, Robertson counties – No delegates reported.

DISTRICT 10
Jessamine, Woodford counties – No delegates reported.

DISTRIBUTION 11
Clark County – Kathryn B. Jones, M.D., Winchester; Ralph Alvarado, M.D., Winchester
Jackson County – Gina L. Bingham, M.D., Tyner
Madison County – William H. Mitchell, M.D., Richmond
Estill, Lee, Menifee, Montgomery, Owsley, Powell, Wolfe counties – No delegates reported.

DISTRIBUTION 12
Mercer County – Richard S Goodstein, D.O., Harrodsburg
Russell County – Jerry D. Westerfield, M.D., Russell Springs
McCreary, Pulaski, Rockcastle, Wayne counties – No delegates reported.

DISTRIBUTION 13
Greenup County – Sanjiv Gupta, M.D., Russell
Elliott, Lawrence, Lewis, Morgan, Rowan counties – No delegates reported.

DISTRIBUTION 14
Breathitt County – Sunshine Smoot, M.D., Jackson
Pike County – William T. Betz, DO, Pikeville
Floyd, Johnson, Knott, Letcher, Magoffin, Martin, Perry counties – No delegates reported.

DISTRIBUTION 15
Harlan County – Rachel Eubank, M.D., Evarts
Whitley County – Abigail Byrnes, M.D., Corbin
Bell, Clay, Knox, Laurel, Leslie counties – No delegates reported.

RFS President – Shachi Pandya M.D., Glasgow
RFS Delegate – Nelson Seabrook, M.D., Glasgow
UofL MSS - Christian Steuerle Moser, Louisville
UofK MSS - Megan Rajagopal, Lexington
Dean of Medicine at UL- Toni Michelle Ganzel M.D., Louisville
Dean of Medicine at UP-Boydd Buser, M.D., Pikeville

Thank you
For serving
The Kentucky Medical Association
Opposite page, clockwise, KMA Past President Theodore Miller, M.D., PhD, and Middlesboro students Haylee Mills, Chloe Burchett, Ryann Tong and Sabrina Sparks; Tuyen T. Tran, M.D.; 2015-16 KMA Alliance President Patti Pellegrini; KMA Distinguished Service Award winner Shawn Jones, M.D., his wife, Evelyn Jones, M.D., and family; KMA Board Chair Randolph Schrodt, M.D. Above, clockwise, Mark Shroer, M.D., and Father David Fay of Saint Gabriel Church; KFMC President James Beattie, M.D., and Michael Kuduk, M.D.; Katharine Montgomery Krause, Wally Montgomery, M.D., Geraldine Montgomery, Judge Christopher Shea Nickell, KMA Board member Carolyn Watson, M.D., and Patricia Brabon; and Kelly Clark, M.D.

Photos by David Knapp
Opposite page, clockwise, Michael Kuduk, M.D., Marie Michelson, M.D., Seema Gupta of the West Virginia Medical Association, and KFMC President James Beattie, M.D.; Alain Chaoui, M.D., J. Gregory Cooper, M.D., and Steve Imbeau, M.D.; KMA Board Chair Randolph Shrodt, M.D., and outgoing board member, Michael Oghia, M.D.; former KMA President Fred Williams, M.D., and Speaker of the KMA House of Delegates Bruce Scott, M.D.; William C. Thornbury, M.D., Benjamin Carmichael, M.D., of the Southern Medical Association and Neal Moser, M.D.. Above, clockwise, KMA President-Elect Maurice Oakley, M.D.; Richard E. Park, M.D., Kay Waldridge, J. Roger Goodwin, M.D., and Ronald Waldridge, M.D.; Toni Ganzel, M.D.

Photos by David Knapp and Mary Branham
The Kentucky Medical Association House of Delegates met Sept. 11 and took action on the following reports and resolutions. The resolutions are listed by number, title and sponsor, followed by the action taken by the House of Delegates. Visit the KMA website at www.kyma.org for details on full proceedings of the House.

REPORT ON SUNSETTING POLICY >> ADOPTED
All policies were reaffirmed.

REFERENCE COMMITTEE >> ADOPTED
Members of the Reference Committee were Tuyen T. Tran, M.D., of Versailles, chair, Kelly J. Clark, M.D., of Louisville, Robert P. Granacher, Jr., M.D., of Lexington, Eric F. Lydon, M.D. of Louisville, and Richard E. Park, M.D., of Edgewood.

ANNUAL REPORT >> FILED

RESOLUTION 1: KENTUCKY MEDICAL ASSOCIATION BYLAWS AMENDMENT (KENTUCKY MEDICAL ASSOCIATION BOARD OF TRUSTEES) >> ADOPTED
1st RESOLVED: that Chapter IV, Section 2, of the Kentucky Medical Association Bylaws be amended as follows: “The Immediate Past President shall serve as the Nominating Review Authority to verify the eligibility and willingness to serve of each candidate nominated. Should the Immediate Past President be nominated for an elected office or is not available to serve as the Nominating Review Authority, the Speaker shall appoint another KMA officer who is not nominated for an elected office that year to serve as the Nominating Review Authority. The Nominating Review Authority shall accept and post for information all eligible and willing candidates proposed for offices elected from the state at large. On the second day of the Annual Meeting, the Nominating Review Authority shall post on a bulletin board near the entrance to the hall in which the Annual Meeting is being held, the nomination, or nominations, for each office to be filled, and shall formally present said nomination, or nominations, to the House at the time of the election. Additional nominations may be made from the floor by submitting the nominations without discussion or comment;” and be it further
2nd RESOLVED: that Chapter IV, Section 6, of the Kentucky Medical Association Bylaws be deleted in its entirety.

RESOLUTION 2: LIMITED SERVICE CLINICS (NORTHERN KENTUCKY MEDICAL SOCIETY) >> ADOPTED AS AMENDED
RESOLVED: that the Kentucky Medical Association advocate to hold Limited Service Clinics to the same business practices as physician practices.

RESOLUTION 3: TELEMEDICINE PAYMENT PARITY (BARREN COUNTY MEDICAL SOCIETY) >> ADOPTED
RESOLVED: that the Kentucky Medical Association adopt and advocate for a policy of telemedicine payment parity between virtual visits and in-office visits to Kentucky physicians, where a bona fide established and ongoing care relationship exists, such that, the reimbursement is equivalent for online care and face-to-face care.

RESOLUTION 4: KAPER-1 (GREATER LOUISVILLE MEDICAL SOCIETY) >> ADOPTED
RESOLVED: that the Kentucky Medical Association urge the Kentucky Cabinet for Health and Family Services to include language on the KAPER-1 Part B form that will allow physicians and allied health professionals to verify photo identification for initial hospital privileges through an affidavit and release that has been signed in the presence of a notary instead of verifying photo ID in person.

RESOLUTION 5: RESTRICTIVE COVENANTS (GREATER LOUISVILLE MEDICAL SOCIETY) >> ADOPTED
1st RESOLVED: that the Kentucky Medical Association work with the Kentucky Hospital Association, the individual hospitals and health care systems to eliminate restrictive covenants from their employed physician contracts; and be it further
2nd RESOLVED: that if the Kentucky Medical Association’s efforts to eliminate restrictive covenants with employed physicians contracted by hospital and health care systems are unsuccessful, the Kentucky Medical Association will then pursue legislative action.
RESOLUTION 6: PLAN FOR PHYSICIAN EDUCATION AND RESOURCES IN TREATING ADDICTION (GREATER LOUISVILLE MEDICAL SOCIETY) -- ADOPTED AS AMENDED
RESOLVED: that the Kentucky Medical Association pursue a plan to help educate physicians and the public on evidence based ways to prevent and treat drug addiction and disseminate this information to all physicians across the state.

RESOLUTION 7: RECOGNITION OF THE NATIONAL BOARD OF PHYSICIANS AND SURGEONS AS AN ALTERNATIVE FOR BOARD CERTIFICATION (GREATER LOUISVILLE MEDICAL SOCIETY) -- ADOPTED AS AMENDED
RESOLVED: that the Kentucky Medical Association request that the American Medical Association consider recognizing the National Board of Physicians and Surgeons (NBPAS) as an alternative to the American Board of Medical Specialties (ABMS) re-certification.

RESOLUTION 8: REDUCE CONSUMPTION OF SUGAR-SWEETENED BEVERAGES IN KENTUCKY (GREATER LOUISVILLE MEDICAL SOCIETY) -- ADOPTED AS AMENDED
RESOLVED: that the Kentucky Medical Association urge physicians to educate their patients regarding the health effects of sugar-sweetened beverages and, if necessary, encourage patients to reduce consumptions of such beverages.

RESOLUTION 9: COST OF PRESCRIPTION MEDICATIONS (GREATER LOUISVILLE MEDICAL SOCIETY) -- ADOPTED AS AMENDED
1st RESOLVED: that the Kentucky Medical Association seek opportunities to advocate for more affordable prescription medications; and be it further
2nd RESOLVED: that the Kentucky Medical Association, in cooperation with other key stakeholders (e.g. the Kentucky Pharmacists Association, the Kentucky Nurses Association, and the Kentucky Hospital Association), urge the Pharmaceutical Research and Manufacturers of America® and its member companies to reign in the cost of medications; and be it further
3rd RESOLVED: that the Kentucky Medical Association educate state legislators and the state’s congressional delegation on the severity and importance of rising prescription drug costs so that lawmakers can more effectively address the problem on behalf of Kentucky citizens; and be it further
4th RESOLVED: that the Kentucky Medical Association urge state policymakers to evaluate drug pricing and value to assess possible benefits for patients and physicians.

RESOLUTION 10: MEDICAL LICENSE RENEWAL (GREATER LOUISVILLE MEDICAL SOCIETY) -- ADOPTED AS AMENDED
RESOLVED: that the Kentucky Medical Association work with the Kentucky Board of Medical Licensure to streamline the renewal process for medical licensure.

RESOLUTION 11: MAXIMIZING THE PHYSICIAN WORKFORCE (GREATER LOUISVILLE MEDICAL SOCIETY) -- ADOPTED AS AMENDED
RESOLVED: that the Kentucky Medical Association work with the Kentucky Board of Medical Licensure and other organizations to study ways by which physicians previously licensed in the United States of America can most efficiently and safely re-enter the workforce after a period of absence from clinical care and educate the membership on the findings.

RESOLUTION 12: OPPOSING CONTRACTUAL THREATS TO PATIENTS AND PROFESSIONALISM (GREATER LOUISVILLE MEDICAL SOCIETY) -- ADOPTED AS AMENDED
1st RESOLVED: that the Kentucky Medical Association mount a vigorous program to educate physicians and physicians in-training on contract elements that may be interpreted to bar, impede or threaten physician advocacy for patient safety, quality care and cost efficiency including but not limited to: (1) Confidentiality; (2) Productivity incentives; (3) “Leakage control”; (4) Termination without cause; (5) Non-compete clauses; (6) Over-restriction of outside activities; (7) Employee “Gags”; and (8) “Anti-poaching”; and be it further
2nd RESOLVED: that the Kentucky Medical Association facilitate legal remedies for physicians facing “whistleblower” reprisals and other adverse employer actions for advocating patient safety, care quality and cost efficiency; and be it further
3rd RESOLVED: that if progress is not made on the use of restrictive contract terms by employers, the Kentucky Medical Association pursue alternative means that may include public education, legislative or regulatory action, or advocacy through the American Medical Association.
RESOLUTION 13: MAINTENANCE OF CERTIFICATION REQUIREMENTS FOR INSURANCE PLANS (GREATER LOUISVILLE MEDICAL SOCIETY AND MCCrackEN COUNTY MEDICAL SOCIETY)  -- ADOPTED
RESOLVED: that the Kentucky Medical Association oppose hospital systems, employers, insurers and other entities restricting a physician's right to practice medicine without interference due to lack of maintenance of certification or due to a lapse of time-limited board certification as long as the physician is in good standing with the Kentucky Board of Medical Licensure and has completed the required Continuing Medical Education activities necessary for maintaining a license.

RESOLUTION 14: ESTABLISH A KENTUCKY INSTITUTE OF MEDICINE (LEXINGTON MEDICAL SOCIETY)  -- REFERRED TO LONG RANGE PLANNING COMMISSION FOR FURTHER STUDY
RESOLVED: that the Kentucky Medical Association support the implementation of a Kentucky Institute of Medicine to enhance healthcare in Kentucky.

RESOLUTION 15: GRADUATE MEDICAL EDUCATION (LEXINGTON MEDICAL SOCIETY)  -- ADOPTED
1st RESOLVED: that the Kentucky Medical Association work with the Kentucky General Assembly to develop more graduate medical education positions in Kentucky; and be it further
2nd RESOLVED: that the Kentucky Medical Association inform hospitals which have never had graduate medical education programs to consider starting such programs with funding from Medicare.

RESOLUTION 16: ECONOMIC DEVELOPMENT FUNDS TO ATTRACT PHYSICIANS TO RURAL AND UNDERSERVED AREAS (LEXINGTON MEDICAL SOCIETY)  -- ADOPTED AS AMENDED
RESOLVED: that the Kentucky Medical Association advocate for the use of economic development funds to attract physicians to rural and underserved areas.

RESOLUTION 17: TORT REFORM IN KENTUCKY (LEXINGTON MEDICAL SOCIETY)  -- ADOPTED
RESOLVED: that the Kentucky Medical Association work with the Kentucky General Assembly to implement tort reform in Kentucky.

RESOLUTION 18: MEDICAL SOCIETY SOCIAL MEDIA PLATFORMS (LEXINGTON MEDICAL SOCIETY)  -- ADOPTED AS AMENDED
1st RESOLVED: that physicians be encouraged to use the Kentucky Medical Association and other medical society social media platforms; and be it further
2nd RESOLVED: that the Kentucky Medical Association's (KMA) Commission on Public Health utilize existing social media platforms to promote KMA's public health priorities and encourage Young Physician and Physician In-Training involvement.

RESOLUTION 19: DRUG PRICING (LEXINGTON MEDICAL SOCIETY)  -- REJECTED IN LIEU OF RESOLUTION 2016-9

RESOLUTION 20: SUMMARY OF CENTERS FOR DISEASE CONTROL AND PREVENTION (CDC) GUIDELINES ON OPIOID PRESCRIBING (LEXINGTON MEDICAL SOCIETY)  -- ADOPTED AS AMENDED
RESOLVED: that the Kentucky Medical Association promote the Center for Disease Control's single page Checklist for Prescribing Opioids.

RESOLUTION 21: CENTRALIZED EVENTS CALENDAR (LEXINGTON MEDICAL SOCIETY)  -- ADOPTED
RESOLVED: that the Kentucky Medical Association will maintain a central events calendar that is coordinated among the different constituent organizations to mitigate overlap as much as possible.

RESOLUTION 22: KMA SUPPORT OF KENTUCKY COUNTY EDUCATION FOUNDATIONS (LEXINGTON MEDICAL SOCIETY)  -- ADOPTED AS AMENDED
1st RESOLVED: that the Kentucky Medical Association encourage its membership in each county to promote and establish foundations to provide scholarships to students in each county; and be it further
2nd RESOLVED: that the Kentucky Medical Association provide information to county medical societies on issues regarding scholarships and other possible charitable activities undertaken by the societies, including basic tax issues to consider when conducting such activities.
RESOLUTION 23: “PAY FOR PERFORMANCE” MEASURE VALIDATION (ISHMAEL STEVENS, M.D.) -- ADOPTED
1st RESOLVED: that the Kentucky Medical Association support efforts to require that ongoing access to a physician’s performance data be provided by the measuring entities in a manner that ensures that the data is being received and is valid; and be it further
2nd RESOLVED: that the Kentucky Medical Association encourage its members to become active in validating the receipt and accuracy of their performance data; and be it further
3rd RESOLVED: that the Kentucky Medical Association support efforts by state and federal legislators to enact legislation supporting the accurate collection and validation of physician performance data.

RESOLUTION 24: DUE PROCESS PROTECTIONS FOR PHYSICIANS (NAREN JAMES, M.D., CORAZON VEZA, M.D., AND THE NORTHERN KENTUCKY MEDICAL SOCIETY) -- ADOPTED AS AMENDED
1st RESOLVED: that the Kentucky Medical Association support regulatory and/or legislative action that upholds due process protections for physicians; and be it further
2nd RESOLVED: that the Kentucky Medical Association support due process protections for physicians that require regulatory boards and employers to demonstrate that proposed actions against physicians are least disruptive to the patients they serve and to their professional careers.

RESOLUTION 25: ADDRESSING THE ADDICTION EPIDEMIC IN KENTUCKY (NAREN JAMES, M.D.) -- REJECTED

1st RESOLVED: that the Kentucky Medical Association support efforts to research the effects of secondhand smoke on children and minors riding in cars with someone smoking; and be it further
2nd RESOLVED: that the Kentucky Medical Association collaborate with state and local health care organizations to educate the public about the harmful effects of secondhand smoke in cars with minors; and be it further
3rd RESOLVED: that the Kentucky Medical Association support state and local provisions that prohibit smoking in cars with minors.

RESOLUTION 27: NEUTRAL POLICY LANGUAGE ON ABORTION (SAMANTHA EDWARDS, KATHARINA PERLIN, AND MALLIKA SABHARWAL – STUDENTS, UNIVERSITY OF LOUISVILLE, SCHOOL OF MEDICINE) -- REFERRED TO THE COMMISSION ON PUBLIC HEALTH AND THE COMMISSION ON YOUNG PHYSICIANS AND PHYSICIANS IN-TRAINING FOR FURTHER STUDY
1st RESOLVED: that the Kentucky Medical Association rescind the policy that states abortion on demand be discouraged at any time; and be it further
2nd RESOLVED: that the Kentucky Medical Association will take no action which may be construed as an attempt to alter or influence the personal views of individual physicians regarding abortion procedures.

RESOLUTION 28: ADVERSE EFFECTS TO RURAL AREAS FROM 2012 HOUSE BILL 1 (DANESH MAZLOOMDOOST, M.D.) -- ADOPTED AS AMENDED
RESOLVED: that the Kentucky Medical Association urge relevant state agencies, such as the Legislative Research Commission, to study the overall effects of 2012 House Bill 1 and its impact on access to quality care.

RESOLUTION 29: PHARMACY USE OF MEDICATION DISCONTINUATION MESSAGING FUNCTION (DAVID BENSEMA, M.D.) -- ADOPTED AS AMENDED
1st RESOLVED: that the Kentucky Medical Association strongly encourage all software providers and those pharmaceutical dispensing organizations that create their own software to include the functionality to accept discontinuation message transmittals in their electronic prescribing software products; and be it further
2nd RESOLVED: that the Kentucky Medical Association strongly encourage all dispensing pharmacies, accepting medication prescriptions electronically, to activate the discontinuation message transmittal functionality in their electronic prescribing support software.
Physicians are being called upon to be leaders now more than ever before.

“The development of leadership skills for physicians of the 21st century is critical to medicine,” said Shawn Jones, M.D., chair of the new Kentucky Physicians Leadership Institute (KPLI). “More than ever before, doctors are being called upon to fulfill roles on committees, in large health systems, and in administration of hospitals and hospital groups.

“There is no better place and no organization doctors trust more than the Kentucky Medical Association to provide excellent educational opportunities.”

Accordingly, KMA, in conjunction with its charitable organization, the Kentucky Foundation for Medical Care, recently launched a new leadership initiative called LEED – Leadership through Education, Experience and Development.

The LEED initiative offers a continuum of programs to cultivate and train physicians from all backgrounds and all regions of the state from the time they are medical students until they become leaders in their field.

LEED encompasses the KMA Community Connector Leadership Program (CCLP), the Kentucky Physicians Leadership Academy and the KMA Medical Student Outreach and Leadership Program (MSOL).

It now also includes the new Kentucky Physicians Leadership Institute (KPLI), which will launch in 2017 in conjunction with Butler University.

The KPLI is a deeper dive into leadership skills and will include four weekends of leadership training focused on personal leadership skills, business leadership and advocacy. It will culminate with the Kentucky Physicians Leadership Academy at the KMA Annual Meeting. Only 15 applicants will be accepted each year.

“We believe this (KPLI) will be a good start for someone who would like to be chair of a committee, be head of a medical society, be head of a specialty society, or take another leadership role in the community in public health in other ways,” said KMA Executive Vice President Pat Padgett.

The CCLP was started in 2014 to provide an opportunity for physicians to enhance their leadership skills through education and direct community involvement. The CCLP just graduated its third class of graduates and includes a total of 25 physicians who’ve completed the program.

The Kentucky Physicians Leadership Academy, open to all KMA members, is a daylong session focused on leadership during the KMA Annual Meeting.

The MSOL program is designed to promote community involvement, as well as to give students an opportunity to learn more about the political, social and economic issues in the health care system. Twenty-three medical students from the University of Kentucky and the University of Louisville were recognized in the first class at the 2016 KMA Annual Meeting.

“By virtue of what we do every day in medicine, we are already seen as leaders,” Dr. Jones said. “Why not leverage that influence through professional leadership development?”

“KMA is singularly poised in the Commonwealth with the organizational capacity, expertise and desire, particularly with respect to leadership training, to serve the physicians of the state.”

To learn more about the leadership programs offered through the KFMC and KMA, visit www.kyma.org or www.kyfmc.org.
Kentucky is one of the unhealthiest states in the nation, so it’s no surprise that physicians—who deal with those challenges on a daily basis—liked what they heard about the healthiest places in the world.

Tony Buettner, project manager with Blue Zones, shared insights into the longest-lived communities during the Kentucky Physicians Leadership Academy at the KMA Annual Meeting.

“Studies have shown than within the first seven months of a diet, over 90 percent of individuals will have given up and gym membership attendance typically drops 70 percent after two years,” Buettner said.

The leadership academy, sponsored by the Kentucky Foundation for Medical Care, made an impact on many physicians in attendance.

Buettner talked about practical ways to transform the health of communities and the cultural traits of the longest-lived and healthiest places in the world. Blue Zones strives to help people live longer, better lives.

“I’ve come across so much information here; it’s one of the best meetings I’ve been to,” said Jerry Westerfield, M.D., a radiologist at Russell County Hospital in Russell Springs. “I’m in a population like most other people in Kentucky with obese, smoking, people who don’t exercise. We’re now working on putting in a walking/biking path all around our property to encourage not only our employees to walk but also other people in the town to walk.”

Other speakers at the Leadership Academy addressed timely topics facing physicians.

Bruce Bagley, senior adviser to the Professional Satisfaction and Practice Sustainability effort at the American Medical Association, discussed the AMA's STEPS Forward™ program, a practice-based initiative aimed at helping physicians meet the Quadruple Aim—better patient experience, better population health and lower overall costs with improved professional satisfaction.

STEPS Forward is designed to help the office staff help the physicians do better work. “Team-based care gets better results,” Bagley said.

“We (physicians) need to look at utilizing nurses, nurse practitioners and the front office,” said Kristie Jones Paris, M.D., a physician and radiology oncology professor at the University of Kentucky Department of Radiation Medicine in Lexington. She said Bagley’s presentation helped her learn more about the skill set her staff needs that will not only help the patient, but will ultimately benefit her as well.

With changes like electronic health records increasing administrative tasks and time spent working, physicians often have little time to rejuvenate and spend time with family. But Bagley said things like that—and MACRA, insurance plans and other things people “are doing to us”—only account for a small amount of the burnout factors.

“Only about 20 percent of why you feel hammered at the end of the day has to do with those things,” he said. “Eighty percent is about operational inefficiencies.”

Attorneys Karen Paulin, with Vice Cox & Townsend PLLC, and Demetrius Holloway, with Stites & Harbison PLLC, discussed fostering respect and trust in the workplace.

“I thought the issues on liability were well thought out,” said Donald Wilson, M.D., F.A.C.O.G., medical director at PrimaryPlus in Maysville.

The Leadership Academy speakers also included students who were part of the 2014 Destination Imagination Team from Middlesboro Elementary School that worked with the Middlesboro City Council to adopt the public smoking ban. They were awarded the KMA Debra K. Best Outstanding Layperson Award for their efforts.

“You have no idea how many lives you have saved,” John Johnstone, M.D., a Richmond cardiologist, told the students. “I wish so many people in this state could emulate you all. We need to learn from you.”

For the past year, the Kentucky Medical Association and its charitable arm, the Kentucky Foundation for Medical Care, have joined with other stakeholders for its Commit to Quit smoking cessation campaign. KMA has lobbied for a statewide smoking ban during the most recent legislative sessions.
Physician leaders are needed to educate business, government and civic leaders in their communities on the importance of quality medical care and the physician-patient relationship to avoid further intrusions on the practice of medicine.

KMA Community Connectors are physicians who are engaged in their communities in an effort to promote KMA policies & the practice of medicine in Kentucky by working with business, government & civic leaders. Nine physicians from across the state participated in the inaugural class in 2014 and seven physicians completed the program in 2015. The Community Connector Leadership Program prepares and supports physicians in leadership roles and offers grants to nonprofit organizations.

KMA recognized nine physicians from across Kentucky for completing the KMA Community Connector Leadership Program in 2016 during the KMA Annual Meeting.

To qualify as a KMA Community Connector, a physician must:

- Become an active member of the Kentucky Medical Association.
- Complete an informational webinar at www.kyma.org to learn details about the program.
- Serve in a leadership role within medicine. This can include a leadership position in an organized medical society, organized medical staff, group practice or public health department.
- Serve in a leadership role in the community at large. This can include a leadership position in a civic, religious or political group.
- Participate in a public education activity designed to improve public health or educate the public on health issues.
- Attend and complete the KMA Leadership Academy, which will equip physicians with the tools needed to become an effective leader within the profession and community.
- Let KMA know. Email Laura Hartz at hartz@kyma.org about your intent to participate. KMA staff will be in contact with participants regarding important dates and program information.
According to CBS Money Watch, if you are “brilliant, ambitious and gifted in science,” you should “think again” before you consider being a doctor. They cite that the increasing administrative tasks are only matched by the increasing amount of debt that medical students graduate with—which averaged $180,000 in 2014.

The fact that major news outlets are redirecting bright students to a different field is a testament to the challenge that we face as medical students. We are tasked with becoming a computer database of medical knowledge, maintaining a well-rounded resume and ignoring the debt and bureaucracy for as long as possible.

The KMA has taken on the role of helping students with this challenge. The Medical Student Outreach and Leadership Program (MSOL Program) encourages students to engage in the bureaucracy early on, and furthermore incentivizing this engagement with a resume-worthy project. Through a series of well-organized lunch-and-learn style lectures, KMA teaches students topics that are not covered on our board exams, but are increasingly relevant to our future career. Topics include such things as how physician reimbursement works, what our options are when it comes to signing contracts, and the importance and logistics of contacting our legislators. This program has the potential to create a new generation of physicians with ownership of the medical system and the ability to change it for our benefit.

Speaking as a medical student, we are always looking for anything that saves us time and stress. The topics covered in this program are things that never leave the recesses of our mind but can’t be tackled in a single Google search. Having someone walk you through the tenuous subject of health care finance is a large weight that can be taken off of our shoulders. I would recommend this program to any student looking to transform their sensation of burden and concern regarding the medical system to one of empowerment.
PREPARE FOR ANOTHER LICENSE RENEWAL CYCLE

As we approach the end of 2016 and the holiday season, the Kentucky Board of Medical Licensure is preparing for the start of another renewal cycle for all licensed physicians in the Commonwealth.

In mid-December, physicians holding an active medical or osteopathic license will receive a notice by mail with instructions to renew his/her license for 2017. In order to complete this renewal process, physicians are required to verify and update their unique licensure information and pay a renewal fee of $150. Please note physicians that choose to renew via a paper application must pay an additional fee of $10. The link to renew a medical or osteopathic license will be available on the Board’s website, www.kbml.ky.gov, beginning the first week of January 2017.

The Board would like to announce that it has elected new officers to serve in leadership positions for the upcoming year. Randel C. Gibson, D.O., of Mayfield, was recently elected to serve as the Board’s new president. Dr. Gibson, who previously served as vice president of the Board for nine years, is the first osteopathic physician to be named president of the Board. C. William Briscoe, M.D., of Corbin, was elected to serve as vice president and Russell Travis, M.D., of Lexington, was elected as secretary. Dr. Briscoe will continue to serve as chairman of the Board’s Inquiry/Hearing Panel A and Dr. Travis is the new chairman of the Board’s Inquiry/Hearing Panel B.

In addition to the election of officers, the Board would like to welcome its two newest members. Hiram C. Polk Jr., M.D., of Louisville, is now serving on the Board in his capacity as the Commonwealth’s Commissioner of Public Health. Michael E. Fletcher, M.D., who practices anesthesiology, interventional pain management and addiction medicine in Crestview Hills, was appointed by Gov. Matt Bevin and fills the vacancy left by Preston P. Nunnelley, M.D., who recently announced his retirement from medicine.

The Board would like to take this opportunity to thank Dr. Nunnelley for his 24 years of service and will formally recognize him for his efforts during its December meeting. During his tenure, Dr. Nunnelley served as the chairman of the Board’s Inquiry/Hearing Panel B for 10 years and as president of the Board for the past nine years. Words cannot express the Board’s appreciation to Dr. Nunnelley for his service not only to the citizens of the Commonwealth, but also to the physicians of Kentucky. His passion and dedication for public protection was constant throughout his time on the Board and his leadership abilities helped guide the Board for many years. The Board would like to extend its best wishes to Dr. Nunnelley and his wife, Lucille, on a very well deserved retirement.

In closing, the Board would like to extend our holiday best wishes to all during this joyous time of the year. In the event that you have a question for the Board, please feel free to contact our office via correspondence at 310 Whittington Pkwy, Louisville, KY 40222, or via phone at (502) 429-7150.
50 YEARS AND COUNTING

J. Kenneth Allen, M.D. | Louisville
David T. Allen, M.D. | Louisville
Joseph C. Babey III, M.D. | Prospect
P. Bruce Barton, M.D. | Corbin
Fe Leano Bautista, M.D. | Mount Washington
Garry N. Binegar, M.D. | Okatie
Voltaire C. Briones, M.D. | Louisville
C. William Briscoe, M.D. | Corbin
Charles M. Brohm, M.D. | Prospect
John L. Bunting, M.D. | Louisville
Wigberto C. Camomot, M.D. | Louisville
Glyn G. Caldwell, M.D. | Frankfort
Michael E. Daugherty, M.D. | Lexington
Ronald J. Elin, M.D. | Prospect
Rachel R. Eubank, M.D. | Evarts
Philip J. Feitelson, M.D. | Louisville
Fred Z. Ferris, M.D. | Naples, Fla.
Robert D. Fields, M.D. | Mayfield
James F. Fitzpatrick, M.D. | Louisville
Ralph T. Fossett, M.D. | Morehead
Cyrus Z. Ghazi, M.D. | Louisville
Jerry L. Gibbs, M.D. | Glasgow
William J. Godfrey, M.D. | Elizabethtown
J. Roger Goodwin, M.D. | Louisville
Agripina D. Grino, M.D. | Paintsville
Owen K. Hitt, M.D. | Louisville
Tsung Yao Huang, M.D. | Louisville
Harry B. Huntsman, M.D. | Greensburg
Mohammed Hussain, M.D. | Jeffersonville, Ind.
William M. Johnson, M.D. | Pikeville
Edward Joseph, M.D. | Jacksonville, Fla.
Edgar M. McGee, M.D. | Lexington
Ira P. Mersack, M.D. | Lexington
H. Brooks Morgan, M.D. | Nashville
James P. Moss, M.D. | Louisville
Syed M. Nawab, M.D. | Prospect
Edwin J. Nighbert, M.D. | Lexington
Chandrakant C. Patel, M.D. | Louisville
John W. Poundstone, M.D. | Lexington
Robert W. Powell, M.D. | Louisville
Ben A. Reid Sr., M.D. | Louisville
Harold D. Rosdeutscher, M.D. | Bowling Green
Nooshafarin Sahebjami, M.D. | Cincinnati, Ohio
Ewell G. Scott, M.D. | Morehead
Raymond G. Shea, M.D. | Louisville
Christopher B. Shields, M.D. | Louisville
Frank G. Simon, M.D. | Louisville
Barry S. Stoler, M.D. | Louisville
Richard G. Stoltzfus, M.D. | Harlan
Howard Stone, M.D. | Louisville
John C. Tapp, M.D. | Bowling Green
Rajinder K. Thind, M.D. | Louisville
Ronald E. Waldridge II, M.D. | Shelbyville
Gary R. Wallace, M.D. | Lexington
Isabelita P. Wijangco, M.D. | Louisville
Hugh H. Wilhite, M.D. | Calhoun
Janice W. Yusk, M.D. | Louisville
John F. Yusk, M.D. | Prospect
F. Douglas Scutchfield, M.D. | Lexington
Robert Steinberger, M.D. | Bloomington, Ind.

Rachel Eubank, M.D., of Evarts, who has been practicing medicine for 50 years or more, attended the KMA Annual Meeting in September.
Photo by David Knapp
<table>
<thead>
<tr>
<th>Name</th>
<th>County</th>
<th>Date</th>
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<td>COY E. BALL, M.D.</td>
<td>Daviess County</td>
<td>5/31/2016</td>
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<td>PATRICK T. BIRRE, M.D.</td>
<td>Kenton County</td>
<td>11/16/2015</td>
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<td>JOSEPH B. BRILL, M.D.</td>
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<td>HAROLD L. BUSHEY, M.D.</td>
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List of deceased KMA Member physicians as of Aug. 11, 2016
The Kentucky Foundation for Medical Care works to improve the lives of all Kentuckians through medical education and public health initiatives, such as these programs.

The KFMC has launched the LEED initiative to help cultivate leadership skills in physicians and medical students.

The KFMC was the lead sponsor in the Commit to Quit smoking cessation campaign, partnering with health care groups throughout Kentucky.

KFMC Contribution Levels
- Legacy $5,000+
- Visionary $1,000-$4,999
- Benefactor $500-$999
- Partner $250-$499
- Supporter $25-$249

Contribute at www.kppac.org or mail a contribution to:
KPPAC
9300 Shelbyville Rd. Ste 850
Louisville, KY 40222-5178

Robert H. Couch, M.D.
KPPAC Chair 2016

“Government regulations impact every aspect of our profession. Having a robust PAC ensures we can be engaged at the state and federal level as policymakers continue to make changes that fundamentally alter the doctor-patient relationship.”

Are YOU ready to LEAD?

The Kentucky Physicians Leadership Institute, presented by the Kentucky Foundation for Medical Care through KMA, is designed to enhance the leadership skills of physicians who can fill emerging leadership roles and influence health care policy in the ever-evolving world of medicine. Only 15 physicians accepted. Visit www.kyma.org and www.kyfmc.org to learn more and to apply.

2017 Schedule

The Personal Side of Leadership
Friday, July 14-Saturday, July 15
Introduces participants to many of the critical communication skills associated with being an effective leader. Emphasis placed on how to use those skills.

From Leadership to Advocacy
Friday, Aug. 11-Saturday, Aug. 12
Introduces participants to the critical role advocacy plays in ensuring access to health care at the community level.

The Business of Leadership
Friday, July 28-Saturday, July 29
Introduces participants to the structure and language of business. Participants gain an understanding of components of health care organizations.

Leadership in Action
Saturday, Aug. 26 (At KMA Annual Meeting)
Provides participants with an opportunity to engage in an in-depth analysis of a key issue facing health care today. Designed to complement other modules.
WE’VE MOVED

9300 Shelbyville Road | Suite 850
Louisville, KY 40222-5178

Telephone numbers, website, email addresses all stay the same