FOR THE RECORD

•••• The Journal of the Kentucky Medical Association





November 2015



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MEET KMA PRESIDENT THEODORE H. MILLER, MD, PhD

EDGEWOOD PHYSICIAN SAYS ORGANIZED MEDICINE MORE IMPORTANT NOW THAN EVER

The 2015 Kentucky Medical Association president, Theodore Miller, MD, PhD, is a strong believer in organized medicine.

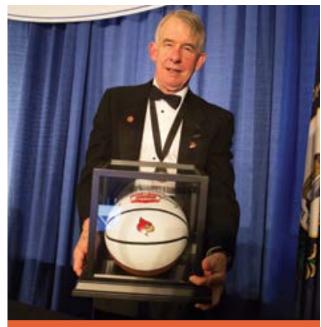
"I think organized medicine is more important now than it's ever been," Miller said recently.

This is due to the fact that changes in the practice of medicine make it more critical than ever for physicians, in both private and employed practice, to have access to quality educational materials, to have input into advocacy efforts on their behalf, and to have the ability to communicate with their peers regarding these issues. This is where KMA is invaluable. Dr. Miller advised that, with its education, advocacy and communication capabilities, "the KMA is the organization that looks out for physicians" in the Commonwealth.

Dr. Miller's personal journey to leadership in the KMA has been somewhat circuitous.

Early Academic Years

Dr. Miller's early academic career was colored by the events of the late '60s. He grew up in Northern Kentucky attending Covington Latin School, an accelerated parochial school intended to prepare students for a career in



KMA President Ted Miller, MD, PhD, is an avid University of Louisville sports fan. Immediate Past President David Bensema, MD, presented Dr. Miller with the encased Louisville Cardinals basketball autographed by former Coach Denny Crum. Photo by Jaclyn Heeke

the professions. He entered college at age 15 majoring in psychology and was in the first class to graduate from the new campus of Thomas More College in 1969.

He attended graduate school on fellowship in experimental psychology at Loyola University of Chicago aiming for an academic career. He was planning to do a master's thesis studying visual depth perception cues in rats after surgically eliminating portions of the visual pathways. This research would have required extensive animal surgery and behavioral testing.

With the war in Vietnam, the draft board had different plans for Dr. Miller. After a year of being misclassified by the draft board as a college student, in September 1970, he received a notice to show up for induction into the Armed Services in two weeks.

"That was kind of a shock," he related.

He was able to defer induction for six months. This allowed time to apply for and be accepted into a Navy program that would enable him to finish his master's and doctoral degrees while on inactive duty, then go on active duty doing research.

This necessitated a more expeditious master's thesis. Loyola was resurrecting the Parmly Hearing Institute and the new director needed a graduate student to help in his research interests. Dr. Miller completed his master's and doctoral research in psychoacoustics, the study of the auditory system through human behavior. Specifically, he studied binaural auditory detection in masking situations. Research in this area led to later developments such as noise-cancellation headphones.

The Navy's Bureau of Personnel waited patiently until all requirements for the PhD were completed in 1973.

Military Service

Dr. Miller's active duty assignment was in the Auditory Branch of the Submarine Medical Research Laboratory New London in Groton, Conn. He was an officer in the Medical Service Corps and did research on the ability of the human auditory system to tolerate noise exposure in high-pressure environments such as hard-hat diving suits and hyperbaric chambers. This involved pioneering the calibration of microphones and earphones in high pressures. As part of his duties, he also stood the Administrative Officer's watch at the base hospital at night and on weekends.

Medical Roots

Dr. Miller's interest in medicine developed slowly over many years.

During graduate school, he took courses with premed undergraduates to facilitate his understanding of the auditory system. He also read the otolaryngology literature extensively to broaden his understanding of auditory physiology and anatomy. He continued to delve into the medical literature in the Navy.

This led him to consider a career in medicine. He asked a physician friend in the Navy about embarking on a medical career. The friend's response was positive and he encouraged this endeavor, but he cautioned that "the hardness is only exceeded by the longness."

Thus encouraged, Dr. Miller was able to take courses while on active duty to fill out the biological science background needed for application to medical school. He applied to several medical schools, but reduced the number to the two Kentucky schools in existence at that time. He was accepted by both schools and chose Cardinal red.

Medical Career

Dr. Miller enrolled at the University of Louisville School of Medicine in 1976 after his honorable discharge from the Navy with the rank of full Lieutenant. As all medical students do, he tried to decide on an area of interest for postgraduate training. With his background in hearing and animal surgery, ENT seemed a natural choice. A clinical rotation with Dr. Gordon McMurry helped him decide on otolaryngology.

During the medical school years, Dr. Miller and his wife of 41 years, Marianne, developed an interest in University of Louisville basketball and football. They also completely renovated a turn-of-the-century home in Old Louisville in their spare time. The couple currently reside in a pre-Civil War home that they restored.

On graduation in 1980, with no residency match in existence, Dr. Miller had to decide between a residency spot at the University of Iowa and one at the University of Cincinnati. Although the Iowa program was very highly regarded both academically and clinically, the Cincinnati program was closer to his family in Northern Kentucky and to his wife's family in Cincinnati.

Following five years in the Otolaryngology-Head and Neck Surgery residency at the University of Cincinnati and after a brief time in a group practice north of Cincinnati, Dr. Miller began solo practice in both Ohio and Kentucky. This was logistically difficult and he started practicing solely in Northern Kentucky. He remained solo for 20 years before joining a large ENT practice nine years ago.

Outside Interests

In 2001, one of Dr. Miller's patients who was a nurse asked if he was interested in medical mission work. Since he was in solo practice at that time, it was financially difficult to be away from the practice for any length of time. But the nurse suggested a Catholic medical mission to a small town in the mountains of central Mexico. This was only 10 days in duration.

Dr. Miller and the nurse, both actively practicing Catholics, joined a group in Dallas that traveled to Mexico two weeks after the 9/11 attack. The patients were very grateful for the care they received, and Miller said it was rewarding to be able to visit them in subsequent years and see how they had benefitted from treatment. Dr. Miller continued making the trip for 10 years.

Organized Medicine

Dr. Miller served as a delegate from the Eighth Trustee District (Northern Kentucky) for a number of years.

He wanted to learn more about how the KMA functioned and it was suggested that he become the Alternate Trustee from the Eighth District. The Trustee had to move out of the area within a year or so, and Dr. Miller became Trustee.

Under the tutelage of Drs. William Monnig and Donald Swikert, both former KMA presidents, Dr. Miller eventually served on the KMA Executive Committee. He then served as Vice Chair and then Chair of the Board of Trustees. He then was elected Vice President and President-Elect and was recently installed as President of the KMA. He also is a longtime AMA member and has attended the AMA Annual Meeting in Chicago for several years.

Miller readily admits that he is conservative by nature, but he believes the Focus Forward Initiative, started under former KMA President, Fred Williams, MD, was vitally needed. It was necessary to align KMA services with the needs of physicians of today, he said. He plans to continue to implement and further develop that initiative during his term as KMA President.

Dr. Miller strongly believes organized medicine will continue to play an important role in maintaining the medical profession and the doctor-patient relationship so vital to the clinical practice of medicine. He also believes the key to improving membership numbers in organized medicine is for individual members to exhibit enthusiasm for the role of organized medicine. This enthusiasm, he said, can be infectious and is what attracted most physicians to organized medicine in the first place. This is especially important in appealing to younger physicians who bring new ideas and vitality to the work of the KMA.

PRESIDENT'S MESSAGE

MEDICINE-AND KMA-ARE CHANGING



It is certainly a great honor and privilege to serve as the President of the Kentucky Medical Association. As we begin a new chapter in the 165year history of the KMA, I, too, am beginning a new phase of my involvement in organized medicine.

Although I served in the U.S. Navy and have done some sailing as a civilian, I would never think of myself a "sailor."

From my limited experience in civil aviation, however, I know that unless you are sure of your current position, it is very difficult to chart a course to a new position. It is important at times such as these to reflect on the current state of organized medicine in general, and of the KMA in particular.

The practice of medicine has been fundamentally transformed since I received my diploma from the University of Louisville in 1980. I remember that, when I was considering a career in medicine in the early 70s, I approached my family physician, Dr. Meyer Jolson, who practiced in downtown Covington. I advised him of my thoughts in this regard and asked him what he thought about the profession. He said that medicine was still a great calling, but that it just was not as much fun as it had been before.

Health care in Kentucky and across the nation has undergone tremendous changes, and continues to do so. To paraphrase a 1980s vintage automobile marketing plan, "this isn't your father's practice of medicine anymore."

The KMA also had changed over that period of time in an effort to keep apace of the changes in medicine. Two years ago, the KMA President, Fred Williams Jr., MD, recognized the need for more rapid changes in the organization to better serve our membership. He was also concerned about the difficulty of getting young physicians, especially employed ones, to see the value

By Theodore H. Miller, MD, PhD | KMA President

of organized medicine. He surveyed the membership to see what they wanted out of organized medicine.

Dr. Williams recruited a strategic planning committee to make recommendations to the Board of Trustees. These recommendations resulted in a revision of our committee structure, a change in format of the Annual Meeting and a renewed emphasis on political advocacy. He also initiated the Community Connector program to increase the activity and leadership of physicians in their communities. Dr. David Bensema last year worked diligently to implement these changes. But there is still much more work to be done.

"I THINK OUR MEMBERSHIP HAS WHAT IT TAKES INTELLECTUALLY AND MORALLY TO OVERCOME ANY **OBSTACLES TO THE PRACTICE OF QUALITY MEDICINE."**

I am optimistic that we can accomplish this work. But what is the basis of my optimism?

- The quality of our membership. Medicine still attracts some of the best and brightest minds of any profession. Physicians tend to be altruistic and highly motivated for the good. I think our membership has what it takes intellectually and morally to overcome any obstacles to the practice of quality medicine.
- The quality of those involved in organized medicine. This is what attracted me and many of my colleagues to organized medicine. Many physicians are willing to sacrifice for the good of the profession. This is true on the state and national level.
- The awakening of political awareness among physicians. We are beginning to become more aware that how we practice our profession is, in large part, determined by the laws of the nation and state in which we practice.
- The quality of the staff and political advisers that the KMA has assembled over the years.

• The increased role of Kentucky physicians in shaping the direction of the American Medical Association.

There are clearly many challenges ahead for our profession and for organized medicine. The KMA has moved to become better positioned to deal with these challenges. That process of reasoned change will continue during my presidency.

I am committed to doing all that I can to promote the

2015 KMA HOUSE OF DELEGATES ELECTION RESULTS

PRESIDENT-ELECT (1 YEAR) Nancy C. Swikert, MD | Union

VICE PRESIDENT (1 YEAR) R. Brent Wright, MD | Glasgow

AMA DELEGATE (2 YEARS)

David J. Bensema, MD | Lexington Frank R. Burns, MD | Louisville J. Gregory Cooper, MD | Cynthiana Bruce A. Scott, MD | Louisville Donald J. Swikert, MD | Union

AMA ALTERNATE DELEGATE (2 YEARS)

James F. Beattie, MD | Bowling Green Robert H. Couch, MD | Louisville Shawn C. Jones, MD | Paducah William B. Monnig, MD | Edgewood Robert A. Zaring, MD | Louisville

TRUSTEES

District 2 Paul E. Moore, MD | Henderson

District 6 (Two Years)* Wayne Hendrix, MD | Bowling Green

District 7 Benjamin Kutnicki, MD | Warsaw

*Partial term vacated by another Trustee/Alternate Trustee

involvement of more of our membership and also more practicing physicians in general in our work. This will require every member of our association to be enthusiastic about the organization and to promote it to other physicians. We need to show our enthusiasm to attract others.

That may be our biggest challenge, but I believe we can overcome it.

District 9 Donald R. Wilson, MD | Maysville

District 10 Dale E. Toney, MD | Lexington

District 13 J. Roger Potter, MD | Ashland

ALTERNATE TRUSTEES

District 2 Charles E. Bea, MD | Owensboro

District 5 (Two Years)* Russell A. Williams, MD | Louisville

District 6 (Two Years)* William C. Thornbury, MD | Glasgow

District 7 Vacant

District 9 Vacant

District 10 Thomas K.Slabaugh Jr, MD | Lexington

District 11 (Two Years)* John M. Johnstone, MD | Richmond

District 13 Ishmael W. Stevens, MD | Ashland

District 15 (Two Years)* Vacant

2014-2015 KMA REPORT TO THE MEMBERSHIP

The Kentucky Medical Association's committees and commissions have been active over the past year. This report was presented to delegates to the KMA 2015 Annual Meeting held in late August.

KMA adopted recommendations from the Focus Forward strategic planning committee, which included a reorganization of many KMA committees into six new commissions; a renewed focus on advocacy; changes to the KMA Annual Meeting; and modernization of KMA's communications platforms. KMA President David Bensema, MD, made implementation of these changes an ongoing theme throughout the year.

Commission on Legislative and Political Advocacy

Chaired by Donald J. Swikert, MD, this commission largely focused on legislative advocacy—seeking passage of KMA's legislative goals and objectives into law and resisting the enactment of bills that are not in the best interest of the public or profession—up to and during the 2015 Kentucky General Assembly. The commission, in cooperation with the KMA Legislative Quick Action Committee, oversaw a successful legislative session. These KMAsupported bills passed the General Assembly and were signed by Gov. Steve Beshear.

 House Bill (HB) 213, otherwise known as the Heroin Bill, was one of KMA's top-five legislative priorities. The measure contained key provisions lobbied by KMA to address the heroin epidemic, including protections for By R. Brent Wright, MD | Chair, KMA Board of Trustees

Good Samaritans who report an overdose to the authorities, greater access to naloxone by first responders, and money for addiction treatment programs.

- HB 248 eliminates outdated HIV/AIDS training requirements for health care professionals and helped KMA achieve another top-five legislative goal—relief from mandates for issue-specific CMEs.
- Senate Bill (SB) 61, a measure introduced by Sen. Ralph Alvarado, MD, R-Winchester, will assure full coverage of colorectal cancer screenings and is expected to increase the number of patients who get life-saving, advance screenings.
- SB 77, also known as the "MOST" bill, creates a single, uniform document that summarizes a patient's health care decisions and can be used across all health care settings.
- SB 44 allows patients who suffer from chronic diseases to "sync" their maintenance medications and refill them on one appointed day each month.
- HB 258 will increase the number of physician assistants a doctor can supervise from two to four.
- HB 377 expands the reach of collaborative care agreements to include multiple physicians and pharmacists caring for a specifically identified patient.
- SB 51 allows a physician to discharge the duty to warn and still enjoy the liability protection afforded by the law when the patient is involved in outpatient care.



• SB 107 eliminates the Annual Disclosure of Ownership requirement and instead aligns Medicaid reporting mandates with the less onerous deadlines set by federal law.

Although the following bills were not passed by the legislature, they garnered significant attention and the subject matter will likely be debated during the 2016 regular session: maintenance of certification/maintenance of licensure (SB 58), medical review panels (SB 6), smoke-free policy (HB 145), and fair contracting (SB 87).

The commission also addressed a significant federal issue in 2015. KMA representatives met with the Kentucky congressional delegation to advocate for the passage of HR 2, the "Medicare Access and Chip Reauthorization Act," or MACRA, which was a bipartisan effort to eliminate the flawed Medicare sustainable growth rate (SGR) formula.

KMA also asked members to engage in grassroots advocacy by contacting their representative and senator to express support for the measure. These efforts, which complemented the efforts of the AMA, proved successful. In early 2015, Congress overwhelmingly passed the legislation.

Key provisions of the legislation include:

- The SGR was repealed immediately.
- Positive annual payment updates of 0.5 percent will be provided for four-and-a-half years, beginning July 1, 2015.
- The current Medicare quality reporting programs will be replaced with a simplified and consolidated meritbased incentive payment system, or MIPS.
- A 5 percent incentive payment for physicians is provided for physicians who participate in alternative payment models and meet certain thresholds.
- The Children's Health Insurance Program (CHIP) will be extended through 2017.
- The decision by the Centers for Medicare and Medicaid Services (CMS) to eliminate bundled payments for 10-day and 90-day global surgical services will be reversed; instead, CMS would collect data on these services beginning in 2017 to determine the accuracy of payment rates.

Commission on Long Range Planning

Chaired by Michael Kuduk, MD, this commission reviewed changes to the KMA Annual Meeting that resulted from recommendations in the recent KMA strategic plan, along with the new KMA Community Connector program. Commission members also provided input on changes being made to KMA's member communications, which also resulted from the strategic plan. Cardiology. KMA also presented several Medicaid and ACA update programs for the American Academy of Professional Coders (AAPC) Kentucky and Southern Indiana chapters. KMA also received formal designation as an Independent Review Organization (IRO) under Medicare.

Significant discussion took place regarding KMA's dealings with rural county societies in Kentucky, focusing on those that charge member dues. Over the past few years, KMA has reached out to rural counties with proposals for joint projects, but only a few have responded. Information regarding activity level within these county societies was also reviewed, although it was noted that little information is available. In addition, the commission discussed the possibility of conducting specific public outreach on major issues, and once again offering to counties the opportunity to work with the KMA to promote such issues. This project was discussed during a joint meeting with the Commission on Legislative and Political Affairs in April.

Medical Economics Commission

Chaired by Robert Couch, MD, this commission met four times in 2015, developed a mission statement, and discussed managed care and public health priorities, as well as the Physician Compare website.

The commission helped develop the KMA Barriers to Screenings survey of KMA members, which assisted in advocacy efforts with payers by showing the many systemic barriers to achieving the state's public health priorities. KMA President David Bensema, MD, highlighted the results of the survey in major media outlets across the state.

Based on the feedback from the commission and the survey, KMA offered Continuing Education Units (CEUs) for physician staff through the American Academy of Professional Coders (AAPC) on several important topics, including preventive services coding and coverage, chronic care management and Physician Compare.

KMA worked closely with several large health systems presenting programs throughout the state for employed physicians, as well as small and large group physicians.

As Medicaid and more commercial payers transitioned to value-based payments, KMA was an active participant in the Kentucky Stakeholder Innovation Model (SIM) monthly meetings, and provided input for the development of consistent and simplified quality measures.

KMA staff presented updates on the Affordable Care Act and Health Reform at KMGMA and AAMA conferences; staff also was scheduled to present an update on the Recovery Audit Contractor to the American College of Cardiology. **Commission on Physician Licensure & Workforce** Chaired by Tamella B. Cassis, MD, this commission reviewed its main objectives, which are to have a relationship with the Kentucky Board of Medical Licensure (KBML) and work with KMA regarding any workforce changes. Members discussed pursuing legislation to ease the burden of the ever-increasing health care regulations on physicians practicing in Kentucky, especially prohibiting the movement underway to tie MOC to licensure; the dilemma of how complicated the MOC process is today; and Resolution 2014-3, Maintenance of Licensure/Maintenance of Certification.

The commission also discussed getting accurate information regarding the age spectrum and certification status of Kentucky's physician workforce, the balance between the need to preserve a workforce versus the shift of burden in the regulatory world of getting licenses certified, and some way of measuring or assuring physician competence. Commission members received ABMS certification statistics and the Commonwealth of Kentucky Health Care Workforce Capacity Report.

Issues surrounding the prescribing of suboxone have recently surfaced in Kentucky, and it was noted that KBML is attempting to deal with such issues by adopting new rules regarding who can prescribe the drug and the manner in which they do so.

Commission on Public Health

Chaired by John Johnstone, MD, this commission met in December 2014 and reviewed its mission to provide the necessary leadership to promote the physical and mental health of all Kentuckians through education and the advancement of healthy lifestyles. The commission was also charged with recommending methods for accomplishing this objective and maintaining liaison with the Kentucky Department for Public Health and public health agencies, as well as the American Medical Association, local medical societies and other appropriate organizations as part of its work.

In subsequent meetings, the commission focused its efforts on helping to achieve the goals of the state's kyhealthnow initiative, as many of these are KMA priorities as well. The commission identified its top priorities: smoking cessation and prevention, and dealing with obesity, which also impacts Kentucky's problems with diabetes, cardiovascular disease and cancer.

Commission on Young Physicians and Physicians in Training Chaired by Svarit Dave, MD, this commission has been studying the special concerns of medical students, residents, fellows and young physicians in active practice who make up the commission—and determining ways to be more responsive to them. The commission reviewed Resolution 2014-7, Promote Medical Student Engagement in Organized Medicine, and suggested various communication ideas. UK and UofL students held a strategic planning session in April and discussed ways to better engage students. Planned events include KMA presentations at each school's first year orientation, five presentations to medical students throughout the year, and the development of a student leadership program.

The commission also reviewed Resolution 2014-8, Promote Resident and Fellow Engagement in Organized Medicine, and discussed ideas, including holding oncampus meetings and finding key contacts for outreach to directors or faculty members of the residency programs.

Members also discussed the Town Hall during the KMA 2015 Annual Meeting.

Monalisa Tailor, MD, represented KMA as the delegate to the AMA Young Physicians Section at the June meeting.

Resident and Fellow Section Governing Council

Chaired by Anil George, MD, this council discussed the Town Hall meeting being held during the KMA 2015 Annual Meeting where AMA President Steven J. Stack, MD, would address medical students and residents, followed by a reception where they were paired with a practicing physician.

Lindy Lady, KMA's Medical business advocacy manager, gave an overview of the employment market, wellness, consumer input, technology, payment systems and compliance.

Burton Brooks, MD, represented KMA as the delegate to the AMA Resident Fellow Section at the June meeting.

KMA participated in the 2015 New Resident Orientations, at UK on June 15 and UofL on June 30, with David J. Bensema, MD, addressing both groups.

Continuing Medical Education Committee and CME Council The CME Committee, chaired by John L. Roberts, MD, and the CME Council, chaired by James L. Borders, MD, continued their educational support to accredited providers by hosting "The Roadmap to CME," a new CME coordinator training held at the KMA office. The Annual CME Coordinator Conference featuring Marcia Martin, manager of Provider Education and Outreach for the Accreditation Council for Continuing Medical Education (ACCME); Karen Busse of Norton Healthcare; Roberts and KMA staff was held in June. More than 35 coordinators and committee and council members were in attendance.

In support of reaccreditation, KMA submitted its application for reaccreditation as a provider of CME to

the ACCME in December. This application included a detailed narrative, accompanying documentation and an interview with ACCME surveyors.

KMA developed robust education focused on mandated CME requirements for physicians. More than 400 physicians attended these "Meet the Mandates" sessions, which generated more than 20 new members.

KMA continues to expand its educational offerings for members and has partnered with various organizations to jointly provide CME, including the Greater Louisville Allergy Society, the Lexington Medical Society and the Kentucky Physicians Health Foundation.

Through a grant from The Physicians Foundation and financial assistance from KMA's charitable arm, the Kentucky Foundation for Medical Care, KMA offered a fullday comprehensive Leadership Academy at the 2015 KMA Annual Meeting featuring a national speaker on social media. Attendees had the opportunity to apply to have this unique leadership program offered locally.

As part of KMA's accreditation efforts, five CME providers were surveyed for reaccreditation to provide local CME across the state. Other educational activities include continued offering of enduring materials and practice management, coding, and billing seminars.

Medicaid Physician Technical Advisory Committee Chaired by Don Neel, MD, this committee met with state officials several times to discuss KMA Medicaid priorities. KMA continues to track the impact of the exploding Medicaid population on physician practices and assist members with the persistent administrative problems in dealing with the many different Managed Care Organizations.

The primary care incentive payments ended at the end of 2014, and as KMA advocated for extending these payments, Passport made the decision to extend the primary care incentive through 2015. In June, the cabinet prepared an updated request for proposal and the new MCO contracts demanded more standardized processes, evidence that the cabinet is listening to many of the committee's concerns.

KMA used the Barriers to Prevention Services survey to show where coverage gaps existed and how these gaps created barriers for Kentuckians to receive prevention services and stopped the state from meeting the kyhealthnow goals.

As other states continue to closely monitor what is happening in Kentucky, KMA presented an update on Medicaid expansion to the Ohio Medical Managers Group. To keep members up to date on Medicaid, KMA made presentations in every region of the state and used social media to promote awareness about upcoming KMA education activities and KMA's public health priorities.

Committee on Physical Education and Medical Aspects of Sports

Led by co-chairs Michael Miller, MD, and Phillip Hurley, MD, this committee 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. Toward that end, the committee, in cooperation with the Kentucky High School Athletic Association, set plans to update the online sports safety course. This course is mandatory for all high school and middle school coaches in Kentucky. Several members of the committee led this effort by providing curriculum, knowledge and expertise on various topics addressed by the safety course.

Other topics addressed by the committee throughout the year included modification of the state statute regarding billing for athletic trainer services, KHSAA adoption of electronic pre-participation forms and use of facial protection in girls' fast pitch softball.

Budget Committee

Chaired by Wally O. Montgomery, MD, this 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 continues to plan for the changes to KMA's organizational structure and the impact on the association's finances. Changes to the Annual Meeting, along with projected savings in a reduction in office space needs, are anticipated to bring savings in future years.

Kentucky Foundation for Medical Care

Chaired by Jim Beattie, MD, the Foundation obtained a grant from The Physicians Foundation to fund a series of educational events over the coming year focused on physician leadership training coupled with education on the new federal government transparency programs run through the national Physician and Hospital Compare websites.

The programs—known as the Kentucky Physician Leadership Initiative—were presented at the 2015 KMA Annual Meeting and later in 2016, with sites chosen based on applications from those who attended the Annual Meeting presentation.

The Foundation also sponsored the highly successful "Meet the Mandates" seminars held in the fall of 2014, allowing more than 400 physicians from across the state to attend these sessions for free. In order to help promote the KMA Community Connector Leadership Program, the KFMC awarded two \$3,000 grants to charitable organizations that work with a KMA Community Connector. Recipients of the grants were Jewish Hospital and The Healing Place.

NEWS OF NOTE

Kentucky at the AMA

The KMA Delegation to the American Medical Association, chaired by J. Gregory Cooper, MD, attended the 2014 AMA Interim Meeting and the 2015 AMA Annual Meeting in Chicago.

Kentucky enjoyed the distinction of having several members elected to a variety of leadership positions within the AMA and the World Medical Association. In June, KMA member Steven J. Stack, MD, of Lexington, was elected president of the American Medical Association. Other Kentuckians elected or appointed to leadership positions at the AMA are:

- Bruce A. Scott, MD, of Louisville, KMA speaker of the House of Delegates, vice speaker;
- Gregory Cooper, MD, of Cynthiana, chair of the Southeast Delegation
- Glen Loomis, MD, of Fort Mitchell, AMA Council on Long Range Planning and Development;
- John L. Roberts, MD, of Louisville, chair-elect of the AMA Section on Medical Schools: and
- Patrick Padgett, KMA executive vice president, chair of the AMA Litigation Center.

It was also announced that AMA Immediate Past President Ardis D. Hoven, MD, of Lexington, was named chair of the World Medical Association.

Scientific Journal Ceases Publication

With the June 2015 issue, KMA ceased publication of its monthly scientific Journal of the Kentucky Medical Association as recommended by the Focus Forward initiative. Although Senior Editor Patrick Murphy, MD, other members of the Editorial Board and members of leadership regretted this step, a lack of resources and a need to focus on advocacy were the foremost reasons for the action.

Community Connector Leadership Program

KMA launched its Community Connector Leadership Program in 2014 to provide an opportunity for physicians to enhance their leadership skills through education and direct community involvement. The program is designed to create a network of physician leaders who will work with local organizations to improve the state's health.

KMA honored the inaugural class of nine Community Connectors during the 2014 Annual Meeting. David J. Bensema, MD, Divya B. Cantor, MD, Jiapeng Huang, MD, Rice C. Leach, MD, Danesh Mazloomdoost, MD, John A. Patterson, MD, Vaughn W. Payne, MD, Gordon T. Tobin, II, MD, and Fred A. Williams Jr., MD, were recognized for their leadership roles in medicine and within their communities.



Participation, celebrated during the AMA meeting in Chicago in June.

AMA President Steven Stack, MD, AMA Southeast Delegation Chair Gregory Cooper, MD, and Kimberly Moser of Taylor Mill, Ky., who received the American Medical Association Political Action Committee's Belle Chenault Award for Political

2015 KMA HOUSE OF DELEGATES

The Kentucky Medical Association House of Delegates met Aug. 30 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 Read more about the KMA sunsetting policies on the KMA website, www.kyma.org.

REFERENCE COMMITTEE A » ADOPTED

Members of Reference Committee A were Richard Park, MD, of Edgewood, chair, W. Lisle Dalton, MD, of Lexington, Michael S. Citak, MD, of Somerset, Melinda Ruberg of Louisville, and Monalisa M. Tailor, MD, of Louisville.

ANNUAL REPORT » FILED

RESOLUTION 1: AMEND LIMITATION ON AMA DELEGATES (GREATER LOUISVILLE MEDICAL SOCIETY) » ADOPTED AS AMENDED

RESOLVED, that the Kentucky Medical Association amend the KMA Bylaws, Chapter IV, Section 1, line 10, by addition of the clause, "except in the instance that a member of the Kentucky delegation is elected to the office of Speaker or Vice Speaker of the American Medical Association House of Delegates, in which case, no more than two delegates and two alternate delegates shall be elected from any component society."

» ADOPTED

RESOLVED, that the Kentucky Medical Association actively promote activities that support colorectal cancer screening, and join organizations committing to the National Colorectal Cancer Roundtable "80% by 2018" goal.

RESOLUTION 3: ASSIST PRIMARY CARE PHYSICIANS WHO PROVIDE MENTAL HEALTH CARE (GREATER LOUISVILLE MEDICAL SOCIETY) » ADOPTED AS AMENDED 1st RESOLVED: that the Kentucky Medical Association study possible solutions for equipping primary care physicians to provide appropriate care for patients with mental health issues; and be it further

2nd RESOLVED: that the Kentucky Medical Association discuss these issues with appropriate professionals in the mental health profession in order to help educate primary care physicians, and to promote integrated mental health care models in the primary care setting, including efficient means of communication between providers; and be it further

3rd RESOLVED: that the Kentucky Medical Association will further advocate for payment mechanisms that allow adequate funding of mental health care in order to assure its continued availability in the primary care physician office.

» ADOPTED AS AMENDED

1st RESOLVED: that the Kentucky Medical Association explore ways that persons in need of medicationbased addiction treatment may have access provided to them; and be it further

2nd RESOLVED: that the Kentucky Medical Association use its influence to expand mental health and addiction treatment in all forms of drug abuse including evidence-based medical and non-medical addiction treatment modalities.

MEDICAL SOCIETY) » ADOPTED

RESOLVED: that the Kentucky Medical Association encourage and actively promote communities to have free events promoting healthful lifestyles.

Read more on the actions from the 2014 Annual Meeting on the KMA website, www.kyma.org.

RESOLUTION 2: 80% COLORECTAL SCREENING BY 2018 (GREATER LOUISVILLE MEDICAL SOCIETY)

RESOLUTION 4: IMPROVING DRUG ABUSE TREATMENT (GREATER LOUISVILLE MEDICAL SOCIETY)

RESOLUTION 6: PROMOTION OF FREE HEALTHFUL LIFESTYLES EVENTS (GREATER LOUISVILLE

RESOLUTION 9: DIABETES AND PREDIABETES (FRED A. WILLIAMS, MD, AND JOHN M. JOHNSTONE, MD) » ADOPTED

1st RESOLVED: that the Kentucky Medical Association support efforts to educate physician members, their patients, and third-party payers as to the importance of diabetes prevention and treatment alternatives; and be it further

2nd RESOLVED: that the Kentucky Medical Association encourage its members to participate in the American Medical Association and Centers for Disease Control's Preventing Diabetes STAT – Screen/Test/Act Today™ initiative; and be it further

3rd RESOLVED: that the Kentucky Medical Association support efforts by state and federal legislators to enact legislation supporting prevention and treatment of diabetes.

RESOLUTION 12: GET HEALTHY KENTUCKY (NAREN JAMES, MD) » ADOPTED AS AMENDED

1st RESOLVED: that the Kentucky Medical Association encourage Community Connectors and other physicians to establish programs in their local communities based on local needs and resources and designate a specific month, days of the week, or other times of the year to focus efforts on improving the health and fitness of the local population; and be it further

2nd RESOLVED: that the KMA encourage its members to promote efforts to improve the health of Kentucky by speaking at educational opportunities free to the public such as town hall meetings, social media campaigns, and presentations at local schools.

RESOLUTION 13 : A CALL TO HEALTHY LIVING AMONG PHYSICIANS (NAREN JAMES, MD) » ADOPTED AS AMENDED

RESOLVED: that the KMA call upon its members as well as physicians and other health professionals across the Commonwealth to engage in positive health practices based on well-established public health data.

REFERENCE COMMITTEE B » ADOPTED AS AMENDED

Members of Reference Committee B were Vaughn Payne, MD, of Louisville, chair, Robert H. Couch, MD, of Louisville, Larry L. Cunningham, MD, of Lexington, Ruyen T. Tran, MD, of Versailles, and Ronald E. Waldridge II, MD, of Shelbyville.



RESOLUTION 5: LOWERING DRUG ABUSE WITH ABUSE DETERRENT OPIOIDS (ADO) (GREATER LOUISVILLE MEDICAL SOCIETY) » REFERRED TO THE BOARD OF TRUSTEES 1st RESOLVED: that the Kentucky Medical Association support legislation that requires coverage for Abuse Deterrent Opioid (ADO) products on a basis equal to that of non-ADOs including cost sharing and utilization requirements; and be it further.

2nd RESOLVED: that the Kentucky Medical Association encourage Kentucky physicians to become educated in the use of Abuse Deterrent Opioid (ADO) products when appropriately prescribing other opioid medications.

RESOLUTION 7: MEDICAID PRESCRIBER ONLY PARTICIPATING STATUS (GREATER LOUISVILLE MEDICAL SOCIETY) » ADOPTED AS AMENDED

RESOLVED: that the Kentucky Medical Association urge the Kentucky Cabinet for Health and Family Services to establish the "Prescriber Only" status for physicians and other providers throughout the Kentucky Medicaid program.

RESOLUTION 8: VISION TESTING AT DRIVER'S LICENSE RENEWAL (GREATER LOUISVILLE MEDICAL SOCIETY) » ADOPTED

RESOLVED: that the Kentucky Medical Association work towards passage of legislation requiring the testing of vision at the time of driver's license renewal in Kentucky.

RESOLUTION 10: THIRD-PARTY PAYER PAYMENTS (JOHN M. JOHNSTONE, MD) » ADOPTED RESOLVED: that Kentucky Medical Association advocate for changes to the third-party reimbursement system that encourage achieving the health priorities established by Kentucky's kyhealthnow initiatives and similar future initiatives.

RESOLUTION 11: LENGTH OF SCHOOL LUNCHES (DAVID J. BENSEMA, MD) » ADOPTED RESOLVED: that the Kentucky Medical Association support legislation requiring a minimum of 30 minutes for lunch for grades K-5 in public schools.

RESOLUTION 14: PREVENTATIVE HEALTH CARE EXAMINATIONS FOR STUDENTS (MICHAEL KUDUK, MD) » ADOPTED

1st RESOLVED: that the Kentucky Medical Association support preventive health care examinations for initial school entry and sixth grade as outlined in the Kentucky Department of Education's regulations on school health services; and be it further

2nd RESOLVED: that the Kentucky Medical Association seek revisions to the Kentucky Department of Education's regulations on school health services which would require additional preventive health care examinations for students entering the third grade and ninth grade.

RESOLUTION 15: ICD-10 GRACE PERIOD (MICHAEL KUDUK, MD) » ADOPTED

RESOLVED: that the Kentucky Medical Association urge all public and private third-party payers who provide insurance within the Commonwealth of Kentucky, including Medicaid managed care organizations, self-insured plans, and commercial companies, to adopt policies that mirror the Centers for Medicare and Medicaid Services' rules regarding the one-year grace period transition to the ICD-10 code set.

RESOLUTION 16: KMA POSITION ON MEDICAL CANNABIS (LEXINGTON MEDICAL SOCIETY) » ADOPTED AS AMENDED

1st RESOLVED: that KMA advocate for further clinical research of cannabis in the treatment of medical conditions; and be it further

2nd RESOLVED: that KMA facilitate evidenced-based dialogues on the issues of cannabis in medicine by hosting forums, panel discussions, and other educational programs for physicians, policymakers, and other interested stakeholders.

RESOLUTION 17: ENDORSE KASPER INCLUSION OF MEDD CALCULATED OPIATE DOSES (LEXINGTON MEDICAL SOCIETY) » REFERRED TO THE BOARD OF TRUSTEES FOR FURTHER STUDY 1st RESOLVED: that KMA endorse KASPER's inclusion of MEDD on patient reports; and be it further

2nd RESOLVED: that KMA encourages use of MEDD calculations on self-reports as a self-evaluation tool, not punitively.

RESOLUTION 18: KASPER INCLUSION OF NON-CONTROLLED SUBSTANCES WITH STREET VALUE (DANESH MAZLOOMDOOST, MD) » REJECTED

RESOLUTION 19: PAYMENT FOR MEDICAID PRE-CERTIFICATION AND PRE-AUTHORIZATION (LARRY SUESS, DO) » ADOPTED

RESOLVED, that the Kentucky Medical Association advocate for physician reimbursement for time spent obtaining precertification and pre-authorization for designated services and prescriptions.



KMA 2015 ANNUAL MEETING

















Opposite page, clockwise, Dr. Kevin Pho of KevinMD.com and Kevin Kavanagh, MD; William C. Harrison, MD, left, KMA Alliance Board Member Charlotte Burton, Bruce Edward Burton, MD, and KPPAC Board Member Cheryl Broster; KMA President Ted Miller, MD, KPPAC Chair Kim Moser, and Eula Hall.; Dr. Bensema; Alvin Martin, MD, Mary Helen Davis, MD, William Harrison, MD, and Cory Meadows, KMA's director of advocacy. Above, clockwise, KMA Secretary-Treasurer Linda Gleis, MD, and her family; KMA Board Chair Randolph Schrodt, MD, and KMA Vice President Brent Wright, MD; Eric W. Nells, MD, left and Tushar Kothari, MD, and their families; Dr. Gleis, Donald Neel, MD, and KMA Vice Speaker Maurice Oakley, MD. Photos by Mary Branham and Jaclyn Heeke

















Opposite page, clockwise, Medical Student Section representatives Brad St. Martin of UK and Melanie Ruberg of UofL; KPPAC Chair Kim Moser; AMA President Steven Stack, MD, and student at town hall; KMA officers, President-Elect Nancy Swikert, MD, Vice President Brent Wright, MD, President Ted Miller, MD, PhD, Board Chair Randolph Schrodt, MD, and Secretary-Treasurer Linda Gleis; Andrew R. Pulito, MD, and Uof L resident Nelson Edings Seabrook, MD. Above, clockwise, KMA member physicians at the Town Hall and Reception; KMA President Ted Miller, MD, PhD, Vice President Brent Wright, MD, and President-Elect Nancy Swikert, MD; KMA Vice Chair Dale Toney, MD, Preston Nunnelley, MD, David Bensema, MD, Deepak Azad, MD, of the Indiana State Medical Association, and his family; members of the Kentucky Foundation for Medical Care. Photos by Mary Branham, Jaclyn Heeke and Lindy Lady

HOUSE OF DELEGATES ROLL CALL

HOUSE OF DELEGATES MEETING | AUG. 30, 2015

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

OFFICERS

President – David J. Bensema, MD, Lexington Vice President – Nancy C. Swikert, MD, Florence President-Elect – Theodore H. Miller, MD, PhD, Edgewood Secretary-Treasurer – Linda Gleis, MD, Louisville Chair, Board of Trustees – R. Brent Wright, MD, Glasgow Vice Chair, Board of Trustees – G. Randolph Schrodt, MD, Louisville Speaker, House of Delegates – Bruce A. Scott, MD, Louisville

Vice Speaker, House of Delegates – Maurice J. Oakley, MD, Ashland TRUSTEES

District 1 – Carolyn S. Watson, MD, Paducah District 2 – Paul E. Moore, MD, Henderson

District 3 – James M. Donley, MD, Madisonville **District 4 – Corazon A. Veza, MD, Elizabethtown** District 5 – G. Randolph Schrodt Jr., MD, Louisville

District 6 – R. Brent Wright, MD, Glasgow

District 7 – Benjamin Kutnicki, MD, Warsaw District 8 – Neal J. Moser, MD, Crestview Hills District 9 – Douglas C. Crutcher, MD, Cynthiana District 10 – Dale E. Toney, MD, Lexington District 11 – Michael K. Kuduk, MD, Winchseter District 12 – Naren James, MD, Stanford District 13 – John R. Potter, MD, Ashland District 14 – H. Michael Oghia, MD, Jackson District 15 – Truman Perry, MD, Corbin

ALTERNATE TRUSTEES

District 1 – Ali Jessee, DO, Paducah District 2 – Charles E. Bea, MD, Owensboro District 3 – Alan J. Thorner, MD, Madisonville District 4 – K. John Yun, MD, Elizabethtown District 5 – David R. Watkins, MD, Louisville District 6 – Wayne Hendrix, MD, Bowling Green District 7 – Vacant District 8 – Mark A. Schroer, MD, Newport District 9 – Donald R. Wilson, MD, Maysville District 10 – Thomas Kirk Slabaugh Jr., MD, Lexington District 11 – Vacant District 12 – David L. Brabon, MD, Wilmore District 13 – Ishmael W. Stevens Jr., Ashland District 14 – Jyotin V. Chandarana, MD, Hazard District 15 – Vacant AMA DELEGATES

District 8 – Donald J. Swikert, MD, Edgewood District 9 – J. Gregory Cooper, MD, Cynthiana

District 10 – Andrew R. Pulito, MD, Lexington

District 5 – Bruce A. Scott, MD, Louisville

AMA ALTERNATE DELEGATES

District 10 – David J. Bensema, MD, Lexington District 2 – Donald R. Neel, MD, Owensboro District 5 – Robert A. Zaring, MD, Louisville District 8 – William B. Monnig, MD, Crestview Hills

PAST PRESIDENTS

William C. Harrison, MD, Owensboro Shawn C. Jones, MD, Paducah Fred A. Williams Jr., MD, Louisville Gordon R. Tobin Jr., MD, Louisville John Robert White, MD, Lexington

MEDICAL STUDENT SECTIONS

UK – District 10 – Brad St. Martin, Lexington UofL – District 5, Melinda Christine Ruberg, Louisville RFS – Daniel Tyler Jackson, MD, Louisville

OMSS – Nancy C. Swikert, MD, Florence

Dean – UK – Frederick C. De Beer, MD, Lexington Dean – UofL – Tonie Michelle Ganzel, MD, Louisville Dean – PC – Boyd R. Buser, DO, Pikeville

DISTRICT 1

Ballard, Calloway, Carlisle, Fulton, Graves, Hickman, Livingston, McCracken, Marshall counties – No delegates reported

DISTRICT 2

Henderson County – John McClellan, MD, Henderson

Davies, Hancock, Henderson, McLean, Ohio, Union, Webster counties – No delegates reported.

DISTRICT 3

Hopkins County – Darren C. Chapman, MD, Madisonville; Larry Suess, DO, Madisonville; Satish J. Shah, MD, Madisonville

Crittenden, Muhlenberg, Pennyrile (Caldwell, Christian, Lyon, Todd and Trigg counties) — No delegates reported.

DISTRICT 4

Hardin/Larue counties – Biren Desia, MD, Elizabethtown, Syed R.P. Quadri, MD, Elizabethtown, John Godfrey, MD, Elizabethtown Marion County – Marck Alan Ackermann, MD, Lebanon Taylor County – Eugene H. Shively, MD, Campbellsville Breckinridge, Bullitt, Grayson, Green, Hart, Meade, Nelson, Washington counties – No delegates reported.

DISTRICT 5

GLMS (Jefferson County) – Susan Berberich, MD, Louisville, Susan G. Bornstein, MD, Louisville, David E. Bybee, MD, Louisville, Frank R. Burns, MD, Louisville, Kelly Clark, MD, Louisville, Mahoney Cobb, Louisville, Robert H. Couch, MD, Louisville, Mary Helen Davis, MD, Louisville, J. Eric Downing, MD, Louisville, Eric Downing, Louisville, R. John Ellis Jr., MD, Louisville, Jeffrey M. Goldberg, MD, Louisville, Heather Lynn Harmon, MD, Louisville, Casey H. Johnson, MD, Louisville, B. Oliapuram, Jose, MD, Prospect, Udaya Geetha Joseph, MD, Louisville, Thomas Higgins Jr., MD, Louisville, Tezo Karedan, MD, Louisville, John Kolter, MD, Louisville, Rishi Verma Kumar, MD, Louisvile, A. O'tayo Lalude, MD, Louisville, Julie S. Lee, MD, Louisville, Eric F. Lydon, MD, Louisivlle, Catherine Rose Mier, MD, Louisville, James Patrick Murphy, MD, Louisville, Rosemary Ouseph, MD, Louisville, Susan E. Parsons, DO, Louisville, Vaughn W. Payne, MD, MBA, Louisville, Todd Jordan Purkiss, MD, PhD, Prospect, Amy Riddell Quillo, MD, Louisville, Racy L. Ragland, MD, LaGrange, Cynthia R. Rigby, MD, Prospect, John L. Roberts, MD, Louisville, Ricky L. Rowe, MD, Louisville, Lewis Rowe, MD, Louisville, Rajesh K. Sheth, MD, Prospect, Barry B. Sosnin Jr., DO, Bardstown, Bernard Speevack, MD, Louisville, Natalie Graham Stephens, MD, Louisville, Erica Ruth Sutton, MD, Louisville, James B. Tabler, MD, Louisville, Monalisa Mohan Tailor, MD, Louisville, Russell A. Williams, MD, Louisville, Terrie S. Williams, MD, Louisville

DISTRICT 6

Barren County – William C. Thornbury Jr., MD, Glasgow Cumberland County – Joseph D. Skipworth, MD, Burkesville Monroe County – Kimberly Y. Eakle, MD, Gamaliel Warren County – Omkar N. Bhatt, MD, Bowling Green, Prana R. Bhatt, MD, Bowling Green, Marie L. Michelson, MD, Bowling Green, James Beattie, MD, Bowling Green, Janice Bunch, MD, Bowling Green

Adair, Allen, Butler, Edmonson, Logan, Metcalfe, Simpson counties – No delegates reported.

DISTRICT 7

HOSS (Henry, Oldham, Shelby & Spencer counties) — Ronald Edwin Waldridge II, MD, Shelbyville

Anderson, Carroll, Franklin, Gallatin, Grant, Owen, Trimble counties – No delegates reported.

DISTRICT 8

NKMS (Boone, Campbell & Kenton counties) – Stephen O. Bernardon, MD, Edgewood, Mark J. Zalla, MD, Florence, Gordon W. Air, MD, Crescent Springs, Michael Lee Bowlin, MD, Verona, Mark A. Boyd, MD, Fort Mitchell, Charles J. Breen, MD, Florence, Thomas E. Bunnell, MD, Edgewood, James C. Conner, MD, Edgewood, John P. Eldridge, MD, Fort Wright, Tushar G. Kothari, MD, Cincinnati, Glenn Loomis, MD, Fort Mitchell, Kevin D. Martin, MD, Cincinnati, Eric W. Neils, MD, Villa Hills, Richard E. Park, MD, Edgewood, Alisha Rust, DO, Edgewood, Michael G. Schafer, MD, Alexandria, William L. Stafford Jr., MD, Fort Mitchell, Jackie S. Sweeney, MD, Covington

DISTRICT 9

Harrison County – Stephen A. Besson, MD, Carlisle Bath, Bourbon, Bracken, Fleming, Mason, Nicholas, Pendleton, Robertson, Scott counties – No delegates reported

DISTRICT 10

LMS (Fayette County) – Bruce M. Belin, MD, Lexington, Marian E. Bensema, MD, Lexington, Bruce C. Broudy, MD, Lexington, John W. Collins, MD, Lexington, Larry L. Cunningham Jr., MD, Lexington, Waller Lisle Dalton, MD, Lexington, Jitander S. Dudee, MD, Lexington, Jamil Farooqui, MD, Lexington, Robert P. Granacher, MD, Parksville, Terrence R. Grimm, MD, Lexington, Hollis R. Hilty, MD, Lexington, Daniel E. Kenady Sr., MD, Lexington, Michael E. Lally, MD, Lexington, Rice C. Leach, MD, Frankfort, Vinnette Theresa Little, MD, Lexington, Danesh Mazloomdoost, MD, Lexington, John Michael Moore, MD, Lexington, Preston P. Nunnelley, MD, Lexington, Charles L. Papp, MD, Lexington, Khalilo U. Rahman, MD, Lexington, Nat H. Sandler, MD, MPH, Lexington, Tuyen T. Tran, MD, Versailles, Thomas H. Waid, MD, Lexington, Kathryn E. White, MD, Lexington, Emery A. Wilson, MD, Lexington, Katherine E. Woody, MD, Lexington

Jessamine, Woodford counties – No delegates reported.

DISTRICT 11

Clark County – Ralph Alverado, MD, Winchester Madison County – John M. Johnstone, MD, Richmond, William H. Mitchell, MD, Richmond Estill, Jackson, Lee, Menifee, Montgomery, Owsley, Powell, Wolfe counties – No delegates reported

DISTRICT 12

Casey County – Housam I. Haddad, MD, Lexington **Pulaski County** – Michael S. Citak, MD, Somerset, Houssein Fallahzadeh, MD, Somerset, **Kevin T. Kavanagh, MD, Somerset** Rockcastle County – George W. Griffith, MD, Mount Vernon Russell County – Jerry D. Westerfield, MD, Russell Springs Boyle, Clinton, Garrard, Lincoln, McCreary, Mercer, Wayne counties – No delegates reported.

DISTRICT 13

Greenup County — Sanjiv Gupta, MD, Russell Boyd, Carter, Elliott, Lawrence, Lewis, Morgan, Rowan counties — No delegates reported.

DISTRICT 14

Pike County – William T. Betz, DO, Pikeville

Breathitt, Floyd, Johnson, Knott, Letcher, Magoffin, Martin, Perry counties – No delegates reported.

DISTRICT 15

Bell County – David G. Sanford, MD, Knoxville

Laurel County – Ashu T. Joshi, MD, London

 ${\it Clay, Harlan, Knox, Leslie, Whitley \ counties - No \ delegates \ reported.}$





KMA AWARDS

Dr. Shaw Receives KMA Educational Achievement Award



Monica Ann Shaw, MD, MA, FACP, of Louisville, a board certified internal medicine physician and senior associate dean for the University of Louisville School of Medicine, received the KMA Educational Achievement Award during the KMA 2015 Annual Meeting Aug. 29.

Dr. Shaw was nominated by Jesse Roman, MD, Chief, University of Louisville Hospital, and supported by many other colleagues and selected by the KMA Committee on Continuing Medical Education. The award is presented to individuals who have made outstanding contributions and achievements in the area of continuing medical education.

KMA Immediate Past President David Bensema, MD, recognized Shaw with the award. Dr. Shaw joined the University of Louisville in 1995.

"Throughout her tenure, Dr. Shaw has been committed to changing the way medical students are educated," Dr. Bensema said.

As principal investigator on a Robert Wood Johnson Foundation grant, Dr. Shaw developed and implemented an interdisciplinary palliative care curriculum for medical students that serves as a national model for successful palliative care education. She also implemented a mini-clinical exercise for students that focuses on patient education and positive manner.

"Her passion and dedication to the growth and development of future physicians are keystones of the KMA Educational Achievement Award criteria," Dr. Bensema said.

KMA Recognizes Appalachian Health Activist Eula Hall



The Kentucky Medical Association recognized legendary Appalachian community health activist Eula Hall during the KMA Leadership Dinner Aug. 29.

Hall, 87, of Floyd County, received the KMA Debra K. Best Outstanding

Layperson Award. She is best known as founder of the Mud Creek Clinic in rural Floyd County in 1973. Big Sandy Healthcare, which now operates the clinic, started two funds to honor Hall. The Eula Hall Patient Assistance Fund covers health care costs for uninsured and indigent patients and the Eula Hall Scholarship Fund provides financial assistance for area students pursuing careers in health care or social services. KMA Immediate Past President, David J. Bensema, MD, who presented the award to Hall, cited her commitment to meeting the health care needs of her neighbors.

"Eastern Kentucky is often associated with many thingscoal mining, Bluegrass music, hard-working people and some of the most beautiful scenery anywhere. It has also been recognized as a medically underserved area, as well as a population with many health issues," Dr. Bensema said.

"Eula Hall has devoted her life with a servant's heart to her community and to the plight suffered by any person in this nation without access to health care. At 87, she is as dedicated as ever to being the voice for 'her people'." Media outlets across the state, including Ms. Hall's Floyd County, noted her recognition by the KMA.

Dr. Gleis Receives KMA Distinguished Service Award



Linda H. Gleis, MD, a physician at the Louisville Veterans Administration Medical Center Physical Medicine and Rehabilitation Service, received the KMA Distinguished Service Award during the KMA 2015 Annual Meeting Aug. 29.

Since 1945, the KMA Distinguished

Service Award has been presented to a Kentucky physician who has made outstanding contributions to organized medicine and individual medical service.

Dr. Gleis has served as the secretary-treasurer of the KMA Board of Trustees since 1999. She has served as a Greater Louisville Medical Society delegate since 1993. Dr. Gleis was the first female president of what was then the Jefferson County Medical Society in 1991. She has co-chaired the Healing Place Capital Campaign and, as co-chair of the GLMS annual scholarship golf tournament, has helped to raise \$100,000 in scholarships for University of Louisville medical students.

KMA Immediate Past President David Bensema, MD, pointed out the number of meetings–316–and hours spent in those meetings–1,264–to illustrate Dr. Gleis' commitment to KMA and organized medicine.

"She has done all of this, and much more, while providing care to the veterans of Kentucky and, with her husband, Dr. Greg Gleis, raising four children," Dr. Bensema said. "There's an old saying in college – show up for class and you get a 'C." Over the past 16 years, Linda has shown up more than anyone. But her service, commitment and quality participation has earned her an 'A-plus' from her peers."

50 YEARS AND COUNTING

THESE KMA MEMBER PHYSICIANS HAVE BEEN PRACTICING MEDICINE FOR 50 YEARS OR MORE.

Billy R. Allen, MD | Hartford Harry E. Altman, MD | Pikeville Raleigh R. Archer, MD | Lexington Paul J. Arena, MD | Prospect Syed G. Badrudduja, MD | Prestonsburg Omkar N. Bhatt, MD | Bowling Green Robert D. Blair, MD | Louisville Leslie B. Branch, MD | Lexington Thomas E. Bunnell, MD | Edgewood Gerald Clark, MD | Fairhope, Ala. Ronald N. Collier, MD | Hazard Victor J., DiOrio, MD | Louisville Arthur J. Donovan, MD | Louisville James G. Gay, MD | Lexington Anthony George, MD | Anchorage John D. Howard, MD | Louisville Jamie J. Jacobs, MD | Lexington Patrick L. Jasper, MD | Somerset Stephen J. Kavka, MD | Prospect Carl O. Knutson, MD | SE Lacoma Ind. Thomas P. Leonard Jr., MD | Louisville Harold V. Markesbery, MD | Augusta Daniel E. McMartin, MD | Louisville



These physicians, who have all been practicing medicine for 50 years or more, attended the KMA Annual Meeting in August: Thomas E. Bunnell, MD, Harold V. Markesbery, MD, Allan H. Pribble, MD, and Remedios M. Valera, MD. Photo by Jaclyn Heeke

Gorden T. McMurry, MD | Louisville James D. McNeely, MD | Louisville George E. Miller, MD | Fort Mitchell Hirikati S. Nagaraj, MD | Louisville Robert A. Noel, MD | Louisville Allan H. Pribble, MD | Bowling Green Alfonso Puerto, MD | Louisville Robert G. Reed, MD | Fishers Ind. Todd G. Richardson, MD | Louisville Kenneth R. Rosenberg, MD | Louisville Elaine Y. Rosin, MD | Boca Raton, Fla. Nassir Saghafi, MD | Paducah A. Fred Schultz, MD | Somerset John C. Shaw, MD | Louisville Judah L. Skolnick, MD | Louisville Gerald F. Sturgeon, MD | Louisville David P. Thomas, MD | Paducah Robert B. Thompson, MD | Lexington William L. Tyler III, MD | Owensboro Remedios M. Valera, MD | Greenville, N.C. Charles H. Wilkens, MD | Jellico, Tenn. A. Byron Young, MD | Lexington

2015 For the Record ••••

КМА

KENTUCKY PHYSICIANS LEADERSHIP ACADEMY

LEADERSHIP IN MEDICINE



Kevin Pho, MD, founder and editor of KevinMD.com, had this to say about the physicians attending the Kentucky Physicians Leadership Academy, sponsored by the Kentucky Foundation for Medical Care through a grant from the Physicians Foundation:

"What a tremendous audience! Thank you @KYMedAssoc for the opportunity to keynote at #kyma2015," he tweeted following the presentation.

The leadership academy at the Kentucky Medical Association's Annual Meeting in August had the highest attendance of similar leadership seminars held on a single day.

As keynote speaker, Dr. Pho offered advice regarding the use of social media in health care. Among his words of wisdom:

- "Social media is the best way to establish your online reputation."
- "Social media is the most powerful communications tool to come along in a generation."
- "The biggest risk to social media is not using it at all in health care. It is an opportunity we can't miss."
- "Embrace social media and change the world of health care."

Other speakers at the Leadership Academy shared insights into the challenges facing health care in Kentucky.

Brock Slabach, MPH, senior vice president at the National Rural Health Association, said while the U.S. has made a lot of progress in the war on poverty, "we have pockets in this nation that have not been affected positively ... people in rural communities are the ones most affected today."

John Langefeld, MD, chief medical officer for the Kentucky Department of Medicaid Services, noted the challenges facing the state because of the high concentration of poverty in eastern Kentucky. Eleven of the top 25 counties in the nation with premature death rates are in Kentucky, he said. The hardest place to live in the nation is Clay County, Ky., and six of the top 10 hardest places to live are in the state, Langefeld said.

"Poor health turns lives upside down," he said.

Alison Davis, PhD, professor at the University of Kentucky and executive director of the Community and Economic Development Initiative of Kentucky, Richard E. Wild, MD, chief medical officer of the Atlanta Regional Office of the Centers for Medicare and Medicaid Services, and Nancy Wiser, president of Wiser Strategies, also shared insights into health care today and how physicians can be involved in the transformation of medicine.



Kentucky Foundation for Medical Care

Speakers at the Kentucky Physicians Leadership Academy, sponsored by the Kentucky Foundation for Medical Care through a grant from The Physicians Foundation, included Dr. Kevin Pho, founding editor of KevinMD.com, Nancy Wiser of Wiser Strategies, John Langefeld, MD, chief medical officer for the Kentucky Department of Medicaid Services, and Brock Slabach, MPH, senior vice president at the National Rural Health Association. Photos by Mary Branham

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LEAD AND CONNECT

By David Bensema, MD | 2014-15 KMA President

KMA COMMUNITY CONNECTOR PROGRAM CREATING STATEWIDE NETWORK OF PHYSICIAN LEADERS

This article first appeared in the Summer 2015 issue of Kentucky Doc Magazine.



When physicians talk, people listen. The high esteem in which physicians are held makes their leadership in the community integral to addressing the disconnect between community leaders and sound health policy. The Kentucky Medical Association's Community Connector Leadership Program (CCLP) aims to help Kentucky

physicians close that gap in their communities.

Started in 2013, the KMA Community Connector program is designed to make physician leaders even better leaders. The program provides training to enhance community leadership to ensure the voice of medicine is heard when decisions regarding health care are made. As the 2014-2015 president of KMA, I am proud to have been a member of the inaugural class of the CCLP in 2014.

Health care is undergoing tremendous transformation and many of the decisions affecting that transformation are being made by people outside of medicine. Physicians can impact these changes at the local level, but they must be connected with local civic, business and political leaders on issues related to medical care. The CCLP helps physicians make those connections and become more involved in their local communities. It provides a support system and network to make Kentucky - and local communities - a healthier and better place to live.

Good individual health is vital to the health of our communities. Physicians play a unique and important role in achieving that goal. Poor health behaviors and related problems are so engrained within our communities that they can only be changed through a united effort on multiple fronts. The more the public is aware of these initiatives, the greater the success will be.

That's why we at KMA are excited about the work of the nine 2014 graduates of the Community Connector Leadership Program. Here are a few examples:

- Divya B. Cantor, MD, of Louisville, helped to educate legislators on clinical testing on newborns and testing for breast and ovarian cancer;
- John A. Patterson, MD, of Lexington, writes a monthly column for Health & Wellness Magazine, a health magazine in Lexington;
- Vaughn W. Payne, MD, of Louisville, was a speaker at the Heart Truth for Women program in southeastern Kentucky; and
- Fred A. Williams, Jr., MD, of Louisville, has given several health-related presentations to students.

In addition to participation in a public education activity, physician leaders are involved in a leadership role within and outside medicine in their communities. Here is how some members of the 2014 class of Community Connectors are involved:

- Jiapeng Huang, MD, of Louisville, is chair of the Department of Anesthesiology at KYOneHealth and serves on the Board of Directors of the Kentucky Chinese School;
- Rice C. Leach, MD, of Lexington, is CEO of the Lexington-Fayette County Health Department and is president of the Lexington Medical Society;
- Daneesh Mazloomdoost, MD, of Lexington, serves on the Lexington Medical Society Administrative Council and on the Board of Directors of the Hope Center; and
- Gordon T. Tobin, II, MD, of Louisville, serves on the board of the Center for Interfaith Relations-Festival of Faiths.

The KMA Community Connector Program is a great way for physicians to enhance their innate leadership abilities and develop a better understanding of policy, process and governance. To learn more, check out the information at www.kyma.org or contact KMA staff member Laura Hartz at 502-814-1386 or hartz@kyma.org and start your journey to leadership.

Eighteen physicians from around Kentucky participated in the 2015 KMA Community Connector Leadership Program. These physician leaders are involved in their communities, whether it be local governments, charities, or other endeavors, as well as leadership roles within medicine.

KMA RECOGNIZES 2015 COMMUNITY CONNECTORS

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 and the practice of medicine in Kentucky by working with business, government & civic leaders.



THE 2015 CLASS OF KMA COMMUNITY CONNECTORS ARE: FRONT: James Patrick Murphy, MD, a Louisville pain specialist | Mary Helen Davis, MD, a Louisville psychiatrist | Nancy Swikert, MD, a Florence family physician | BACK: Benjamin Kutnicki, MD, a Warsaw family physician | Theodore Miller, MD, PhD, an Edgewood otolaryngologist | John Johnstone, MD, a Richmond cardiologist | Donald Swikert, MD, a Florence family physician.

To gualify 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.
- 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.
- 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.

Nine physicians from across the state participated in the inaugural class in 2014. The Community Connector Leadership Program prepares and supports physicians in leadership roles and offers grants to nonprofit organizations.

KMA recognized seven physicians from across Kentucky for completing the KMA Community Connector Leadership Program in 2015 at the KMA Annual Meeting.

• Participate in a public education activity designed to improve public health or educate the public on health issues.

KENTUCKY MEDICAL ASSOCIATION ALLIANCE

By Patty Pellegrini | KMA Alliance President

BUZZING AROUND THE HIVE TO MAKE OUR COMMUNITIES BETTER



If you attended the KMA Leadership Dinner Aug. 29 in Louisville, you heard about my love for bumblebees, how it all began and how I came to view the KMA Alliance functioning much the same as bees – having a gueen bee and many worker bees all striving to make the honey everyone loves and wants.

You also heard that my tagline for the year is "bee innovative, bee committed and bee involved." As I begin my year as KMA Alliance president, I am trying to promote this idea beginning right in my hometown of Lexington by working with our local medical alliance on its recent annual fundraiser, "Sunset Soiree." This was definitely a hive of bees with our fundraising chair as the "Queen Bee" and a committee of worker bees all buzzing around gathering all of the ingredients to make the honey (a successful fundraising event) that we all strive for.

I think we were innovative with the idea for the event, everyone who participated was committed at least 110 percent, and many were involved, to say the least, ensuring the evening would be a

success. And it was all done by a group of physician spouses who want to make a better community for us to live in and help those who are less fortunate due to circumstances beyond their control. Proceeds from the event will be given to Baby Health Services, a free clinic for children who have fallen through the cracks and have no health insurance and don't gualify for government assistance.

This is just one example of how the medical communities around our state gather together to help those who need it.

As I go forward with my year, I plan to visit other alliances around the state and participate in events they are planning for their communities.

In February, date still to be determined, we plan to once again have our day at the capitol where we will do blood pressure screenings, pass out brochures on healthy eating and other health-related topics, and offer support to our legislators and their staffs for all the good works they do for our state.

As you can see, the Queen Bee and all of the worker bees are buzzing around the hive "beeing innovative, beeing committed, and beeing involved" hoping to help our physician families and the communities where we live be even better than they already are.

As the Alliance has stated in our vision statement, we are "the volunteer voice of the family of medicine," and our mission is "strengthening the family of medicine through advocacy, education and friendship."

I invite you to join us in these efforts, to help as much as you are able. You may contact me at p.pellegrini@twc.com or go to our Web page kyma.org and click on "Alliance" to see more information or to join online.

Our members are our most valuable asset; the honey that sustains us!

KENTUCKY BOARD OF MEDICAL LICENSURE

KBML FOCUS ON PRESCRIPTION DRUG ABUSE



The primary mission ing treatment for addiction to prescription opioids or illegal controlled substances such as heroin. While the utilization of Buprenorphine is recognized for medical treatment for opioid addiction, law enforcement was concerned about the problem of its growing street value and increased diversion. Because of these concerns, and the fact the board had disciplined numerous physicians for failing to conform to the standards of acceptable and prevailing medical practice in Kentucky for utilizing this medication, the board took steps to promulgate the regulation, which went into effect on April 3, 2015. In future months, the board will be monitoring the implementation of the regulation in order to identify any unintended consequences and could revisit it at a later date. The board also has completed work on the development and adoption of a standardized medical order for scope of treatment (MOST) form, as mandated by the recently passed SB 77. This legislation, sponsored by Sen. Tom Buford, requires the board to promulgate an administrative regulation to develop the format for a standardized medical order for scope of treatment form approved by the board, including spacing, size, borders, fill and location of boxes, types of fonts used and their size, and placement of boxes on the front or back of the form so it fits on a single sheet. I am pleased to report that efforts to promulgate the regulation are underway and the form, along with a board opinion that was developed to provide guidance on the use of the MOST form, is available on the board's website, www.kbml.ky.gov. This is just a brief summary of the activities the board has been involved with during the past few months. On behalf of the board, I would like to thank the KMA for the opportunity to share this update with physicians throughout Kentucky. If you have a question for the board, please feel free to contact our office via correspondence or via phone at (502) 429-7150. NOTE: The Kentucky Board of Medical Licensure no longer publishes a print newsletter. To ensure KMA member physicians are up to date on the work of KBML, KMA has asked the board to provide a quarterly report – in this publication and the quarterly print Communicator. This is the first report to KMA membership on the actions of KBML.

of the Kentucky Board of Medical Licensure continues to be to protect and promote the public welfare of the citizens of the Commonwealth. It is with this significant duty in mind that board members are called upon to make the crucial decisions on whether physicians are competent to provide patient

care or if they pose a threat to the public. The board appreciates the fact the Kentucky Medical Association recognizes the importance of this mission and has supported the board's efforts over the years. Prescription drug abuse and the overprescribing of opioid pain medication continues to be a major focus of the board. Since the board's adoption of 201 KAR 9:260 and other HB 1 regulations in 2013, the board has seen a decrease in some of the most known abused medications. This statement was verified by the findings of a recent study that was completed by the University of Kentucky Institute for Pharmaceutical Outcomes and Policy that showed a significant decrease in the most abused medications and a 50 percent decrease in doctor shopping; it also revealed that more Kentuckians are seeking treatment for opioid addiction. The board recognizes that most physicians throughout the state are adhering to the prescribing standards and commends them on their efforts to address this serious health problem. In conjunction with the board's efforts to combat inappropriate prescribing, the board adopted a new regulation, 201 KAR 9:270, which sets out the professional standards for prescribing and dispensing Buprenorphine-Mono-Product or Buprenorphine Combined-with-Naloxone. As reported by various sources, more Kentuckians than ever before are seek-

By Preston Nunnelley, MD | Kentucky Board of Medical Licensure President

IN MEMORIAM

WILLIAM A. BLODGETT, MD | Louisville | 12/14/14
WOODY G. BURROW, MD | Paducah | 9/27/14
RALPH M. DENHAM, MD | Louisville | 11/20/14
CHRISTOPHER M. FORD, MD | Lexington | 2/4/15
C. RICHARD GILL, MD | Lexington | 1/4/15
MARTYN A. GOLDMAN, MD | Louisville | 6/18/15
AMOS GERALD HALL, MD | Lexington | 10/24/14
TIMOTHY K. HULSEY, MD | Bowling Green | 11/18/14
WILLIAM WALTER JOULE, MD | Louisville | 5/19/15

LOUIS L. KAHLE, MD | Louisville | 4/27/15 SAMUEL W. LYKINS, MD | Lexington | 11/27/14 HAROLD S. MOBERLY JR, MD | Louisville | 4/22/15 GERALD R. PRATT, MD | Monticello | 12/16/14 CHARLES L. PRICE, MD | Hartford | 6/13/15 EVERETT N. RUSH, MD | Louisville | 12/15/14 BILLY E. SANDERLIN, MD | Atlanta, Ga. | 2/4/15 JOHN GORDON STOBER SR, MD | Louisville | 4/15/15 JERROLD E. TOMLIN, MD | Jeffersonville, Ind. | 6/16/15 List of deceased KMA member physicians as of Aug. 11, 2015

"Meaningful legal reform in Kentucky will only be possible if the entire medical community - led by KMA and KPPAC comes together in one voice to demand action and relief from Kentucky's unfair, burdensome legal environment. Your support of KPPAC is an investment that is critical in achieving that objective give today."



Contribute at www.kppac.org or mail a contribution to: KPPAC 4965 US Hwy 42, Ste 2000 Louisville, KY 40222



KIMBERTY P. Moser KPPAC Chair 2014-2015



IN KENTUCKY'S **HEALTH**

The Kentucky Foundation for Medical Care works to improve the lives of all Kentuckians through medical education and public health initiatives. Your tax-deductible donation allows KFMC to assist practicing physicians through education and other projects.

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

Through a grant from the Physicians Foundation, KFMC sponsored the **Kentucky Physicians Leadership Academy** at the 2015 KMA Annual Meeting and will sponsor two local leadership symposia in Spring 2016.

Mail Contributions to KFMC – 4965 US Hwy 42 – Suite 2000 – Louisville, KY 40222



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WELCOME TO THE NEW KMA Changing to Better Serve You

The Kentucky Medical Association is making changes to the way we communicate with you, our members. Look for these new and upgraded products coming in 2016.





www.kyma.org