The ACOI leadership (President-elect Rick Greco and myself with Brian Donadio) attended the AOA Board of Trustees and House of Delegates meetings this past month in Chicago. During this time, I was again able to meet with the Presidents of the ACOFP, ACOEP and the ACOS and discuss common concerns and challenges. The relationship of the specialty colleges with the AOA is one of those concerns that we share and hope eventually to resolve.

The graduate medical education system unification with the ACGME was a major topic of interest. The ACGME presented the AOA Board of Trustees a Memorandum of Understanding (MOU) which, after months of negotiations, indicated their willingness to proceed. Because the MOU did not meet the criteria that the AOA Board felt was necessary to maintain the AOA values, however, it was rejected.

For the foreseeable future, osteopathic GME will remain under the accreditation of the AOA. Efforts will continue to expand residency programs. The ACOI has been a leader in the profession in developing new residencies and fellowships. We believe the AOA will find renewed energy to provide high quality education for DO graduates.

We continue to look for community hospitals that have the resources to initiate an internal medicine residency program.
Letter from the President

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There are pathways to receive new GME slot financing from Medicare and the AOA and ACOI are willing to assist in the development. If you or your hospital has any interest now that the ACGME issue has been resolved, please contact me via my email.

During the House of Delegates meeting, an internist who had completed ACGME training expressed his desire to become an ACOI member, but felt restricted due to his training. I want to make it very clear that ACOI has offered full membership privileges for at least the last 20 years to physicians qualified for certification by both the AOBIM and ABIM. We have many active members who have participated in allopathic postgraduate training, including some of our Board members and other leaders. If you have colleagues who may want to join, but feel restricted by their training, please let them know that they are welcome to apply for membership and become part of our family.

I would appreciate some feedback from you regarding our weekly email newsletter, ACOI Insights. Send me your impressions so we can determine the value that membership places on this information material.

It’s time again to sign up for the ACOI Healthcare Leadership and Management course that we sponsor with the University of Texas at Dallas. This course will graduate its first class at the ACOI Convention in October and we are now accepting registrations for 2014. Please contact the ACOI office, complete the application as part of the convention materials, or go on-line and complete the registration electronically.

This course was designed to fulfill the needs of the Phoenix Physician, the physician leader of the Patient Centered Medical Home. It is perfect for the practicing internist who wants to learn leadership skills to improve the efficiency of the healthcare team.

I have continued to represent you before the osteopathic and allopathic professions, served as your advocate to the federal government, and now am reaching out to national news media for internal medicine. Send me your concerns. Don’t forget we have active Facebook pages with video feeds from the multiple informational interviews that we have published this year.

 coping with CODING

The information provided here applies to Medicare coding. Be sure to check with local insurance carriers to determine if private insurers follow Medicare’s lead in all coding matters.

Additional Transitional Care Services Material Released

Effective January 1, 2013, Medicare pays for two Current Procedural Terminology (CPT) codes (99495 and 99496) that are used to report physician or qualifying nonphysician practitioner care management services for a patient following discharge from a hospital, skilled nursing facility or community health center stay, outpatient observation or partial hospitalization. In an effort to clarify some questions that have arisen around the 30-day transitional care management period and to promote proper coding, the Centers for Medicare and Medicaid Services (CMS) released a Medical Learning Network document entitled, “Transitional Care Management Services.” The document is available at http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/Downloads/Transitional-Care-Management-Services-Fact-Sheet-ICN908628.pdf.
House and Senate are in Recess
The House and the Senate are in recess. Congress is scheduled to return the second week of September. Upon its return, Congress will have a number of critical issues waiting for its consideration, including the 2014 fiscal year budget and Medicare payment reform, among many other things.

House Committee Approves Repeal of Medicare Physician Payment Formula
The House Energy and Commerce Committee considered and approved the “Medicare Patient Access and Quality Improvement Act” (H.R. 2810) by a bipartisan vote of 51-0 on July 31. The legislation would permanently repeal the Medicare Sustainable Growth Rate (SGR) formula.
H.R. 2810 would repeal the SGR formula and replace it with “alternative payment models.” The specific replacement payment models are not defined. The legislation would provide for a period of stability by creating a .5 percent positive physician payment update for five years. Following the five-year statutorily guaranteed update, high-performing physicians under a new quality reporting system would receive a positive update of one percent. Low-performing physicians would receive a one percent reduction.

The House Ways and Means and Senate Finance Committees are expected to consider legislation designed to repeal the SGR as well. According to the non-partisan Congressional Budget Office (CBO), a repeal of the SGR with a freeze in current payment would cost approximately $139.1 billion over 10 years. H.R. 2810 and other legislative proposals under consideration by committees of jurisdiction are projected to increase budget deficits, and as such, will likely require offsets prior to being approved by the House and Senate and sent to the President for signature. Congress is in recess until September and is expected to take up this issue upon its return. Failure to do so, would result in an approximately 25 percent decrease in reimbursement under the Medicare program in January, 2014. The ACOI is continuing to closely monitor this important issue.

House Responds to Employer Mandate Delay
In response to the White House’s announcement that it will delay implementation of the Patient Protection and Affordable Care Act’s (ACA) employer mandate provision for one year, the House approved two related pieces of legislation. First, the House approved the “Authority for Mandate Delay Act” (H.R. 2667) by a vote of 264-161. H.R. 2667 would put in statute the delay announced by the Administration. Following this action, the House approved the “Fairness for American Families Act” (H.R. 2668) by a vote of 251-174. H.R. 2668 would delay for one-year implementation of the individual mandate which requires most uninsured individuals with taxable income to obtain health insurance coverage or pay a penalty. Both bills were approved along mostly party lines on July 17. House leadership announced that the bills would be combined and sent to the Senate, where it is unlikely that they will be considered. The White House also issued a statement that the legislation would be vetoed should it be approved by Congress.

40th Repeal Vote Cast in House
The House held its 40th vote to repeal or defund a portion of the ACA on August 2. On a vote of 232-185, the House approved the “Keep the IRS off Your Health Care Act” (H.R. 2009). The legislation would prevent the IRS from implementing tax provisions of the ACA. H.R. 2009, which was approved mostly along party lines, would prevent the IRS from collecting penalties from individuals who are required to secure health insurance coverage under the ACA and fail to do so. In addition, the bill would prevent the IRS from distributing subsidies to eligible individuals to buy health insurance coverage. The House considered H.R. 2009 prior to beginning its August recess on August 2. The Senate is not expected to consider this legislation.

CBO Scores Cost of Delaying Employer Mandate
In a new report the non-partisan Congressional Budget Office (CBO) estimates that it will cost approximately $12 billion dollars to delay for one year the employer mandate provision of the ACA. According to the CBO, there will be approximately a $10 billion loss in penalties collected from employers. In addition, it is estimated that it will cost about $3 billion in increased spending for exchanges due to additional people seeking coverage through them. Finally, the CBO estimates that the delay will save $1 billion in reduced taxable income savings. The CBO places the current price tag for the ACA at $1.375 trillion over 10 years.

Increase in Primary Care Incentive Program Payouts
The Centers for Medicare and Medicaid Services (CMS) announced an 18.5 percent increase in pay outs under the Primary Care Incentive Payment Program (PCIP) created under the ACA. According to CMS,
Government Relations

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providers received $664 million in 2012 under the PCIP compared to $560 million in 2011. The five-year program offers the highest percentage of payments to internal medicine physicians, followed by family physicians and nurse practitioners. According to CMS, the number of rural providers receiving incentive payments also increased from 13.6 percent to 17.8 percent during the same time period.

Sunshine Act Goes Into Effect

The Physician Payments Sunshine Act created under the (ACA) took effect on August 1. The Act created the National Physician Payment Transparency Program to promote greater transparency with regard to financial relationships that could influence the drugs, devices, biologics, or medical supplies used in healthcare. As a result, drug and medical device manufacturers must begin reporting to CMS any payments, ownership interests and other “transfers of value” to physicians. The reported data will be published in an online database beginning in 2014 in an effort to prevent inappropriate influences on research, education and clinical decision-making.

While physicians are not required to report information to CMS, they will have the opportunity to review the information pertaining to them prior to it becoming publicly available. To this end, CMS announced the release of a free web application available through the Apple Store and the Google Play Store. According to CMS, the app designed for physicians will help doctors ensure the information reported about them is accurate and complete. Additional information is available at http://www.cms.gov/Regulations-and-Guidance/Legislation/National-Physician-Payment-Transparency-Program/index.html.

Washington Tidbits: A Statue Facing East…

Standing atop the Capitol dome is the Statue of Freedom. The bronze statue is 19 feet 6 inches tall and weighs approximately 15,000 pounds. If you visit Washington, you will notice she is facing east with her back turned to the Mall and the Washington Monument. Why does the statue appear to be facing the wrong direction?

There is actually a simple explanation. The Capitol’s East Front was planned, and still serves, as its main entrance. It is the only front that is on level ground. (The West Front faces the Mall and the Washington Monument.) As a result, the Statue of Freedom stands facing those coming to visit the hallowed halls of Congress.

AOA Business Meeting

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DO, MACOI, was reelected as Speaker of the House of Delegates. David Broder, DO, FACOI, served as the House’s parliamentarian.

The major issue to be considered during the meetings was the potential unification of the AOA and ACGME graduate medical education accreditation systems. Following months of negotiations conducted by a small group of representatives from both bodies and the American Association of Colleges of Osteopathic Medicine (AACOM), a draft Memorandum of Understanding was presented. Meeting in executive sessions, the governing boards of the AOA and AACOM rejected the Memorandum, stating that it did not meet one or more of the five non-negotiable items they had established going into the discussions. It appears as a result that the potential GME unification will not go forward.

In other activities, two ACOI members – David F. Hitzeman, DO, FACOI and Gilbert A. D’Alonzo, DO, FACOI – received Presidential Citations for their many contributions to osteopathic medicine. Both men are former members of the ACOI Board of Directors. Dr. Hitzeman has represented the AOA for many years on the AMA Relative Value Update Committee. Dr. D’Alonzo recently announced that he would be completing his tenure as Editor-In-Chief of AOA publications.

Approximately 50 internists were elected as delegates or alternates to the House of Delegates by their states. A breakfast meeting for the group was hosted by Dr. Good to bring them up to date on ACOI activities and items of interest on the meeting agenda.

Investigators and Patients Sought For Clinical Trials in Pain Management

Purdue Pharma, L.P. is currently recruiting clinical trial investigators and enrolling patients for a number of clinical trials in chronic moderate to severe pain. Purdue researchers are developing investigational analgesic pharmaceutical formulations and therapies in an effort to expand treatment options for patients with pain. In partnering with Purdue on these clinical programs, you can help expand the body of scientific knowledge in pain management. For additional information, contact Craig Engesser at Craig.Engesser@pharma.com.
ACADEMIC INTERNAL MEDICINE FACULTY—Missouri. Kansas City University of Medicine and Biosciences invites applications from outstanding candidates for a full-time faculty member in the Department of Internal Medicine. The successful candidate must be a graduate of a college accredited by COCA or LCME, have completed an IM residency and be certified by the AOBIM or ABIM. Eligibility for Missouri licensure required.

Interest in teaching medical students at all levels is essential; osteopathic residency training preferred, but not required. In addition to patient care, an interest in clinical trials will be helpful.

To apply, go to https://jobs.kcumb.edu. Specific questions may be directed to Kevin P. Hubbard, D.O., FACOI, Chair of Internal Medicine, 1-800-234-4847 ext. 7392 or 816-654-7392 or email at khubbard@kcumb.edu.

A private university comprising a College of Osteopathic Medicine founded in 1916 and a College of Biosciences, Kansas City University of Medicine and Biosciences is the oldest medical school in Kansas City and the largest in Missouri. We are a tobacco-free environment

SEEKING BC/BE PHYSICIANS—Oregon. Oregon State Hospital is looking for BC/BE physicians. We have it all! Oregon State Hospital is a brand new hospital that incorporates modern architecture, treatment spaces, and technologies.

Our Medical Clinic provides general medical care for psychiatric in-patients at both Salem and Portland campuses. A generous and comprehensive benefit and PERS retirement package is included as well as opportunities to have an academic appointment with the Oregon Health Sciences University.

Monday – Friday work week is available, with potential for compensated night/weekend call.

Contact by Phone: (503) 945-2887; email: lila.m.lokey@state.or.us; www.oregon.gov/OHA/mentalhealth/osh. The State of Oregon is an Equal Opportunity Employer.

INTERNAL MEDICINE PHYSICIANS—Pennsylvania. Traditional IM group of nine physicians with four offices, one hospital and a number of LTC facilities. Each physician works out of one office along with a varying number of specific nursing facilities dependent on geographical area and need. The average office volume per physician is 18-22 patients/day. The group has four nurse practitioners. Call requirements are an average of seven days every five weeks, divided into three and four day blocks (Friday-Sunday and Monday-Thursday). Two physicians cover the hospital rounds (average census 30-50), office and nursing home calls. Our need is immediate: we are open to full or part-time, physicians who prefer only office-based practice, and will even consider a physician who does not want nursing home work. Base salary $170-$220K. Live anywhere you want in the greater Pittsburgh area.

Pittsburgh has a population of over one million people with all of the cultural amenities anyone could ever take advantage of: Professional sports; professional symphony, and orchestra; major universities and teaching hospitals international airport.

INTERNAL MEDICINE PHYSICIAN—Arizona. Would you like to be part of an Internal Medicine group located in the picturesque Cottonwood/Sedona Arizona? We are seeking an Internal Medicine Physician to join our team (MD or DO).

• Practice demographic is retirement age
• Patient base established
• Work alongside a team of medical professionals
• Must be willing to participate in a group call schedule
• Board Certification required or Board Eligible
• Competitive package
• Participate in rotating in-patient and out-patient call group
• Partnership available or employment model available
• Serious inquiries only

For further details, please submit your CV with work history to cottonwood.human.resource@gmail.com

INTERNAL MEDICINE PROGRAM MULTIPLE POSITIONS—New Jersey. Hospitalist/Night Float Position available for a Board Certified/Eligible Internist/Family Practitioner to join a medicine based Hospitalist group in Bergen County, NJ at a prestigious, nationally ranked institution. Position is for a Night Float physician with No Call. The position offers an excellent compensation package including Medical Insurance and 401K as well as a highly competitive salary. To apply or inquire for further information about this opportunity please contact Timothy Hermansen. E-mail: timothy.hermansen@yahoo.com Phone: 973-653-9898.

Please direct CVs to Cindy Popovich, Physician Practice Manager, Fatgati/Nalin Associates, St. Clair Medical Services. Phone 412-343-1788 or email at cindy.popovich@stclair.org.
INTERNAL MEDICINE PROGRAM DIRECTOR
Osteopathic, Faculty
Christiansburg, Virginia

Carilion Clinic is seeking an Internal Medicine Osteopathic Program Director to direct a new residency program. Over the next year this position will be charged to lead the development and credentialing of the program, the next year will be available for recruitment of the incoming class and developing the educational program. Anticipated start date for the new residency would be July 1, 2015.

The program will be located on the campus of Carilion New River Valley Medical Center in Christiansburg, Virginia, a busy, modern, 146-bed medical center that serves a regional population of 185,000.

The ideal candidate will be osteopathic trained in internal medicine with at least 5 years of practice experience, three years teaching experience, board certified by the American Board of Osteopathic Internal Medicine, and possess a background in the development of an AOA-approved training program. The administrative FTE assigned to this position will be 0.5, with outpatient, specialty and hospitalist opportunities available to complete the successful applicant’s full-time position.

Submit CV and cover letter to Andrea Henson, Manager, Physician Recruitment and Onboarding, Carilion Clinic, POB 40032, Roanoke, VA 24022-0032, or ahenson@carilionclinic.org, 540-224-5241. AA/EOE.

DIRECTOR OF MEDICAL EDUCATION (DME),
SYSTEM DIRECTOR OF OSTEOPATHIC MEDICAL EDUCATION (DOME)
Osteopathic, Faculty
Roanoke, VA

Carilion Clinic is seeking a Director Medical Education to lead the education development of their regional campus at Carilion New River Valley Medical Center. This position will lead overall program development and directly lead medical student education, primarily in conjunction with the Virginia College of Osteopathic Medicine (VCOM). Carilion is developing two residencies on this campus as well, Internal Medicine and Emergency Medicine, and these two program directors would report to this position as well. Anticipated start date for the new residencies is July 1, 2015.

The program will be located on the campus of Carilion New River Valley Medical Center in Christiansburg, Virginia, a busy, modern, 146-bed medical center that serves a regional population of 185,000.

The ideal candidate will be osteopathic trained in internal medicine with at least 5 years of practice experience, three years teaching experience, board certified by the American Board of Osteopathic Internal Medicine, and possess a background in the development of an AOA-approved training programs. The administrative FTE assigned to this position will be 0.4.

This position will also serve as the Director of Osteopathic Medical Education (DOME) for the entire Carilion system headquartered in Roanoke, VA. In addition to the above two residencies at CNRV, this position would have responsibility for oversight of the AOA-accredited Neurosurgery residency, and a portion of the two Roanoke-based dual-accredited training programs, Family Medicine and Internal Medicine. This additional system responsibility and title would carry an FTE assignment of 0.2, leading to a combined total for this position of 0.6 administrative, 0.4 clinical with outpatient, specialty and hospitalist opportunities available to complete the successful applicant’s full-time position.

Submit CV and cover letter to Andrea Henson, Manager, Physician Recruitment and Onboarding, Carilion Clinic, POB 40032, Roanoke, VA 24022-0032, or ahenson@carilionclinic.org, 540-224-5241. AA/EOE.
Professional Opportunities
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Daytime Hospitalist Position
Available for a Board Certified/ Eligible Internist/ Family Practitioner to join a medicine based Hospitalist group in Bergen County, NJ at a prestigious, nationally ranked institution. Daytime hours with No Call. The position offers an exceptional compensation/benefit package including Medical Insurance and 401K, as well as a competitive salary including productivity bonuses. To apply or inquire for further information about this opportunity please contact Timothy Hermansen. E-mail: timothy.hermansen@yahoo.com Phone: 973-653-9898.

P/T Hospitalist Position
Available for a Board Certified/Board Eligible Internist/Family Practitioner to assist with medical rounds on weekends at an acute rehabilitation hospital. Multiple shifts available on both Saturdays and Sundays of each month. Competitive hourly reimbursement. To apply or inquire for further information about this opportunity please contact Timothy Hermansen. E-mail: timothy.hermansen@yahoo.com Phone: 973-653-9898.

P/T Hospitalist Position
Part-time Daytime position with Full time Benefits. Daytime hours typically 10AM – 3PM Monday through Friday with No Call and some weekend coverage. Position available for a Board Certified/Board Eligible Internist/Family Practitioner to assist with medical rounds at an acute rehabilitation hospital. The position offers exceptional benefits including Medical Insurance and 401K, as well as a competitive salary and with productivity bonuses. To apply or inquire for further information about this opportunity please contact Timothy Hermansen. E-mail: timothy.hermansen@yahoo.com Phone: 973-653-9898.

Volunteer For An ACOI Committee

The ACOI has numerous committees and task forces and volunteers are needed to serve on them. Incoming ACOI President, Rick A. Greco, DO, and the Board of Directors will be making committee appointments shortly after the Annual Meeting in Indian Wells, CA in October.

Areas where volunteers are needed included the Committee on Minority Health and Cultural Competency, the Information Technology Committee, the Clinical Practice Committee, the Government Affairs Committee and others.

A listing of all committees and task forces, with descriptions of most, may be found on www.acoi.org. Committee service is a great way to become more involved. Most meet via telephone in the evenings and do not require travel. To volunteer, send a letter or e-mail to Brian J. Donadio, Executive Director, at bjd@acoi.org. Please state the areas of interest and your qualifications and include a current CV. Resident, fellow and student interest is encouraged.

Cutting edge medicine... A great place to live... It all comes together here.

There’s a simple reason you chose a career in medicine. We invite you to practice it.
We welcome your enthusiasm for compassionate medicine as you change lives with some of the most inspiring people you will ever meet.

We are seeking BC/BE Internal Medicine physicians to join our employed Hospitalist team at award winning Aspirus Wausau Hospital.

- Hospitalist - 7 am-7 pm, 7 on/7 off, flexible scheduling
- Nocturnist - 7 pm-7 am, Tuesday to Monday. Days of the week are open for discussion

In return, we promise to treat you with the same dignity and respect you give to your patients.
Respecting your work/life balance is a big part of the Aspirus culture. We will surround you with a highly qualified nursing and support staff, an extensive network of outstanding specialists, and a medical culture that shares an unyielding commitment to excellence.

A practice model like this could only happen in a place like this.
It’s a place where kayakers and theatergoers live in harmony. A place of adventure through all four seasons.

Details at AspirusProviderOpps.org. Contact Karen Lindstrum at Karen.Lindstrum@aspirus.org or 800.792.8728.

Photos are actual Wausau Area events

PHREC-084
Future ACOI Education Meeting Dates & Locations

NATIONAL MEETINGS

• 2013 Annual Convention & Scientific Sessions
  Oct 9-13  Renaissance Esmeralda Resort and Spa, Indian Wells, CA

• 2014 Internal Medicine Board Review Course
  March 26-30  Westin Savannah Harbor Resort & Spa, Savannah, GA

• 2014 Challenges in Inpatient Care
  March 26-30  Westin Savannah Harbor Resort & Spa, Savannah, GA

• 2014 Congress on Medical Education for Residency Trainers
  May 2-4  Orlando World Center Marriott, Orlando, FL

• 2014 Annual Convention & Scientific Sessions
  Oct 15-19  Baltimore Marriott Waterfront, Baltimore, MD

• 2015 Annual Convention & Scientific Sessions
  Oct 28-Nov 1  Marco Island Marriott Resort Golf Club and Spa, Marco Island, FL

• 2016 Annual Convention & Scientific Sessions
  Oct 12-16  San Francisco Marriott Marquis, San Francisco, CA

• 2017 Annual Convention & Scientific Sessions
  Oct 4-8  Gaylord National Resort and Convention Center, Washington, DC

• 2018 Annual Convention & Scientific Sessions
  Oct 17-21  Orlando World Center Marriott, Orlando, FL

• 2019 Annual Convention & Scientific Sessions
  Oct 30- Nov 3  JW Marriott Desert Ridge Resort & Spa, Phoenix, AZ

Please note: It is an ACOI membership requirement that Active Members attend the Annual Convention or an ACOI-sponsored continuing education program at least once every three years. Information on any meeting listed here may be obtained from ACOI Headquarters at 800 327-5183 or from our website at www.acoi.org.

2014 Certifying Examination Dates & Deadlines

Internal Medicine Certifying Examination
Computerized Examination 200 Sites Nationwide
September 11, 2014 - Application Deadline: February 1, 2014
Late Registration Deadline: April 1, 2014

Subspecialty & Certification of Added Qualifications:
Aug. 23, 2014 • Lombard, IL - Application Deadline: April 1, 2014
Late Registration Deadline: May 1, 2014
Cardiology • Critical Care Medicine • Endocrinology • Gastroenterology • Hematology • Infectious Disease
• Interventional Cardiology • Nephrology • Oncology • Pulmonary Diseases • Rheumatology

Internal Medicine Recertifying Examination
Computerized Examination 200 Sites Nationwide
September 12, 2014 - Application Deadline: April 1, 2014
Late Registration Deadline: May 1, 2014

Subspecialties and Added Qualifications Recertifying Examination:
Aug. 23, 2014 • Lombard, IL - Application Deadline: April 1, 2014
Cardiology • Clinical Cardiac Electrophysiology • Critical Care Medicine • Endocrinology • Gastroenterology • Hematology • Infectious Disease
• Interventional Cardiology • Nephrology • Oncology • Pulmonary Diseases • Rheumatology
Late Registration Deadline: May 1, 2014

Further information and application materials are available at www.aobim.org or by writing to: Gary L. Slick, DO, MACOI, Executive Director, American Osteopathic Board of Internal Medicine, 1111 W. 17th Street, Tulsa, OK 74107. admin@aobim.org.

Estate Planning
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The presentation will address some of the following issues to help you protect your future:

• How to leave an inheritance to your children…choosing between a will and trust.
• How to reduce estate taxes.
• How to preserve your legacy by leaving something to your favorite charities, while still making generous provisions for your spouse and heirs.
• How to keep the estate from falling into the wrong hands.
• How to find someone you trust to help with your estate planning needs.

The session will be led by Joel Loquvam, JD, a former Board member of the American Association of Estate Planning Attorneys. This presentation is offered strictly as a service to ACOI members and is not a sales pitch for any individual or product.

The 2013 Annual Convention and Scientific Sessions will take place October 9-13 at the Renaissance Esmeralda Resort and Spa in Indian Wells, CA. Registration information is available at www.acoi.org.