

*From President Sutton*

## Change Is a Constant



January is a month for new beginnings. We have inaugurated a new President of the United States, and elected a new Congress. Changes in the provision of healthcare are in the air in Washington.

This leaves some hopeful and some fearful. It seems in my 22 plus years in practice that my practice has been ever-changing, in part, related to regulations of the government. Although physicians in the US have a vote, we have limited control of regulations. The ACOI offices are located in the Washington area, in part to keep our finger on the pulse of legislative and regulatory activities affecting medicine. Our monthly *ACOInformation* newsletter keeps us up-to-date with government relations articles, and we have a standing committee working on these topics.

The health payors are beginning to address quality of care in payment plans, but one question is how to cross the Ts and dot the Is for covered benefits. The patients watch us viewing the computer screen while we type in the data of each case. Some patients see this as interference in face-to-face time with the doctor. They need care, and each patient cannot imagine what is happening behind the scenes. I often say in so many words: "What have I been doing (in the practice of medicine) for over 20 years?" I was carefully studying, working and educating in an effort to provide quality care. Providing quality

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## ACOI Launches Major Gifts Campaign in 2017 to Raise \$750,000



*Campaign Leaders: Martin C. Burke, DO (left) and Lawrence U. Haspel, DO, have agreed to lead the 75th Anniversary Campaign.*

**The 75th Anniversary Campaign is not to build a building or establish a scholarship program. It is to fund a once-in-a-lifetime idea to benefit and preserve osteopathic internal medicine for future years.**

Looking to the future, the ACOI sees that the decision to eliminate the independent osteopathic process for graduate medical education accreditation threatens the continued existence of osteopathic internal medicine. The College believes that osteopathic internists practice in a way that is different, and that the osteopathic difference is both beneficial to patients and

valued by them. Residency training is where distinctive osteopathic skills are refined and perfected. The ACOI has long provided significant guidance and assistance to our programs throughout the training process. Our ability to continue in this role will be eliminated in 2020 unless programs obtain Osteopathic Recognition in the new system.

### ACOI's Plan

The ACOI has a plan to assure the future of our profession by working with residency programs, providing our excellent continuing medical education for both osteopathic and allopathic credit, and supporting medical students and residents. Key elements include the following:

- Provide hands-on support and encouragement from ACOI staff to all osteopathic residency programs to seek ACGME osteopathic recognition.
- Achieve accreditation by the Accreditation Council for Continuing Medical Education (ACCME) as a sponsor of CME.
- Develop a centralized digital repository that consists of catalogued, on-demand access to ACOI materials created for live and online courses.
- Create new videos, podcasts, and other digital resources for training programs and students considering osteopathic recognition or training.

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### March 23-26, 2017 in Las Vegas

## 2017 Inpatient Clinical Challenges Program

Registration continues for the ACOI's popular CME program for hospitalists and others: Clinical Challenges in Inpatient Care, which will take place March 23-26, 2017 at the J.W. Marriott Las Vegas Resort & Spa. The program will provide up to 26.75 AOA 1A CME credits in internal medicine. In addition, the program meets the American Osteopathic Board of Internal Medicine's (AOBIM) requirement for a board review course for those who plan to sit for the focused hospital medicine recertification credential. New this year, the program will include a full day of inpatient cardiology education.

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## American College of Osteopathic Internists

*In Service to All Members; All Members in Service*

### MISSION

*The mission of the ACOI is to promote high quality, distinctive osteopathic care of the adult.*

### VISION

*The 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, the 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

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## Letter from the President

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care continues to challenge me with the massive amount of data to consider.

We must start by going back to the basics in osteopathic internal medicine. This is how we trained. Start at the beginning and dig deep into the information. As internists, we have been taught not just to put out the fires. A temporary band aid on the focal problem is not good enough. Take extended face-to-face time with the patient, family and anyone else with knowledge of the case. In-depth questioning into the history is imperative. After obtaining the chief complaint, it is important to go through six areas, which include the medications and medication allergies, as well as the medical, surgical, family, and social history. This is topped off by the review of symptoms, focusing in detail on symptoms that might relate to the problem.

Sometimes the patient hints at the answer to the overall health problem as the doctor uncovers information. The next step is the careful physical exam, which helps to clarify additional diagnostic information. In my specialty of endocrinology, focused lab is an important step. Also in endocrinology, imaging may be necessary after the lab confirms a relatively clear diagnosis. This is the classic history and physical, and as osteopathic internists we know how to use this information to get to the crux of the case. Hands-on medicine is extremely important to us, and patients sense the power of hands-on care. They expect us to spend the time to get the story, and the examination is very important to the patient, as well.

Although getting paid is very important, quality care is our focus. That is not a new thing for us as osteopathic physicians. We have been taught that from day one of medical school. At the American College of Osteopathic Internists, we value excellence, professionalism and integrity. We believe in leadership and service to our members in the advancement of osteopathic internal medicine. Promotion of quality care of the adult is in our mission. That is the foundation of our training programs and of our doctors. I like to think of the ACOI as Home Base. A place to come back to be with your osteopathic family. Home is cozy and warm.



### This month I am introducing a new segment of the newsletter.

It is an effort to celebrate grass roots osteopathic internal medicine. In each newsletter, I plan to celebrate what the ACOI is all about, by highlighting one of our members, practicing in the trenches.

**Margaret Davenport, DO, FACOI** is board certified in Internal Medicine and Critical Care by the American Osteopathic Board of Internal Medicine. She is what I consider to be a classic “southern belle.” Dr. Davenport has been in private practice in Anniston, AL since 1993. She has a Bachelor of Arts degree in biology from the University of Mississippi, and is a 1987 graduate of the Kirksville



College of Osteopathic Medicine. She completed her internship and internal medicine residency at Deaconess Hospital in St. Louis, MO, where she was intern of the year. She then completed a fellowship in Critical Care at St. Louis University.

Dr. Davenport is presently serving as the site director in Anniston for the Alabama College of Osteopathic Medicine. There are 17 third and fourth year students in Anniston. Margaret

is married to Blane Bateman, DO, an ENT and Facial Plastic Surgeon. He is also a KCOM graduate. They have one son, Richard, who is in his third year at the University of Chicago. In her spare time, Margaret enjoys reading and Pilates. She is also active in her community and in her church. We celebrate Margaret Davenport, DO, as she carries the banner of osteopathic internal medicine in the trenches, educating and practicing in Alabama.

Peace to you,

John R. Sutton, DO, FACOI  
President



# government RELATIONS

Timothy McNichol, JD

## Process to Repeal ACA Is Underway

The House and Senate recently approved a budget resolution along party lines to begin the process of repealing the Affordable Care Act (ACA). The resolution directs the House Ways and Means and Energy and Commerce Committees and the Senate Finance and the Health, Education, Labor and Pensions (HELP) Committees to report out legislation that achieves at least a \$1 billion deficit reduction from fiscal years 2017 through 2026. It is important to note that the package does not impose any penalties should the committees fail to act by January 27 as directed by the reconciliation instructions contained in the resolution. Utilization of this process allows the Senate to advance legislation to repeal the ACA with a simple majority and without the need to overcome the threat of a filibuster by the minority. Legislation to repeal the ACA previously was vetoed by President Obama.

In addition to the budget reconciliation process undertaken by Congress, one of President Trump's first official acts was to issue an executive order directing the Secretary of Health and Human Services and the heads of all other executive departments and agencies with authorization under the ACA to "take all actions consistent with law to minimize the unwarranted economic and regulatory burden of the Act..." The executive order was issued providing Congress time to proceed with its efforts to advance legislation that repeals and replaces the ACA. The actual impact of the executive order remains unclear as do the next steps that will be taken by Congress. Progress has been slowed by concern that ill-conceived legislation could result in adverse impacts to insurance markets and currently insured individuals. The ACOI continues to monitor this matter closely as it impacts physicians and the patients they serve.

## CBO Report Examines Repeal of ACA

According to a new report released by the non-partisan Congressional Budget Office (CBO), repealing the ACA could initially result in an additional 18 million uninsured Americans. Further, the CBO estimates that the number of uninsured Americans could grow by more than 32 million by 2026. The estimate was based on ACA repeal provisions contained in legislation vetoed by Present Obama during the previous Congress. The CBO analysis does not consider the impact of replacement legislation that could be enacted at the time of repeal. While the Trump administration and Republicans in Congress have identified repeal of the ACA as a priority, details have yet to be released on legislation to repeal and replace the ACA. As such, the impact of repealing the ACA on the number of uninsured remains uncertain if done through a comprehensive "repeal and replace" process. The CBO analysis serves as a reminder of the potential impact of modifying existing law. You can view the CBO report in its entirety at [www.cbo.gov](http://www.cbo.gov).

## False Claims Act Recoveries Continue to Grow

The Department of Justice (DOJ) recently announced recoveries from False Claims Act (FCA) cases surpassed \$4.7 billion in fiscal year (FY) 2016. According to the DOJ, \$2.5 billion of the total recoveries were the result of health care cases. Suits against drug and device manufacturers accounted for \$1.2 billion of the recoveries. Suits against hospitals and outpatient clinics resulted in recovering \$360 million. In total, the DOJ opened 975 new criminal and 930 new civil health care fraud investigations in FY 2016. According to the DOJ, the amount recovered from healthcare

fraud claims since 2009 now totals more than \$19 billion.

## Order to Clear Medicare Appeals Backlog Stands

The US District Court for the District of Columbia recently rejected a motion filed by the Department of Health and Human Services (HHS) requesting the court to reconsider an earlier ruling directing HHS to clear all Medicare appeals by 2021. Under the order previously issued by the court, HHS is instructed to reduce 30 percent of the appeals backlog by the end of 2017, 60 percent by the end of 2018, 90 percent by the end of 2019, and completely by December 31, 2020. HHS continues to assert that it will be impossible to clear the backlog as ordered by the court without making a large number of improper payments.

## Washington Tidbits Certification of Election Results -- The Electoral College and Congress

The 538 members of the Electoral College met in 50 states and the District of Columbia on December 19 to cast their votes for president and vice president of the United States. Their votes were determined by nearly 129 million votes cast across the country on November 8. Only seven members of the Electoral College cast votes for someone other than the candidate for whom they were elected to vote for – five Hillary Clinton electors and two Donald Trump electors. It was not until January 6 during a joint session of Congress that the election of Mr. Trump was certified and made official. Presided over by then-Vice President Joseph Biden, Congress received the states' electoral vote certificates. The votes for vice president and president were read out loud and tabulated. In the end, Hillary Clinton received 227 electoral votes to Donald Trump's 304 electoral votes. With 270 electoral votes needed to be elected, Donald Trump was certified as the official President-elect of the United States. The peaceful transfer of power could proceed.



## *coding* **CORNER**

*Jill M. Young, CPC, CEDC, CIMC*

*The ACOI Coding Corner is a column written by Jill M. Young, CPC, CEDC, CIMC. Ms. Young is the Principal of Young Medical Consulting, LLC. She has over 30 years of experience in all areas of medical practice, including coding and billing. Additional information on these and other topics are available at [www.acoi.org](http://www.acoi.org) and by contacting Ms. Young at [YoungMedConsult@aol.com](mailto:YoungMedConsult@aol.com).*

*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.*

## **Adding a Provider - Understanding Locum Tenens**

What exactly is locum tenens? An online dictionary defines it as, "one filling an office for a time or temporarily taking the place of another -- used especially of a doctor or clergyman." The origins of the concept date back to the 1600s and the Medieval Latin phrase "locum tenens," which means "holding the place." It seems there is an unlimited number of advertisements on the Internet for locum coverage of medical professionals. Locum tenens as a model for the billing of services creates challenges of which you should be aware.

When a practice is in need of temporary coverage for a provider who is ill or has left a practice, Medicare allows locum tenens to become a billing concept. Use of this code allows a practice to bill for a substitute provider's services using the Q6 modifier on the claim. The scenarios under which this is allowed are well-defined in the Medicare Carriers Manual in Chapter 1, Publication 100-04. Medicare payment policy indicates that locum tenens is permitted for physician services only. You cannot use the concept for services provided by non-physician practitioners (NPP).

Non-Medicare insurance carriers employ different rules for billing when services are provided by locum tenens physicians. While I have not personally found any carriers that allow NPPs to use the concept, many also do not allow for the payment of physicians providing locum tenens services. Some carriers go as far as requiring some level of credentialing of the substitute physician. As a result, locum tenens does not apply. These carriers require billing of services under the temporary physician's own NPI number.

An example of a potential pitfall is seen when a claim is submitted to a non-Medicare carrier that does not allow payment for locum tenens services. The insurance company does not recognize the Q6 modifier and at first ignores the code listed on the claim form. As a result, the claim passes through their computers appearing as a claim submitted by an off-duty physician. The insurance company thinks your regular physician provided the service and the services are subsequently paid for. However, when the chart is audited and it is discovered the name of the provider on the claim form is not the same as the one who provided the service and signed the patient's note, the claim is denied and funds recovered.

The lesson here is if your practice is adding a new provider, be sure to know the policies of your insurance carriers, including Medicare. This will prevent you from submitting claims where the insurance carrier could misidentify the physician provider. It will also help prevent erroneously billing locum tenens services provided by NPPs.

## **Inpatient Clinical Challenges** *continued from page 1*

The ACOI Continuing Medical Education Committee, led by Chairman Frederick A. Schaller, DO, MACOI, has designed an agenda that will appeal to physicians who treat patients in the hospital. The first day of the program will be devoted primarily to cardiology issues and will include presentations on: Medical Management of Atrial Fibrillation; Leadless Pacing Devices; TAVR Update; Device Management of Atrial Fibrillation; Late Breaking Clinical Trials; and New Medical Modalities in Management of Heart Failure with Reduced Ejection Fraction.

Among the other areas to be covered are: respiratory support in hospitalized patients, pulmonary fibrosis, mobile devices to improve hospital efficiency, Metformin use in chronic kidney disease, non-healing wound management, oncologic emergencies and more. Complete program information appears in this newsletter and is available at [www.acoi.org](http://www.acoi.org).

The JW Marriott Las Vegas Resort & Spa is situated on 50 acres of lush garden landscape, only 20 minutes from the Las Vegas Strip. The hotel offers an impressive range of premium amenities and a commitment to outstanding service. Guest rooms are well-appointed and recently renovated and the resort features 10 restaurant options. Meeting registration and hotel information is available in this newsletter and at [www.acoi.org](http://www.acoi.org).

## **Have You Moved?**

**Keep us updated. If you have recently made any changes in your address, phone number or email, please notify the ACOI.**

[www.acoi.org](http://www.acoi.org)



# talking science & education

*Donald S. Nelinson, PhD*

Happy new year to our ACOI family. We wish you happiness and of course, health in the coming year. Last month I began to feature a series of questions about health in America based on the United Health Foundation's annual report. The report derives its definition of health from the World Health Organization: "Health is a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity."

## Your question last month was:

Which state takes the title as the healthiest state in 2016?

- A. Connecticut
- B. California
- C. Hawaii
- D. Vermont

For the fifth consecutive year, Hawaii ranks healthiest. Strengths include low prevalence of obesity, low percentage of uninsured, and low rate of preventable hospitalizations. How did you fare?

So for this month's question, let's try the opposite:

Which state ranks the lowest for overall health?

- A. Ohio
- B. Texas
- C. Mississippi
- D. Louisiana

Send me your answer at [don@acoi.org](mailto:don@acoi.org) and win a valuable prize! Again, this month's answer will be in the February newsletter.

## ACGME Osteopathic Recognition Update

The Osteopathic Principles Committee has updated the Application Instructions for Osteopathic Recognition (OR) to reflect recent changes to the Osteopathic Recognition application. The application will no longer contain common program application questions or questions related to duty hours, patient safety, and learning environment. This does not in any way change our strong recommendation that programs consider OR as they are applying for ACGME accreditation. Issues such as scholarly activity, program evaluation and others can be developed in a manner that will meet the needs for both the ACGME Internal Medicine review and the review for OR by the Osteopathic Principles Committee.

## Diabetes Dialogues

African-American patients with diabetes are under-represented in US drug trials....still!

Even though diabetes rates are almost twice as high in African-American people as in whites, African-American patients may be far less likely to be included in drug safety trials, a recent study suggests.

Since 2008, the U.S. Food and Drug Administration has required that new glucose-lowering medications for diabetes be tested for cardiovascular safety, which may differ based on patients' race or ethnicity, researchers note in *The Lancet Diabetes and Endocrinology* (12/21/16).

When researchers looked at seven diabetes drug trials done since then to test cardiovascular safety, they found that in five of the trials, African-American people made up less than five percent of the patients.

"In the United States the burden of diabetes and the serious complications associated

with it fall unfairly on minorities, particularly African-Americans, yet it appears that they are under-represented in clinical trials of new therapies and devices," said study co-author Dr. David Kerr of the William Sansum Diabetes Center in Santa Barbara, CA.

"If they are excluded they may be exposed to therapies which may not work or could cause harm," Kerr added. "The therapies are also likely to be expensive and ineffective."

About 13 percent of African-Americans in the U.S. have diabetes, compared with 7.6 percent of white Americans. Death rates from cardiovascular disease are also disproportionately high among African-Americans, the researchers point out.

When it comes to drug effectiveness and safety, self-identified race doesn't necessarily predict response to a treatment, or suggest that outcomes would be similar among patients of different races. Still, the reality is that the majority of cardiovascular studies in recent decades have focused on white heterosexual males. The *Lancet* study confirms the notion that African-American subjects are poorly represented in large cardiovascular outcome trials in particular.

When drug trial participation isn't balanced across gender, race, ethnicity and socioeconomic status, it can be easy to miss critical distinctions in how treatments may work in different types of people. Certain groups of patients may respond differently to the same therapies."

There are examples beyond just diabetes. For example, studies have found two types of blood pressure medications (ACEs/ARBs) don't work as well in African-American patients as in other people, and one medicine for heart failure (BiDil) works very well in African-American patients but not in white patients.

For some time we have known high-risk minority populations have been under-represented in clinical trials. This major issue is not limited to diabetes studies but also cancer and clinical trials in a number of therapeutic categories.

## Tornado Devastates William Carey COM Campus



A tornado ripped through the town of Hattiesburg, MS in the morning of Saturday, January 21, killing four people and leaving destruction in its wake. The campus of William Carey University and its College of Osteopathic Medicine (WCUCOM) suffered significant damage. Fortunately, no students, faculty, or administration were among the reported fatalities. The damage, however, was significant enough that the school was forced to close its on-campus operations.

Medical school facilities sustained damage from tornado at William Carey University. Photo via Baptist Press.

“Of the four affected buildings, two are structurally sound and may be salvageable,” reported WCUCOM Dean James Turner, DO. Early estimates are that it may take as long as 18 months to rebuild everything, but Dr. Turner has announced that some classes will resume this week in an empty nursing school facility at nearby Southern Mississippi University.

Several of the COM’s buildings may be usable after they’re cleaned up, but the campus has no IT support, power, or water, and housing conditions will be unsuitable for some time. While the school is “still in salvage mode,” WCUCOM hopes to retrieve 80 percent of its computers and, although the university’s communications are under several feet of water, its internet is up and running and its website is operational.

**Fundraising initiatives have begun. The American Osteopathic Foundation (AOF) is accepting tax-deductible donations to assist WCUCOM students and faculty with their material losses. Donors can visit [www.aof.org/wcu2017](http://www.aof.org/wcu2017) and make donations directly online. Or they can text 41444, enter the keyword WCU and the dollar amount (e.g. WCU 20). No additional language or symbols are required. Text donors will receive a response with a link to enter their donation.**

The ACOI has made a donation and encourages members to do what they can. WCUCOM asks that direct communications with the school be kept to a minimum as the assessment of needs continues.

## NHSC Zika Loan Repayment Program

The National Health Service Corps (NHSC) Zika Loan Repayment Program is accepting applications for fiscal year (FY) 2017. The program offers eligible clinicians up to \$70,000 in student loan repayment in exchange for a three-year service commitment to work at an approved-NHSC site affected by the Zika virus. Three years of half-time clinical service is an option for awardees, where the maximum amount of loan repayment assistance is \$35,000.

Priority will be given to applications from Puerto Rico, U.S. Virgin Islands, and American Samoa, as these are currently the only U.S. Territories in which the Centers for Disease Control and Prevention has confirmed widespread local vector-borne transmission of active Zika virus. However, applications from clinicians intending to practice in all other U.S. territories are eligible to apply.

The NHSC Zika LRP is open to licensed primary care medical providers and others who are employed or seeking employment at NHSC-approved service sites. To be eligible, applicants must:

- Be a U.S. citizen (either U.S. born or naturalized) or U.S. National;
- Be eligible to participate as a provider in the Medicare, Medicaid and the State Children’s Health Insurance Program, as appropriate;
- Have unpaid student loans, taken before your application to the NHSC Loan Repayment to support undergraduate or graduate education;
- Have a current, full, permanent, unencumbered, unrestricted health professional license, certificate, or registration issued by the territory in which you will work and in the discipline in which you are applying to serve by July 18, 2017; and
- Employed or newly hired eligible clinicians at NHSC-approved sites in Puerto Rico and other U.S. Territory affected by the Zika virus.

For questions regarding the NHSC Zika loan program individuals may contact the Customer Care Center at 1-800-221-9393, Monday through Friday (except federal holidays) from 8:00 AM to 8:00 PM ET.

A complete online application is due by 7:30 PM ET on April 6, 2017. Interested individuals may view the [application guidelines](#) and apply [here](#).

# PROFESSIONAL OPPORTUNITIES

**ACADEMIC MEDICINE, NEW JERSEY** - The Department of Medicine of Rowan University School of Osteopathic Medicine is seeking physicians who are interested in careers in academic medicine. We are specifically seeking physicians in general internal medicine, rheumatology, endocrinology, and pulmonary medicine. Other subspecialties will also be considered. Academic, administrative, and teaching experience are desirable. Entry-level candidates (Assistant Professor) are preferred, but more experienced candidates will also be considered.

Salaries will be competitive and commensurate with experience. Faculty appointment is associated with a significant benefits package, including travel allowance, health care insurance, and an excellent pension plan. New Jersey state licensure is required for employment.

Rowan University is a comprehensive state-designated research institution and is only the second in the country to offer both MD and DO medical degree granting programs. Rowan University's medical programs have grown significantly and we anticipate continued growth because of our affiliate programs with the Kennedy, Lourdes, Inspira, Meridian, Atlantic, and Cooper Health systems. Rowan has over 400 trainees, conducts over 250,000 patient visits annually, and serves a population of over 1.5 million people. For more than three decades, our deep commitment to South Jersey has continued to grow, with more than 160 physicians and health care professionals combining compassion with expertise at 64 locations in 27 South Jersey towns.

Located in Southern New Jersey with easy access to Center City Philadelphia, our area boasts tremendous school choices at the primary and high school level. The Jersey shore is just one hour away, and we are just a short drive from New York City and Washington, DC. Our area has a rich historical heritage and we have many cultural events that take place throughout the year.

## Full-Time Internal Medicine-Primary Care Physician for a Large Public Health and Hospital System in Silicon Valley

Santa Clara Valley Medical Center (SCVMC), a large public teaching hospital, affiliated with Stanford University School of Medicine, in San Jose CA, is seeking a full-time BC/BE internal medicine-primary care physician to join our large Department of Medicine and one of our thriving primary care practices at our Valley Health Center- Moorpark or Valley Health Center-Downtown.

SCVMC is the main hospital for the Santa Clara Valley Health and Hospital System, which in turn is the second largest County-owned health system in California, including a large primary care network with nine primary care health centers, wide-ranging specialty care services, a large behavioral health department, and a health plan. SCVMC hosts a large Internal Medicine Residency Training Program, TJC-accredited Primary Stroke Center, CARF-accredited Rehabilitation Center, ABA-verified Burn Center, and ACS-verified Level 1 Trauma Center. SCVMC is located in the heart of Silicon Valley, 50 miles south of San Francisco and 30 miles north of the Monterey Bay, offering one of the most diverse selections of cultural, recreational, and lifestyle opportunities in the nation.

VHC-Moorpark is on our central campus and is a popular training site for our Internal Medicine residents. Minutes away, VHC-Downtown is a new state of the art facility in downtown San Jose near San Jose State University, which opened in June 2016.

We offer competitive compensation, generous comprehensive benefit package (including 53 days of leave per year), paid malpractice, vibrant professional environment, opportunity for career growth, and the opportunity to serve a multicultural patient population and the community. SCVMC is an Equal Opportunity employer. Please submit your letter of intent and CV to Roya Roustas at [roya.rousta@hhs.sccgov.org](mailto:roya.rousta@hhs.sccgov.org).

If you are interested in joining a highly professional, renowned teaching faculty, please email Thomas F. Morley, DO, FACOI, via [galantro@rowan.edu](mailto:galantro@rowan.edu) and include "letter of interest" in the subject line along with your CV. Thank you for your interest.

**ASSISTANT PROFESSOR/INTERNAL MEDICINE, AZ** - The Arizona College of Osteopathic Medicine (AZCOM) is seeking an academic/clinical Assistant Professor. This person will spend 0.4 FTE in the Internal Medicine Department teaching small groups, lecturing, assisting with standardized patient testing of students, grading, and participating in clinical clerkship rotation recruitment and rotation site visits and didactic education.

This position, at a rank of Clinical Assistant Professor, requires a DO degree and osteopathic or ABMS board certification in Internal Medicine and must be clinically active. Contact William Peppo, DO, Chair, Department of Medicine at [wpeppo@midwestern.edu](mailto:wpeppo@midwestern.edu).

*Midwestern University is an Equal Opportunity/Affirmative Action employer that does not discriminate against an employee or applicant based upon race, color, religion, gender, national origin, disability, or veterans status, in accord with 41 C.F.R. 60-1.4(a), 250.5(a), 300.5(a) and 741.5(a). We maintain a drug-free workplace and perform pre-employment substance abuse testing.*

**PRIMARY CARE PHYSICIAN, SILICON VALLEY, CA** - Santa Clara Valley Medical Center, a public teaching hospital, affiliated with the Stanford University School of Medicine, located in the heart of Silicon Valley, CA is seeking a BC/BE Internal Medicine-primary care physician to join our dynamic, growing, nurturing Department. Submit a letter of intent and CV to [roya.rousta@hhs.sccgov.org](mailto:roya.rousta@hhs.sccgov.org). EOE Employer.



Contact the Physician & Provider Services Team for more information about our current opportunities:

(844) FPN-DOCS / (844) 376-3627

Email us at [Practice@franciscanalliance.org](mailto:Practice@franciscanalliance.org)

Visit us online at [FranciscanDocs.org](http://FranciscanDocs.org)

# ACOI 2017 Clinical Challenges in Inpatient Care AGENDA

JW Marriott Las Vegas Resort & Spa, Las Vegas, NV • March 23 - 26, 2017

## Thursday, March 23

7:30 - 8:00 am **Continental Breakfast**  
8:00 - 8:05 am Welcome - *Frederick A. Schaller, DO, FACOI*  
8:05 - 8:50 am Medical Management of Atrial Fibrillation - *Asif Serajian, DO, FACOI*  
8:50 - 9:35 am Leadless Pacing Devices - *Martin C. Burke, DO, FACOI*  
9:35 - 10:15 am TAVR Update - *Speaker TBD*  
10:15 - 10:30 am **BREAK**  
10:30 - 11:30 am Device Management of Atrial Fibrillation - *Erik Sirulnick, MD, FACC*  
11:30 - 11:45 am Q&A with *Drs. Martin Serajian and Sirulnick*  
11:45 am - 1:00 pm **LUNCH**  
1:00 - 2:00 pm Late Breaking Clinical Trials - *Martin C. Burke, DO, FACOI*  
2:00 - 3:00 pm New Medical Modalities in Management of Heart Failure with Reduced Ejection Fraction - *Erik Adler, MD, FACC*  
3:00 - 3:15 pm **BREAK**  
3:15 - 4:15 pm ECG Challenge - *Asif Serajian, DO, FACOI*  
4:15 - 5:15 pm Mobile Devices to Improve Hospital Efficiency - *Thomas F. Mohr, DO, FACOI*  
5:15 - 5:30 pm Q&A with *Drs. Burke, Serajian, Adler and Mohr*

## Friday, March 24

7:30 - 8:00 am **Continental Breakfast**  
8:00 - 9:00 am Pulmonary Fibrosis - *Kevin R. Flaherty, MD*  
9:00 - 9:45 am Non-Healing Wound Management in the Hospitalized Patient - *Bruce L. Mintz, DO, FACOI*  
9:45 - 10:00 am **BREAK**  
10:00 - 10:45 am Sarcoidosis: Evaluation in Hospitalized Patients - *Kevin R. Flaherty, MD*  
10:45 - 11:45 am Curbside Consult in ID - *Gerald W. Blackburn, DO, MACOI*  
11:45 am - 1:00 pm **LUNCH**  
1:00 - 2:00 pm Optimizing Length of Stay - *TBD*  
2:00 - 2:45 pm Oncologic Emergencies - *Kevin P. Hubbard, DO, MACOI*  
2:45 - 3:00 pm **BREAK**  
3:00 - 5:00 pm Tests I Wish You'd Never Ordered (or Curbside Consultations)  
*Gerald W. Blackburn, DO, MACOI*  
*Patrick C. Cullinan, DO, FACOI*  
*Robert T. Hasty, DO, FACOI*  
*John R. Sutton, DO, FACOI*

## Saturday, March 25

7:30 - 8:00 am **Continental Breakfast**  
8:00 - 9:00 am Nutrition in the Hospitalized Patient: Calories or Therapy - *Matthew L. Bechtold, MD*  
9:00 - 10:00 am MACRA/MIPS: Implication for Hospital Practice - *Dale W. Bratzler, DO, MACOI*  
10:00 - 10:15 am **BREAK**  
10:15 - 11:00 am C. difficile: Update - *Matthew L. Bechtold, MD*  
11:00 - 11:45 am The Hospital Value-based Purchasing Program: What the Internist Needs to Know - *Dale W. Bratzler, DO, MACOI*  
11:45 am - 1:00 pm **LUNCH**  
1:00 - 2:00 pm CAP to HCAP - *Patrick C. Cullinan, DO, FACOI*  
2:00 - 3:00 pm Journal Club - *Robert T. Hasty, DO, FACOI*  
3:00 - 3:15 pm **BREAK**  
3:15 - 4:15 pm Respiratory Support in the Hospitalized Patient - *Patrick C. Cullinan, DO, FACOI*  
4:15 - 5:15 pm Mistakes in Management - *Robert T. Hasty, DO, FACOI*  
5:15 - 5:30 pm Q&A with *Drs. Bechtold, Bratzler, Hasty and Cullinan*

## Sunday, March 26

7:30 - 8:00 am **Continental Breakfast**  
8:00 - 8:45 am Transitions of Care - *TBD*  
8:45 - 9:30 am Metformin use in Chronic Kidney Disease - *Jeffrey Packer, DO, FACOI*  
9:30 - 10:15 am Hospice and Palliative Care Update: DNR in Hospitalized Patient - *Marianne M. Holler, DO, FACOI*  
10:15 - 11:00 am New Oral Anticoagulants in Chronic Kidney Disease - *Jeffrey Packer, DO, FACOI*  
11:00 am - Noon Exam for Physicians Interested in the Hospitalist Recertification - (Optional)



# ACOI 2017 Clinical Challenges in Inpatient Care REGISTRATION FORM

JW Marriott Las Vegas Resort & Spa, Las Vegas, NV • March 23 - 26, 2017  
Registration available online at [www.acoi.org/education/cme/clinical-challenges-in-inpatient-medicine.html](http://www.acoi.org/education/cme/clinical-challenges-in-inpatient-medicine.html)

|  |  |                      |   |       |
|--|--|----------------------|---|-------|
| <b>Full Name</b>   |  |                      |   |       |
| <b>AOA Number</b>  |  |                      |   |       |
| <b>Mailing Address</b>   |  |                      |   |       |
| <b>City</b>  |  | <b>State</b>         | <b>Zip</b>  |       |
| <b>Work Phone</b>  |  | <b>Fax Number</b>    |   |       |
| <b>Home Phone</b>  |  | <b>Cell</b>          |   |       |
| <b>Email Address</b>   |  |                      |   |       |
| <b>Preferred Name on Badge</b>   |  |                      |   |       |
| <b>Emergency Contact</b>   |  | <b>Telephone</b>     |   |       |
| <b>Fees</b>  | Registration on/before 2/28/17   |                      | Registration after 2/28/17                            |       |
|  | <input type="checkbox"/> ACOI Member.....  | \$625                | <input type="checkbox"/> ACOI Member.....             | \$675 |
|  | <input type="checkbox"/> Non Member.....   | \$750                | <input type="checkbox"/> Non Member.....              | \$800 |
|  | <input type="checkbox"/> Non Physician Provider .....  | \$625                | <input type="checkbox"/> Non Physician Provider ..... | \$675 |
|  | <input type="checkbox"/> Residents/Fellows .....   | \$525                | <input type="checkbox"/> Residents/Fellows .....      | \$575 |
| <input type="checkbox"/> *ACOI Generational Advancement Fund \$_____   |  | <b>TOTAL \$_____</b> |   |       |
| <b>Payment Method</b>  | <input type="checkbox"/> Check to ACOI <input type="checkbox"/> MasterCard <input type="checkbox"/> Visa |                      |   |       |
| <b>Name on Card</b>  |  |                      |   |       |
| <input type="checkbox"/> Check here if billing address is same as mailing address listed above. If not, please provide below |  |                      |   |       |
| <b>Billing Street</b>  |  |                      |   |       |
| <b>Billing City</b>  |  | <b>State</b>         | <b>Zip</b>  |       |
| <b>Credit Card Number</b>  |  | <b>Security Code</b> |   |       |
| <b>Credit Card Exp. Date</b>   |  |                      |   |       |
| <b>Signature</b>   |  |                      |   |       |

Send this form and payment to: ACOI: 11400 Rockville Pike, Suite 801, Rockville, MD 20852 or Fax to 301 231-6099 or register online at [www.acoi.org](http://www.acoi.org)

NOTE: All registrations must be accompanied by a check for payment in full or appropriate credit card information. A processing fee of \$50 will be charged for cancellations received at any time. In order to obtain a refund, written cancellations must be received by February 28, 2017. No refunds will be made after that date, but registration fees (less \$50 cancellation fee) may be applied to a future ACOI meeting registration.

\*The **ACOI Generational Advancement Fund** was created to foster the growth and assure the future of osteopathic internal medicine. The Fund directs its efforts toward assisting students, residents and fellows as they begin their careers as osteopathic internists. For more information, visit [https://www.acoi.org/mms/legacy\\_fund.cgi](https://www.acoi.org/mms/legacy_fund.cgi).

**PLEASE NOTE:** Check here if you plan to stay at the JW Marriott Resort. Separate hotel registration is required. This does not register or guarantee a room at the hotel.

**SPECIAL NEEDS:** In accordance with the Americans with Disabilities Act, every effort has been made to make this conference and activities accessible to people of all capabilities. Please list specific special assistance needed or any dietary restrictions or contact Susan Stacy at [susan@acoi.org](mailto:susan@acoi.org) or by phone, 301 231-8877.

List special requirements here: \_\_\_\_\_

# 2017 ACOI INTERNAL MEDICINE REVIEW COURSE REGISTRATION FORM

**JW Marriott Las Vegas Resort & Spa, Las Vegas, NV • March 22-26, 2017**  
*Registration available online at [www.acoi.org/education/cme/board-review-course.html](http://www.acoi.org/education/cme/board-review-course.html)*

|  |  |                      |            |
|--|--|----------------------|------------|
| <b>Full Name</b>   |  |                      |            |
| <b>AOA Number</b>  |  |                      |            |
| <b>Mailing Address</b>   |  |                      |            |
| <b>City</b>  |  | <b>State</b>         | <b>Zip</b> |
| <b>Work Phone</b>  | (     )  | <b>Fax Number</b>    | (     )    |
| <b>Home Phone</b>  | (     )  | <b>Cell</b>          | (     )    |
| <b>Email Address</b>   |  |                      |            |
| <b>Preferred Name on Badge</b>   |  |                      |            |
| <b>Emergency Contact</b>   |  | <b>Telephone</b>     | (     )    |
| <b>Fees</b>  | <input type="checkbox"/> ACOI Member (Registering ON/BEFORE 2/28/2017...\$850) <input type="checkbox"/> ACOI Member (Registering AFTER 2/28/2017...\$900)<br><input type="checkbox"/> Non-Member (Registering ON/BEFORE 2/28/2017...\$1025) <input type="checkbox"/> Non-Member (Registering AFTER 2/28/2017...\$1075)<br><input type="checkbox"/> Resident/Fellow (Registering ON/BEFORE 2/28/2017...\$750) <input type="checkbox"/> Resident/Fellow (Registering AFTER 2/28/2017...\$800)<br><input type="checkbox"/> Printed Syllabus \$80 (Electronic copy provided with registration) <input type="checkbox"/> *ACOI Generational Advancement Fund \$ _____ <input type="checkbox"/> TOTAL \$ _____ |                      |            |
| <b>Payment Method</b>  | <input type="checkbox"/> Check to ACOI <input type="checkbox"/> MasterCard <input type="checkbox"/> Visa   |                      |            |
| <b>Name on Card</b>  |  |                      |            |
| <input type="checkbox"/> Check here if billing address is same as mailing address listed above. If not, please provide below |  |                      |            |
| <b>Billing Street</b>  |  |                      |            |
| <b>Billing City</b>  |  | <b>State</b>         | <b>Zip</b> |
| <b>Credit Card Number</b>  |  | <b>Security Code</b> |            |
| <b>Credit Card Exp. Date</b>   |  |                      |            |
| <b>Signature</b>   |  |                      |            |

**Send this form & payment to:** ACOI, 11400 Rockville Pike, #801, Rockville, MD 20852 or Fax to 301 231-6099, or register at [www.acoi.org](http://www.acoi.org).

NOTE: All registrations must be accompanied by a check for payment in full or appropriate credit card information. A processing fee of \$50 will be charged for cancellations received at any time. In order to obtain a refund, written cancellations must be received by February 28, 2017. No refunds will be made after that date, but registration fees (less \$50 cancellation fee) may be applied to a future ACOI meeting registration.

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**PLEASE NOTE:** Check here if you plan to stay at the JW Marriott Las Vegas Resort & Spa. Separate hotel registration is required. This does not register or guarantee a room at the hotel.

**SPECIAL NEEDS:** In accordance with the Americans with Disabilities Act, every effort has been made to make this conference and activities accessible to people of all capabilities. Please list specific special assistance needed or any dietary restrictions, or contact Susan Stacy at [susan@acoi.org](mailto:susan@acoi.org) or by phone, 301 231-8877.

List special requirements here: \_\_\_\_\_

## NHSC Will Accept 2017 Loan Repayment Applications Until April 6

The National Health Service Corps (NHSC) Loan Repayment Program (LRP) is accepting applications for fiscal year (FY) 2017. The program offers eligible clinicians up to \$50,000 in student loan repayment in exchange for a two-year service commitment to work at an approved-NHSC site in a high-need, underserved area.

The complete online application is due by 7:30 PM ET on April 6, 2017. Interested individuals may view the [application guidelines](#) and apply [here](#).

The NHSC LRP is open to licensed primary care medical, dental, and mental and behavioral health providers who are employed or seeking employment at NHSC-approved service sites. To be eligible, applicants must:

- Be a U.S. citizen (either U.S. born or naturalized) or U.S. National;
- Be eligible to participate as a provider in the Medicare, Medicaid and the State Children's Health Insurance Program, as appropriate;
- Have unpaid student loans, taken before the application is submitted to the NHSC LRP to support undergraduate or graduate education; and
- Be working at or have an accepted offer of employment with a start date no later than July 18, 2017, at an NHSC-approved service site.

For any questions regarding the NHSC LRP, call 1-800-221-9393, Monday through Friday (except federal holidays) from 8:00 AM to 8:00 PM ET.

## Major Gifts Campaign

*continued from page 1*

- Expand the Visiting Professor Program for medical students and create a similar program for residents that would provide continuing exposure to osteopathic role models.
- Increase the number of grants offered for our educational programs so that more learners can benefit from ACOI's excellent continuing medical education programs.

The next 12 months are key to the plan's success. With the transition of AOA training programs to ACGME accreditation, there is a very real prospect that future students and residents will not be exposed to the distinctive osteopathic approach to care unless we develop the means to provide it to them. This must be done now, before the GME transition is complete.

### The 75th Anniversary Campaign's Strong Leadership

It is critical that the 75th Anniversary Campaign be successful in raising the necessary funds to implement ACOI's plan. Campaign contributions will be put to use to implement our plan, not to support the College's general operations.

The ACOI is delighted to report that Lawrence U. Haspel, DO, MACOI, past ACOI president in 2003-2004, has agreed to chair this important, first-time campaign effort for the College. Martin C. Burke, DO, FACOI, President-Elect, is serving as vice chair of the campaign. The 75th Anniversary Campaign Committee held its first meeting on January 21 in Tampa, FL, where they discussed how best to promote the campaign and successfully solicit major gifts.

### Campaign Committee members include:

Jack Bragg, DO, FACOI (President 2011-2012)  
John Bulger, DO, MBA, FACOI (Immediate Past President)  
Michael Clearfield, DO, FACOI (President 2009-2010)  
Robert DiGiovanni, DO, FACOI (current ACOI Board member)  
Robert Good, DO, FACOI (President 2012-2013)  
Rick Greco, DO, FACOI (President 2013-2014)  
David Hitzeman, DO, MACOI (former ACOI Board member)  
Kevin Hubbard, DO, MACOI (President 2007-2008)  
Judith Lightfoot, DO, FACOI (President 2014-2015)  
Karen Nichols, DO, MA, MACOI (President 2000-2001)  
Anthony Ottaviani, DO, MS, MACOI (President 1998-1999)  
Frederick Schaller, DO, MACOI (President 2005-2006)  
Scott Spradlin, DO, FACOI  
John Uslick, DO, MACOI (President 1999-2000)  
Larry Wickless, DO, MACOI (President 1990-1991)

If you are interested in serving on the Campaign Committee and/or have questions about how to make a major gift to ACOI, contact Brian Donadio ([bjd@acoi.org](mailto:bjd@acoi.org)), or call 301-231-8877.

"We will not be able to achieve ACOI's ambitious plan to advance and preserve osteopathic internal medicine without your generous support. The College hopes you will see your financial investment in our future as a part of your legacy as an osteopathic internist."

*Lawrence U. Haspel, DO, MACOI, Campaign Chair*



*Campaign Committee members at the meeting in Tampa: (L-R) Larry Wickless, DO; Jack Bragg, DO; Rob DiGiovanni, DO; Marty Burke, DO; David Hitzeman, DO; Larry Haspel, DO and Rick Greco, DO. Attending*

# CME CALENDAR

## ***Future ACOI Education Meeting Dates & Locations***

### **NATIONAL MEETINGS**

- 2017 Internal Medicine Board Review Course  
March 22-26 JW Marriott, Las Vegas, NV
- 2017 Clinical Challenges in Inpatient Care  
March 23-26 JW Marriott, Las Vegas, NV
- 2017 Congress on Medical Education for Resident Trainers  
May 4-6 Sheraton San Diego Resort & Marina, San Diego, CA
- 2017 Annual Convention & Scientific Sessions  
Oct 11-15 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
- 2020 Annual Convention & Scientific Sessions  
Oct 21-25 Marco Island Marriott Beach Resort, Marco Island, FL

*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](http://www.acoi.org).*

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## **2017 Certifying Examination Dates & Deadlines**

### **Internal Medicine Certifying Examination**

Computerized Examination 200 Sites Nationwide  
September 14, 2017 - *Application Deadline: February 1, 2017*

### **Internal Medicine Recertifying Examination**

Computerized Examination 200 Sites Nationwide  
September 15, 2017 - *Application Deadline: April 1, 2017*

### **Subspecialty Certifying Examinations**

Computerized Examination 200 Sites Nationwide  
August 29, 2017 - *Application Deadline: April 1, 2017*

- Cardiology • Clinical Cardiac Electrophysiology • Endocrinology • Gastroenterology
- Geriatric Medicine • Hematology • Hospice and Palliative Medicine • Infectious Disease
- Oncology • Pulmonary Diseases • Rheumatology • Sleep Medicine

### **Subspecialty Recertifying Examinations**

Computerized Examination 200 Sites Nationwide  
August 29, 2017 - *Application Deadline: April 1, 2017*

- Cardiology • Clinical Cardiac Electrophysiology • Critical Care Medicine • Endocrinology
- Gastroenterology • Geriatric Medicine • Hematology • Hospice and Palliative Medicine
- Infectious Disease • Interventional Cardiology • Nephrology • Oncology
- Pulmonary Diseases • Rheumatology • Sleep Medicine

*Further information and application materials are available by contacting Daniel Hart, AOBIM Director of Certification at [admin@aobim.org](mailto:admin@aobim.org); 312 202-8274.*

*Contact the AOBIM at [admin@aobim.org](mailto:admin@aobim.org) for deadlines and dates for the **Hospice and Palliative Care, Pain Medicine, Undersea/Hyperbaric Medicine and Correctional Medicine** examinations.*

## **New Members Welcomed**

*The ACOI Board of Directors and staff welcome the following members whose membership applications or changes in membership status have been approved by the Credentials Committee and Board of Directors.*

### **Active Members:**

Ezekiel Adewale, DO  
Sheeraz Baig, DO  
Matthew Berger, DO  
Brenda Buzydlowski, DO  
Ariel Caplan, DO  
Kevin Gershuny, DO  
Miranda Giusti, DO  
Andrew Konicek, DO  
Donna Lawson, DO  
Caleb Lee, DO  
Corinne Lee-Guzman, DO  
Keith Mahin, DO  
Kathleen Maksimowicz-McKinnon, DO  
Jonathan McFadden, DO  
Robin Ober, DO  
Pratik Patel, DO  
Charles Swanson, DO  
Jean Talsma, DO  
Ryan Thompson, DO  
Christopher Webb, DO  
Jennifer Winthers, DO  
Jonathan Winthers, DO

### **Associate Member:**

George Michel, MD