A Publication of the Indiana Academy of Family Physicians

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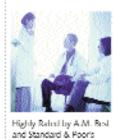
WINTER 2003

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The MISSION of the Indiana Academy of Family Physicians is to promote excellence in health care and the betterment of the health of the American people. Purposes in support of this mission are:

- To provide responsible advocacy for and education of patients and the public in all health-related matters;
- To preserve and promote quality cost-effective health care;
- To promote the science and art of family medicine and to ensure an optimal supply of well-trained family physicians;
- To promote and maintain high standards among physicians who practice family medicine;
- To preserve the right of family physicians to engage in medical and surgical procedures for which they are qualified by training and experience;
- To provide advocacy, representation and leadership for the specialty of family practice;
- To maintain and provide an organization with high standards to fulfill the above purposes and to represent the needs of its members.



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Richard Feldman, M.D., President, Indiana Academy of Family Physicians

These are exciting times for the Indiana Academy of Family Physicians. We have settled into our new headquarters on Monument Circle. Our offices project a new and more professional image for the Academy as we conduct business with other organizations, medical students and residents, legislators, lobbyists, and policy makers.

I am happy to report the Indiana Academy of Family Physicians is taking a leadership position in organized medicine and state government. We are so proud that Dr. Tom Kintanar was elected to the AAFP Board of Directors at the AAFP Annual Scientific Assembly in New Orleans. Dr. Tom Felger continues to represent Indiana as the Chairman of the AAFP Commission on Health Care Services. Earlier this year IAFP past-president Dr. Ed Langston was elected to the AMA Board of Directors, and in September our own Dr. Bill Mohr was named president-elect of the Indiana State Medical Association. Additionally, a record number of members applied for AAFP commissions and committees, and we await news of potential new appointments. Lastly, I can think of at least nine gubernatorial and other state government appointments held by IAFP members. Indeed, our academy is full of leadership!

One extraordinary event has taken place. The IAFP Foundation has just learned that it is the beneficiary of a one milliondollar trust from the estate of Dr. Ralph Barnett who died in 1963. The trust was transferred to the Foundation after the death of his last remaining relative. We will now enjoy the use of the interest on one million dollars to benefit our

Foundation's work in promoting our specialty and improving the health of our patients. A number of legal details still must be worked out, but we expect the trust to be available to us in a few months. However, I do want to remind the membership of one thing: Even though the Foundation will have more money to work with in the future, the Foundation in the past has not had funds sufficient to administer its programs. It has also relied on a grant that will not necessarily be available to us in the future. That makes it imperative that our members continue to financially support the Foundation's programs and efforts. Together with your generosity and the trust proceeds, we will have the premier state chapter Foundation in the country.

There has also been excellent progress on two of this year's special priorities. Fund raising for the historic family physician's office at the Indiana Medical History Museum is going quite well. We have raised more than \$20,000 of our \$35,000 goal for the project. For the public, the historic family doctor's office will place our specialty in historical context and increase appreciation for family medicine. It also will provide a visible source of pride for Hoosier family physicians. You should have recently received a letter requesting your financial support of this endeavor. Please give generously.

Additionally, we have begun our efforts to restore adequate state tobacco prevention and cessation funding that was lost during the last legislative session. We were asked to join the state tobacco control coalition, the core group working politically on this issue, led by the American Cancer Society. I have also been busy talking to other health and medical professional organizations to get them back on board in a meaningful way to fight for this issue. Not only is tobacco control funding important for the health of our patients but for our academy as well. The IAFP Tar Wars program lost its entire state tobacco agency grant of \$101,000 because of last year's legislative actions. This will not only require us to drastically downsize the program but also

will cause a projected deficit in our academy budget in 2004. This money must be restored to the people of Indiana.

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There are also other significant challenges ahead for family medicine. We look forward to the legislative session to help promote and support good public health legislation, yet protect our specialty so we may better serve our patients. Obesity, junk foods in schools, new vaccine requirements, potential changes in Medicaid policy, and the very controversial subject of niche hospitals and certificate of need are among the issues to be addressed. We are fortunate to have Doug Kinser, our lobbyist, and Laura Hahn, our Director of Governmental Affairs, to guide and coordinate our efforts.

Lastly, our biggest issue to address this year is the IAFP governance/redistricting plan that was referred back to the Board of Directors for consideration by the IAFP Congress of Delegates. At its October meeting, the Board sent this issue to the Ad-Hoc Committee on Governance, chaired by Dr. Larry Allen, for further development. A revised plan will be presented to the 2004 Congress of Delegates after approval of the Board of Directors.

Yes, these are both exciting and challenging times for the IAFP and family medicine. It's a wonderful time to get involved. Consider testifying at the Legislature on an issue you feel strongly about. Volunteer for the Tar Wars program in your community or as a Doctor of the Day at the General Assembly. Donate money to the IAFP Foundation. Promote family medicine to bright school-age children and high school students. Open your practice to medical students and family practice residents and mentor and teach the future of our specialty. We have a wonderful life and profession and a very special academy. Do you know what I think? I think all of this is really a great adventure. Make sure that you are a part of it!



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# Rules to Practice By

By Hall, Render, Killian, Heath & Lyman, P.S.C.

In April the Department of Health and Human Services Office of Inspector General (OIG) released its Compliance Program Guidance for Pharmaceutical Manufacturers (OIG Guidance). Through its Guidance, the OIG has identified potentially troublesome practices engaged in by pharmaceutical manufacturers and the physicians with which they interact, and has offered suggestions on how manufacturers and physicians can avoid running afoul of the federal Medicare Fraud and Abuse laws. The Guidance encourages the use of internal controls to efficiently monitor adherence to applicable statutes, regulations and program requirements. The Guidance does not create any new law or legal obligations, but should be used as a starting point for review of particular practices in pharmaceutical manufacturer-physician relationships.

### Anti-Kickback Statute

Pharmaceutical manufacturers and their agents routinely deal with physicians and other healthcare professionals in position to refer, order or prescribe the manufacturer's products. Relationships between pharmaceutical manufacturers and healthcare professionals, if not properly maintained, can violate the federal Anti-Kickback statute. The anti-kickback statute is a criminal prohibition against payments (in any form, whether the payments are direct or indirect) made purposefully to induce or reward the referral or generation of federal health care business. Payments or offering payment of anything of value to induce the referral of patients can violate the statute.

Violation of the anti-kickback statue can result in both criminal and civil penalties. Not only will someone found to have violated the statute be subject to fines and possible federal healthcare program exclusion, that person can also be sentenced to imprisonment. And a lawful purpose will not legitimize a payment that also has an unlawful purpose. But, pharmaceutical manufacturers and the physicians they deal with may look to the anti-kickback statute "safe harbors" for shelter. The statute itself has realized certain relationships that might otherwise be subject to antikickback scrutiny do not present much danger of fraud or abuse. As a result, the government has created statutory protections for these relationships. By constructing an arrangement to meet the elements of a particular safe harbor, parties will be able to avoid liability.

#### **Relationships**

Manufacturers, providers, and suppliers of health care products and services frequently cultivate relationships with physicians to generate business for them through a variety of practices, including gifts, entertainment, and personal services compensation arrangements. These activities have a high potential for fraud and abuse and, historically, have generated a substantial number of antikickback convictions. If a pharmaceutical manufacturer provides a healthcare professional with remuneration and it is intended to generate any federal health care business, it potentially violates the anti-kickback statute. The OIG cautions that any time a pharmaceutical manufacturer provides anything of value, the manufacturer should examine whether it is providing a valuable tangible benefit to the physician with the intent to induce or reward referrals.

### **Consulting Services**

The OIG warns that payments by pharmaceutical manufacturers to physicians and others for personal services as consultants or advisors should be fees paid for bona fide services. The Pharmaceutical Research and Manufacturers of America (PhRMA), a trade association that represents research-based pharmaceutical and biotechnology companies, in its Code on Interactions with Healthcare Professionals (PhRMA Code), states that physicians may be paid for consulting services provided the payments made are fair market value for bona fide services. The OIG states in its Compliance Guidance that adherence to the PhRMA Code will go a long way toward keeping manufacturers and physicians out of harm's way.

### **Problematic Practices**

Some practices should always be discouraged and/or avoided. One practice the OIG strongly cautions against is a "switching" arrangement, in which a pharmaceutical manufacturer offers a physician or others cash payments or other benefits each time a patient's prescription is changed to the manufacturer's. The OIG states flatly that switching programs may be permissible only in certain managed care environments (and may not be permissible there), and suggests they probably will not be in any other setting. The OIG does not explain how or when such an arrangement may survive anti-kickback scrutiny.

Another questionable practice is "detailing," that is, payments to physicians for advice on sales pitches, marketing strategy or Internet "research." These arrangements generally involve very little actual work on the part of the physicians, according to the OIG, such as completing minimal paperwork or simply accessing web sites to listen view or listen to marketing information or perform "research."

### **Drug Samples**

The OIG states in its Guidance that some recent government fraud and abuse law enforcement activity has focused on instances in which drug samples were provided to physicians who, in turn, sold them to the patient or billed them to the federal health care programs on behalf of the patient. This, the OIG notes, is in violation of the Prescription Drug Marketing Act of 1987 ("PDMA"), which governs the distribution of drug samples and forbids their sale.

### Gifts

The OIG Guidance states that the practice of pharmaceutical manufacturers providing gifts to physicians should be strictly limited. The AMA Guidelines provide that no gifts should be accepted if there are strings attached – physicians should not accept gifts if they are given in relation to the physician's prescribing practices, as this would clearly violate the statutory proscription. "Nothing should be offered or provided in a manner or on conditions that would interfere with the independence of a healthcare professional's prescribing practices."

# IAFP Awards Call for Nominations

hroughout the years, the Indiana Academy of Family Physicians has strived to better ► healthcare in Indiana. In recognition of the individual who works to improve the practice of family medicine, the IAFP bestows awards on an annual basis. This call for nominations plays an important part in the process of recognizing outstanding service. Nominations must be in writing and submitted on official nomination form with appropriate attachments. The IAFP Commission on Membership Services and Public Relations will review the entries and present its recommendation to the IAFP Board of Directors form approval. Nominations for the awards will be accepted from IAFP members until April 1, 2004. Thank you for your participation in recognizing these outstanding family physician and supporters of family medicine.

#### Lester D. Bibler Award

The Lester Bibler Award is designated to recognize long-term dedication, rather than any single significant contribution, and is given on the basis of dedicated effective leadership toward furthering the development of family medicine in Indiana. This award was named in honor of the "Founding Father" and first president of IAFP.

#### **A. Alan Fischer Award**

The A. Alan Fischer Award is designed to recognize members who have made outstanding contributions to education for family practice, in undergraduate, graduate and continuing education spheres." This award was named in honor of Dr. Alan Fischer, a long-time member of the IAFP who actively served the Indiana Chapter and AAFP and who established the IUSM Dept of Family Medicine and the IU Family Practice Residency Program.

#### **Jackie Schilling Certificate of Commendation**

The Jackie Schilling Certificate of Commendation was established to recognize non-family-physicians who have been deemed to contribute in a distinguished manner to the advancement of family medicine in Indiana. Those considered for the award come from careers in many fields, including medical education, government, the arts and journalism. In 1999, the award was named after the past IAFP Executive Vice President, Jackie Schilling.

#### **Distinguished Public Service Award**

The Distinguished Public Service Award is presented to members in good standing who have distinguished themselves rendering a community or public service. The service must be entirely separate from purely profession achievement in research and scientific endeavors. The service for which this award is bestowed should have been performed on a voluntary basis and should have benefited the local and/or state community in a civic, cultural or general economic sense and, except in unusual circumstances, should have been uncompensated.

#### Indiana Family Physician of the Year Award

Nominees for the Indiana Family Physician of the Year Award must be members in good standing with both the IAFP and AAFP. Nominees must provide their patients with compassionate, comprehensive, and caring family medicine on a continuing basis and must be directly and effectively involved in community affairs and activities that enhance the quality of their community. Nominees must be a family physician who is a credible role model professionally and personally to the community, to other health professionals, and to residents and medical students and who can effectively represent the specialty of family practice and the IAFP/AAFP in public speaking.

For more information and nomination forms, please contact Amanda Bowling at (317) 237-4237 or (888) 422-4237.

## Help Out at the Statehouse in January

The IAFP and the Indiana State Medical Association (ISMA) will once again sponsor the Physician of the Day Program at the 2004 General Assembly. Your assistance is needed. The 2004 legislative session is sure to be an exciting one. In this short session it is most important that family medicine make an impression on our legislators. This program allows you to observe the legislative process first hand and to meet with your area representatives.

The Physician of the Day Program is one in which IAFP members volunteer to spend one or more days at the statehouse during the legislative session. The purpose of the Physician of the Day Program is to provide episodic primary care services, as a convenience, for the governor, legislators and their staff during the time the state legislature is in session. The Physician of the Day is introduced at the beginning of the day. You'll be at the statehouse from 8:30 a.m. to 4:30 p.m.

We are in the process of scheduling physician volunteers for January. If you are interested in serving as the Physician of the Day, please circle the day or days that you want to serve and fill out the calendar form and return it to the IAFP office as soon as possible. Or, call the IAFP toll free at (888) 422-4237 or (317) 237-4237 to schedule your Physician of the Day shift.

Thank you in advance for your assistance with this important program.

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Holidays and observances: 1: New Year's Day, 19: Martin Luther King Day.

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Please fill out this form and send to: **Indiana Academy of Family Physicians** 55 Monument Circle, Suite 400 Indianapolis, Indiana 46204 Phone: 317.237.4237 Fax: 317.237.4006 • 888.422.4237

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### Thomas Kintanar, MD, Elected to the AAFP Board of Directors

homas A. Kintanar, MD, of Fort Wayne, Ind., and a member of the IAFP, has been elected to the Board of Directors of the American Academy of Family Physicians. Dr. Kintanar was elected to a three-year term in October by the AAFP's governing body, the Congress of Delegates.

Dr. Kintanar is in private practice with Associated Family Medical Consultants, P.C., in Fort Wayne and serves as clinical associate professor of medicine at Indiana University.

He has served on the IAFP Board of Directors, president-elect, president and chair of the board and also various commissions and committees. He has also served as an AAFP member of the Committee on Scientific Programs and chairman of the Committee on Special Constituencies. Additionally, he was a minority delegate to the AAFP's Congress of Delegates.

After receiving his bachelor's degree in microbiology from Indiana University in Bloomington in 1978, Kintanar received his medical degree from Southwestern University, Matias H. Azner Memorial College of Medicine, and Philippines in 1983. He completed the Fort Wayne Indiana Family Practice Residency Program in 1986. He is board certified by the American Board of Family Practice and is an AAFP Fellow, an earned degree awarded to family physicians for distinguished service and continuing medical education.

Dr. Kintanar is active in the Fort Wayne community, and as Director of Medical Education for St. Joseph Hospital, on the Governing Board of the Fort Wayne Medical Education Program, and as Medical Director of the Applewood Nursing Home, Regency Nursing Home, Wood Youth and Youth Services, and Heartland Hospice.

Dr. Kintanar's election translate into success for the IAFP, too. A term as a board member will allow him to bring back valuable information to IAFP members. "As a member of the board, I would have intimate knowledge of how things work at the national level. I can bring that knowledge back to our state academy," he says.

"I look at the opportunity to serve on the AAFP board as a privilege, and I appreciate the support and trust the IAFP has given me. I hope it translates into trust and support at the national level come election time."



Dr. Tom Kintanar, of Fort Wayne Indiana is congratulated by IAFP members after being elected to the AAFP Board of Directors.



Left to Right: Cindy Nicholson, Ray Nicholson, MD, Fred Ridge, MD, Tom Kintanar, MD, John Haste, MD, Richard Feldman, MD, Becky Feldman, MD, Clif Knight, MD, and Shelly Knight helping out with the Kintanar campaign hospitality during the AAFP Congress of Delegates in New Orleans.



AAFP Delegates Fred Ridge, MD and Tom Kintanar, MD representing Indiana at the AAFP Congress of Delegates in New Orleans.

# Legislative Update:

By Douglas M. Kinser, Academy Lobbyist

Since my last legislative update on Aug. 15, much has happened that has changed the political landscape for the coming session. Gov. Frank O'Bannon passed away on Sept. 13 and was replaced by Lt. Gov. Joe Kernan. After being sworn in as Governor by Chief Justice Shepard, Gov. Kernan was very kind in his comments to Mrs. O'Bannon and to Indiana citizens. Speaker Bauer of the House of Representatives and President Pro-Tem Garton of the Indiana Senate were supportive of Gov. Kernan during the change and in this time of sorrow. Both leaders indicated complete support to Gov. Kernan in his role ahead.

On Oct. 9, Gov. Kernan selected Kathy Davis, Indianapolis, to replace him as Lieutenant Governor. Kathy Davis's experience includes stints as engineer at INDOT, Budget Director to Gov. Bayh, Secretary of FSSA to Gov. O'Bannon, and City Controller to Indianapolis Mayor Peterson. Both parties expressed support of her selection. Davis had to be ratified as Lieutenant Governor by the House and the Senate. On Oct. 20, both Chambers unanimously ratified her with a voice vote.

As you may recall, Lt. Gov. Kernan announced in December 2002 that he would not run for Governor. Upon assuming his new duties as Governor, Mr. Kernan reevaluated his future for nearly two months. In November, Gov. Kernan indicated that he would indeed be the Democratic candidate for Governor and Kathy Davis would be Democratic candidate for Lieutenant Governor. Joe Andrew and Vi Simpson, both candidates for Governor, immediately indicated their support for Gov. Kernan and dropped out of the race.

The Republican candidate is likely to be Mitch Daniels, former Budget Director to President George W. Bush and former Lilly Executive. Daniels has already been to all 92 counties in seeking the Republican nomination. Eric Miller, a lawyer and lobbyist for Advance America, has said he will remain in the race. Former Gov. Otis Bowen is Miller's honorary campaign chairman.

By nearly a 2-1 margin on Nov. 4, Orange County voters approved the casino referendum. The Gaming Commission will quickly determine which group will hold the license. French Lick is going to change with the new casino.

### **The Session**

Nov. 18 was Organization Day. In the off-election year, Organization Day is generally more celebratory than organizational. Leaders will remain the same. Speaker Bauer has indicated that he wants a substantive beginning with a review and changes to the reassessment problems faced by taxpayers. The Ways and Means Committee is already holding hearings throughout the state. Senator Borst of Senate Finance has indicated that his committee will also evaluate the problems. The devil (and disagreement) is always in the details. In the final outcome, it is likely something will be done.

Besides reassessment, the shortfall in the budget must be considered. During the first quarter of the new fiscal year (through Oct. 30), the revenue shortfall has exceeded \$152.2 million on top of an expected \$400 million shortfall for the end of the fiscal year, June 30, 2005. Depending upon fiscal needs, the budget may be reopened. While Representative Crawford, Ways and Means Chair, stated at the end of the session in April that the budget was maintenance and may need to be reevaluated, neither party will want to reopen the budget in an election year.

Medicaid reimbursement will again come under scrutiny. During the 2003 budget negotiations, legislators decided to flat-line Medicaid appropriations and require Medicaid to live within its budget. Legislators gave Medicaid authority to raise money by leveraging payments for additional federal reimbursement. To date, no new money has been forthcoming from the federal government. The Medicaid shortfall will remain a problem during session.

During the short session, nearly 1,000 bills will be introduced. Introduction can begin on Organization Day and will continue through the second week of January 2004. The session must legally conclude by March 15 but will likely end by Feb. 28.

### **Other Issues**

There have been no preliminary drafts adopted by any health interim committees yet. While there have been several proposals, none have sufficient votes to move forward with committee approval. There will be discussion in the health committees regarding Certificate of Need (CON), a moratorium on construction of hospital beds, hospitals, or ambulatory outpatient surgical centers, and perhaps an Indiana Stark bill, similar to last year's HB 1697.

### **The Elections**

During 2004, Indiana will have elections for President, Governor, U.S. Senator, and 125 of 150 legislative seats.

Those elected to serve on the legislature will determine the direction of policy decisions for the next two years. Currently, the Republicans hold a substantial 32-18 majority control of the State Senate. It is not likely that a significant change will occur in the Senate. If the Republicans controlled one additional seat, they will have a quorum-proof Senate. That means Republicans can have a quorum and continue the process without Democrats being present.

Democrats currently control the House with a 51-49 majority. The 51st seat was won by only 36 votes. It could not be much closer than in 2002. With the Democrats controlling the majority, the Democrats elect the Speaker, and the Speaker appoints the chairs of the committee. It is significant to be in the majority.

medicine through patient care, research and teaching.

While "high-tech" makes for good medicine, our most important commitment is listening to you and your patients.

The Republicans have an announced goal of 54 in '04 and the Democrats have not stated a goal except to remain in the majority. It will be a vigorous and expensive campaign. Laura Hahn and I have attended fundraisers as the Academy PAC allows. We think it is important to participate in the process.

### Conclusion

If you have comments or questions about the session, please do not hesitate to contact me. The session will be harried as usual. I need the input and direction of the Commission on Legislation and others to be effective. If you come to the Legislature as Doctor of the Day or for another reason, please let me know. You can reach me at (317) 633-4884 or dinser@hallrender.com.



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# Worthe Holt, MD Named Interim COO



orthe S. Holt Jr., MD, MMM, Past President of the IAFP, has been appointed Interim COO for St. Francis Hospitals and Health Centers, Beech Grove, Ind. Dr. Holt previously served as Vice President, Medical Management for St. Francis, and continues to see patients in the Family Practice Center of the St. Francis Family Practice Residency Program under the direction of Richard Feldman, MD, current President of the IAFP.

Dr. Holt views this as a wonderful opportunity to contribute direct clinical expertise and physician advocacy into the daily operations of a large, teaching hospital. The IAFP wishes him the best in the challenges that lie ahead.



## **Resident Awarded** *Excellence in Graduate Medical Education*

B all Memorial Hospital's Family Practice Chief Resident, Amanda L. Morris, MD, was honored at a breakfast on Oct. 3 as a winner of the prestigious Bristol-Myers Squibb award. The presentation was made during the American Academy of Family Physicians Scientific Assembly in New Orleans, Dr. Morris joins a select group of previous winners who represent the most outstanding family practice residents in the country. Her performance in her residency training has proved her to be one of the finest and brightest residents among a large group of highly qualified applicants.

Dr. Morris graduated No. 1 in her academic class at Loyola University Stritch School of Medicine in Maywood, IL. She is completing her residency training at Ball Memorial Hospital Family Practice Residency. In 2000, she was awarded the Pisacano Leadership Foundation Scholarship for her leadership skills, superior academic achievement, strong communication skills, identifiable character and integrity, and high level of community service. Dr. Morris is currently chief resident and a member of the Ball Memorial Hospital Ethics Committee, Family Practice Residency Patient Education Committee, and the OB/GYN Curriculum Committee Foundation. She has a passion for teaching and ultimately would like to be a faculty member of a family practice residency program.

# MEDICAL GROUP

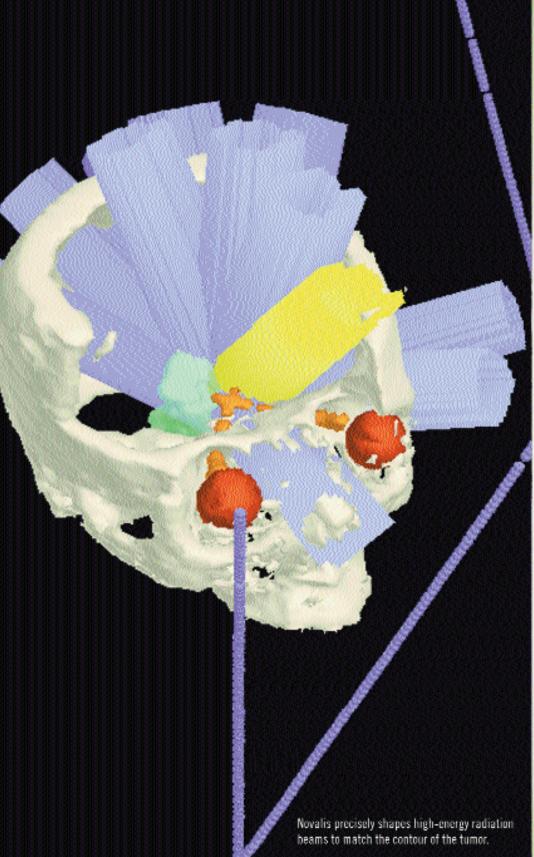
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# The Timmy Foundation

The Timmy Foundation to provide IAFP members an opportunity to mentor pre-med students and earn CME through mission trips to Eucador and the Dominican Republic in 2004



The Mission of the Timmy Foundation is to improve the availability of quality healthcare to children around the world through medical MISSION TRIPS. The Foundation is a clearinghouse for medicine and medical supplies, support for health facilities and the Haiti Heart Program. Youth involvement is an important facet of our mission, introducing pre-med students to international service opportunities and creating mentoring relationships between pre-med students and physicians.

Our medical mission trips are unique because they not only provide vital medical care for underserved communities but also give physicians the chance to mentor pre-med students while earning 8 hours of CME credit.

The Timmy Foundation will be taking two trips the week of March 13, 2004 to March 20, 2004 to the Dominican Republic and Ecuador. We will be working together to strengthen the existing health initiatives of Crossroads in Ecuador and Fundación Tierra Nueva in Quito. The work during this week will involve diagnosing and treating cases, which include parasites, infections, skin ailments and other conditions. Medication and vitamins that have been brought from Indianapolis will be distributed to patients at the clinics.

In the Dominican Republic, volunteers stay just outside the town of Sosua at Crossroads, a rustic group retreat located on the top of a lush mountain overlooking the north coast of the island and sugarcane fields. In Ecuador, volunteers stay in the capital, Quito, at Fundación Tierra Nueva, a secure urban guesthouse.

Cost for the Dominican Republic and Ecuador are \$925 and \$1,100 respectively. This includes airfare, meals, accommodations and ground transportation.

Pre-trip responsibilities involve assistance with collection of medications, which includes sample medications from pharmaceutical reps, and updating personal vaccines and your passport.

The basic itinerary includes two days for travel, four clinic workdays and one or two sight seeing days. There will be opportunities to visit the beautiful beaches in the Dominican Republic or visit the indigenous market and colonial center of Quito.

For more information about these trips, please contact Jessica Trimble at jessica@timmyfoundation.org or at 317-253-8466.

If you would like to learn more about these trips from veteran volunteers, feel free to contact Dr. Suzanne Montgomery at drsuzannem@msn.com or Dr. Chuck Dietzen at scott@timmyfoundation.org.





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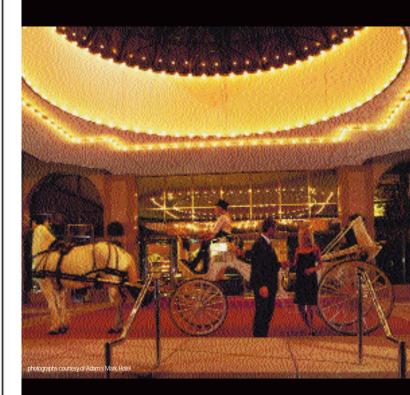
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Indiana Academy of Family Physicians Presents

## 2004 IAFP Family Practice Update



### January 22-25, 2004 Adam's Mark Hotel Indianapolis, Indiana

Sessions will begin at 2:30 pm on Thursday, January 22 and will adjourn at 11:00 am on Sunday, January 25th.



## 2004 IAFP Family Practice Update

The IAFP is pleased to offer another high quality and low cost CME activity for its members. Make plans today to attend the upcoming **IAFP Family Practice Update** to be held in Indianapolis, **January 22-25, 2004**. This meeting is being held in downtown Indianapolis at the Adam's Mark Hotel.

**Topics include:** Intensive Management of Type II Diabetes Using Insulin Pump Therapy, Migraine or *Sinus Headache? – That is the Question, Alleviating* Anxiety Associated with Depression, Hormone Replacement, Approach to the Patient with Food Allergies, Pediatric Psychiatry, Degenerative Joint Disease: Management & Rx, Evidenced Based Medicine in Managing CHF, Diabetes, COPD & Hypertension, Managing Pain for the Office Patient Special Sessions and workshops will include: Role of Spirometry in the Office, Maximizing Outcomes in Community Based Pneumonia and Acute Exacerbations of Chronic Bronchitis, and Evaluation & Treatment of Common Foot and Ankle Disorders. CME Dinner on Thursday evening and Breakfast CME Sessions on Friday, Saturday, and Sunday. Registration fee of \$275 includes all CME sessions, planned meals, breaks, and syllabus.

**CME Credit:** Over 25 hours of CME will be available. **Program Goals:** Registrants for this CME activity will receive current information on a diversity of medical subjects pertinent to patient care in the daily practice of family medicine. Subject matter was chosen based on assessed needs of the IAFP membership and from past IAFP CME activity evaluation forms. At the conclusion of the program, registrants should have a working and applicable understanding of the topics. Hotel: The meeting will be held at the Adam's Mark Hotel, 120 West Market Street, Indianapolis, IN, just a block off the circle. Room rates start at \$109. You may call the hotel at 800-444-2326 to make reservations. Additional information and a full brochure including schedule will be mailed in late November.

### Registration Form IAFP Family Practice Update • Adams Mark, Downtown Indianapolis

#### January 22-25, 2004

Name:			
Address			City
State	Zip	Phone #:	_
E:Mail:			

Confirmation letters will be mailed along with a complete schedule and directions to the hotel.

Complete and Mail to: **IAFP** 55 Monument Circle, # 400 • Indianapolis, IN 46204 Contact Mandy Bowling for 1 day registration

317-237-4237 • 888-422-4237

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Please return this form to: **Missy Lewis, MS, CHES Coordinator, Tar Wars®, Indiana Indiana Academy of Family Physicians Foundation** 55 Monument Circle, Suite 400 Indianapolis, IN 46204 317.237.4006 (fax) Email: mlewis@in-afp.org

Or submit a sign-up form at www.tarwarsindiana.org

# Foundation News Indiana's Youth Smoking Rates Drop

Good news was released last month about youth smoking rates in Indiana. At a press conference highlighting the Youth Tobacco Survey that was completed last winter, officials at the Indiana Tobacco Prevention and Cessation (ITPC) Agency announced that youth smoking is on the decline in Indiana. In fact, high school smoking rates dropped 25% from 2000 to 2002. Not only is this a very significant drop, it also puts us below the national average for youth smoking among both junior high and high school students. A special thanks goes out to all of you who have participated in Tar Wars® over the years. It is people like you that have helped contribute to this incredible advance in youth smoking. Let's keep up the hard work!

### What's Happening at the IAFP Foundation? The Historic Family Physician Office Project

arlier this year, the Foundation became involved with a project being organized by the Indiana Medical History Museum—the Historic Family Physician Office. The goal of the project is to reconstruct a historically accurate physician's office on the museum grounds. The purpose of this exhibit would be to interpret and showcase the role of family medicine in the midtwentieth century.

The Indiana Medical History Museum is located just west of downtown Indianapolis on the site of the former Central State Hospital for the Insane. Located in one of Central State's original buildings (constructed in 1895), it holds medical instruments and other artifacts from the 19th and 20th centuries. From its exhibits to the building itself, the Museum is intended to give visitors a glimpse of Indiana's medical past and how that history has influenced today's medical environment.

The museum's plan is to establish the historic physician office exhibit in an out-building next to the museum (pictured above). The contents of the exhibit were donated from the relatives of a family physician who operated a solo-practice in Indiana from 1938 until his death in 1971. Many of the items from his office are from the early days of his practice, and many were still being used when the office closed in 1971. The contents of this physician's office went undisturbed from the time of his death until his family donated the items to the museum for display.

Another related IAFP Foundation project is the publication of the book Family Practice Stories. This project is intended to focus on the experiences of individual family physicians in Indiana. The IAFP has been collecting stories told about and by individual family physicians related to their work in the



communities they serve. These stories help put individual faces on the specialty of family medicine in Indiana. It is the IAFP Foundation's hope that this book will be available throughout Indiana to medical students, other members of the health care community, and the general public. The book will also compliment the historic physician office exhibit.

Together, the Historic Family Physician Office Project and Family Practice Stories will help our specialty promote its unique role in Indiana's medical history. Every day, family physicians across our state add to the history of family practice. This project intends to capture a portion of this history so that Hoosiers and museum visitors will appreciate the importance of family medicine in the lives and health of Indiana families.

Donations are being accepted to help support the Historic Family Physician Office Project. Additionally, the IAFP is still collecting stories from retired or practicing family physicians. Please send your contribution or story to the IAFP Foundation—Historic Family Physician Office Project, 55 Monument Circle, Suite 400, Indianapolis, IN 46204.

# Thank You

The Board of Trustees of the Indiana Academy of Family Physicians Foundation would like to thank the individuals and organizations that have donated to the Foundation this year. Your generosity has provided the Foundation with critical resources needed to fulfill its mission: *"to enhance the health care delivered to the people of Indiana by developing and providing research, education and charitable resources for the promotion and support of the specialty of Family Practice in Indiana."* 

### FOUNDER'S CLUB MEMBERS

Founder's Club Members have committed to giving \$2,500 to the IAFP Foundation over a 5-year period. Members noted with a check mark have completed their commitment. The Board would like to acknowledge that many of the Members on this list also give to the Foundation in addition to their Founder's Club commitment. Members who have done so in 2003 are noted with a diamond.

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Indianapolis, IN 46204 Amount Enclosed:		Memorial contribution in memory of		

**Thank you for your generosity. It will support:** Assuring access to family physicians and the quality, comprehensive and affordable healthcare they provide; Enhancing the recruitment, education and training of prospective family physicians; and Supporting other initiatives that further the vision of the Foundation to enhance the quality of healthcare services delivered to Indiana residents.

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# IAFP Calendar

### 2004

Family Practice Update January 22 – 25 Downtown Adam's Mark Hotel, Indianapolis

#### IAFP Board of Directors Meetings January 25

Downtown Adam's Mark Hotel, Indianapolis

Residents Day and Research Forum March 3 Airport Holiday Inn, Indianapolis

#### Faculty Development Workshop March 4 Airport Holiday Inn, Indianapolis

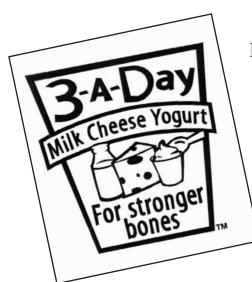
IAFP Board of Directors Meetings April 18 Columbia Club, Indianapolis

#### IAFP Annual Scientific Assembly July 21 – 25 French Lick Springs Resort,

French Lick

IAFP Board of Directors Meetings July 21 Columbia Club, Indianapolis

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### **Angola Family Physician Accepts ISMA Award**



R. Wyatt "Joe" Weaver Jr., MD, of Angola, Ind., accepted the annual Indiana State Medical Association Physician Community Service Award during its convention Sept. 21. Thomas L. Miller, MD, president of the Steuben County Medical Society, nominated him.

Dr. Miller noted, "Some people sit on boards of charities and do not participate, but Dr. Weaver has always been very vocal and active in support of local charitable activity." In 1995 when a movement began to establish a YMCA in Steuben County, Dr. Weaver became a charter member of the YMCA board. Since then, he has served as president, expanded the board, solicited funds and hired staff.

"He has given of his time selflessly to make our community a better place in which to reside and raise a family," said Charles Needle of Croxton & Roe Insurance Service, Inc., who served with Dr. Weaver for 10 years on the Cameron Memorial Community Hospital Board of Directors.

Dr. Weaver has had an association with Tri-State University for 15

years. In 1989, he became team physician for the athletic department. He also has conducted free physical exams for student athletes, donated equipment, and provided financial and moral support.

Since 2000, Dr. Weaver has been president of the Steuben County Board of Aviation Commissioners that supervises operation of the local municipal airport.

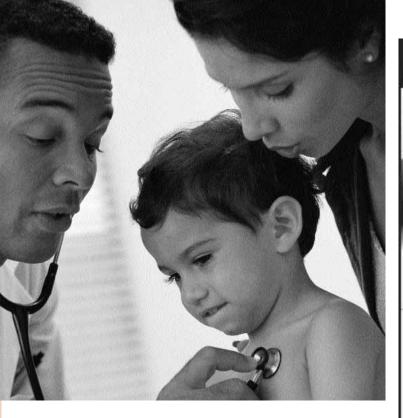
"Steuben County is definitely a better place to live because of Joe Weaver," Needle said.

## FSSA Works to Increase Checkups

The Indiana Family and Social Service Administration (FSSA) is placing a priority on increasing the number of children who receive five or more well-child checkups from birth to 15 months. Preventive care is very important, especially for infants.

To have an impact on thousands of Hoosier Healthwise families across Indiana, FSSA has developed several strategies to encourage pregnant women and new parents to take their newborns into the doctor's office for well-child visits. Strategies include:

- Over-the-phone education when a member calls the Hoosier Healthwise Helpline
- Direct mailings to members
- Adding information on the www.healthcareforhoosiers.com.
- Asking providers to display a poster in your office explaining the importance of well child exams. FSSA would like for providers to go to its Web site at www.in.gov/fssa/hoosier\_healthwise/checkup.html and print the poster to display in common areas where Hoosier Healthwise patients will receive care.
- Creating a flyer for new parents to help them keep track of their children's checkup appointments. (This flyer is also available on the Web site.)



## ISMA Elects Family Physician as President-Elect

William H. Mohr, MD, a member of the IAFP from Kokomo, Ind., has won the support of colleagues in the Indiana State Medical Association who voted to make him president-elect of their statewide organization. Dr. Mohr will assume presidency of the ISMA in September 2004 and serve a one-year term.

The election and swearing in of the new officers took place during the ISMA's annual meeting September 19-21 at the Westin Hotel in downtown Indianapolis. Approximately 200 delegates attended the event, representing physicians from all across the state.

Dr. Mohr, who was born in Kokomo, is employed by American Health Network and affiliated with St. Joseph and Howard Community hospitals. He has practiced family medicine in Kokomo since 1988 and until recently delivered babies—at both Howard County hospitals.

Dr. Mohr serves on the IAFP Board of Directors and has also served on various commissions and committees of the IAFP including the Commission on Legislation and the Commission on Education.

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n Sept. 19 health industry experts came together in downtown Indianapolis to speak out about health issues in Indiana. The *Indianapolis Business Journal* and others sponsored this "power breakfast." The panelists were: Virginia Caine, MD, Director of The Marion County Health Department; Vincent Caponi, CEO of St. Vincent Health Care Coalition, Ned Lamkin, MD, President of Indiana Employers Health Care Coalition; and Sam Nussbaum, MD, Executive Vice President and CMO of Anthem. Laura Hahn, Director of Legislative and Government Affairs, represented the IAFP.

In the wake of what many call a health care crisis, everyone is trying to maintain or produce a positive bottom line. Many specialty hospitals have been or are currently being built in the Indianapolis area. "It has a lot to do with economics and incentives," said Caponi.

"The incentive right now is—and I look at this from a physician perspective—over the last several years physicians have seen their real income go down, and it has gone down for a number of reasons," he continued. "So, I believe that economics are going to have to rule and we'll see whether or not people are willing to pay."

Since we live in America, where capitalism rules, this may seem like a good system. However, we must ask ourselves this question, "At whose expense do these boutique hospitals succeed?"

"Most of us operating acute care hospitals, those particularly on the not for profit side, worry that if the profitable lines of business we operate leave the main campus, what's going to be left? Unfortunately, what's going to be left is a lot of care that's being provided to people who do not have insurance or who have Medicaid or Medicare, which, quite frankly, doesn't pay the full cost of providing care," said Caponi.

Another problem Caponi alluded to is that these specialty hospitals may or may not accept all patients. He stated that he always makes sure charity care is provided in some capacity at his facility. Finally, Caponi said, "Some people look at this and say, 'If we had a certificate of need law within the state, perhaps that would curb it.' I don't know. In addition to being in this state, I've been a CEO in Michigan, Alabama and Georgia. Those three states have CON laws, and they were effective in different measures, but I don't know if it really addressed this. They have bariatric surgery centers popping up, and they have eye centers on every corner."

Dr. Caine expressed different concerns. First, Dr. Caine said she would like to see more preventative health care practiced in physician offices. She feels that because this is something not reimbursed by insurance companies, it is not done. However, providers should engage patients in discussions about their weight, smoking cessation and exercise. She went on to say that there should be incentives for patients and report cards for providers. Dr. Caine also has concerns about Wishard Memorial Hospital. "We're now seeing a lot of small businesses saying, 'I don't have to buy insurance because we have Wishard.' We must realize that our best hope for Wishard is increased Medicaid reimbursement."

She cited other reasons for the hospital's financial peril. "We've seen an immigration of many different ethnic groups than we've ever seen before," Dr. Caine said. "For example, 25% of the deliveries now at Wishard are Hispanic. We've seen an increased rate of Asian Americans." Finally, she explained that these factors extend Wishard's costs because it must have translations of all its materials, as well as providing actual translators to patients.

Similarly, Dr. Nussbaum has the same type of concerns as Dr. Caine. "At Anthem, 1% of our 12 million members use 28% of all health care costs, and that's not different in Indiana, 5% use 55%. Therefore, our strategies and our approaches and the collaborative approaches we take with doctors and nurses and hospitals have to be focused on that 1 to 5%. In the past, I think the industry has set up potential broad barriers to care one-size utilization management, as opposed to helping those with the most chronic and complex illnesses get better care. In addition, preventive care services are a great opportunity for us to again limit expensive care going forward."

Dr. Lamkin, too, has different concerns about the health care delivery system. "I worry about what we're doing to patients as we focus only on costs and not on the quality of care," he says. "Second, when I go to my primary care doctor, when I call for the appointment, the nurse goes over my history with me. When I get to the doctor's office, the doctor goes over my history with me. I still have had an appendectomy when I was 10 years old. That hasn't changed. I really have a problem with the redundancy and the cost of information transferal within our system. This is a cost that absolutely provides no value whatsoever, and we ought to do that better."

After the breakfast ended and the panelists stepped down from the podium, the attendees seemed energized to go out and try to work together in communities and in their offices and hospitals to make Hoosiers healthier. The health care crisis is obviously multifaceted and will not easily be solved. However, the main theme from this program was that all health care providers should work together to educate patients and employers about preventative health. It is easier to prevent problems than to treat them later.

# A Blast From the Past



Doug Kinser (IAFP Lobbyist) and Laura Hahn (Director of Legislative & District Affairs) have been working together for more than 15 years. In this picture from 1988, Laura was serving as a page in the Indiana House of Representatives for Representative Doug Kinser.

## **Report on State Legislative Conference**

David Pepple, MD, Kevin Speer, JD, EVP, Laura Hahn and Doug Kinser represented the Indiana Chapter of Family Physicians in Palm Springs, Calif. in October at the AAFP State Legislative Conference. Nutrition, Medicare drug benefits, Medicaid and malpractice reform were among the hot topics discussed.

IAFP representatives shared Indiana's niche hospital issues with other state representatives. Speer participated in a panel discussion regarding medical malpractice reform.



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# Membership Update

### **Member Re-election Reminder**

If you were last re-elected in 2000, you have until the end of 2003 to report 150 hours of CME in order to maintain your membership. Requirements include at least 75 AAFP prescribed credit hours with a minimum of 25 group learning activities. Hours reported should be obtained between Jan. 1, 2001 through Dec. 31, 2003. For more details, review the AAFP CME Requirements for Members reprint 101 or visit www.in-afp.org, www.aafp.org or call Amanda Bowling at (317) 237-4237 or (888) 422-4237.

### Please Keep Us Up-To-Date

Members, please be sure to keep your contact information up-to-date with the AAFP and the IAFP, including your: address, phone, fax, and e-mail. To update, please call Amanda at IAFP: (317) 237-4237 or in-state toll free (888) 422-4237

### **Membership Status Totals**

Active	1614
Supporting	4
Inactive	20
Life	191
Resident	357
Student	280

### **New Members**

The Academy extends a warm welcome to the following new members:

### **Active Members**

Janet Seabrook, MD Merrillville, IN

#### **Residents Members**

David Schweck, MD Fishers, IN

Meredith Langhorst, MD Fishers, IN

Darcy Henson, MD Noblesville, IN

Yuliyan Donchev, MD Avon, IN

Sukhvir Atwal, MD Indianapolis, IN

Khwaja Hussain, MD Indianapolis, IN

Elzbieta Koslacz-Kolanko, MD Indianapolis, IN

Anna Sagoyan, MD Indianapolis, IN

Donna Smith, MD Indianapolis, IN

Louis Landman, MD Indianapolis, IN Melissa Erickson, MD Indianapolis, IN

Carrie Caraco, MD Indianapolis, IN

Lasith Illamperuma Archchi, MD Indianapolis, IN

Jared Basham, MD Indianapolis, IN

Aida Jacic, MD Indianapolis, IN

Susan Larson, MD Indianapolis, IN

Rachel Shockley, DO Indianapolis, IN

Manish Mannan, MD Indianapolis, IN

Tammy Chan, MD Indianapolis, IN

Lam Van, MD Indianapolis, IN

Kevin Hartzell, MD Indianapolis, IN

Azra Abdullah, MD Indianapolis, IN Josephine Lilla, MD Indianapolis, IN

Indianapolis, IN

Elizabeth Diller, MD

Mazhar Zaidi, MD Gary, IN

Ihmad Alizray, MD Merrillville, IN

Lashunda Williams, MD Mishawaka, IN

Rebecca Brice, DO Mishawaka, IN

Kenneth Dill, MD Mishawaka, IN

Surekha Bavirti, MD Mishawaka, IN

Katherine Lisoni, MD South Bend, IN

Peng Zhang, MD South Bend, IN

Marc Hilgers, MD South Bend, IN

Gregory Gifford, MD Columbus, IN Jennifer Wilson, MD Muncie, IN

Justin Whitt, MD Yorktown, IN

Djenita Butulija, MD Evansville, IN

Syed Kazmi, MD Evansville, IN

Jared Kocher, MD Evansville, IN

Cristian Pantea, MD Evansville, IN

Ruchika Yusufji, MD Evansville, IN

Darren Brucken, MD Terre Haute, IN

Kevin W. Schreiber, MD Fort Wayne, IN

Michael Gerald Angeles Sebastian, MD Evansville, IN

Maria Mosqueda Soller, MD Evansville, IN

Ryan Douglas Torrie, MD Muncie, IN

#### Students

Mr. Matthew Nobari Carmel, IN

Ms. Rebecca Baker Lebanon, IN

Ms. Margaret Sebree Avon, IN

Mr. Douglas Kitchin Indianapolis, IN

Mr. Shane Hudnall Indianapolis, IN

Mr. Jeffrey Anderson Indianapolis, IN

Mr. Greg Berman Indianapolis, IN

Ms. Micah Smith Indianapolis, IN

Mr. Matt Powellson Indianapolis, IN

Mr. Hiral Shah Indianapolis, IN

Ms. Katie Kieber Indianapolis, IN

Ms. Melissa Spurr Indianapolis, IN

Ms. Heidi Schapker Indianapolis, IN

Mr. Andy Campbell Indianapolis, IN

Mr. David Stiasny Indianapolis, IN

Ms. Jana Seitz Indianapolis, IN

Mr. Luke Gutwein Indianapolis, IN

Mr. Elizabeth Carroll Indianapolis, IN

Mr. R. Scott Hutchison Indianapolis, IN

Ms. Tricia Kurtz Indianapolis, IN

Ms. Amy Olin Indianapolis, IN

Ms. Elizabeth Yust Indianapolis, IN Mr. Anthony Czaplicki, III Indianapolis, IN

Ms. Judith Vahle Indianapolis, IN

Ms. Kristi Havener Indianapolis, IN

Mr. Asoka Ratnayake Indianapolis, IN

Ms. Catherine Adrian Indianapolis, IN Ms. Sonia Pai Granger, IN

Mr. Mark Royer Mishawaka, IN

Mr. Alex Taswadros Notre Dame, IN

Mr. Matt Hatch South Bend, IN

Ms. Jennifer Hurley Columbia City, IN

Ms. Shinta Jong Leo, IN

Mr. Winfield Moses Fort Wayne, IN

Mr. Andrew Harrity Fort Wayne, IN

Ms. April Cjish Walton, IN

Mr. David Amrhein Muncie, IN

Ms. Dee Ann Stults Muncie, IN

Ms. Miriah Chapman Muncie, IN

Mr. Dustin Ellis Muncie, IN

Ms. Christen Kennedy Bloomington, IN

Ms, Anne Howard Bloomington, IN

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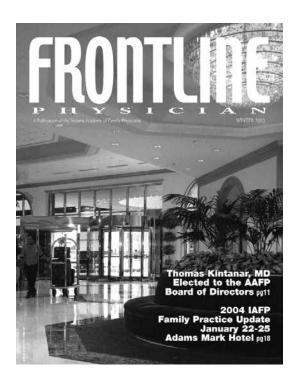
Ms. Karen Trappe Terre Haute, IN

# Resident's Perspective

R. Michelle Galen, MD

This year's AAFP Scientific Session in New Orleans was a huge success and well represented by Indiana Academy members. Indiana was successful in its efforts to elect on of its own, Thomas Kintanar, M.D., Fort Wayne, to the AAFP Board of Directors. The Congress of Delegates continues to work to keep the specialty of Family Medicine focused on the growing needs and changes of the population we serve.

The Congress was followed by numerous lectures and procedure workshops highlighting a wide array of topics. In addition, the international networking opportunities featured medical mission work in Kenya, among other locations. The Annual Foundation Auction raised funds to further future events. The Academy celebration event featured Kenny Loggins, performing for the Assembly. Cajun and Creole food was enjoyed by many, as well as traditional New Orleans jazz. Next year's event will take place in Orlando, Florida between October 13-17.



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#### Update on Pneumonia Management John G. Bartlett, M.D.

Chief, Division of Infectious Diseases Johns Hopkins University School of Medicine

Management of COPD Stephen S. Lefrak, M.D. Professor of Medicine Washington University School of Medicine

Asthma Management in 2003 & Beyond William J. Calhoun, M.D. Associate Professor of Medicine University of Pittsburgh School of Medicine

### Friday, December 5, 2003 1:00 p.m. – 5:15 p.m.

St. Vincent Marten House Hotel & Lilly Conference Center 1801 W. 86th Street Indianapolis, Indiana

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Residents and medical students may attend for free.

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#### Accreditation

This activity has been planned and implemented in accordance with the Essential Areas and Policies of the Indiana State Medical Association through the joint sponsorship of St. Vincent Hospitals and Health Services, and Northwest Radiology Network. St. Vincent Hospitals and Health Services is accredited by the Indiana State Medical Association to provide continuing medical education for physicians.

St. Vincent Hospitals and Health Services designates this educational activity for up to four hours in Category I credit towards the AMA Physician's Recognition Award. Each physician should claim only those hours of credit that he/she actually spent in the educational activity.

In addition, this program has been reviewed and is acceptable for up to four prescribed credit hours by the American Academy of Family Physicians.



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