

From President Lightfoot It Is Time to Think Strategically



As the American College of Osteopathic Internists moves into the future, there are a number of challenges facing us. The transition to

a single GME accreditation system has created the need for us to think creatively about what the College will look like in 2020 and beyond. Fortunately, the individuals who have volunteered to serve as leaders on the Board of Directors and our staff are committed and dedicated to assuring that the ACOI will be sustainable for years to come. The time is now to think strategically and implement change where necessary. We are fortunate to have a very diverse Board, representing many segments of the membership. Most importantly, the Board is unswerv-

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Elections Set for October 4 Board of Directors Nominations Announced



The ACOI Nominating Committee has announced the slate of candidates for election at the Annual Meeting of Members scheduled for Sunday, October 4 in Tampa, FL. The Committee has nominated John R. Sutton, DO, for President-Elect and Martin C. Burke, DO, for Secretary-Treasurer. Under the College's Bylaws, this year's President-Elect, John B. Bulger, DO, MBA, will be inaugurated as President for the 2015-2016 year at the conclusion of the elections.

The Nominating Committee also approved four candidates for election to the Board of Directors. Incumbents **Michael A. Adornetto, DO, MBA, Robert A. Cain, DO,** and **Mitchell D. Forman, DO** are nominated for new three-year terms. **Robert T. Hasty, DO** completes the slate.

John B. Bulger, DO

John B. Bulger, DO, MBA, FACOI of Danville, PA is a board-certified general internist. He is the chief medical officer for the Geisinger Health Plan in Danville. He is the current President-Elect of the ACOI. Dr. Bulger has served on the Council on Education and Evaluation since 2002 and is its chairman. He also chairs the Continuing Medical Education Committee and serves on the Executive Committee. Dr. Bulger chaired the annual convention in 2010. He has been an Active member of the ACOI since 1995. He completed his internal medicine residency training at the Philadelphia College of Osteopathic Medicine. He received the degree of Fellow in 2002 and was first elected to the Board in 2005.

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ACOI's 75th Anniversary Celebration Gets Underway



Osteopathic internists and subspecialists from across the country will gather September 30 through October 4 in Tampa, Florida to participate in the 2015 Annual Convention and Scientific Sessions. In addition to providing attendees

with an outstanding array of didactic sessions and interactive learning opportunities, this gathering of internists will mark the beginning of the ACOI's year-long 75th Anniversary celebration.

The California division of the American Society of Osteopathic Internists reorganized in 1941 to form the American College of Osteopathic Internists. In the 75 ensuing years, there has been a great deal of change in the science and practice of medicine. A constant, however, has been the commitment of ACOI members to their patients and the College. Because of this commitment, the ACOI has continued to grow and evolve to meet the needs of its members.

The ACOI will begin in Tampa the celebration of the members and events that have made the College what it is today. The year-long journey of commemoration will conclude at the 2016 convention in San Francisco. To assist in this celebration, you are encouraged to share any stories, photos or other information by contacting the ACOI directly at 75thanniversary@acoi.org.

2015 Convention Materials Inside!



American College of Osteopathic Internists

In Service to All Members; All Members in Service

MISSION

The mission of the ACOI is to advance the practice of osteopathic internal medicine. Through excellence in education, advocacy, research and the opportunity for service, the ACOI strives to enhance the professional and personal development of the family of osteopathic internists.

VISION

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

VALUES

To accomplish its vision and mission, the ACOI will base its decisions and actions on the following core values: LEADERSHIP for the advancement of osteopathic medicine EXCELLENCE in programs and services INTEGRITY in decision-making and actions PROFESSIONALISM in all interactions SERVICE to meet member needs

2014-2015 OFFICERS

Judith A. Lightfoot, DO, FACOI jlightfoot@gsida.org	President
John B. Bulger, DO, MBA, FACOI jbulger@geisinger.edu	President-Elect
John R. Sutton, DO, FACOIsuttonendo@msn.com	Secretary-Treasurer
Rick A. Greco, DO, FACOI donotsmoke@msn.com	Immediate Past-President
Robert G. Good, DO, FACOIrobert.good@carle.com	Past-President

2014-2015 BOARD of DIRECTORS

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Letter from the President

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ing in its commitment to act together in the best interests of our members.

Here are a few pertinent issues that the College needs to address now:

- 1) All of our existing residency programs should maintain an Osteopathic focus as they transition to ACGME accreditation. Some programs may struggle with how to implement this, or may need help in advocating for this within their institutions. The ACOI is creating tools to assist programs in this regard, including a workshop that will be held during the 2015 Convention.
- 2) How does the Osteopathic philosophy, including Osteopathic Principals and Practice and Osteopathic Manipulative Medicine, manifest itself in our practices?
- 3) How can training program directors, whether in an IM or subspecialty program, collaborate with OMM departments on which techniques can be applied to their disciplines? Collaboration on this level can lead to publishable data which would benefit our patients, medical community and the public at large.
- 4) What distinguishes our programs from others?
- 5) How do we continue to engage and meet the needs of our medical students, interns, residents and fellows with a refreshing approach to internal medicine? Our educators are the leaders of our College and we strive to be the leaders of a great profession with all the challenges ahead.

These are only a few of the items on our agenda that I would like to see addressed as we move forward. I recognize that change is hard, but we have to embrace change if we are going to survive. Our past record of success has been great. We have always strived to live our vision and fulfill our mission. On so many levels, internists have been the leaders in providing quality programs, training future generations of osteopathic physicians, advocating and mentoring, identifying and developing young leaders in our profession. The ACOI has tried to provide a platform for members to raise concerns and grasp opportunities for leadership and change. We will continue to engage our members, lend support to those who have been selected to represent our profession and College on the ACGME and its Board and committees. I can't stress enough how crucial this is for sustainability.

These are only a few items mentioned here; however, there are a many more issues on the table which will be addressed by our Board and members as we transition and strategically place ourselves to see beyond what we see today. Our vision and mission and ability to work with others only can enhance our growth and future. I thank each and every one of you for your support and commitment to the Osteopathic profession and our College.

- Jueril



Supreme Court Upholds Critical Component of ACA

The U.S. Supreme Court upheld a critical piece of the Affordable Care Act (ACA) on June 25. In a 6-3 decision, the Court found in King v. Burwell that the language of the ACA does not preclude the payment of subsidies to people who purchase health insurance coverage through federally-sponsored exchanges. At issue was a sentence in the ACA that provides that an individual's tax credit is determined based on the cost of insurance purchased on an "Exchange established by the state."

In writing for the majority and addressing the ambiguity of the sentence in question, Chief Justice Roberts stated, "The Court nevertheless must do its best, bearing in mind the fundamental canon of statutory construction that the words of the statute must be read in their context and with a view to their place in the overall statutory scheme." Chief Justice Roberts went on to conclude, "Those credits are necessary for the Federal Exchanges to function like their State Exchange counterparts, and to avoid the type of calamitous result that Congress plainly meant to avoid." This decision protects subsidy payments to nearly 6.4 million low-income Americans in 34 states.

While the decision all but ends the possibility of the ACA being repealed through judicial means, it is certain to remain a topic for legislators and candidates. In fact, leaders in both the House and Senate, as well as presidential candidates, have publicly stated their intention to continue to work to repeal the ACA in its entirety. Further, it is possible that Congress will attempt to impact the ACA through the appropriations process. The ACOI will continue to monitor developments impacting this law.

New Medicare Program Aims to Cut Cardiovascular Disease

The Centers for Medicare and Medicaid Services (CMS) unveiled the Million Hearts Cardiovascular Disease Risk Reduction payment model, which will allow participating healthcare providers to work with high-risk Medicare beneficiaries in an effort to reduce the absolute risk for heart disease or stroke. The payment model, created under the ACA, will operate for five years and aims to enroll over 300,000 Medicare beneficiaries and 720 practices varying in size and patient mix. Under the model, healthcare providers will work with each patient to develop a personalized risk modification plan targeting specific risk factors. Providers will be paid for reducing the patients' risks. Applications will be accepted through September 4. Additional information is available at *http://www.cms.gov/Newsroom/MediaReleaseDatabase/Fact-sheets/2015-Fact-sheets-items/2015-05-28. html.*

House Committee Approves Legislation Advancing Personalized Care

The House Energy and Commerce Committee unanimously approved the "21st Century Cures Act." This legislation is intended to modernize and personalize healthcare, support research and streamline the healthcare system to deliver better faster cures to patients. While the legislation enjoys significant bi-partisan support, action by the full House has yet to occur. House leadership indicated that action is possible when it returns from recess. Similar legislation has not been considered in the Senate.

Physician Medicare Payment Data Released

CMS released hospital charge and physician payment data for 2013 on June 1. According to CMS, "Data transparency facilitates a vibrant healthcare data ecosystem, promotes innovation and leads to better informed and more engaged healthcare consumers." CMS plans to continue to release data on an annual basis. The released information includes data on 950,000 distinct healthcare providers and represents \$90 billion in Medicare payments. In an effort to allow for greater analysis of the data set, the 2013 data released includes separate totals for medical services and drug services in addition to totals for all services. Concerns continue to be raised about the possibility of errors in the data, the lack of risk adjustment, and the inability to account for patient mix and demographics, among other things.

House Approves Repeal of IPAB

The House approved legislation to repeal the provision of the Affordable Care Act establishing the Independent Payment Advisory Board (IPAB). The IPAB was created under the ACA to develop proposals to reduce the percapita rate of growth in Medicare spending. While this section of the ACA has been subject to bi-partisan criticisms, as well as concerns raised by the physician community, the White House recently indicated that the President will veto the legislation if it presented to him for his signature. The bill approved by the House has been referred to the Senate Finance Committee where no action has been scheduled. The ACOI will continue to monitor this matter closely.

Medicare At-Home Care Demonstration for Chronically Ill Shows Promise

According to CMS, a new demonstration program allowing Medicare beneficiaries with chronic conditions to receive comprehensive primary care services at home saved over \$25 million while meeting quality benchmarks. The three-year Independence at Home Demonstration Program was created under the ACA and includes 17 participating practices. Nine of the practices will receive incentive payments totaling \$11.7 million for reducing Medicare costs while meeting quality goals. According to CMS, the demonstration program also saved an average of \$3,070 per Medicare beneficiary. As a result of the early success of this program, it is likely to gain additional attention in the future as a means to improve care while reducing costs under the Medicare program.

New CBO Report Examines Cost of Repealing ACA

A new report released by the nonpartisan Congressional Budget Office (CBO) states that repealing the ACA in its entirety would increase the federal budget deficit by \$353 billion over the next 10 years. Further, the report finds that a repeal of the ACA would raise Medicare spending while reducing health insurance subsidies, costs for Medicaid and coverage for poor children. In addition, the report says that a repeal of the ACA would result in an additional 19 million uninsured people in 2016 and more than 24 million by 2020. Finally, the report notes

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

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

When Saving Time Becomes Expensive

Love them or hate them, electronic health records (EHRs) are now an integral part of the health care delivery system. Gone are the days when patient records had to be deciphered because of legibility issues. We now have pages and pages of very legible notes on a patient, but caution must be exercised in how you use the tools available to you.

A 2013 Office of Inspector General (OIG) report reviewed the Health and Human Services' (HHS) efforts to promote EHR adoption and stated that HHS "focused largely on developing criteria, developing meaningful use and administering incentive payments. It gave less attention to the risks EHRs may pose to the program integrity of federal health care programs." As a result, the OIG raised questions about what actions EHR software allows physicians to take and the potential impact on program integrity

Phrases like "note bloat" have been created to represent some of the lengthy notes seen in patients' charts. The use of copy and paste or cloning frequently leads to these lengthy and sometimes meaningless patient notes. While saving time, notes created with recycled text can create problems for both the physician and the patient. Repetitive or excessive notes can lead providers to lose confidence in the note all together. When physician's orders for a patient are based on information that may not be current, or are inaccurate, consequences can occur for both the patient and the physician.

Studies indicate that the use of cut and paste tools is significant. According to a 2013 report by the American Health Information Management Association, 74 to 90 percent of physicians use the copy and paste function in their EHRs. Further, the study found that between 20 and 78 percent of physician notes are copied text. Another study from Case Western Reserve University School of Medicine in 2012 showed 82 percent of progress notes created by medical residents contained 20 percent or more of copied and pasted material from patient records. In addition, 74 percent of progress notes created by attending physicians contained 20 percent or more of copied text. These bad habits are being passed on to our new physicians. The number one response I get from physicians on this topic when asked about the use of cut and paste tools is that they do it due to time constraints. The practice may save a little time, but could be very costly.

Payers are beginning to take notice. They have analyzed the situation and come to the conclusion that cut and pasted notes may show work that was not done. For example, cloning the exam section allows for a physician to introduce or "carry

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Member Milestones



Thomas A. Cavalieri, DO, FACOI, of Stratford, NJ, has been appointed by U.S. Department of Education Secretary Arne Duncan to serve on the National Com-

mittee on Foreign Medical Education and Accreditation (NCFMEA). Dr. Cavalieri, who is the Dean of Rowan University School of Osteopathic Medicine, will join the other 10 appointed members to evaluate the standards used by foreign countries to accredit medical schools and determine whether those standards are comparable to standards used to accredit medical schools in the U.S. Dr. Cavalieri is an internist and gerontologist who is a past president of the ACOI.



ACOI member Lee Peter Bee, DO, FACOI, was interviewed in a recent edition of FiercePracticeManagement, on how he has successfully

integrated inexpensive technology into his private practice with great results for the practice and its patients. Dr. Bee is a general internist in Sesser, IL. The article can be viewed here: http://www. fiercepracticemanagement.com/story/ how-integrated-technology-can-driveprivate-practice-success/2015-06-17.



ACOI member Augustine L. Perrotta, DO, MACOI, of Bloomfield Hills, MI, has authored a new book. "A View from the Inside," contains 15 medically-oriented short

vignettes written from the perspective of an internist as a tribute to the osteopathic profession. The non-fiction chapters are about public and private personalities, such as Babe Ruth, Ezzard Charles, Doc Holiday and others, and recount Dr. Perrotta's connection to them. Additional information can be found at *www.aviewfromtheinside.net*.

Board Nominations

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John R. Sutton, DO



Martin C. Burke, DO









Robert A. Cain, DO

Robert T. Hasty, DO

Mitchell D. Forman, DO, FACOI, is Professor of Medicine and Dean of Touro University, Nevada, College of Osteopathic Medicine in Henderson, Nevada. He is board-certified in internal medicine and rheumatology and has been an Active ACOI member since 1990. Dr. Forman received the degree of Fellow in 1999. He is a founding fellow of the American College of Rheumatology. Dr. Forman has served on the Ethics Committee, including two years as chairman. He continues to see patients in addition to his duties at the school. Dr. Forman was first elected to the Board of Directors in 2009.

Robert T. Hasty, DO, FACOI is Vice President of Medical Education, Southeastern Health and Regional Associate Dean at the Campbell University-Jerry M. Wallace School of Osteopathic Medicine in Buies Creek, NC. He is a graduate of the Nova Southeastern University College of Osteopathic Medicine and completed his internal medicine residency at Mount Sinai Medical Center in Miami, FL. Dr. Hasty completed an AOA Health Policy Fellowship in 2006-07. He has served on the ACOI CME Committee and as a member of the ACOI Council on Education and Evaluation. He chaired or co-chaired the program at the Annual Trainers' Congress for the past five years. He was appointed this year as a member of the ACGME Osteopathic Principles Committee. Dr. Hasty received his ACOI Fellowship in 2007 and has been an Active member of the College since 2004.

John R. Sutton, DO, FACOI, is an endocrinologist practicing in Carson City, Nevada. He has been an Active ACOI member since 1994 and received the degree of Fellow in 1999. Dr. Sutton is a graduate of Kirksville College of Osteopathic Medicine. He completed his internal medicine residency at Garden City Hospital in Garden City, Michigan, and an endocrinology fellowship at Bi-County Community Hospital in Warren, Michigan. Dr. Sutton is a past chair of the endocrinology subspecialty section and has provided numerous lectures at the annual board review course and conventions. He serves on Executive Committee and chairs the Practice Management and Professional Development Committee. He is Secretary-Treasurer this year. He was first elected to the Board of Directors in 2007.

Martin C. Burke, DO, FACOI is a board-certified cardiologist practicing in Chicago. He is Professor of Medicine at the Pritzker School of Medicine of the University of Chicago and was the first osteopathicly-trained internist to receive such an appointment there. Dr. Burke completed an electrophysiology fellowship at the University of Chicago, following his internal medicine and cardiology training at the Chicago College of Osteopathic Medicine. Dr. Burke is chairman of the ACOI Development Committee and is an at-large member of the Executive Committee. He has chaired and served as education coordinator of the Cardiology Subspecialty Section. He chaired the annual convention program in 2014. Dr. Burke is involved in clinical research and has served as an editorial consultant for the Journal of the American College of Cardiology and other peer-reviewed journals. He has been an Active member of the ACOI since 1995 and achieved the degree of Fellow in 2001. Dr. Burke was first elected to the Board of Directors in 2008.

Michael A. Adornetto, DO, MBA, FACOI, is a board-certified general internist with a private practice in Westlake, Ohio. A graduate of the Ohio University College of Osteopathic Medicine, Dr. Adornetto completed a combined internal medicine/pediatrics residency at the Cleveland Clinic Foundation in 1994. He is president of the West Shore Primary Care Association and was the founding program director of the osteopathic internal medicine residency at St. John Medical Center, Westlake. He was awarded the degree of Fellow in 2006 and was first elected to the Board of Directors in 2011.

Robert A. Cain, DO, FACOI is a board certified internist and pulmonologist in Powell, OH. He is the Associate Dean for Graduate Medical Education at the Ohio University Heritage College of Osteopathic Medicine in Athens. Dr. Cain has broad experience in medical education, including service on the ACOI Council on Education and Evaluation. He is the Chair of the ACGME's Osteopathic Principles Committee. He was instrumental in developing the ACOI's Path to Mastery Curriculum for internal medicine residencies. Dr. Cain also has served on the AOA's Council on Postdoctoral Training and was the Director of Medical Education and internal medicine residency program director at Grandview Hospital in Dayton, OH. Dr. Cain has been an Active member of the ACOI since 1994 and received the degree of Fellow in 2001.

The ACOI Bylaws provide a mechanism for the nomination of other candidates. Any Active member of the ACOI may nominate other qualified candidates by submitting the nomination to the Executive Director. Such nominations must be supported by the signatures of 30 Active members of the College; they must also include a brief statement of qualifications and must be received no later than 30 days prior to the date of the election. Further information is available from the Executive Director.

The Nominating Committee this year is chaired by Rick A. Greco, DO. Also serving are Annette T. Carron, DO and Joanne Kaiser-Smith, DO.

ACOI Members Teaching the Next Generation of Osteopathic Physicians

(During the past academic year, ACOI sponsored 29 Visiting Professor lectures, the largest number ever, thanks in part to contributions from its members! Here are some photographs and reflections from ACOI Visiting Professors and internal medicine club leaders..)

"The ACOI provides a great opportunity to meet with Osteopathic Internal Medicine Leaders in practice. As a sub-specialist, I can demonstrate depth of education, and how far an osteopathic medical student can go in life. Through the Visiting Professor program, the ACOI can put an active profession in touch with student doctors at the start of their careers." John R. Sutton, DO, FACOI

"I want to thank the ACOI for all the opportunities and support they have given us. Thanks to Dr. Sutton and our other extraordinary speakers, interest in our SOIMA chapter has soared, making us one of the largest clubs on campus. Your support has helped us find physicians from nearly







every internal medicine specialty, allowing us to host an average of two events per month.

Nick Musso, Kirksville College of Osteopathic Medicine

"Being part of the ACOI Visiting Professor has been a tremendous experience for me over the years. It has enabled me to travel across the country and meet the emerging leaders of our profession. I believe in the ACOI and the way it welcomed me as a student and resident many years ago. Therefore, I wanted to reach out to students and provide that welcoming hand into all that being an Internist has to offer. I see the program as a way to connect to students early in their careers and explore with them all the opportunities available to them through Internal Medicine." *Marianne M. Holler DO, FACOI*

"As medical students, we sit day after day learning about clinical presentations, diagnoses and treatments. We often forget to pay attention to one of the most important aspects of being a physician - communication. The students of Philadelphia College of Osteopathic Medicine – Georgia Campus were fortunate enough to have Dr. Marianne M. Holler present her lecture "Addressing Code Status: A Guide to Practical Conversations. This lecture provided insight on how we can develop skills to become better communicators, which will, in turn, allow us to become better physicians." Nikesh Patel, Philadelphia College of Osteopathic Medicine - Georgia campus

Photos:

Top; University of Pikeville Kentucky College of Osteopathic Medicine students with Visiting Professor Kenneth P. Hubbard, DO (center)

Middle: Scott L. Girard, DO, FACOI (left) visiting Campbell University School of Osteopathic Medicine

Bottom: Students at VCOM with Annette T. Carron, DO, FACOI (in red)

the ethical PRACTICE

In this ACOInformation feature, members of the Ethics Committee present a case study featuring a potential ethical conflict, followed by a discussion of the ethical issues involved. Reader comments are welcome and should be submitted to Brian J. Donadio at bjd@acoi.org. This month's case is submitted by Jack D. Bragg, DO, FACOI, President, ACOI Board of Directors, and a member of the ACOI Ethics Committee.

- 1. A physician is asked on his Facebook page about a particular drug treatment for Crohn's disease. The individual making the inquiry is a friend of the doctor's receptionist and not the doctor's patient. The physician likes being of help to people so he freely advises the lady that this particular medication wouldn't be the best choice for her.
- 2. Again through a social media venue a doctor answers a question posed to her regarding the best site on the web for information about her son's seizure disorder. The doctor obliges by referring her to WebMD.
- 3. In an attempt to make his professional web site look more attractive a physician includes a recent picture he got off of the internet that involves his favorite professional sports team.
- 4. After a difficult day in clinic a doctor vents his frustrations to his friends by Twitter regarding "some of the dumbest diabetes patients in the world" and "especially the woman who works at the newspaper office" who can't seem to get her insulin dose correct.

Most physicians can see themselves participating in one or more of the above scenarios at some time to one degree or another. With social media being a recent phenomenon little thought has been given to the professionalism aspect of this type of communication by most of us. However the rules that apply to our daily encounters with patients whether in the office, hospital or by phone apply to social media as well and serious errors in judgment have been made by several without realizing this fact.

According to a recent article on Medscape The University of Cincinnati Medical Center was named as a defendant after several of its employees allegedly misbehaved. According to lawsuits, a female patient's ex-boyfriend convinced two UC Medical Center employees to post a screenshot of the patient's medical records on Facebook. The medical record included a positive diagnosis of syphilis. There were reportedly over 2,000 comments about the patient.

Physicians who own a practice may also be held responsible for the actions of employees in regards to violations of this variety.

Admittedly this is a most egregious example of privacy violation but what of the four scenarios that began this article? Would any of these be considered unprofessional and if so why?

According to the "Model Policy Guidelines for the Appropriate Use of Social Media and Social Networking in Medical Practice" published by the Federation of State Medical Boards(FSMB) a recent survey revealed that 87% of doctors use a social media website for personal use and 67% use social media for professional purposes. Medical practitioners have already adopted some form of social media to improve the care of patients with diabetes, to assist in the administration

of residency programs and make medical knowledge available to their patients.

Serious problems such as unprofessional conduct, HIPAA violations and breach of confidentiality can occur and each medical practice and institution needs a social media policy to stay out of trouble. Multiple organizations such as the AMA, Federation of State Medical Boards, The American Congress of Obstetricians and Gynecologists (ACOG), University of Michigan, Mayo Clinic and others have published their own guidelines that are similar. In general they include the following recommendations:

- 1. Always protect the privacy and confidentiality of your patient
- 2. Avoid requests for online medical advice
- 3. Act with professionalism online as you would in your clinic or hospital
- 4. Be forthcoming about your employment, credentials and conflicts of interest
- 5. Think twice about forming online relationships with patients
- 6. Keep private and public social media venues separate.

In the first scenario above a good motive on the part of the physician resulted in a wrong action. Most of the guidelines strongly recommend against giving medical advice online because you are establishing a doctor-patient relationship. As the FSMB report states "The physicianpatient relationship can begin without a personal encounter..." In an online relationship you can never be sure who it is you are communicating with.

In the second scenario the doctor acted appropriately. There's not only no reason you shouldn't direct any person to an educational website it's part of the good that social media can bring to medicine and is entirely

Ethics

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different from giving medical advice as in the first example.

In the third example what is described seems like an innocuous action. We use internet images and pictures all the time for a lecture or to send someone as an email attachment but many of these images are copyrighted and can result in legal action against you. Lectures and emails are one thing but your website or Facebook page are different stories. Permission needs to be obtained. As Sacopulos states in his article, using an image without permission makes you an "infringer" under the law.

Scenario number four above may be the most egregious and unprofessional of the lot. In this example patient confidentiality, privacy and HIPAA regulations may have all been violated in one "tweet". The only way to describe this type of behavior is "dumb." A meta-analysis published in 2008 found that up to 17% of physician blogs included information that could identify certain patients. Even though you think you are de-identifying information, you may not be.

Other actions that could be considered unprofessional or unethical by physicians include prescribing medication online in certain circumstances, beginning a romantic relationship with a patient online, sexting, the practice of sending pictures of body parts through various avenues, discriminatory language or practices, criticizing colleagues, or inappropriate pictures of yourself or others in an intoxicated state.

The report from the FSMB indicates that Doximity provides a way for doctors to exchange HIPAA sensitive information in a secure fashion and there may be others but for the most part you should not put anything in social media that you wouldn't want to see on the front page of your local newspaper.

New Members Welcomed

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

Active Members:

Nimesh Amin . DO Patrick S. Atkinson, DO Shirley O. Ayuk-Takem, DO Joel F. Baker, DO Jennifer L. Beal, DO Francesca M. Buskulic, DO John P. Carney, DO Christine P. Chelladurai, DO Johnny N. Cheng, DO Jeremy M. Cox, DO Joseph Crawford, DO Deepu Daniel, DO Joel S. David, DO Leah Delumpa, DO Peter DeReus, DO Reshma Desai, DO Joseph A. Dombroski, DO A. Lynn Doyle, DO Aaron C. Earles, DO Jeffrey W. Edmunds, DO Eric A. Elliott, DO Katerina A. Erokhina, DO Cameron Esmkhani, DO Margaret S. Fairhurst, DO Marwah W. Farooqui, DO Ryan C. Garbalosa, DO George A. Garcia, DO Yuliya Gatina, DO Ovidiu Ghita, DO Mehboob Ghulam, DO Majida B. Giancola, DO Kristi M. Gillette, DO Marley A. Griffin, DO Jay K. Guiter, DO Gabriel Hays, DO Nicholas S. Hoeve, DO

Tracy L. Hume, DO Jessica L. Hunt, DO Long Huynh-Duc, DO John R. Jenkins, DO Natasha A. Joshi, DO E. James Kahn, DO Gliciria Kalathas, DO Leila K. Karimpoor, DO Heather L. Katz, DO Brandon D. Ketron, DO Gloria F. Lam, DO Sheren S. Leung, DO Seth D. Levine, DO Martin E. Litman, DO Sarah Luber, DO Anthony J. Lutz, DO Samer Masri, DO Jeffrey D. Martindale, DO Farbod Masrour, DO William McGrade, DO Kevin J. McHale, DO Jonathan Meyer, DO Leslie B. Mills, DO Robert J. Morgan, DO Ryan T Morgan, DO Basim Mozaffari, DO Natasha Nanpatee, DO Brian S. Newberry, DO Thuy D. Nguyen, DO Angeli A. Niravel, DO Dawn M. Nuckolls, DO Seth R. Olson, DO Brandon M. Osmanski, DO Christopher D. Palmer, DO Brijesh D. Patel, DO Jessy Paul, DO Mitchell F. Peabody, DO

John Pham, DO Rhoda D. Pham, DO John K. L. Porter, DO Heather R. Preissler, DO Thomas D. Prutz, DO Paul T. Pulice, DO Charles Aaron Romans, DO Talal Sabbagh, DO Sahar Sarrami Amini, DO Elizabeth M. Schmidt, DO David A. Schulte, DO Jessica L. Schwartz, DO Robert Sehgel, DO Trent T. Sensiba, DO Priti A. Shah. DO Sean K. Shargh, DO Marnina B. Shelkin, DO Hadi Siddiqui, DO Tiffany B. Sizemore-Ruiz, DO Simon N. Smith, DO Nicola Stepanian, DO Brian W. Stephenson, DO Timothy Swindoll, DO Jennifer Tan, DO Thanh Tran, DO Christopher A. Troxell, DO Rafayel Vahratyan, DO Lindsey VanVoorhis Reyman, DO Caitlin J. Warf, DO Justin W. Weisenberger, DO Anthony D. Welch, DO Shane C. Wilson, DO Michael A. Wilson, DO William B. Workman, DO Jun Yoo, DO Jessica L. Young, DO Gregory S. Zarcone, DO

PROFESSIONAL OPPORTUNITIES

SEEKING INTERNAL MEDICINE PHYSICIANS - Michigan. Looking to recruit up to 4 Internal Medicine Physicians. Open to having an established group of physicians come, and/or husband and wife teams, or independent physicians, experienced or new physicians. We need more IMs to work in a soon to be new free standing medical office and want to hit the ground running by putting together a good team. Employed, all outpatient (unless wanting to do inpat), benefits, malpractice, relocation and more. Right on Lake Michigan, 2 hrs to Chicago, near Kalamazoo and Grand Rapids. Please forward CV and contact info to Cindi Dilley, Inhouse Recruiter at WhitneyRecLLC@aol.com 269-506-4464

PROGRAM DIRECTOR, INTERNAL MEDICINE RESIDENCY PROGRAM -

North Carolina. Southeastern Health in Lumberton North Carolina is immediately seeking an Internal Medicine Residency program director to oversee the newest start-up in our state. The program director would be an employee of Southeastern Health with their full benefit package, while also serving on staff at Campbell University's Jerry Wallace School of Osteopathic Medicine, the 2nd largest medical school in the state. The Director would have teaching, administrative, and (potentially) clinical time as part of their job responsibilities. For more information, please contact Dr. Robert Hasty at 954-464-7227, email hasty02@ srmc.org or Joe Butler, III at (910) 272-3041, email butler11@srmc.org.

RHEUMATOLOGIST - Kirksville, Missouri. 9am to 5pm clinics only. No evenings or weekends. Four days of service per week (or less) with six weeks off annually for vacations and CME. Base income >\$380,000.00 with an opportunity for teaching at AT Still University rheumatology courses and provide presentations in ATSU CME conferences. Contact: Robert W. Jackson, DO, FACOI, *robert.jackson@psnmo.net*.



PHYSICIAN LEADERSHIP OPPORTUNITIES Chicago, Illinois

The NBOME is seeking qualified individuals to join a team of dynamic leaders and a staff that is passionate about the NBOME's mission of protecting the public. We currently have two full-time physician leadership opportunities in our Chicago, IL office – Senior Vice President for Cognitive Testing and Chief Physician for Test Development.

The Senior Vice President (SVP) for Cognitive Testing reports directly to the NBOME President/CEO and is responsible for operational oversight of all aspects of cognitive testing at NBOME, including test development, psychometric operations, research, and test administration for the COMLEX-USA licensure examinations and other NBOME assessment products. The SVP also serves as the senior physician clinical content expert for the department.

The Chief Physician for Test Development (CPTD) reports directly to the SVP for Cognitive Testing and assists with leading test development and related initiatives for the COMLEX-USA licensure examinations and other NBOME assessment products. Coordinates with internal product teams and item writing leaders on exam item development and review, and serves as content expert in partnership with NBOME National Faculty subject matter experts to assist in test item and clinical case writing and editing, referencing, item review, key validation, and related quality assurance and improvement processes.

For more information on these opportunities and how to apply, please visit our website at *www.nbome.org*.

Government Relations

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that around six million people would gain employer-sponsored coverage. These new findings released by the CBO report are certain to play a role in future debates examining a full or partial repeal of the ACA. This CBO report gained a new significance following the Supreme Court's recent decision. The full report is available at www.cbo.gov.

ACOI Member Named to Michigan Prescription Drug and Opioid Abuse Task Force

ACOI member Stephen Bell, DO, FACOI, has been appointed by Michigan Governor Rick Snyder to the newlyformed Michigan Prescription Drug and Opioid Abuse Task Force. The Task Force was created to examine recent trends, evaluate strategic options and develop a statewide action plan. Dr. Bell joins the Lieutenant Governor, State Attorney General, Director of the Department of Health and Human Services and other stakeholders on this important bi-partisan Task Force. The recommendations of the Task Force are expected to be released later this year.

Washington Tidbits: The Supremes

Over the past few weeks the US Supreme Court has issued a number of landmark decisions that will ultimately shape the history of our Nation. Rulings covered such diverse areas as healthcare, the environment, marriage, capital punishment and redistricting, among many others. Through all of these rulings, it remains clear that the Court continues to be divided much as the Nation is.

The judicial opinions of the justices can vary greatly as a result of the perspective and the judicial philosophy of each justice. The Court's composition is a direct reflection of the philosophies of the appointing Presidents. To this end, 40 presidents have appointed approximately 100 individuals to serve as Associate and Chief Justices. There have been 17 Chief Justices, the first of whom was John Jay appointed by President George Washington in 1789. Future appointments, one or more of which may happen in the near future, are certain to continue to shape the Court, its opinions and ultimately the Nation.

ACOI CONVENTION REGISTRATION FORM



Full Name	
Preferred Name on Badge	AOA Number
Mailing Address	
City	State Zip
Work Ph. () Cell	Phone ()
Home Ph. () E-Mail Address	
Medical Specialty/Subspecialty	
Preferred Name of Spouse/Guest on Badge	
Emergency Contact	
Relation Telepl	none ()
NOTE: TO COMPLETE THE FORM BELOW, ENTER ALL REGISTRATIC SEE REGISTRATION INFORMATION SHEET FOR COMPLETE EXPLAN	
REGISTRATION PAY	(MENT
REGISTRATION	\$
SPOUSE REGISTRATION	\$
ON-SITE ACTIVITIES/OFF-SITE TOURS	\$
OFF-SITE TOUR FEE FOR NON-REGISTERED SPOUSE/GUEST If ordering tour tickets, a \$35 fee is required for each adult NOT registered for	· · · · · · · · · · · · · · · · · · ·
*GAF (Generational Advancement Fund): ACOI provides each resident and College also provides grants to medical students via their campus internal me □\$1000 □\$500 □\$250 □\$200 □\$150 □\$125 □\$100 *Your donation to GAP may qualify as a tax deductible charitable contribution. ACOI is a 501(c)(3) organization and no goods or services are provided in return for the contribution. A s	dicine clubs. Suggested Donation: □\$50 □Other\$
TOTAL FEES ENCLOSED	\$
Online registration for the Tampa Marriott Waterside Hotel is available by visiting https://	
Payment Method Check to ACOI MasterCard VISA	Credit Card Security #
Credit Card Number	Credit Card Exp. Date
Name on Card Sign	nature
CHECK HERE IF BILLING ADDRESS IS SAME AS MAILING ADDRESS LISTED	ABOVE. IF NOT, PLEASE PROVIDE BELOW
Billing Address	
City	State Zip
REGISTER ONLINE AT WWW.ACOI.ORG or mail to: ACOI Office, 11400 Rockville Pike, #8	01. Rockville. MD 20852. Phone 301 231-8877. Fax 301 231-6099
NOTE: All registrations must be accompanied by a check for payment in full or appropriate credit card information. A order to obtain a refund, written cancellations must be received by Sept. 9, 2015. No refunds will be made after that c	processing fee of \$50 will be charged for cancellations received at any time. In
OVERMore registration information on reverse side. Both side	es must be completed for form to be processed.

You may also register online at www.acoi.org



Annual Convention & Scientific Sessions September 30-October 4 Marriott Tampa Waterside Hotel

ACOI CONVENTION REGISTRATION FORM

Please complete all areas on both sides of registration form. Payment must accompany all registrations. PLEASE PRINT CLEARLY!

eAOA Number		
REGISTRATION F	EES	
REGISTRATION CATEGORY (please check appropriate box(es))	ON/BEFORE SEPT. 9	AFTER SEPT. 9
□ ACOI Member (Training completed PRIOR to 6/30/2010)	\$745	\$795
ACOI Young Internist Member (Training completed AFTER 7/01/11)		
ACOI Retired/Emeritus Member	\$645	\$695
🗆 Non Member Physician	\$945	\$995
□ Resident/Fellow (List Training Institution)	\$495	\$545
☐ Resident Displaying a Poster (List Training Institution)		\$345
□ Student (List Osteopathic College attended)		N/C
□ Non-Physician Health Care Professional (RN, PhD, RD, etc.)	\$745	\$795
□ Florida Licensure Requirements Only (Florida Licensure Requirements Session is included with full Convention registration)	\$295	\$345
Spouse/Guest Registration	g one ticket to the Opening Reception.	\$175
ON-SITE ACTIVITIES (please check appropriate box(es)		
Wednesday, Sept. 30 - 6:30 pm Welcome Reception		
Thursday, Oct. 1 - Noon - 1:00 pm Luncheon		
□ Thursday, Oct. 1 - 5:30-7:30 pm Allumni Receptions (Please check the appropriate box below) □ BOTSFORD □ DMUCOM □ MIDWESTERNU/CCOM-AZCOM □ MSUCOM □ NOVA SO		
□ Friday, Oct. 2 - 11:45 am - 1:00 pm Luncheon □ Friday, Oct. 2 - 6:45 am Fun Run		
Saturday, Oct. 3 - Noon - 1:00 pm Luncheon:		
OFF-SITE TOURS (please check appropriate box(es))		
□ Thursday, Oct. 1 - 8:00 am - Noon Neighborhoods of Tampa		\$62
Thursday, Oct. 1 - 9:00 am - 3:00 pm Museums of St. Petersburg/Salavador Dali Museum		
Friday, Oct. 2 - 10:00 am - 2:00 pm Strolling Ybor City Tour with Lunch		
Friday, Oct. 2 - 9:00 am - 4:00 pm Highlights of Sarasota/Ringling Musem		
□ Saturday, Oct. 3 - 8:00 am - Noon Airboats		
Saturday, Oct. 3 - 9:00 am - 3:00 pm Dolphin Encounter/Clearwater Beach		
PLEASE NOTE: Check here if you plan to stay at the Marrriott Tampa Waterside Hotel. (Separate hotel registration is required. This does not register or guarantee a room at the Online registration for the hotel is available by visiting resweb.passkey.com/go/ACOIAnn		
SPECIAL NEEDS: In accordance with the Americans with Disabilities Act, every eff activities accessible to people of all capabilities. Please list specific special assistan Susan Stacy at susan@acoi.org, 301 231-8877.	ort has been made to make this	

OVER...More registration information on reverse side. Both sides must be completed for form to be processed. You may also register online at www.acoi.org



Annual Convention & Scientific Sessions September 30-October 4 Marriott Tampa Waterside Hotel

REGISTRATION INFORMATION

EDUCATION SESSION FEES

Fees for the 2015 education sessions are based on ACOI membership status and length of time in practice. Active members (training completed prior to 6/30/10) pay \$745; Young Internists (training completed 6/30/09 or later) pay \$645; Emeritus and Retired members pay \$645; Residents and Fellows pay \$495 (\$295 for Research Contest entrants). Non-member Physicians pay \$945; Non-Physician Health Care Professionals may register for the ACOI member rate of \$745. Those registering only for the Florida Licensure Requirements session pay \$295. There is no charge for students. Spouse/guest registration is \$125. These fees include a \$50 early registration discount, which applies until September 9, 2015. Registrations received after that date do not qualify for the discount.

WHAT DOES REGISTRATION INCLUDE?

Physician registration for the Convention includes entry to all education sessions, the Exhibit Hall, daily continental breakfast and luncheon symposia and one ticket to the Opening Reception. Luncheon seating is limited and will be held at the Convention Center, located next to the hotel. Spouse/Guest registration includes entry to the education sessions, daily continental breakfast in the Exhibit Hall, and all social events, including one ticket to the Opening Reception. (Due to limited seating, guests may not attend the luncheon symposia.)

HOTEL INFORMATION

The Marriott Tampa Waterside Hotel is the headquarters hotel for the ACOI 2015 Annual Convention and Scientific Sessions. All educational and social events will take place there. ACOI has arranged a discounted room rate of \$175 per night (single/double). Additional local taxes apply. Early reservations are suggested as the hotel is likely to sell out and does not have to honor ACOI's discounted rates after September 9, 2015. Reservation information is available by calling 1-800-228-9290 or visit https://resweb. passkey.com/go/ACOIAnnualConvention.

PAYMENT INFORMATION

You may register online, by mail or fax for the ACOI 2015 Annual Convention and Scientific Sessions. Secure online registration is available through the ACOI website. Visit *www.acoi.org* and click on the convention registration link on the home page. You may also use the registration form in the Convention Packet to register by mail or fax. Payment may be by check payable to ACOI or charged on VISA or Mastercard. Complete the required information on the white Registration Form and mail, email to susan@acoi.org, or fax it to ACOI at (301) 231-6099.

CANCELLATION POLICY

Please note that refund requests must be made in writing to ACOI prior to September 9, 2015. A processing fee of \$50 will be charged for cancellations received at any time. No refunds will be made after September 9, 2015, but unused registration fees may be applied toward a future ACOI education program.

ACOI GENERATIONAL ADVANCEMENT PROGRAM

Donations are requested to assist the ACOI in providing a medical textbook to each resident and student registered for the Convention. Textbook prices average \$100. In addition, the ACOI provides grants to representatives of the internal medicine clubs on the campuses of osteopathic medical schools to defray the cost of attending the Convention. All contributions are acknowledged in the printed program if received prior to the publication deadline. Suggested donation is \$100, but contributions in any amount are welcome. Your donation may qualify as a tax deductible charitable contribution. ACOI is a 501(c)(3) organization and no goods or services are provided in return for the contribution. A separate receipt will be provided for your records.

CME CALENDAR

Future ACOI Education Meeting Dates & Locations NATIONAL MEETINGS

- 2015 Annual Convention & Scientific Sessions Sept 30-Oct 4 Marriott Waterside Hotel, Tampa, FL
- 2016 Internal Medicine Board Review Course March 30-April 3 Renaissance Resort at SeaWorld, Orlando, FL
- 2016 Clinical Challenges in Inpatient Care March 31-April 3 Renaissance Resort at SeaWorld, Orlando, FL
- 2016 Annual Convention & Scientific Sessions Oct 12-16 San Francisco Marriott Marquis, San Francisco, CA
- 2017 Annual Convention & Scientific Sessions Oct 15-19 Gaylord National Resort and Convention Center, Washington, DC
- 2018 Annual Convention & Scientific Sessions Oct 17-21 Orlando World Center Marriott, Orlando, FL
- 2019 Annual Convention & Scientific Sessions Oct 30- Nov 3 JW Marriott Desert Ridge Resort & Spa, Phoenix, AZ
- 2020 Annual Convention & Scientific Sessions Oct 21-25 Marco Island Marriott Beach Resort, Marco Island, FL

Please note: It is an ACOI membership requirement that Active Members attend the Annual Convention or an ACOI-sponsored continuing education program at least once every three years.

Information on any meeting listed here may be obtained from ACOI Headquarters at 800 327-5183 or from our website at www.acoi.org.

2015 Certifying Examination Dates & Deadlines

Internal Medicine Certifying Examination

Computerized Examination 200 Sites Nationwide September 10, 2015 - *Application Deadline: February 1, 2015 Late Registration Deadline: April 1, 2015*

Subspecialty & Certification of Added Qualifications:

Aug. 22, 2015 • Lombard, IL - Application Deadline: April 1, 2015 Late Registration Deadline: May 1, 2015 Cardiology • Clinical Cardiac Electrophysiology • Endocrinology • Gastroenterology • Geriatric Medicine Hematology • Infectious Disease • Nephrology • Oncology • Pulmonary Diseases • Rheumatology

Internal Medicine Recertifying Examination

Computerized Examination 200 Sites Nationwide September 11, 2015 - Application Deadline: April 1, 2015 Late Registration Deadline: May 1, 2015

Focused Hospital Medicine Recertification Aug. 22, 2015 • Lombard, IL - *Application Deadline: April 1, 2015 Late Registration Deadline: May 1, 2015.*

Subspecialty and Added Qualifications Recertifying Examinations: Aug. 22, 2015 • Lombard, IL

Cardiology • Clinical Cardiac Electrophysiology • Critical Care Medicine • Endocrinology • Gastroenterology • Geriatric Medicine • Hematology • Infectious Disease • Interventional Cardiology • Nephrology • Oncology • Pulmonary Diseases • Rheumatology Application Deadline: April 1, 2015 Late Registration Deadline: May 1, 2015

Further information and application materials are available at www.aobim.org or by writing to: Gary L. Slick, DO, MACOI, Executive Director, American Osteopathic Board of Internal Medicine, 1111 W. 17th Street, Tulsa, OK 74107, email: admin@aobim.org. Exam date for Hospice/Palliative Medicine is October 18, 2015, to be held during the OMED Convention in Orlando, FL. Visit http://www.aobim.org/WebPageStatic/PDF/CAQ_Hospice_and_Palliative_Medicine.pdf for more information regarding this exam.

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

Coding Corner

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forward" a complete physical exam, when in fact only parts of the complete examine were performed. The suggestion that some work was not done causes the entire record to be questioned, including the level of evaluation and management services billed. Remember, billing for services not rendered meets the definition of fraud.

Carriers have followed the lead of the Centers for Medicare and Medicaid Services (CMS) on the issue of cloning and cutting and pasting. If CMS finds that notes are cut and pasted or cloned it will withhold payment or, if necessary, take money back. The CMS position is that a duplicated note does not show that the work/care of the patient was done and therefore payment is not appropriate.

So, the time to change any bad habits is now. Write a note – a real note, telling what your assessment and plan is so other physicians can assist in the treatment of the patient. Physicians who click or carry forward words and phrases into a record whose motivation is only to get enough words down to satisfy an auditor are on notice. An improper effort to save time could be costly.

Have You Moved?

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