

From President Carron What's Your Story?



I recently saw a quote by Maya Angelou, "There is no greater agony than bearing an untold story inside you." This stuck with me as I have

often thought, and have heard many people say, "I need to write a book about that." In fact, I have told many family members, patients and even new acquaintances when I hear just part of a story they are telling, "You need to write a book." The book I have in my head is telling individual stories of patients at the end of life. I will never cease to be surprised at the often utter shock when I tell the family of a 90-something-year-old patient that he/she may be at the end of their life. The patient on the other hand is never shocked. I want to write a book that helps people tell their story, even to their own family, and in some small way begin the goodbye, so the family focuses on celebrating how many years they got with their loved one, rather than

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2019 Board Review Course Registration Open



Registration is open for the 2019 ACOI Internal Medicine Board Review Course, which will take place May 8-12 at the Baltimore Marriott Waterfront Hotel. This 5-day course is a comprehensive review of general medicine and each of the subspecial-

ties. It is an excellent way for practicing physicians to update their medical knowledge, and it provides an intensive and comprehensive overview of most of the major areas of importance to physicians preparing for the American Osteopathic Board of Internal Medicine Certifying Examination (September 3-5, 2019) and Recertifying Examination (September 3-5, 2019).

Special emphasis is placed on recent advances in various subspecialty areas in internal medicine and clinical skills management as they pertain to clinical practice and the examinations. In addition, several "board-type" questions are included during each lecture to improve registrants' readiness to respond to examination questions. The lectures are given by distinguished faculty who

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ACOI Online Learning Center Features Free Access to Keynote



The ACOI unveiled its new Online Learning Center in December. The site offers 24-hour access to CME presentations, both for purchase and free of charge. Among the latter is the chance to view an inspiring keynote from the 2018 Annual Convention and Scientific Sessions. **Christian Cable, MD**, truly moved those in attendance with his presentation entitled, "Osteopathic Medicine from the Inside Out."

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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:

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EXCELLENCE in programs and services

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Letter from the President

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denying death.

I often find myself explaining to families the story of a patient's disease course and that is why I can help predict the future course and that death may be near. I help define the patient's goals for care based on what the family believes the patient would want. It is always better to ask the patient their goals, but, unfortunately, we often begin the conversation too late and the patient is too confused or sick to share their wishes. This is where the sadness and shock should be--- that we never talked to our loved one about how their story of life should end. I dislike calling the patient's disease course a story, as I prefer to hear the story of a patient's life, not disease, but I find families understand and accept this disease course analogy the best.

We as physicians hear stories of our patients every day. We, unfortunately, often neglect our own story--- our health, our family and our own personal joy. I recently attended a conference put on by a company that helps physicians find ways to earn non-clinical income. I attended one conference topic, but next door was a session on the physician as writer. I loved this!! Our insight into human nature, suffering and family interactions, not to mention joy, is irreplaceable. I thought the physician as writer is a win-win: cathartic for physician health and priceless for the reader.

Life review is a good way for you or your patients to begin to write their story for family. Formal questionnaires are available online. You can also encourage family members to simply ask their loved one to "Tell me the story of your life," and "Tell me what you hope for, for whatever time you have left," as ways to help families and patients face a serious illness.

For you as our ACOI member, take advantage of whatever you can that offers help for physician wellness. This is an important topic to ACOI and many other hospitals/physician organizations. Let us know at ACOI if we can help reduce your stress in any way. These are tumultuous times for all. Take time to make the next chapter of your story a good one. Make the job change you have been considering, take the vacation, call the long lost friend, or write your book.

Take time to think about your story. Is it one of mostly work? Regrets? Family? Giving? What would your loved ones think you would want if facing serious illness? Would they know? Do you know what your patients would want? Have you asked? We are here at ACOI to hear your story and to help build it. As always, contact me or any Board/staff member if we can help!

Chapter one

*Annette T. Carron, DO, FACOI
President*



government RELATIONS

Timothy McNichol, JD

State of the Union Address Includes Discussion of Healthcare Policy

President Donald J. Trump recently delivered his annual State of the Union address to a joint session of Congress. While the address touched on the expected areas of border security and economic growth and prosperity, the speech also addressed healthcare-related topics. The President called on both parties in the House and Senate to take legislative action to lower the cost of prescription drugs. It is worth noting that Congress has already begun to explore this issue with recent committee hearings reflecting bipartisan effort. The President also called on Congress to approve legislation to prevent late-term abortions. The address included the announcement of an initiative to end new HIV infections by as much as 90 percent in 10 years. The President concluded the healthcare portion of his address by announcing his intention to request \$500 million over the next 10 years to advance childhood cancer research. The State of the Union address serves as an opportunity for the President to review the past year and set forth the policy priorities for the upcoming one. It is primarily to act on the policy recommendations put forth.

Legislation Introduced to Increase Medicare-Funded Residency Positions

Legislation was introduced in the Senate to increase the number of Medicare-funded residency slots by 15,000 over five years. A report recently released by the Association of American Medical Colleges (AAMC) estimates a physician shortage of between 42,600 and 120,000 by 2030 in the United States. Currently, the number of Medicare-funded training slots is capped at 1996 levels. The legislation would expand the number of training positions by 3,000 a year for five years. The ACOI will continue to monitor this legislation.

Number of Hospital Acquired Conditions Falls

According to a report recently released by the Agency for Health Research and Quality (AHRQ), the estimated rate of hospital-acquired conditions (HACs) dropped 13 percent from 2014 through 2017. The report estimates that the reduction in HACs resulted in a savings of about \$7.7 billion and prevented nearly 20,500 HAC-related inpatient deaths. The Centers for Medicare and Medicaid Services (CMS) Administrator Seema Verma was quoted as saying, "Our work isn't done and we will continue our efforts to hold providers accountable for delivery results." You can read the full report at <https://www.ahrq.gov/>.

Funding for Community Health Centers Receives Bi-Partisan Support

The Republican and Democratic leaders of the Senate Health, Education, Labor and Pensions (HELP) Committee recently introduced and held a hearing in support of legislation to provide five years of mandatory federal funding for community health centers. In addition to funding health centers, the legislation would fund the following: the National Health Services Corps; the Teaching Health Center Graduate Medical Program; the Special Diabetes

Program at the National Institutes of Health; and the Special Diabetes Programs for Indians. The legislation awaits additional consideration in the Senate, where it is expected that additional action will be taken.

Incorrect 2019 MIPS Payment Adjustments Identified by CMS

CMS has become aware that some physicians are incorrectly receiving 2019 MIPS payment adjustments on excluded items, including Medicare Part B drugs. CMS is working its contractors to resolve the issue and has asked that the following FAQ be shared:

Q. Should payments for Medicare Part B drugs be included in the 2019 MIPS Payment Adjustment?

A: On February 9, 2018, Congress passed the Bipartisan Budget Act of 2018, which contained provisions that made several changes to the Merit-based Incentive Payment System (MIPS) track of the Quality Payment Program, including no longer calculating the cost of Part B drugs in the low volume threshold.

Recently, CMS discovered an error in the 2019 MIPS payment adjustment applied by the Medicare Administrative Contractors (MACs), which included the payments for Medicare Part B drugs.

At this time, the Center for Medicare and Medicaid Services (CMS) is unable to provide an exact date of when impacted clinicians will see the update and correction, but we anticipate an adjustment in the near future. In the event that CMS overpaid a claim based on inclusion of the Medicare Part B drugs, a notification for recoupment will be issued from their MAC on behalf of CMS.

CMS is working as quickly as possible to resolve this issue. No further action is requested of clinicians.

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coding CORNER

Jill M. Young, CPC, CEDC, CIMC

Jill Young, CPC, CEDC, CIMC, is the principal of Young Medical Consulting, LLC, a company founded to meet the education and compliance needs of physicians and their staff. Jill has over 30 years of medical experience working in all areas of the medical practice. You can reach Jill by emailing her at youngmedconsult@gmail.com.

Telephone, Internet and Electronic Health Record Consultations

There are four revisions and two new CPT codes on Inter-professional Telephone / Internet / Electronic Health Record Consultations in 2019 that are worth your attention. These changes could have a significant impact on the way you practice medicine. The intent of the codes is to provide compensation for a physician who consults with another physician with specialty expertise in an effort to obtain his/her opinion and advice regarding a particular patient. This interaction becomes billable only when certain requirements are met as set forth in the applicable CPT code and guidelines.

For the Consultant

- The patient may be a new or established one.
- The problem may be a new one, or it may be an exacerbation of an existing one.
- The patient should not have been seen by the consultant within the last 14 days.
- This service should not be reported if the consultation leads to a transfer of care.
- This service should not be reported if the consultation leads to a face-to-face within 14 days, or at the next available appointment date of the consultant.
 - o This includes surgery, hospital visits, or a scheduled office evaluation.
- The majority of service time reported (greater than 50 percent) must be devoted to the medical consultative verbal or electronic discussion.
 - o This is the most important one because if the “discussion” does not take over 50 percent of the time, the guidelines indicate that a consultation code of this family of codes should NOT be billed.

It is important to note that the requesting provider may be any physician (specialty or primary care), or a non-physician practitioner (NP, PA), but the consultant MUST be a physician. The consultant role cannot be filled by an NP or PA.

Based on the requirements and guidelines for the codes, I recommend documenting all of the following:

- How the conversation took place (verbal or electronic);
- How long the conversation was and what percentage of the total time was spent looking at records and “talking” to the requesting physician;
- Who asked for the consultation;
- What diagnosis or condition the consultation was for;
- If the patient is new or established and, if an established patient whether or not they have been seen in the past 14 days;
- That the conversation did not lead to a transfer or care;
- That the consultant’s recommendations did not include one for the patient to make an appointment, or otherwise be seen or meet with the consultant;
- What the opinion of the consultant physician was and any recommendations.

The majority of the codes are for the “conversational” consultations that include a written report, but there is one that is for the report only.

The codes for the consultant and their descriptors are:

Inter-professional Telephone / Internet / Electronic Health Record assessment and management service provided by a consultative physician, including verbal and written report to the patient’s treating/requesting physician or other qualified health care professional:

99446 - 5-10 minutes of medical consultative discussion and review

99447 - 11-20 minutes of medical consultative discussion and review

99448 - 21-30 minutes of medical consultative discussion and review

99449 - 31 minutes or more of medical consultative discussion and review

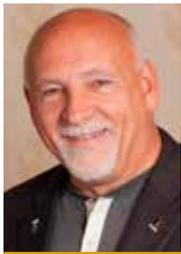
99451 - Inter-professional Telephone / Internet / Electronic Health Record assessment and management service provided by a consultative physician, including a written report to the patient’s treating/requesting physician or other qualified health care professional, 5 minutes or more of medical consultative time

99452 - Inter-professional Telephone / Internet / Electronic Health Record referral service(s) provided by a treating requesting physician or other qualified health care professional, 30 minutes

Looking at what the requesting physician can bill for with his/her time:

- There is also a code for the time the requesting provider spends preparing for the referral and/or communications with the consultant;
- If the patient is in the office at the time of the call and the requirements for prolonged care are met, it is possible that the add-on codes 99354 & 99355 may be billed with the Evaluation and Management service (E&M) for the day;
- If the patient is not in the office, the guidelines indicate consid-

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talking science & education

Donald S. Nelinson, PhD

Greetings colleagues and welcome to the February issue of Talking Science and Education. I think across the country we've all experienced the extremes in winter weather. However, no need to fear: Punxsutawney Phil assures us an early Spring is coming!

In last month's population health quiz we asked which state showed the largest percentage point decrease in prevalence of adult smoking between 2012 and 2017. In the past five years, adult smoking declined in all 50 states — decreasing significantly in 39 states and the District of Columbia. The largest percentage point decreases in prevalence of smoking between 2012 and 2017 occurred in Oklahoma (26.1 percent to 19.6 percent).

As we move into updated population health data up to 2018, we see that obesity and chronic diseases continue to negatively impact health and mortality. During 2018, the nation's obesity rate rose what percent?

- A. 22%
- B. 2%
- C. 5%
- D. 15%

Remember: no Googling!!!

Send your answer to don@acoi.org and win valuable prizes!

Talking Education

In a few weeks I will be attending the 2019 ACGME Annual Educational Conference. This meeting has proven to be a good source for insights and answers to issues related to the graduate training of physicians. In addition to the diverse faculty, valuable peer interaction adds to the benefits conferred by the program. Of particular interest and value to osteopathic educators is the ACGME/AOGME Pre-Conference for Osteopathic Programs and Institutions. This day-long session addresses a full range of topics related to securing and maintaining ACGME accreditation, as well as Osteopathic Recognition. On Saturday, Natasha Bray, DO, MEd, FACOI, FACP, Chair of the Osteopathic Principles Committee (OPC), and Tiffany Moss, MBA, Executive Director of the OPC, will provide an update on the requirements for Osteopathic Recognition with ACGME. I hope to see some of you March 7-10 in Orlando.

Diabetes Dialogues

Research finds lack of CV risk factor control in diabetes

It's a challenge that all internists are aware of and aspire to address in their practices. Only one in five adults with diabetes achieved control over multiple risk factor targets for atherosclerotic cardiovascular disease (ASCVD), according to United States registry data published in *Diabetes, Obesity and Metabolism*.¹

The Diabetes Collaborative Registry provides multidisciplinary data tracking diabetes and metabolic care through a collaboration of the American College of Cardiology, American Diabetes Association, American College of Physicians, American Association of Clinical Endocrinologists, and the Joslin Diabetes Center.

In this study, investigators examined Diabetes Collaborative Registry data from 74,393 patients with diabetes from 174 practices and 646 office locations. Of these patients, 88% were white, 41% were women, and the average age was 69. Patients' average body mass index was 32 kg/m², almost 70% had prior ASCVD, and approximately 14% were current smokers.

Investigators found that 73.6% of patients met individual hemoglobin A1c targets, 69% met blood pressure targets, 48.6% met low-density lipoprotein cholesterol targets, and 85.2% were nonsmokers. However, only 21.6% of all patients achieved composite control of all four risk factors ($P < .001$). Overall risk factor control rates were lower in women (18.6%) compared with men (23.6%) and in patients who were black (14.7%), white (22.5%), and of other ethnicities (20.8%). Significant differences in rates were observed between patients with (20.7%) and without (23.6%) prior ASCVD.

The study investigators noted limitations to the Diabetes Collaborative Registry, including that the majority of data was collected from white patients and from a high number of cardiology practices, which may limit generalizability of the results to all patients with diabetes.

Pointing to studies suggesting a >50% lower risk for ASCVD in patients with diabetes who achieved multiple risk factor targets,^{2,3} the investigators stated that "improved multifactorial interventions focused both on lifestyle management and evidence-based therapies to achieve all targets will be necessary to optimize the prevention of future cardiovascular disease."

References

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How Financial Support of ACOI Is Making A Difference for Student Leaders



(This is one in a series of interviews with medical students who are strongly committed to the College and why they believe it has made a difference in their lives. This series is presented by Barbara L. Ciconte, CFRE, Development Counsel to ACOI.)

Meet **Oksana Vasylyvna Mayovska** and **Sanath Shetty**, second year medical students at Rowan University School of Osteopathic Medicine in Stratford, New Jersey. They currently serve as the Co-Presidents of the Student Osteopathic Internal Medicine Club.

Oksana and her family moved to

Northern New Jersey from Ukraine when she was six years old. With an interest in medicine, Oksana majored in biology and minored in public health and sociology at Drew University in New Jersey. She first heard of osteopathic medicine during her junior year. When she interviewed to attend Rowan, she knew the osteopathic, holistic approach to preserve health was where she belonged.

Sanath and his family came to the U.S. from India when he was 10 years old. After living in New York City and Georgia, his family settled in New Jersey. With an interest in the sciences and medicine, Sanath studied at Rutgers University-New Brunswick in New Jersey majoring in cell biology/neuroscience and psychology. While a student at Rutgers, he shadowed a medical student at Rowan and was drawn to the philosophy and patient-centered care that osteopathic medicine offered.

Ms. Ciconte: I know you attended the 2018 ACOI Annual Convention in Orlando. Tell me about your experiences.

Ms. Mayovska: I was fortunate to attend the 2017 ACOI Annual Convention in Washington, DC as well as the one in Orlando. It was wonderful to hear the residency directors tell us what they look for when choosing applicants for their programs firsthand. I also liked the program on student burnout that covered what medical students need to do to take care of ourselves. Dr. Good, who Sanath and I met when he did a Visiting Professor program at Rowan, truly made the students feel a part of the ACOI family at the convention.

Mr. Shetty: It was great attending my first ACOI convention. I especially liked the smaller sessions with other students from around the country. In addition, ACOI's session about the single GME initiative was helpful, as it was probably the only lecture that I have attended that informed us about the process of the "merger" and how it impacts our osteopathic field. And as Oksana said, the doctors on the residency panel were very helpful and informative. They were also very inspiring as they spoke about their profession.

Ms. Ciconte: As the SOIMA Co-Presidents, tell me about a Visiting Professor session you had.

Ms. Mayovska and Mr. Shetty: First, we want to thank the ACOI staff for all their help in organizing our Visiting Professor sessions. They were terrific. We were able to promote our sessions so that we had great attendance. Last year, Dr. Good visited us and his session was wonderful, very interactive and gave us a realistic view of medicine in the future. He discussed the time commitment, financial burden and training involved if one were to pursue the various subspecialties. Additionally, since at this time in our medical education we are following a traditional track, it was interesting to have Dr. Good present a clinical case for us to discuss. It was very engaging for the students and I could tell they were excited by it. Dr. Marianne Holler did a Visiting Professor session more recently that focused on end-of-life matters, which is her field of expertise.

Ms. Ciconte: What are some of the challenges facing medical students today?

Ms. Mayovska: The transition to the ACGME system presents a challenge for matching

medical students to residencies. We are all learning the same things so it's fitting to be on a level playing field, so to speak, but the increased competition for residency slots will be intense. We really don't know what is going to happen.

Mr. Shetty: I see the issue of managing Boards, studying and school work. You truly get a feel for what burnout means when you are in the thick of the second year of medical school. The ever looming question of what Boards should we take? Medical school is truly a marathon, which can be a daunting experience.

Ms. Ciconte: How can ACOI help?

Ms. Mayovska and Mr. Shetty: Our medical school is offering student wellness programs. It would be good for the ACOI to provide funds for these de-stressing efforts. We think the ACOI could also help students learn about financial management of their own funds and the business aspects of their practices.

Ms. Ciconte: Your Visiting Professor sessions and grants to student leaders to attend the Annual Convention are thanks to gifts to the College, especially to the ACOI's Generational Advancement Fund. What would you say to encourage more ACOI members to contribute to the Fund?

Ms. Mayovska and Mr. Shetty: First, we would say thank you to them for their financial support because it is making a difference in the lives of medical students. Their support enables us to learn about osteopathic internal medicine by attending ACOI annual conventions, meeting osteopathic internists who can serve as mentors, and receiving textbook vouchers at convention.

Visiting Professors who present sessions on osteopathic medical school campuses expose students to different things than medical school. They bring their knowledge and experience from different geographic areas to us. The ACOI should share photos from student internal medicine clubs with members so that they can see how well attended they are and the impact their support is having.

We look forward to a future time when we, too, can give back to the College like ACOI donors now.

75th Anniversary Campaign Honor Roll of Donors

(Outright Gifts and Multi-Year Commitments of \$1,000 or more as of February 15, 2019)

The ACOI Board of Directors wishes to thank all ACOI members for their annual support for the College. The generous support of our 75th Anniversary Campaign donors is of the utmost importance as we seek to maintain an osteopathic approach to internal medicine for future generations of patients.

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G. Michael Johnson, DO, MACOI
Robert S. Juhasz, DO, MACOI
Joanne Kaiser-Smith, DO, FACOI
and Kevin P. Smith
Michael Keefe, DO, MACOI
Marc M. Kesselman, DO, FACOI
and Robin Kesselman, DO
Teresa M. Kilgore, DO, FACOI
Janice A. Knebl, DO, MACOI
Andrew Kotis, DO, FACOI
Cheryl Kovalski, DO, FACOI
Paul Kudelko, DO, MACOI
Nathan J. Landesman, DO, FACOI
Alexander "Sandy" Macnab
Daniel L. Maxwell, DO, FACOI
Timothy W. McNichol, JD
Michael J. Menolasino, III, DO, FACOI
Nathan Miller, DO, FACOI
Jo Ann Mitchell, DO, FACOI
Rizwan K. Moineddin, DO
and Mahnaz Ali, DO
Joseph Namey, Jr., DO, MACOI
Donald S. Nelinson, PhD
V. Kim Newsome, DO, FACOI
and Tim Stainbrook, RN, BSN
Herbert Pasternak, DO, FACOI
Joanna Pease, DO, MACOI
William Peppo, DO, FACOI
Daniel K. Peshka, DO
John Prior, DO, FACOI
Bennet Radford, DO, FACOI
Jeffrey A. Ranalli, DO
and Trina A. Poretta, DO
Laura Rosch, DO, FACOI for her mentor
George Caleel, DO, MACOI
Christine M. Samsa, DO, FACOI
and Nathan P. Samsa, DO, FACOI
Roy J. Sartori, DO, FACOI
and Christine Sartori
Thomas Schneider, DO, FACOI
Martin W. Schwarze, DO, MACOI
Suzanne Shenk, DO, FACOI
and Scott Siegal, DO, FACOI
Laura Smith, DO, FACOI
Duane Sossong, DO
David G. Stainbrook, Jr., DO, FACOI
Christina A. Stasiuk, DO
and George M. Farion, Esq.
W. W. Stoever, DO, MACOI
Brad Suprenant, DO, FACOI
David Susser, DO, MACOI
John R. Sutton, DO, FACOI
Richard R. Thacker, DO, FACOI
Kenneth Trinidad, DO
Gordon P. Tussing, Jr., DO
Amita Vasoya, DO, FACOI
William H. Voss, DO, MACOI
Ronald L. Walsh, DO, MACOI
Thomas Waltz, DO, FACOI
R. Colin Wetz, DO, FACOI
Mark L. Woodard, DO, FACOI
William Zipperer, Jr., DO, FACOI

ACOI Learning Center Keynote

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Dr. Cable is an oncologist at Baylor Scott & White Health in Temple, TX. He is an educator who is chair of the ACGME Internal Medicine Residency Review Committee and has been instrumental in helping guide osteopathic residency programs through the application process for accreditation. He is also an Active Member of the ACOI. You can watch as Dr. Cable describes what called him to a career in medicine and how his own values are closely aligned with the osteopathic philosophy. To watch Dr. Cable's address, visit <https://learning.acoi.org>. If you have not already done so, create an account, then click on the "free activities" menu tab.

The ACOI Online Learning Center is optimized to work from your desktop or mobile devices. In addition to talks like Dr. Cable's, the site provides the opportunity to earn credits you may need to complete your CME requirements for certification. Make the ACOI Online Learning Center your new online home for lifelong learning. Visit the ACOI Online Learning Center at <https://learning.acoi.org>!



With the launch of the ACOI Online Learning Center, continuing medical education is now available at your fingertips 24/7.

Convenient.
Affordable.

Visit [www.learning.acoi.org](https://learning.acoi.org) to get started!

Patient-Focused. Evidence-Based. Physician-Led.

When you join Northwest Permanente, P.C., you will have the chance to practice in an environment that offers ample opportunity to pursue and achieve your personal and professional goals. You will benefit from a comprehensive network of support services and a talented team of colleagues who share your passion for medicine and patient care.

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Opportunities available in Portland and Salem, OR, and SW WA, including Longview.

As one of the nation's pre-eminent health care systems and a benchmark for comprehensive, integrated and high-quality care, we offer a variety of opportunities to grow and hone your skillset. We offer leadership, research and teaching opportunities, as well as new physician mentorship programs, cross-specialty collaboration, career growth and stability.

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- Student loan assistance program
- Education stipend and leave for continued medical education
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- Generous retirement programs

Join us and be a part of something unique, something special, something that matters.

To apply, please visit: <http://nwp.kpphysiciancareers.com>.

Please contact Sr. Recruiter, Marisa Walter, at Marisa.E.Walter@kp.org or 503-813-1045, with any questions. EOE

Paper Sees Potential for Physician Compensation Bubble



ACOI member **Seger S. Morris, DO, MBA, FACOI**, of Corinth, MS, wrote a paper on the potential for a

physician compensation “bubble” for the American Association for Physician Leadership. The paper, which was published in January, notes that physician compensation is of significant interest to both the general public and the health care community. There is public sentiment that U.S. physicians are compensated well, so actions taken by Congress made physicians an easy target for policies that have led to instability in compensation. This, and increases in administrative costs, correlated with the transition of physicians from private practice to employed models — could be leading to a compensation bubble that will burst if it isn’t addressed.

Dr. Morris is a hospitalist at Magnolia Regional Health Center in Corinth, who serves on the ACOI Committee on Government Affairs. He is also chair of the AOA Bureau of Emerging Leaders and represents new physicians in practice on the AOA Board of Trustees. Third-year internal medicine resident **Heather Lusby, DO**, is also an author of the paper.

You can read the paper here: <https://www.physicianleaders.org/news/physician-compensation-bubble-looming>.

Find Your Career at CHSU

CHSU College of Osteopathic Medicine is hiring full-time and part-time positions in UME with future potential in GME.

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Trainers Congress Registration Is Open!

Register today for the 2019 ACOI Congress on Medical Education for Resident Trainers scheduled for May 10-11, 2019 at the Baltimore Marriott Waterfront Hotel in Baltimore, MD. This year's Congress will focus heavily on faculty development to assist you in the new single GME milieu.

The agenda will include presentations on meeting scholarly activity requirements; preparing residents for the yearly ACGME survey; how to respond to ACGME citations; utilizing a flipped classroom in a residency program; utilizing best practices in osteopathic recognition; training MD residents who want OPP/OMM; recognizing unconscious biases; providing effective feedback. Finally, ACGME Internal Medicine Review Committee leaders will offer their insights into recent Review Committee activities.

For travel purposes, the meeting will start on Friday, May 10th at 8:00 am and conclude on Saturday, May 11th, early in the afternoon.

Free 2019 Planning Guides Help Save Taxes and Help ACOI!

We are pleased to offer two helpful new planning documents:
Your 2019 Personal Planning Guide has ideas and strategies on

- **Estate Planning**
- **Gifts from Your Estate**
- **Income Tax Planning**
- **Investments and Retirement**
- **Social Security**
- **Charitable Gift Planning**

An easy to understand, non-technical comparison of charitable gift techniques is included in the 2019 Federal Tax Pocket Guide which we will also send you. It's packed with information on income tax and estates and trusts, the Federal Corporation Tax, Federal Income Tax on Capital Gains and other charts and tables you may want to review before talking with your estate planner or tax attorney. You can also give it to your legal, tax or estate planner. They will be grateful and may ask for another! Let us know and we'll get them to you right away!

Please email katie@acoi.org and ask to receive these helpful planning booklets.

If you already know that you would like to have Mr. Sandy Macnab, the ACOI planned giving consultant call you, please email Brian Donadio at bjd@acoi.org or call 301-231-8877 to let us know how and when to contact you.



Join the New Sustainers Club Today

The ACOI is pleased to welcome and recognize the following members of our new Sustainers Club:

Lee Peter Bee, DO, FACOI
Janet Cheek, DO, FACOI
Jeffrey Packer, DO, FACOI
Laura Rosch, DO, FACOI

Christine Samsa, DO, FACOI and Nathan Samsa, DO, FACOI
Samuel Snyder, DO, FACOI

BECOME A MEMBER OF THE NEW ACOI SUSTAINERS CLUB

Help the College Better Plan for Its Future!

Sustainer Club Members contribute on a monthly basis.

Benefits of being a Sustainer Club member include:

- Invitations to donor events at ACOI meetings
- Update communications from ACOI leaders twice a year
- Special recognition as Sustainers Club members in ACOI publications and the website

Sign Up Today by clicking

<https://www.acoi.org/make-a-gift-to-acoi/your-support-makes-difference-acoi> and check the monthly gift box to make a credit card contribution.

Remember, your gift is tax-deductible to the full extent allowed by law.

Advanced CME Course for Cardiologists Planned for May

Exploring New Science in Cardiovascular Medicine, ACOI's continuing education program for cardiologists, will take place May 9-12, 2019 at the Baltimore Marriott Waterfront Hotel. An internationally recognized faculty will bring the very latest evidence-based advances using a highly interactive, case-centric approach. This activity is part of a series of new CME offerings the ACOI has created for subspecialists. It is designed for general cardiologists, interventional cardiologists and electrophysiologists in clinical practice. This activity is certified for both AOA Category 1A CME Credit and for *AMA PRA Category 1 Credit*[™].

Cardiologists are faced with a wide range of clinical presentations and must remain current with the most recent guidelines, pivotal trials and real-world evidence across multiple areas of cardiovascular risk and disease. Clinical cardiologists, including general cardiologists, interventionalists and electrophysiologists, are challenged to maintain knowledge of, and competence in, all relevant medical advances and structural initiatives related to the myriad of cases with which they are involved. This conference will address key gaps in knowledge and competence determined through literature reviews, population health data and quality measurement sources (e.g., AHRQ, NCQA), and ongoing survey activities within ACOI. Gaps were also identified through audits of sources such as the United Health Foundation, CDC, WHO, etc.

Data from our needs assessment process reveal that while most cardiologists are aware of best-practice approaches to the care of various CV diseases, these approaches are not consistently implemented. Some particular areas to be highlighted in this activity include the utility of biomarkers and left ventricular assistive devices in the management of heart failure; optimizing the cardiologist's role in the emergency department; atypical electrophysiologic findings, and adult congenital heart disease for the cardiologist.

At the completion of this program, attendees will be able to:

- Define the clinical value of biomarkers in the DX and TX of heart failure.
- Discuss the optimal uses of LVAD technology for HF.
- Identify how advanced imaging techniques can improve early intervention in the ED and outcomes.
- Establish a patient-centered approach to left atrial appendage occlusion vs. anticoagulant therapies.
- Discuss and evaluate the rationale behind the latest guidelines for hypertension in patients with T2DM.
- Apply case-derived insights to the use of anticoagulants.

Complete registration and agenda information appear elsewhere in this newsletter and at www.acoi.org.

Coping with Coding

continued from page 4

eration for a non-face-to-face prolonged care code (99358) should be given, that requirements are met.

I have worked with physicians who take these types of calls all the time, especially in a practice where the wait time for appointments is long. The RVU listing for the non-facility payment for these time-based codes is:

99446 - 0.52
99447 - 1.01
99448 - 1.04
99449 - 2.02
99451 - 1.04
99452 - 1.04

My recommendation is that you and your staff understand all the requirements of these consultation codes from both sides. Just as important is being sure that the offices requesting a consultation and of the consultant, are aware of their responsibilities in using these codes.

Have You Moved?

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

May 9-12, 2019 in Baltimore

Hospital Medicine Program Addresses Practice Gaps in Key Areas

Clinical Challenges in Hospital Medicine, the popular ACOI CME program for hospitalists and others who treat patients in the hospital, will take place May 9-12 in Baltimore. Hospital-based internists have very busy practices and it is impossible for them to keep updated on all the medical advances and structural initiatives related to the myriad of clinical cases presented to them. This conference will address key gaps that have been found to exist in hospital-based internists' practices. These gaps were determined through literature reviews, population health data reported by the CDC and quality measurement sources (e.g., AHRQ, NCQA), and ongoing survey activities within ACOI.

While most hospitalists maintain a wide breadth of awareness of best practices in many areas, maintaining knowledge and skills in all, and certainly the most difficult clinical areas, creates a unique challenge.

ACOI's assessment using the latest guidelines, epidemiologic data and survey reports shows that hospitalists need more clarity on how best to manage acute and chronic pain under current changes in policies. Successfully meeting QI mandates is another challenge. In addition, conflicting guidelines based on special populations (e.g., hypertension in geriatric patients and triose with T2DM) leaves the treater with the need for more specific guidance. Heart failure and sleep apnea are two other areas where clearer evidence will impact physician competence and improve outcomes.

Learning Objectives--At the completion of this program, participants will be able to:

- Articulate the latest evidence-based approaches to the prevention and management of sepsis.
- Delineate the classifications of Diastolic Heart Failure and different treatment options.

- Describe the most recent developments in medically-assisted opioid management.
- Develop strategies to prevent the misinterpretation of lab values.
- Identify the optimal approaches for managing adult patients with congenital heart failure.

Outcomes - This activity will provide internists and subspecialists updates in the areas of healthcare administration, cardiology, pulmonary, critical care medicine, infectious diseases, gastroenterology, hematology/ oncology, internal medicine, etc., empowering them to provide improved care to their patients. Outcomes will be assessed via immediate and time-delayed post-tests assessing intent to change practice behavior, and self-report of changes.

The 2019 Hospital Medicine Program will take place at the Baltimore Marriott Waterfront Hotel. Complete registration and hotel information is available at www.acoi.org.

This activity is certified for both AOA Category 1A CME Credit and for *AMA PRA Category 1 Credit*TM.

Add Your Name to Leave a Legacy

Members of the ACOI Legacy Society have done their part to ensure the future of the College. A special thank you to our Charter Members!

If you are not a member, please look at the names listed and consider adding yours to those who have made a provision in their estate plans, typically with a bequest provision, that will provide support in the future.

It will bring you peace of mind knowing that you have done your part to ensure that those who enter the profession in the future will have access to the same education, support, and mentoring that you have received. Think of it as paying your dues forward, leaving a legacy and mentoring those you will never know, but who will provide future generations with the kind of patient-centered care that you have built a career providing.

New members will be recognized at the 2019 ACOI Convention in Phoenix. Be among those who will receive a certificate and a unique crystal memento that shows that you have proudly made an investment in the future of the profession.

If you would like to have the ACOI planned giving consultant talk with you about creative ways you can join the Legacy Society now and receive a lifetime income, please contact Brian Donadio via email at bjd@acoi.org, or call 301-231-8877 to let us know how and when to contact you.

Legacy Society Charter Members

Dr. Jack and Jocelyn Bragg

**Dr. John and
Dr. Michelle Bulger**

**Dr. Mathew and
Marbree Hardee**

**Dr. David and
Rita Hitzeman**

**Dr. Robert and
Donna Juhasz**

**Dr. Karen and
Jim Nichols**

Dr. Eugene and Elena Oliveri

**Dr. Frederick and
Amy Schaller**

American College of Osteopathic Internists INTERNAL MEDICINE BOARD REVIEW COURSE Marriott Baltimore Waterfront Hotel • May 8-12, 2019

Course Description and Learning Objectives

This 5-day course will provide an intensive and comprehensive overview of most of the major areas of importance to physicians preparing for the American Osteopathic Board of Internal Medicine Certifying Examination and Recertifying Examination (September 3-5, 2019). It will also provide a thorough overview of major areas of internal medicine. Special emphasis will be placed on recent advances in various subspecialty areas in internal medicine and clinical skills management as they pertain to clinical practice and the examinations.

Several "Board-type" questions will be included during each lecture to improve registrants' readiness to respond to examination questions. The lectures will be given by distinguished faculty who are recognized for their ability as outstanding teachers and clinicians. A detailed syllabus will be provided to registrants. Immediately following each day's lectures, designated faculty from each subspecialty area will be available for a question and answer period.

GENERAL INFORMATION

Recommended Audience

This postgraduate course is appropriate for physicians who provide personal care to adults: general internists; family physicians; residents and fellows-in-training; and subspecialists who want to remain current in the field of internal medicine.

Course Location

The Baltimore Marriott Waterfront Hotel is located at 700 Aliceanna Street, Baltimore, MD 21202. For hotel information, call 1-877-212-5752. A special room rate of \$199/per night (plus 15.5% tax) has been arranged for this meeting. Reservations must be made by April 16, 2019 in order to receive this special ACOI discounted room rate. Reservations may be made online at <https://book.passkey.com/go/ACOIJointReview2019>.

Course Directors

Kevin P. Hubbard, DO, MACOI and Scott L. Spradlin, DO, FACOI.

Syllabus

The syllabus included with registration is provided electronically (you will need a lap top or tablet to follow the agenda on site) and includes the following material: Expanded narrative/lecture content, including all information the instructors deem vital to board preparation; replication of key slides; a bibliography of key references and suggested readings; and board-type questions directly relating to each presentation as an aid in board exam preparation. **Those who prefer a printed binder may order one for an additional \$80.**

Early Registration

Register early to ensure a place in this course and to qualify for the early registration discount, which expires on April 16, 2019.

Discounted Fees For Residents

Residents and students receive a \$100 discount off the regular registration fees.

Refunds

A processing fee of \$100 will be charged for cancellations received at any time. Cancellations must be received in writing no later than April 16, 2019 in order to obtain a refund. Fees for registrations cancelled after that date will be applied toward a future ACOI meeting registration, minus the \$100 processing fee.

Accreditation and Credit Designation Statements

The American College of Osteopathic Internists (ACOI) is accredited by the American Osteopathic Association to provide continuing medical education to physicians and has designated this live CME activity for a maximum of 40.75 AOA Category 1A credit.

The American College of Osteopathic Internists is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education for physicians.

The American College of Osteopathic Internists designates this live activity for a maximum of 40.75 *AMA PRA Category 1 Credits*[™]. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

Disclaimer

Participants should be aware that the certifying and recertifying examinations in internal medicine are prepared by the American Osteopathic Board of Internal Medicine, an organization independent from the American College of Osteopathic Internists. Although the general areas of content have been announced, the questions on the examinations are confidential and have NOT been made available to any organizations, societies or schools preparing "board review courses." Physicians considering taking such a course should realize that as a result of this confidentiality, the courses cannot be uniform and cannot purport to anticipate the examinations' actual content.

Official Car Rental

The following discount fares arranged with Hertz are good for May 1-19, 2019. Call 800 654-2240 and refer to **CV#04130013**.

CAR CLASS	DAILY Per Day	WEEKEND Per Day	WEEKLY 5-7 Days
A-ECONOMY	\$39.00	\$19.00	\$169.00
B-COMPACT	\$42.00	\$21.00	\$174.00
C-MID-SIZE	\$45.00	\$23.00	\$184.00
D-STANDARD	\$49.00	\$25.00	\$194.00

CAR CLASS	DAILY Per Day	WEEKEND Per Day	WEEKLY 5-7 Days
F-FULLSIZE 4DR	\$55.00	\$33.00	\$205.00
G-PREMIUM	\$69.00	\$69.00	\$345.00
I-LUXURY	\$89.00	\$89.00	\$399.00
Q4-MIDSIZE SUV	\$62.00	\$62.00	\$299.00
L-STANDARD SUV	\$74.00	\$74.00	\$339.00

CAR CLASS	DAILY Per Day	WEEKEND Per Day	WEEKLY 5-7 Days
R-MINIVAN	\$79.00	\$79.00	\$399.00
U-CONVERTIBLE	\$75.00	\$75.00	\$413.00
T-LARGE SUV	\$115.00	\$115.00	\$549.00
T6-PRM XCAP SUV	\$130.00	\$130.00	\$715.00

ACOI 2019 BOARD REVIEW COURSE AGENDA

WEDNESDAY, MAY 8

6:30-7:00 am	Continental Breakfast
Hematology	
7:00-7:30 am	Benign Hematology - <i>Cheryl D. Kovalski, DO, FACOI</i>
7:30-8:00 am	Disorders of Hemostasis - <i>Cheryl D. Kovalski, DO, FACOI</i>
8:00-8:30 am	Basic Oncology, Markers, Genes - <i>Kevin P. Hubbard, DO, MACOI</i>
8:30-9:00 am	Clinical Oncology, Physical Diagnosis, Systemic Manifestations, Chemotherapy - <i>Kevin P. Hubbard, DO, MACOI</i>
9:00 - 9:30 am	Leukemia and Lymphoma - <i>Cheryl D. Kovalski, DO, FACOI</i>
9:30 - 9:45 am	Coffee Break
Oncology	
9:45-10:15 am	Oncology Palliative Care Session – <i>Kevin P. Hubbard, DO, MACOI</i>
10:15-10:45 am	Myelodysplastic Syndrome & Plasma Cell Dyscrasias <i>Cheryl D. Kovalski, DO, FACOI</i>
10:45-11:15 am	Cancer in Men-Prostate, Testes and Kidney - <i>Kevin P. Hubbard, DO, MACOI</i>
11:15-11:45 am	Cancer in Women - Breast, Uterus and Ovary - <i>Kevin P. Hubbard, DO, MACOI</i>
11:45-12:00 pm	Hem/Onc Board Review Questions - <i>Kevin P. Hubbard, DO, MACOI and Cheryl D. Kovalski, DO, FACOI</i>
12:00 pm-1:00 pm	Lunch Break
Endocrinology	
1:00-1:30 pm	Parathyroid Disease; Calcium Metabolism; Osteoporosis <i>Jack L. Snitzer, DO, FACOI</i>
1:30- 2:00 pm	Disease of the Thyroid - <i>John R. Sutton, DO, FACOI</i>
2:00-2:30 pm	Endocrine Pancreas; Diabetes Mellitus; Metabolic Syndrome <i>Jack L. Snitzer, DO, FACOI</i>
2:30-3:00 pm	Endocrine Board Review Questions - <i>Drs. Snitzer and Sutton</i>
3:00-3:15 pm	Coffee Break
3:15-3:45 pm	Disease of the Adrenals and Gonads - <i>John R. Sutton, DO, FACOI</i>
3:45-4:15 pm	Pituitary and Related Disorders - <i>Jack L. Snitzer, DO, FACOI</i>
4:15-4:45 pm	Interactive Identification Optic Fundi and Endocrine Physical Findings <i>John R. Sutton, DO, FACOI</i>
4:45-5:00 pm	Endocrine Board Review Questions - <i>Drs. Sutton and Snitzer</i>

THURSDAY, MAY 9

6:30 - 7:00 am	Continental Breakfast
Rheumatology	
7:00-7:30 am	Rheumatoid Arthritis - <i>Robert L. DiGiovanni, DO, FACOI</i>
7:30-8:00 am	Vaculitides and Osteoarthritis - <i>Robert L. DiGiovanni, DO, FACOI</i>
8:00-8:30 am	Scleroderma, Lupus and Dermatomyositis - <i>Howard L. Feinberg, DO, FACOI</i>
8:30-9:00 am	Spondyloarthropathies and Reactive Arthritis - <i>Robert L. DiGiovanni, DO, FACOI</i>
9:00-9:15 am	Coffee Break
9:15-9:45 am	Gout and Pseudogout-Crystal Arthropathies - <i>Howard L. Feinberg, DO, FACOI</i>
9:45-10:15 am	Osteomyelitis, Septic Arthritis, Lyme Arthritis, Rheumatic Fever & AID Arthritis <i>Howard L. Feinberg, DO, FACOI</i>
10:15-10:30 am	Joint Fluid Analysis - <i>Drs. Feinberg and DiGiovanni</i>
10:30-10:45 am	Rheumatology Board Questions - <i>Drs. Feinberg and DiGiovanni</i>
Infectious Diseases	
10:45-11:15 am	Clinical Microbiology - <i>Gerald W. Blackburn, DO, MACOI</i>
11:15-11:45 am	Pneumonia & TB - <i>MarkAlain Dery, DO, FACOI</i>
11:45 am-12:45 pm	Lunch Break
12:45-1:15 pm	Endocarditis & Prophylaxis; Infectious GI Diseases <i>Gerald W. Blackburn, DO, MACOI</i>
1:15-1:45 pm	CNS Infections - <i>MarkAlain Dery, DO, FACOI</i>
1:45-2:15 pm	HIV/AIDS - <i>Gerald W. Blackburn, DO, MACOI</i>
2:15-2:45 pm	Hemorrhagic Fevers & Fevers of Unknown Origin - <i>MarkAlain Dery, DO, FACOI</i>
2:45-3:00 pm	Infectious Disease Board Review Questions - <i>Drs. Blackburn and Dery</i>
Allergy/Immunology	
3:00-3:15 pm	Coffee Break
3:15-3:45 pm	Clinical Basis of the Immune Response and the Compliment Cascade - <i>Bryan L. Martin, DO, FACOI</i>
3:45-4:15 pm	Asthma - <i>Jonathan M. Horbal, DO, FACOI</i>
4:15-4:45 pm	Systemic Allergic Disorders, Immunodeficiency and Immunoglobulin Disorders - <i>Bryan L. Martin, DO, FACOI</i>
4:45-5:15 pm	Food, Sinusitis, Rhinitis and Drug Allergy - <i>Jonathan M. Horbal, DO, FACOI</i>
5:15-5:45 pm	Allergic Skin Disorders and HAE - <i>Bryan L. Martin, DO, FACOI</i>
5:45-6:00 pm	Allergy/Immunology Board Review Questions - <i>Drs. Martin and Horbal</i>
6:00-7:15 pm	Welcome Reception

FRIDAY, MAY 10

6:30-7:00 am	Continental Breakfast
Pulmonary Diseases	
7:00-7:30 am	Respiratory Failure, Ventilator Therapy and PFT - <i>Thomas F. Morley, DO, MACOI</i>
7:30-8:00 am	Chronic Obstructive Lung Disease - <i>Amita Vasoya, DO, FACOI</i>
8:00-8:30 am	Restrictive Lung Disease - <i>Thomas F. Morley, DO, MACOI</i>
8:30-9:00 am	Lung Cancer and Paraneoplastic Syndromes - <i>Amita Vasoya, DO, FACOI</i>
9:00-9:15 am	Coffee Break
9:15-9:45 am	Pulmonary Thromboembolism - <i>Thomas F. Morley, DO, MACOI</i>
9:45-10:15 am	Unknown PFTs, Chest X-rays - <i>Drs. Vasoya and Morley</i>
10:15-10:45 am	Sleep Medicine Case Studies – <i>Timothy J. Barriero, DO, FACOI</i>
10:45-11:15 am	Critical Care Case Studies – <i>Timothy J. Barriero, DO, FACOI</i>
11:15-11:45 am	Pulmonary/Sleep/CCM Board Review Questions - <i>Drs. Barriero, Morley and Vasoya</i>
11:45 am-1:00 pm	Lunch Break
Nephrology	
1:00-1:30 pm	Acute Kidney Injury and Chronic Kidney Disease - <i>Mark D. Baldwin, DO, FACOI</i>
1:30-2:00 pm	Tubulointerstitial Disease - <i>Mark D. Baldwin, DO, FACOI</i>
2:00-2:30 pm	Glomerulonephritis-Diagnosis and Management - <i>John E. Prior, DO, FACOI</i>
2:30-2:45 pm	Nephrology Board Review Questions - <i>Drs. Baldwin and Prior</i>
2:45-3:00 pm	Coffee Break
3:00-3:30 pm	Case Studies of Electrolyte Disorders - <i>Mark D. Baldwin, DO, FACOI</i>
3:30-4:00 pm	Case Studies of Acid/Base Disorders - <i>John E. Prior, DO, FACOI</i>
4:00-4:30 pm	Hypertension - <i>John E. Prior, DO, FACOI</i>
4:30-4:45 pm	Nephrology Board Review Questions - <i>Dr. Prior and Baldwin</i>

SATURDAY, MAY 11

6:30-7:00 am	Continental Breakfast
Cardiology	
7:00-7:30 am	Cardiac Risk Factors and Noninvasive Cardiac Diagnosis-EKG, Echo, et al <i>Martin C. Burke, DO, FACOI</i>
7:30-8:15 am	Valvular and Congenital Heart Disease – <i>Robert Bender, DO, FACOI</i>
8:15-8:30 am	Cardiomyopathies – <i>Martin C. Burke, DO, FACOI</i>
8:30-9:00 am	Diagnosis of Peripheral Arterial Diseases – <i>Robert Bender, DO, FACOI</i>
9:00-9:15 am	Cardiology Board Review Questions - <i>Drs. Burke and Bender</i>
9:15-9:30 am	Coffee Break
9:30-10:00 am	Management of Chronic Coronary Syndromes – <i>Robert J. Chilton, DO, FACOI</i>
10:00-10:30 am	Congestive Heart Failure – <i>Martin C. Burke, DO, FACOI</i>
10:30-11:00 am	Acute Coronary Syndromes – <i>Robert Bender, DO, FACOI</i>
11:00-11:30 am	Management of Cardiac Arrhythmias and Conduction Disorders <i>Robert J. Chilton, DO, FACOI</i>
11:30-11:45 am	Cardiology Board Questions – <i>Drs. Burke, Chilton and Bender</i>
11:45 am-1:00 pm	Lunch Lecture (Medicine for the Boards – <i>Scott L. Spradlin, DO, FACOI</i>)
Gastroenterology	
1:00-1:30 pm	Disease of the Esophagus - <i>Lindsay Mohrhardt, DO</i>
1:30-2:00 pm	Disease of the Stomach - <i>Jack D. Bragg, DO, MACOI</i>
2:00-2:30 pm	Disease of the Small Intestine - <i>Lindsay Mohrhardt, DO</i>
2:30-3:00 pm	Disease of the Colon - <i>Jack D. Bragg, DO, MACOI</i>
3:00-3:15 pm	GI Board Review Questions - <i>Drs. Bragg and Speaker Mohrhardt</i>
3:15-3:30 pm	Coffee Break
3:30-4:00 pm	Disease of the Pancreas - <i>Jack D. Bragg, DO, MACOI</i>
4:00-4:30 pm	Liver Diseases - <i>Lindsay Mohrhardt, DO</i>
4:30-5:00 pm	GI Surgery Review: Indications and Complications – What to Look For <i>Lindsay Mohrhardt, DO</i>
5:00-5:30 pm	Cancer of the GI Tract, Liver and Pancreas - <i>Jack D. Bragg, DO, MACOI</i>
5:30-5:45 pm	GI Board Review Questions - <i>Drs. Bragg and Mohrhardt</i>

SUNDAY, MAY 12

General Medicine	
7:00-7:30 am	Acute and Chronic Neuropathies: Diagnosis and Management <i>Scott L. Spradlin, DO, FACOI</i>
7:30-8:00 am	The Role of Genetic Testing and Counseling for the General Internist <i>Robert Hasty, DO, FACOI</i>
8:00-8:30 am	Headache, Motor Disorders and Amyotrophies - <i>Scott L. Spradlin, DO, FACOI</i>
8:30-9:00 am	Nutritional Disorders and Their Management - <i>Robert Hasty, DO, FACOI</i>
9:00-9:15 am	General Medicine Board Review Questions - <i>Drs. Spradlin and Hasty</i>
9:15-9:30 am	Coffee Break
9:30-10:00 am	Cutaneous Manifestations of Systemic Disease - Part 1 - <i>Lloyd Cleaver, DO</i>
10:00-10:30 am	Cutaneous Manifestations of Systemic Disease-Part 2 - <i>Lloyd Cleaver, DO</i>
10:30-11:00 am	Diagnosis of Stroke & Multiple Sclerosis - <i>Scott L. Spradlin, DO, FACOI</i>
11:00-11:30 am	Drug Caused Side-Effects and Disorders - <i>Lloyd Cleaver, DO</i>
11:30-11:45 am	General Medicine Board Review Questions - <i>Drs. Cleaver and Spradlin</i>
11:45 am-12:00 pm	Questions and Wrap Up

2019 ACOI INTERNAL MEDICINE REVIEW COURSE REGISTRATION FORM

Baltimore Marriott Waterfront Hotel • May 8 - 12, 2019

Registration available online at www.acoi.org/education/cme/board-review-course.html

Full Name			
AOA Number			
Mailing Address			
City		State	Zip
Work Phone	()	Fax Number	()
Home Phone	()	Cell	()
Email Address			
Preferred Name on Badge			
Emergency Contact		Telephone	()
Fees	<input type="checkbox"/> ACOI Member (Registering ON/BEFORE 4/16/19...\$850)	<input type="checkbox"/> ACOI Member (Registering AFTER 4/16/19...\$900)	
	<input type="checkbox"/> Non-Member (Registering ON/BEFORE 4/16/19...\$1025)	<input type="checkbox"/> Non-Member (Registering AFTER 4/16/19...\$1075)	
	<input type="checkbox"/> Resident/Fellow (Registering ON/BEFORE 4/16/19...\$750)	<input type="checkbox"/> Resident/Fellow (Registering AFTER 4/16/19...\$800)	
	<input type="checkbox"/> Printed Syllabus \$80 (Electronic copy provided with registration)	<input type="checkbox"/> *ACOI Generational Advancement Fund \$ _____	<input type="checkbox"/> TOTAL \$ _____
Payment Method	<input type="checkbox"/> Check to ACOI	<input type="checkbox"/> MasterCard	<input type="checkbox"/> Visa
Name on Card			
<input type="checkbox"/> Check here if billing address is same as mailing address listed above. If not, please provide below			
Billing Street			
Billing City		State	Zip
Credit Card Number		Security Code	
Credit Card Exp. Date			
Signature			

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.

NOTE: All registrations must be accompanied by a check for payment in full or appropriate credit card information. A processing fee of \$100 will be charged for cancellations received at any time. In order to obtain a refund, written cancellations must be received by April 16, 2019. No refunds will be made after that date, but registration fees (less \$100 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/donation_form.cgi

PLEASE NOTE: Check here if you plan to stay at the Baltimore Marriott Waterfront Hotel.
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 or by phone, 301 231-8877.

List special requirements here: _____

ACOI 2019 CLINICAL CHALLENGES IN HOSPITAL MEDICINE

Preliminary Agenda

THURSDAY, MAY 9

7:30- 8:00 am
8:00- 8:05 am
8:05- 8:50 am
8:50 - 9:35 am
9:35 - 9:50 am
9:50 - 10:50 am
10:50 - 11:50 am
11:50 am - 12:00 noon
12:00 noon - 1:00 pm
1:00 - 2:00 pm
2:00 - 2:45 pm
2:45 - 3:00 pm
3:00 - 4:15 pm
4:15 - 5:15 pm
5:15 - 5:30 pm
6:00 - 7:15 pm

Continental Breakfast

Welcome - *Rick A. Greco, DO, FACOI*
Potpourri of Guidelines We are Not Following
Misunderstood Lab Values - *Amanda Hayes, DO*

BREAK

Blood Utilization (Will get better title) - *Amanda Hayes, DO*
Dementia and Delirium - *Roberta S. Rose, DO*
Q&A

LUNCH (on your own)

Treating the Parkinson Patient in the Hospital - *Robert S. Rose, DO*
MIPS

BREAK

Quality Improvement - *John B. Bulger, DO, FACOI*
Prognostication
Q&A

Welcome Reception

FRIDAY, MAY 10

7:30 - 8:00 am
8:00 - 8:45 am
8:45 - 9:45 am
9:45 - 10:00 am
10:00 - 11:00 am
11:00 - 11:55 am
11:55 am - 12:00 noon
12:00 noon - 1:00 pm
1:00 - 2:00 pm
2:00 - 3:00 pm

3:00 - 3:15 pm
3:15 - 5:15 pm
5:15 - 5:30 pm

Continental Breakfast

Sepsis Guidelines: What's New? - *MarkAlain Dery, DO, FACOI*
TB: Acute and Latent - *Kenneth Woods, DO*

BREAK

Introduction to MAT: Removing the Stigma - *James H. Berry, DO*
Issues Pertaining to MAT: Addiction in the Hospital - *Patrick Marshalek, MD*
Q&A

LUNCH (on your own)

In the Mind of the Triage Hospitalist - *Christian Greco, DO*
Medical Marijuana: What You Need to Know -
C. Clark Milton, DO, FACOI (invited)

BREAK

Curbside Consultations - *Gerald W. Blackburn, DO, MACOI*
Q&A

SATURDAY, MAY 11

7:30 - 8:00 am
8:00 - 9:00 am
9:00 - 10:00 am
10:00 - 10:15 am
10:15 - 11:00 am
11:00 am - 12:00 noon
12:00 noon - 1:00 pm
1:00 - 2:00 pm
2:00 - 3:00 pm

3:00 - 3:15 pm
3:15 - 4:00 pm
4:00 - 5:00 pm
5:00 - 5:15 pm

Continental Breakfast

Sleep Apnea – What's New? - *Carol E. Ash, DO, FACOI (invited)*
Peer to Peer Conversations: Pitfalls and Hot Buttons

BREAK

Pulmonary Hypertension Update - *Carol E. Ash, DO, FACOI (invited)*
Tele-Medicine: Billing and Opportunities - *Amy M. Meister, DO (invited)*

LUNCH

Diastolic Heart Failure or HFpEF
Why Are My Patients Bleeding? Indications of Cardiac Anticoagulation -
Robert J. Fanning, DO

BREAK

Heart Failure Guideline Updates
Adult Survivors of Congenital Heart Failure - *Saurabh Rajpal, MD*
Q&A

SUNDAY, MAY 12

7:30 - 8:00 am
8:00 - 9:00 am
9:00 - 10:00 am
10:00 - 10:15 am
10:15 - 11:00 am
11:00 - 11:45 am
11:45 am - 12:00 Noon
12:00 Noon

Continental Breakfast

Managing Post - Acute Care
Thoracic Somatic Dysfunction

BREAK

Consult in Maternity
OMM - Hospital-Based Research
Q&A
Closing of Agenda - *Rick A. Greco, DO, FACOI*

A Message for Residency and Fellowship Program Directors

As you advance or maintain your accreditation status with ACGME, ACOI wants to remind you of the critical importance of internal medicine programs achieving Osteopathic Recognition (OR) with ACGME. Programs that achieve OR ensure that the unique principles and practices of the osteopathic medical profession will continue to benefit the entire community of medicine and, most importantly, our patients.

Why should my program apply for Osteopathic Recognition?

- Students want osteopathically-focused training.
- GME programs want the most qualified applicants.
- Hospitals want trainees who provide patient-centered care.

How does Osteopathic Recognition address these needs?

1. Improves **patient care** and reduces **institutional costs**.
 - Improved patient-physician communication (e.g., [empathic, holistic](#)).
 - [Reduction of pain](#) and discomfort, and [improvement of function](#) (*OMT as criteria for non-pharmacologic pain control – Joint Commission*).
 - Explore [alternatives to prescribing medications](#).
 - Decreased length of hospital stays (e.g., [surgery, pneumonia](#)).
 - [Reduced costs](#).
 - Oriented towards “team approach,” which aligns with the “medical home” concept and provides optimal care.
2. Allows physicians and the profession to maintain their **osteopathic distinctiveness**.
 - The existence of osteopathic training programs is the assurance that the profession will continue to grow and thrive.
(e.g., [OMM](#), [OPP](#), [OMT/ileus](#), [Holistic Care](#), [Communication](#))
 - [70% of 3rd year](#) osteopathic medical students (OMS) want an osteopathic focused residency program.
 - Osteopathic principles and practices can be incorporated into all specialties (e.g., cardiology, pulmonology, GI, etc.)
3. Maintains and potentially increases the **number of applicants** while continuing to attract **quality applicants**.
 - Osteopathic students represent [25% of the medical student population](#)
 - [70% of 3rd year](#) OMS want an osteopathic focused residency program
 - An OR program will attract osteopathic and allopathic students, thus [increasing the pool](#) of [qualified applicants](#).

What should you do next? And how can ACOI help?

If you have not started your application for Osteopathic Recognition, **start it today!**

- Much of the information needed for the OR application is the same as the ACGME internal medicine application.
 - Utilize and easily transfer information incorporated in your successful ACGME initial application.
- Assistance is available to you **AT NO COST**
 - ACOI will assist you with your application.
 - Tools and sample evaluation forms.
 - Strategies to address application questions.
 - Free consultation and review services provided by ACOI.
 - For assistance, call **(301) 231-8877** or email Don Nelinson (don@acoi.org).

Government Relations

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CMS sincerely apologizes for any inconvenience this error may have caused.”

Washington Tidbits

The Anatomy of a Government Shutdown

The operations of the federal government can be viewed much like those of the human body in that it is the sum of its many parts, and each part has an effect on the whole. Perhaps, this is nowhere more evident than in the example of the recent modern-day, record-setting partial government shutdown that just ended.

In the early days of our Nation’s history it was not uncommon for federal government departments to spend money before it was appropriated by Congress, or to spend funds that were appropriated for purposes other than those for which the funds were spent. In response, Congress passed the Antideficiency Act in 1870 to prevent the use of “coercive deficiencies” by the executive branch. The Act has been amended over time by both legislation and administrative interpretation, but at its core still prohibits federal agencies from incurring obligations or expanding federal funds in advance or in excess of appropriations, and from accepting voluntary service. Couple this with Article 1, Section 9 of the Constitution, which provides, “No money shall be drawn from the Treasury but in consequence of appropriations made by law,” and the table is set for the possibility of a full or partial shutdown of the federal government and its agencies when the legislative and executive branches differ in spending priorities. The balance of powers in the federal government, much like the symbiotic balance of the systems of the human body, function best when working together.

CME CALENDAR

Future ACOI Education Meeting Dates & Locations

NATIONAL MEETINGS

- 2019 Internal Medicine Board Review Course - May 8-12
- 2019 Clinical Challenges in Hospital Medicine - May 9-12
- 2019 Exploring New Science in Cardiovascular Medicine - May 9-12
- 2019 Congress on Medical Education for Residency Trainers - May 10-11
Baltimore Marriott Waterfront Hotel, Baltimore, MD
- 2019 Annual Convention & Scientific Sessions
Oct 30- Nov 3 JW Marriott Desert Ridge Resort & Spa, Phoenix, AZ
- 2020 Internal Medicine Board Review Course - April 29-May 3
- 2020 Clinical Challenges in Hospital Medicine - April 30-May 3
- 2020 Exploring New Science in Cardiovascular Medicine - May 1-3
- 2020 Congress on Medical Education for Residency Trainers - May 1-2
Renaissance Orlando at Sea World Resort, Orlando, FL
- 2020 Annual Convention & Scientific Sessions
Oct 21-25 Marco Island Marriott Beach Resort, Marco Island, FL
- 2021 Annual Convention & Scientific Sessions
Sept 29-Oct 3 Marriott Marquis Hotel, San Francisco, CA

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.

Tentative 2019 Certifying Examination Dates & Deadlines

Internal Medicine Certifying Examination

Computerized Examination 300 Sites Nationwide

September 3-5, 2019 - *Application Deadline: June 1 - Late Deadline: July 1*

Internal Medicine Recertifying Examination

Computerized Examination 300 Sites Nationwide

September 3-5, 2019 - *Application Deadline: June 1 - Late Deadline: July 1*

Internal Medicine Recertifying with a Focus in Hospital-Based Medicine Examination

Computerized Examination 300 Sites Nationwide

September 3-5, 2019 - *Application Deadline: June 1 - Late Deadline: July 1*

Subspecialty Certifying Examinations

Computerized Examination 300 Sites Nationwide

August 22-24, 2019 - *Application Deadline: June 1 - Late Deadline: July 1*

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

Subspecialty Recertifying Examinations

Computerized Examination 300 Sites Nationwide

August 22-24, 2019 - *Application Deadline: June 1 - Late Deadline: July 1*

- 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; 312 202-8274.

Contact the AOBIM at admin@aobim.org for deadlines and dates for the Allergy, Sports Medicine, Pain Medicine, Undersea/Hyperbaric Medicine and Correctional Medicine examinations.

Board Review Course

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are recognized for their ability as teachers and clinicians. A detailed syllabus is provided to registrants. Immediately following each day's lectures, designated faculty from each subspecialty area are available for a question and answer period.

This postgraduate course is appropriate for physicians who provide personal care to adults: general internists; family physicians; residents and fellows-in-training; and subspecialists who want to remain current in the field of internal medicine. Complete registration information is available in this newsletter and at www.acoi.org.

This activity is certified for both AOA Category 1A CME Credit and for AMA PRA Category 1 Credit™