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Leadership
We help you realize your full potential

Community
We create and welcome you to a home where you belong

Education
We help you learn exactly what you need to know

Health & Wellness
We lead you to discover the spirit of wellness

Connect with us:
Greetings and salutations as we find ourselves in the midst of a new holiday season! The ACOI is working hard as always to advocate on behalf of our members and osteopathic medicine in general. Our first hybrid convention has been a smashing success and the Board and ACOI staff are planning for an even better Annual Convention in 2022! Our CGME committee is already starting to plan out the educational activities for the coming year’s events. The Government Affairs Committee is keeping the ACOI in the legislative loop. Our student and resident outreach continues to be stronger than ever. Our Committee on Diversity, Equity and Inclusion will be doing very important work.

All of that reminds me, we want and need your input! Our committee assignments are a great way to become involved in the ACOI. There’s a lot of talent and brain power among our members. There are very few professional organizations where you can have such an impact through your involvement. Please, consider lending your time and abilities to our committees and educational activities. Send us an email at acoi@acoi.org for more information!

There is much discussion regarding physician burn-out and health and wellness. From a personal point of view, involvement with the ACOI in a leadership and mentoring capacity has been a “value-add” to my professional career that promotes health and wellness. I’ve always felt it was a privilege to be an osteopathic internist, but the numerous perfunctory and regulatory daily activities that we all have to do can certainly take the fun out of your day.

Contributing your time to your College, making your ideas count, and mentoring students and residents can be one of the ways to achieve a professional balance. It helps remind you of why you went into the field of internal medicine in the first place. Make that part of your legacy. (New Year’s resolution?)

I look forward to hearing from each of you. I look forward to seeing each of you at one of our meetings. Spend some quality time with your family and friends this season. May you have a blessed holiday and a happy, healthy new year!

Leadership
In Commemoration of World AIDS Day, Docs off the Clock features Dr. MarkAlain Dery

Check out the latest episode of ACOI’s podcast series, Docs off the Clock, featuring MarkAlain Dery, DO, FACOI.

“Undetectable = Untransmittable: Getting to Zero HIV Infections”

On the ACOI’s podcast series, Docs off the Clock, MarkAlain Dery, DO, FACOI sat down with our podcast interviewer in commemoration of World AIDS Day on December 1 to discuss the progress that has been made with HIV treatment and how through testing, regular treatment, and the use of prevention medications, he believes we can get to an HIV-free world.

What’s U=U?

This acronym has come to signify an important concept in helping individuals living with HIV understand the disease process: **Undetectable equals Untransmittable**. The acronym U=U not only underscores the importance of treatment designed to help patients become untransmittable, but it is also an effective anti-stigma tool and approach. In addition, the knowledge that an individual cannot transmit HIV to their partner or to a fetus in utero helps to remove fear and unwarranted stigmatization.

During the podcast, Dr. Dery expands on the HIV discussion and how inequalities that exist within the healthcare system were a part of this year’s theme for World AIDS Day. Dr. Dery is an expert healthcare communicator and frequently seeks to educate and combat misinformation while empowering individuals around their health. Discussing his own podcast, NoiseFilter, a daily 10-minute show that contextualizes the COVID-19 discussion through the lens of social, economic, environmental, and racial justice, Dr. Dery explains how the show morphed into an animated series that explains MRNA vaccines, HIV, Hepatitis C, and other complex medical concepts as simply as possible in an entertaining and informative way. The animations can be found at noisfiltershow.com.

Tune in to Docs off the Clock to hear more about U=U and HIV prevention and treatment.

Don’t forget to check out our previous episodes, also available to listen to now:

**COVID-19 Vaccine: The Perils of Misinformation**
Featuring: Humayun Chaudhry, DO, MACOI

**Physician Health and Wellness: Finding Balance in Today’s World**
Featuring: Julie Sterbank, DO, MPH

**COVID-19: Vaccine Administration in the Office**
Featuring: Jill Young, CPC, CEDC, CIMC

**Contract Considerations for Physicians**
Featuring: Sheila Mints, Esq.

What is Docs off the Clock?

Discover the ACOI’s podcast series where our members and other experts share their knowledge on a variety of topics relevant for physicians today. Made for busy doctors who may only have a few minutes to listen in the car, on a jog, or even on a lunch break between patients, each podcast episode is designed to enrich members with information especially for them. Spend a few minutes with Docs off the Clock and get some quick tips from our guests who share their thoughts on subjects like practice management, physician wellness, specialty medicine geared toward internists, updates on the COVID-19 pandemic, CME attainment, and more. It will soon become your favorite podcast!
A Gulf War veteran, Patrick C. Cullinan, DO, FACOI, remembers back to 1991 sitting in a tent seven miles from where bombs were exploding in Iraq and listening to the sounds of war in the distance. Danger surrounded him and his fellow Marines. Despite the stillness of their immediate surroundings, there was an uncertainty that kept them ready and on high alert.

That is the way Dr. Cullinan, who now lives in San Antonio and works in both Intensive Care Units and in Emergency Departments in several Texas hospitals describes his first few months as the COVID-19 pandemic struck. He likened the feeling to a combat zone, where he and his teams were experiencing “calm inside the storm.” While all eyes were on the hardest hit areas of the country, which at that time were New York and the East Coast, they knew they had better be prepared for the enemy to arrive at their own front door.

### A Pandemic of Ups and Downs

“There was a period of time when patient volumes (in the ICU and the ER) were nearly 50% less than they normally are because people were afraid to come in.” When they did eventually come in, they weren’t just sick, they were so ill that there was “nothing else to offer them…there was an element of no control.”

He says that the surges and drops in Texas have been similar to what the rest of the country has experienced, and only recently has he begun to feel that things were beginning to get back to “normal” in the ICU and in the ER. He describes “normal” as heart attacks, strokes, diabetic ketoacidosis, and only occasionally COVID. The COVID surges and spikes still occur, and when they do, they bring an emotional roller coaster with them. He remembers how he felt when an unvaccinated 42-year old mom of three passed away due to complications from the virus.

The ebb and flow of emotion for healthcare providers has matched the waves of devastating illness that each surge has brought. “It’s been very interesting to watch these ups and downs, and the different populations that have been affected. But as importantly, it has brought with it a sense of isolation and uncertainty for physicians, and with it, a change in patient volumes.

We go from super low volumes, which then directly impacts our income, to seeing a surge in patients and consequently working all the extra hours and time away from family.”

As he thinks about the fluctuating work demands, the roller coaster of emotions, and the sacrifice that healthcare professionals have faced, he also reflects on his own first-hand experience when he recently tested positive for COVID-19 and how it further launched his world into a state of chaos and uncertainty.

“I work at a high-risk cardiovascular ICU with ECMO and we had an outbreak, so everybody got tested and I tested positive even though I felt fine. I had to then come home and divide my house in half and stay sequestered in one portion of my house as my wife and kids were in the other half.” But then his second test came back showing he was actually negative. “There’s a cost to a false positive. I missed work. I had to sequester my family and divide up my house. There’s a real impact.”

He adds that the sacrifices he and his colleagues have endured aren’t just the number of additional hours worked, the fluctuation of income, or the time away from family. There has also been the sacrifice of personal choice.

Continued
ACOI Healthcare Heroes Facing COVID-19

(Continued)

“It’s been a real shame to watch the people that society once said they are appreciative of being persecuted. Our colleagues have made great sacrifices; some got COVID prior to the vaccines being available, and some sadly have actually died. Now there are nurses and doctors who are losing their jobs because they are concerned about the vaccine. I personally am vaccinated, but I just think it’s such a shame to see how the climate has changed. The people that you thought were of value to you are now disposable because perhaps others are not willing to see things the same way as you do. That leaves us not just with the emotional toll of taking care of patients, the emotional toll of how it affects your family, the emotional toll of the hours that you’re putting in and the risk that you’re taking, but then the emotional toll of your job now being at risk if you choose to think a different way.”

Vaccine Hesitancy, Personal Autonomy, and Lessons from a Pandemic

Dr. Cullinan recently had a conversation about vaccine mandates with an extended family member who is being required by his employer to get the COVID-19 vaccine in order to maintain his employment. Dr. Cullinan says he understands the hesitation to getting vaccinated that he’s heard expressed and consequently, he personally doesn’t support mandates. He recommended to his brother-in-law, as he recommends to his patients who may show some hesitancy about getting the mRNA vaccine, to consider the Johnson & Johnson vaccine since it is considered a more “traditional” vaccine.

However, he says that now, even those who were once concerned should have renewed confidence in the mRNA vaccine since nearly 500 million doses have been given worldwide. He believes they are proving to be very safe.

“At the same time I do support people having the ability to make their own decisions because the purpose of the vaccine is to protect the person that got the vaccine from being hospitalized and from death. My feeling is that if you don’t want to get vaccinated, there is risk. Some people will argue they are a burden on society. My response is that it’s a burden on society to ride a motorcycle without a helmet, to be a drunk driver, to do a variety of things in society that we have somehow, through compassion, accepted. I think there needs to be a little bit of grace to understand that for some people it may take a while for them to start feeling comfortable. Although I am for the vaccine, I am also for self-autonomy. I just think we need to be a kinder, more gentle society to those that we disagree with and to start showing more compassion.”

He has also seen his share of physicians who are experiencing burnout and fatigue and those beginning to question why they are taking care of patients who chose to not get vaccinated. “That is a really dark statement, because that’s like saying, why am I taking care of the patient that got lung cancer, but they smoked? Why am I taking care of the patient that has diabetes, but they’re overweight?

This concept that it’s easy to persecute or scorn populations because we disagree with their choices doesn’t show compassion or love, which, I believe, is the premise of being a physician. It’s been a very challenging time.”

How have these challenging two years changed Dr. Cullinan’s perspective? “For me, it’s confirmed that as a physician, there has to be humanity. There has to be compassion and there has to be forgiveness, especially when I look back at the people that died in the ICUs with no loved ones around. I also think about the things that medical care providers have said about those that are unvaccinated. To me, they’re all part of the same thing: there needs to be more compassion and more grace. That’s what we got into medicine to do.”

He also feels that the pandemic has taught us that we cannot live our lives based off of fear. “We spent a year of not living our lives, not seeing our parents, not seeing our grandparents, not getting together for holidays. That was tough.” Finally, he feels a renewed sense of great honor in being a physician. “We touch people’s lives, one person at a time. Yet medicine has changed and become a corporate business, and the humanity of medicine is being lost. If I was to get sick with COVID and pass away or not be able to practice again, the corporate structure will replace me literally in a day. I can’t forget to take care of the loved ones that I have—my wife and my kids. I can’t sacrifice everything for medicine knowing that medicine will not sacrifice anything for me.

Continued
Dr. Cullinan clarifies, “I don’t mean that on a patient level, because it starts with having to take care of patients, one at a time with humanity, grace, and love.”

Editor’s Note: The views expressed by the Healthcare Heroes in this series are their own and do not necessarily represent those of the ACOI. Throughout this series of Healthcare Heroes stories published in this newsletter, our goal has been to reflect the realities and truths as seen through the eyes of our members. We’ve heard numerous stories of how our members are managing the stress of being at the epicenter of healthcare during an historic pandemic. We know there are likely many of you who can relate to the sincerity of this story as well as others we have featured. We invite you to share yours. We are an organization that has been built on listening and support. Contact Susan Stacy at susan@acoi.org to share your story or to let us know how we can help.
With the end of the year in sight, Congress continues to race to approve must-pass legislation. This includes the recently approved legislation to stave off reductions in Medicare physician reimbursements scheduled to take effect on January 1, 2022. Congress recently approved, and the President signed into law, legislation to raise the federal debt ceiling by $2.5 trillion to prevent the government from defaulting on its financial obligations.

In the near term, Congress will need to consider legislation to fund the government beyond February 18, 2022, among many other things. Congressional action in the new year will take place with the mid-term elections as a backdrop. The ACOI will continue to closely monitor issues of importance to physicians and the patients for whom they provide care.

Congress Approves Legislation to Delay Cuts to Medicare Reimbursement

The House and Senate approved, and the President signed into law, legislation to prevent reductions in Medicare physician reimbursement scheduled to take effect on January 1, 2022. The legislation signed into law includes a delay in “pay-as-you-go” (PAYGO) reductions that totaled 4% through 2022. In addition, sequester cuts that totaled 2% were delayed for the first three months of 2022. From April to June, 1% of the sequester reductions will return, followed by the full 2% reductions in July 2022.

The legislation also provided for a one-year, 3% increase in the Medicare Physician Fee Schedule. Prior to Congress’ intervention, physicians were slated to receive cuts to their reimbursements that would total 9.75%.

The legislation signed into law provides a temporary reprieve and fails to permanently address the underlying problems with the physician reimbursement system. The ACOI will continue to advocate on your behalf to ensure fair compensation for the care you provide. You can read the most recent comments sent by the ACOI and others calling on Congress to act here.

ACOI Advocated on Multiple Issues in 2021

While Congress acted to prevent imminent reductions to physician reimbursement under the Medicare program, much work remains in the new year and the ACOI stands ready to advocate on your behalf. In 2021, the ACOI worked to ensure the voice of the osteopathic internist was heard in Washington and elsewhere. Issues addressed over the past year include the following:

- Physician reimbursement under the Medicare program
- Protecting quality health care for veterans
- Support of guidelines to simplify electronic funds transfer (EFT) standards for physicians

Continued
• Ensuring the availability of graduate medical education training positions
• An extension of a moratorium on physician payment reductions
• Support of legislation to prevent violence in the workforce for health care providers
• Protecting patients through the support of appropriate scopes of practice

You can learn more by reading the comments provided by the ACOI and others by clicking here.

HHS Study Shows Massive Increase in Use of Medicare Telehealth Services

A report recently released by the Department of Health and Human Services found a significant increase in the use of telehealth services during the COVID-19 pandemic. According to the Centers for Medicare and Medicaid Services (CMS) Administrator, Chiquita Brooks-LaSure, “CMS will use these insights—along with input from people with Medicare and providers across the country—to inform further Medicare telehealth policies.” The use of telehealth services allowed patients to maintain access with their healthcare providers. According to the report, telehealth visits went from hundreds of thousands to tens of millions. Specifically, Medicare visits conducted through telehealth increased 63-fold, from approximately 840,000 in 2019 to 52.7 million in 2020. This was made possible through regulatory and legislative actions to increase access to telehealth services and promote flexibility. You can access the full report here.

Washington Tidbits

First Female Acting President

Section 3 of the 25th Amendment to the Constitution provides, “Whenever the President transmits to the President pro tempore of the Senate and the Speaker of the House of Representatives his written declaration that he is unable to discharge the powers and duties of his office, and until he transmits to them a written declaration to the contrary, such powers and duties shall be discharged by the Vice President as Acting President.” This provision of the Constitution was triggered on Friday, November 19 when President Biden underwent a routine colonoscopy. While this was not the first time this constitutional procedure was used, it was the first time in US history that the Vice President was a woman at the time—making Kamala Harris the first female Acting President!
It’s the year’s end. The days are short, the nights long. The time of the year to self-reflect and assess. Let go of the things that we no longer need. Material items, relationships, jobs, anything that you realize is no longer serving you or you no longer need to serve.

Once this is complete, it leaves space for something new to present itself. Some new energy into your life that brings you joy and purpose on some scale. Something that encourages and helps you to bring out and present more of your light. More of your purpose.

As I move through the hospital I make silent, and sometimes not silent, observations of my colleagues, nurses, patients, and their families. I see this occur all the time—the passing of lives as new ones are being born, patients realizing choices they make affect their overall health, being, and longevity. Some prognoses are poor with reflections of what might have been; some present the opportunity to change the path they are on. It all comes down to what do we as individuals. What are our priorities? How are we serving self, and thus, others? Is our contribution positive or negative on a minute by minute basis and on the overall scheme of things?

I look at how my contributions have been over the last year. I see some great changes, places where I was able to help make a positive change, whether this was material items, relationships, professional, or self-care.

Choices were made to release things that are no longer needed or serve a purpose, setting intentions for the new year to come. As we release, what can we bring in? What can we change? How do we continue to serve ourselves to the best of our ability while bringing more into the world to help others?

As the light of the day continues to lengthen, the light you bring will also begin to shine brighter and stronger to all of those around you.

And as the daylight peaks in the length of the day, we will all move back to the cycle of reassessing ourselves to continue to serve our purpose.

May your holidays be warm and full of love and laughter.

Jodie Hermann, DO, FACOI
ACOI Osteopathic Manipulative Medicine Committee
2022 Certifying Examination Dates & Deadlines

AOBIM Initial Certification Exam - Early Entry
Remote Online Proctoring
March 1-3, 2022
First Application Deadline: Feb. 1, 2022
Final Application Deadline: Feb. 12, 2022

AOBIM Initial Certification Exam
Remote Online Proctoring
September 2022
First Application Deadline: Aug. 1, 2022
Final Application Deadline: Aug. 24, 2022

Read more about the Early Entry Pathway on our website here.

Additional Information Coming Soon!

Application materials are available on the AOBIM’s website. Contact the AOBIM at aobim@osteopathic.org for additional information.

ACOI National Meetings

2022 Annual Convention & Scientific Sessions
October 19-23
Baltimore Marriott Waterfront Hotel, Baltimore, MD

2023 Annual Convention & Scientific Sessions
October 11-15
Tampa Marriott Waterside Hotel, Tampa, FL

2024 Annual Convention & Scientific Sessions
October 9-13
Kierland Resort, Phoenix, AZ

Dates for our 2022 Spring Meetings Will Be Announced Soon!

Please note: It is an ACOI membership requirement that Active Members attend 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 acoi.org.
The ACOI Board of Director wishes to thank all ACOI members for their annual support for the College. The generous support from 75th Anniversary Circle members is of the utmost importance as we seek to maintain an osteopathic approach to internal medicine for future generations of patients.
MISSION
The mission of ACOI is to promote high quality, distinctive osteopathic care of the adult.

VISION
ACOI seeks to be the organization that osteopathic internists think of first for education, information, representation and service to the profession.

VALUES
To accomplish its vision and mission, ACOI will base its decisions and actions on the following core values:

LEADERSHIP for the advancement of osteopathic medicine

EXCELLENCE in programs and services

INTEGRITY in decision-making and actions

PROFESSIONALISM in all interactions

SERVICE to meet member needs