

Bree Appointment



Robyn Phillips-Madson, DO, MPH

Governor Christine Gregoire has appointed **Robyn Phillips-Madson, DO** as the osteopathic physician representative on the Robert Bree Collaborative.

The 2011 Legislature passed House Bill 1311, establishing the Collaborative to provide a mechanism through which public and private health care purchasers, health carriers, and providers can work together to identify effective means to improve quality health outcomes and cost-effectiveness of care. Although not included in the original legislation, at WOMA's request a position for an osteopathic physician was added.

The collaborative will identify and review certain high-variation or high-utilization health care services in Washington state that do produce better care outcomes for patients. It will consider and develop strategies that promote improved care outcomes, such as patient decision aids, provider feedback reports, centers of excellence or other provider qualification standards, and research to improve care quality and outcomes. The Collaborative consists of twenty members, with consideration given to geographic representation, gender, and ethnic and cultural diversity of workgroup members themselves and experience in serving diverse populations.

2011 Physician of the Year



Mark Hunt, DO

At its annual Awards and Dinner Auction on June 25th, Mark Hunt, DO was announced as WOMA's 2011 Physician of the Year.

He has had some pretty big shoes to fill with WOMA, as his father, Eugene Hunt, DO, was WOMA's longest-serving Treasurer. Mark started out as a student member in 1978 and graduated from the Kirksville College of Osteopathic Medicine in 1980. Upon completion of his residency in 1983, he returned to Seattle to practice and became an Active member of WOMA. He served as Chief of Staff at Shorewood Osteopathic Hospital and Chair of the Anesthesia Department of Auburn Hospital. He served two terms on the Board of Osteopathic Medicine and Surgery.

In 1984, he was elected as a District Trustee and went on to serve in several capacities, including President. Even after his presidency was completed, he stayed involved by serving on several committees and participating in WOMA's premed forums. He is currently serving his fourth year as your Secretary and regularly attends and actively participates with the Public Affairs Committee.

He has served his church community well as lector, greeter and

OMM CME at PNWU

WOMA is presenting its annual OMM fundraising seminar to benefit the Washington Osteopathic Foundation at the Pacific NW University of Health Sciences College of Osteopathic Medicine on September 17th. **Melicien Tettambel, DO**, Chair, Osteopathic Principles and Practice at PNWU, is program chair and has assembled a very interesting day of lectures and lab time on the topic of OMM in Sports Medicine.

Topics include running mechanics and footwear, nutrition, physiatry, and prolotherapy. Dr. Tettambel will provide osteopathic sports medicine archives with lab time. We are grateful to the faculty, **Lisa Griffith, DO, Linda Welch, DO, Kathaleen Briggs Early, PhD, John Long, DO** and Dr. Tettambel for volunteering their time to help raise funds for the Washington Osteopathic Foundation.

Registrants will lunch with the PNWU class of 2015 and are invited to attend the White Coat Ceremony at the Capitol Theatre after the seminar.

Registration brochures have been mailed and emailed or are available on WOMA's website, www.woma.org. Blocks of rooms at the PNWU rate are reserved at the Oxford Suites (509-457-1000) and LedgeStone Hotel (509-459-3151)

Eucharistic Minister, served many years as a member and chair of the his church school commission, and currently serves as chair of the parish finance council. Politically, he has actively participated in WOMA's Public Affairs Committee and served many years as a Precinct Committee Officer in the 33rd legislative district.

He and his wife Ginny have four grown children.



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The "Washington DO" is the official publication of the Washington Osteopathic Medical Association, published in February, May, August and November. Members are encouraged to submit articles for potential publication. Signed columns are, in all cases, the opinion of the author. For advertising information, please contact the WOMA executive offices at (206) 937-5358. Deadlines for ads and articles are the 10th of the month preceding the publication.

Meeting Notices

The WOMA Board of Governors will have a dinner meeting at 7:00 p.m., Friday, September 16th in Yakima. The Washington Osteopathic Foundation Board will meet prior to the WOMA Board, at 6:30 p.m.

New Members Welcome

The following applications for membership were approved by the WOMA Board of Governors at their quarterly meeting held June 22, 2011:

Active

Kathleen Farrell, DO AZCOM'02
JP Maganito, DO DMU'05
Tony Pham, DO KCOM'99
Molly Slate, DO DMU'02
Cheryl Snyder, DO COMP'91
Tammy Starr, DO MSUCOM'05

Student

Andrea James ATSU-AZ'14
Ryan Hoff COMP'14
Quynh Le PNWU'15

Status Change to Life Member

John Allen, DO
Daniel Brzusek, DO
John Fackenthal, DO
Gary Gaffield, DO
Karl Johnson, DO
Peter Kilburn, DO

2012 WOMA Leaders

At its annual meeting held June 24, 2011 at the Semiahmoo Hotel and Conference Center, the WOMA membership elected the following to assume leadership positions on January 1, 2012.

President **Lyndsey Rasmussen, DO**; President-elect **Marc Cote, DO**; Vice President **Scott Fannin, DO**, Secretary **Mark Hunt, DO**, Treasurer **Steven Leifheit, DO** and Immediate Past President **Stan Flemming, DO**.

Trustees elected for two year positions are District 1 **Mischa Coleman, DO**; District 2 **Dan Wolf, DO** and **David Farrell, DO**; District 3 **David Lukens, DO** and **Tom Shelton, DO**; District 4 **Amber Figueroa, DO**; District 5 **Lynda Williamson, DO**; Public Affairs Chair **Lindy Griffin, DO** and Institutional Representative **Robyn Phillips-Madson, DO**.

Dr. Rasmussen will be making committee appointments in the coming months. If you have an interest in serving on the Public Affairs Committee or the Education Committee, please contact Executive Director Kathie Itter at kitter@woma.org or call 206-937-5358 for more information.

Getting to Know You

WOMA is please to welcome the following new active members:

Kathleen Farrell, DO is a 2002 graduate of the Arizona College of Osteopathic Medicine. Her postgraduate training took place at Central Washington Family Medicine and St. James Hospital, Olympia Fields, IL. She practices Family and Addiction Medicine in Sequim.

JP Maganito, DO graduated from DMUCOM in 2005. He completed his postgraduate training at Botsford Hospital, where he served as chief resident. He practices obstetrics and gynecology in Yakima.

Tony Pham, DO is a 1999 graduate of KCOM. He completed a family practice residency at Via Christi, Riverside Medical Center in Wichita, KS. He is in practice in Seattle.

Molly Slate, DO graduated from DMU in 2002. She completed a pediatric residency at the University of New Mexico and is a pediatric hospitalist in Yakima.

Cheryl Snyder, DO graduated from COMP in 1991. She completed an emergency medicine internship at Brentwood Hospital in Cleveland in 1992. She is currently Associate Professor of Clinical Skills at PNWU and Medical Director/professor of the Paramedic Program at Columbia Basin College in Pasco.

Tammy Star, DO is a 2005 graduate of MSUCOM. She served her internship and residency in obstetrics and gynecology at Genesys Regional Medical Center, Grand Blanc, MI. She practices at Peace Health in Bellingham.

License Fees Reduced

Effective August 15, 2011, several licensing fees for osteopathic physicians and osteopathic physician assistants will be reduced. The law requires that each profession is self-supporting and directs the Department to collect fees to pay the cost of regulating the profession. The cost to administer the osteopathic profession has been consistently below the existing fee revenues, due to reductions in administrative and regulatory costs and activities that include credentialing, complaint intake and disciplinary activities.

For osteopathic physicians:

Endorsement application is reduced from \$800 to \$600

Active license renewal is reduced from \$750 to \$600

Active late renewal penalty is reduced from \$300 to \$250

Active expired license reissuance is reduced from \$300 to \$250

Inactive license renewal is reduced from \$500 to \$350

Inactive late renewal penalty is reduced from \$250 to \$175

Endorsement/state exam application is reduced from \$900 to \$500

Limited license application is reduced from \$350 to \$325

Limited license renewal is reduced from \$325 to \$300

For osteopathic physician assistants:

Application fee is reduced from \$350 to \$250

Renewal fee is reduced from \$325 to \$250

Late renewal penalty is reduced from \$162.50 to \$150

All other fees remain the same.

Valid Written Prescription Requirements

A prescription is an order for medication which is dispensed to or for an ultimate user. A prescription for a controlled substance, all classes, must be dated and signed on the date when issued. The prescription must include the patient's full name and address, and the practitioner's full name, address and DEA registration number. The prescription must include:

Drug Name

Strength

Dosage form

Quantity prescribed

Directions for use

Washington D. O.

WOMA did provide the following comments for the fee reduction hearing. "Looking at the projected revenue through 2023, it appears that little increase in the number of osteopathic physicians is anticipated. There are currently three osteopathic schools with training programs in Washington State. Conservatively speaking, you can anticipate that starting in 2015, a minimum of 50 of these students each year will be new licensees in Washington. From 2015 to 2023 you can expect an increase of 450 new osteopathic physicians. And that does not include additional DOs who are being recruited from other states by new training programs being established in Washington. Perhaps you could reduce the active license renewal fee another \$50 to \$100.

Blake Maresh, Executive Director for the Board of Osteopathic Medicine and Surgery replied, "I did check with our budget director and he said that they do build in an increase in the numbers of licensees, but only through the first 6 years. His reasoning is that it becomes more difficult and speculative to continue the assumptions around the rate of increase into years 7-10. I did make sure to share with him both the projected enrollment numbers at PNWUHS and the rate at which students who do their undergrad and post grad in a locality tend to stay in that locality to practice. So he's aware of that for future calculations."

WOMA will continue to monitor the surplus funds and request further reductions if they do not deplete with the new fees.

Number of refills (if any) authorized

A prescription for a controlled substance must be written in ink or indelible pencil or typewritten and must be manually signed by the practitioner on the date when issued. An individual (secretary or nurse) may be designated by the practitioner to prepare prescriptions for the practitioner's signature.

The practitioner is responsible for ensuring that the prescription conforms to all requirements of the law and regulations, both federal and state.

Retired Active License Pursued

When the moratorium on new rules expires in December, WOMA will resume its pursuit of a Retired Active credential for osteopathic physicians. The new credential will likely mirror the recently amended Retired Active rules adopted by the Medical Quality Assurance Commission for allopathic physicians.

The newly amended rules now apply to other specialties besides primary care and the limit to practicing 90 days in a calendar year is removed. They may volunteer services in emergent or intermittent circumstances and may not receive compensation for health care services. "Emergent" is defined as a circumstance calling for immediate action. "Intermittent" means providing services on a part-time or full-time nonpermanent basis.

The commission determined that physicians with a retired active license must keep up with the emerging standards of practice in their specialties in order to provide the best possible care to their patients, so the Retired Active licensee must meet the same CME requirements as those with active licenses. The license fee is about half of the active license fee.

Medical Record Copy Charges

How much can a medical provider charge for searching and duplicating medical records?

RCW 70.02.010(15) allows medical providers to charge fees for searching and duplicating medical records. The fees a provider may charge cannot exceed the fees listed below:

Effective July 1, 2011 through June 30, 2012.

(1) Copying charge per page:

(a) No more than one dollar and four cents per page for the first thirty pages;

(b) No more than seventy-nine cents per page for all other pages.

(2) Additional charges:

(a) The provider can charge a twenty-three dollar clerical fee for searching and handling records;

(b) If the provider personally edits confidential information from the record, as required by statute, the provider can charge the usual fee for a basic office visit.

Washington's Prescription Monitoring Program

by Mike Quirk, DO, PMP Advisory Committee

Prescription drug misuse is a national and local problem. It has caused an alarming growth in overdose deaths, hospitalizations, admissions for substance abuse, and non-medical use. In Washington, deaths involving unintentional prescription pain reliever overdoses increased nearly 21-fold from 24 in 1995 to 490 in 2009. In the past decade, the numbers of hospitalizations for prescription pain reliever dependence and abuse have doubled, hospitalizations for methadone poisoning have increased five-fold, and poisoning hospitalizations from other prescription pain relievers have increased four-fold.

The Washington State Department of Health is implementing a Prescription Monitoring Program (PMP) to address this problem by collecting all records for schedule II, III, IV, and V drugs. Prescribers and pharmacists will be able to use this information as a tool in patient care.

The state health department held a public hearing June 27, 2011 for the proposed program rules. The rules become effective in late August 27, 2011.

The proposed rules and more information (www.doh.wa.gov/hsqa/PMP/rules.htm) are available online. The tentative plan is to start collecting dispensing data in October 2011. Over the summer, a data submission manual will be developed, along with other resources to help dispensers with this process. The system is expected to be ready to receive and respond to requests from prescribers and other system users by January 2012.

This program will affect practitioners in two different ways. First, any practitioner who dispenses controlled substances from their office must submit those records to the state health department. Practitioners do not have to report any prescribing or administering of controlled substances — only dispensing. The draft rules require weekly data submission using electronic methods. If a practitioner does not have the necessary software to submit the required files there will be an online submission form that can be used to report individual dispensing records.

The second impact of the project actually is a tool to improve patient care and work to assure patient safety. Practitioners may request prescription history reports for their patients from the program. They will be able to access this information online 24 hours a day, seven days a week anywhere that a user has Internet access. The information provided will allow a practitioner to look for duplicate prescribing, misuse, drug interactions, and other potential concerns. By having this information available before prescribing or dispensing, a practitioner can provide improved care to their patients.

The program website www.wapmp.org provides more information and an option to receive updates through a listserv. You can also contact PMP Director Chris Baumgartner at 360-236-4806 prescriptionmonitoring@doh.wa.gov.

(Mr. Baumgartner will provide more information on the program at WOMA's Winter Seminar on December 3rd in Seattle.)

AOA House of Delegates Meeting

by Harold Agner, DO, WOMA Delegate

The AOA held its annual business meeting in Chicago, Illinois from July 15 to July 17, 2011. Membership includes nearly 75,000 physicians and 16,000 osteopathic medical students. Fifty divisional societies and 23 specialty colleges were represented by 623 delegates and alternates. WOMA was represented by Drs. Dave Lukens, Paul Emmans, Jr., Lindy Griffin, Harold Agner, and our PNWU student representative Whitney Fix-Lanes. Dr. Emmans served on the Credentials Committee,

The Annual Report of the AOA was presented by Executive Director John Crosby, JD. Highlights of his presentation are summarized below, with additional details available at www.do-online.org.

1) "Colleagues in the allopathic world believe we are entering a transforma-

tional era in medicine - The dawn of osteopathic medicine"

2) AOA Clinical Assessment Program is helping D.O.s measure their performance and can earn a payment bonus

3) Transforming the mission of the JAOA to "better support research based on the tenets of osteopathic medicine

4) With the ACOFP, advocating the Patient-Centered Medical Home

5) Building the National Osteopathic Advocacy Center in Washington, D.C.

A working lunch for the delegates held on Friday, July 15, 2011 reviewed elements of Osteopathic Continuous Certification. Beginning in 2013, there will be the pathway for initial certification or recertification. A presentation by the Federation of State Medical Boards reviewed elements of its Maintenance of Licensure program.

135 resolutions covering a variety of topics were presented before and discussed by members of the Ad Hoc, Professional Affairs, Educational Affairs, Public Affairs, and Constitution and Bylaws Committees. The Joint Board/ House Budget Review Committee reaffirmed the need for an AOA Cost of Living Dues Increase for Fiscal Years 2012 and 2013". Resolutions were then brought before the body of delegates for action. After two days of deliberation, the house approved 108 resolutions (44 with amendments), disapproved 7, and referred 13 to other bodies within the AOA for further action. Seven resolutions were withdrawn by their submitting organizations before consideration.

Martin S. Levine, DO, was sworn in on July 17th as the 115th President of the

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PNWU Update

By Dean Robyn Phillips-Madson, DO, MPH

PNWU-COM's fourth faculty and student orientation week just ended, and the fourth class of 75 students is now on campus. The White Coat Ceremony for the Class of 2015 will be held September 17th. Two classes are on clinical rotations at 16 core sites. These include Portland/Longview, Centralia, Aberdeen, Puyallup, Mt. Vernon, Yakima, Othello, Spokane, Tri-Cities, Hermiston, Boise, Blackfoot, Great Falls, Billings, Anchorage and Fairbanks. Each site has a PNWU-COM supported regional dean (physician) and regional coordinator to provide oversight. The clinical rotations team both on and off campus does a tremendous amount of work to organize rotations, evaluations, and affiliation agreements. Thank you WOMA adjunct clinical faculty (preceptors), for welcoming our students into your practices. We couldn't do this without you!

Third year students just completed COMPLEX I boards. Students receive significant board preparation support, and are excited to pass this milestone in their careers. Fourth year students are preparing for COMPLEX 2 board exams and have started their residency audition rotations. We are looking forward to graduation May 12, 2012, and full accreditation. Dr. Karen Nichols will be the inaugural graduation's keynote speaker.

The Board approved Phase II of the Butler Haney Hall building project which will provide a large auditorium seating over 300 people which also can be

divided into two large classrooms. Additional office space, restrooms and a kitchen area for school and community events will accommodate the projected class size increase to 125 students. The early renditions are beautiful, and the addition will finish off the building with symmetry. The presidential search committee of the board, with the assistance of a national search firm, is looking for a new president since Dr. Butler would like to retire from that role and pursue other projects. This process is expected to be completed by June, 2012.

The AOA approved 8 PNWU-COM sponsored residency programs this week. They include the following: Puyallup Tribal Health Authority (Family Medicine); Good Samaritan Hospital, Puyallup (Family Medicine); Skagit Valley Hospital (Family Medicine, Internal Medicine); Kennewick General Hospital (Family Medicine, Internal Medicine); Kalispell/Superior, MT (Frontier Family Medicine- the first of its kind in the nation!); Yakima Valley Farm Workers Clinic- Prosser (Family Medicine). This is a tremendous accomplishment. Kudos to Dr. Robert Sutton and his team, who have been working on these programs since 2007.

More residencies are under development in the next few years, so stay tuned! If you know of qualified osteopathic program directors who would like to work on residency development, please let Dr. Sutton know.

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American Osteopathic Association by his predecessor Karen Nichols, DO. President Levine's inaugural address was entitled "Think Osteopathically, Practice It, Prove It and Promote It", expounding upon the elements of the Osteopathic Pledge of Commitment which reads:

I pledge to: PROVIDE compassionate quality care to my patients; PARTNER with them to promote health; DISPLAY integrity and professional-

ism throughout my career; ADVANCE the philosophy, practice and science of osteopathic medicine; CONTINUE lifelong learning; SUPPORT my profession with loyalty in action, word and deed; and LIVE each day as an example of what an osteopathic physician should be.

Premed Forums Scheduled – Students & New Physicians Needed

WOMA staff has scheduled several osteopathic premed forums to enlighten premed students about the osteopathic profession. Over the years, the forums have encouraged more interest in osteopathic medicine and generated more applications to osteopathic schools.

WOMA staff, school representatives, area physicians and students participate in the programs. Attendees learn about the history of osteopathic medicine, the curriculum and the application process. Osteopathic physicians practicing or training in the area are encouraged to attend, answer questions and share their perspectives with the premed students. WOMA hosts the events, providing pizza and information about shadowing opportunities.

All forums take place in the evenings, usually starting about 6:30 pm with refreshments. Students and residents training in the area, as well as new physicians, are particularly encouraged to attend. Those scheduled to date are:

- October 18 – St. Martin's University
- October 19 – Pacific Lutheran University
- October 20 – University of Puget Sound
- October 25 – Seattle University
- October 26 – University of Washington
- October 27 – Seattle Pacific University

We are also working with Western Washington University to schedule a forum in early October and hope to have a forum for Spokane schools this year.

If you are available and willing to participate in any of the scheduled forums, please contact Kathie Itter at 206-937-5358 or kitter@woma.org.

CME, Business and Fun



First Row-Past President Dan Wolf, DO provided the nominating committee report; Trustee Mischa Coleman, DO reported for District 2; Trustee Lynda Williamson, DO reports for District 5. Second Row-District 3 Trustee and WOMA's Representative to the Proscription Monitoring Program Advisory Committee Mike Quirk, DO provided updates on both; Trustee Paul Emmans, Jr, DO reported on District 4; PNWU Interim President Lloyd Butler, DO and wife Gloria enjoy a reception with AOA President Karen Nichols, DO and her husband Jim Nichols. Third Row- President Stan Flemming, DO recognizes David Lukens, DO for 43 years of membership; Dick Richards, DO is recognized for 44 years of membership; Don Woods is recognized for 48 years of membership. Fourth Row-Dwight Williamson, DO is recognized for 48 years of membership; Tom Summe is recognized for 42 years of membership and Loren H "Bear" Rex, DO is recognized for 41 years of membership.

Make For a Great Convention



Above, Clockwise from left: Bill Dickinson, DO provided a four-hour program on opioid addiction as part of a program to help physicians apply for a waiver to prescribe buprenorphine in an office-based setting; Public Affairs Chair Lindy Griffin, DO provides a legislative update to members; President Stan Flemming, DO presents Karl Johnson, DO with Life membership in WOMA; John Allen, DO also receives Life membership in WOMA.

Below, Clockwise from left - President-elect Lyndsey Rasmussen, DO models a Stetson hat during the annual fundraising auction for the Washington Osteopathic Foundation; AOA President Karen Nichols provides an update on AOA activities; Monte Koschene and Janet Tinney display a hand-knitted quilt made for the auction by Jenny Sheaffer, mother of member Sara Sheaffer, DO; Stephanie Hunt and Janet Tinney display a victorian rose quilt made by Margaret Agner, wife of Harold Agner, DO for the auction. Both quilts were quite popular with the bidders.



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A Closer Look at Medical Protective

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Clinical Risk Management Strategies

To promote safety and to reduce liability, each healthcare provider should:

- Create a culture of safety supported by respectful communication with patients and among all staff, consultants and appropriate family members.
- Utilize educational materials consistent with each patient's ability to comprehend and document all patient education in the medical record, thus supporting a comprehensive informed consent process.
- Establish a comprehensive test result and referral tracking system to monitor for accurate and timely follow-up.
- Institute a policy for the disclosure of adverse events and include such policy as a part of staff orientation and ongoing education.
- Initiate written policies and procedures regarding refunds and waivers specific to all payers and consistent with state and federal regulations.

Quick tips to help you avoid a claim

Here are a few tips you can implement today to help avoid a lawsuit.

1. **Spend time with the patient** – the longer the visit, generally the more satisfied the patient
2. **Make sure you have complete and accurate (and legible) charting** – this record may be your best ally
3. **Be aware of your patient's entire medical history** – don't just treat your patient's current complaint, but also review his/her past medical history before treating
4. **Explain risks and side effects** of a recommended course of treatment/procedure, as well as prescribed medications
5. **Personally obtain informed consent** – do not rely on staff to perform this important step

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■ Contact Geoff Smith at 800-4MEDPRO ext. 3771 or your local MedPro appointed agent.

Notes from CAC Meeting Report - 07/12/2011

By Harold Agner, DO, Representative to Carrier Advisory Committee to Medicare

Selection of this region's Medicare Claims Administrator is still under CMS appeal. Noridian will continue during the appeal process. Selection of the claims administrator is expected "soon"

Minimum of 10 (e-Rx) required by Oct 2012 to meet standard. OTC meds may qualify as e-Rx

Four new practice exemptions were added to list. Details are on the Noridian website (www.noridianmedicare.com/)

Electronic Billing Submission Changes – The current standard (4010) to be replaced by 5010 Jan 1, 2012. Providers must test claims submission with your clearing houses prior to this date to prevent payment delays

ICD-10 code sets replace ICD-9 code sets Oct. 1, 2013. No extension of compliance date is anticipated. AMA, AOA, and Noridian websites offer instruction and suggestions on preparation and compliance.

Recovery Audit Contractors are fully operational in Washington State. Providers following the appeals process must be mindful of time deadlines for record submission. There have been no physician practice reviews to date except for duplicate billings.

Claims Adjustment Update - Claims were paid incorrectly Jan-May 2010 due to Fee Schedule change - reprocessing of claims is currently underway. The projection is that it could take as long as 18 months to complete all claims.

Noridian website, www.noridianmedicare.com has been redesigned to be more user friendly. Referring providers are reminded to complete PECOS enrollment - <https://pecos.cms.gov> as referrals are processed only to PECOS enrolled professionals. PTAN must cross-match NPI in PECOS. Supply name and NPI# must be on line 17/17B. Claims without this information will be rejected starting Jan 3, 2012.

2012 CME Topics Selected

WOMA's CME Committee met last month to review the needs assessment survey results and CME program evaluations collected over the last year. Based on that information as well as information provided in Medical Journals and websites, the Department of Health and the CDC, the Committee selected the topics for the 2012 CME programs. The convention will include sessions on pedi-

The number one problem in processing claims is insufficient documentation to support billing

Signatures are required on all records - first name, last name, credentials. They are also required on hospital and ancillary services requests. Signature stamps or "signed but not read" statements are not acceptable.

Risks associated with EMHR were noted:

- Cloning of notes
- Automatic pulling forward of Hx, ROS elements
- Physician must review and sign Hx and ROS forms if completed by patient or ancillary staff
- Documentation must support pick list codes

e. Documentation must support complexity of MDM and medical necessity
f. Bill codes based on what is documented - do not include additional components in the record for the sole purpose of meeting a specific level of CPT code or level"

Billed procedures must be supported with:

- Procedure or Op note
- Path reports
- Anesthesia record
- Nursing notes

For proper amending or correcting records:

- never write over or obliterate entry error
- draw single line through error maintaining legibility
- sign and date stating reason for change in margin

When changing a record, caution should be taken:

- never change a record after an audit request
- may send a currently dated translation, clarification, explanation, or companion note
- must be able to document the original record

atric topics, pain management, behavioral medicine topics, OMM, STI, Gastroenteritis, Crohn's and Ulcerative Colitis, Vitamin D, and some non-clinical breakout sessions. See the calendar at right for all program topics and dates.

WOMA members interested in helping to plan and present CME programs should contact Kathie Itter at 206-937-5358 or kitter@woma.org.

New Member Benefit Announced

The WOMA Board of Governors is pleased to announce its endorsement of medical malpractice insurance carrier Medical Protective (MedPro). As of July 1, 2011, WOMA members who renew or purchase new malpractice insurance from MedPro will receive a 5% discount on their premium. This is in addition to other MedPro discounts such as risk management and claim history.

For more information, please contact one of the agents listed below:

Kibble & Prentice-Seattle

Phil Dyer 206-508-6030

McDonald Insurance-Kirkland

David Hamilton 425-897-6002

Western States Insurance

Mike McWhorter-Tri-Cities

Randy Hale 509-946-2622

2011-2012 CME Calendar

September 17, 2011

OMM and Sports Medicine

Yakima

7 Category 1-A Credits Approved

December 3, 2011

Cardiology Update for Primary Care

Seattle

8 Category 1-A Credits Anticipated

March 10, 2012

Pain Management Update

Seattle

8 Category 1-A Credits Anticipated

June 21-24, 2012

99th Annual Northwest Osteopathic Convention

Blaine, WA

25 Category 1-A Credits Anticipated

September 15, 2012

OMM – Lower Extremities

Yakima

7 Category 1-A Credits Anticipated

December 1, 2012

Health Matters: Mars and Venus

Seattle

8 Category 1-A CME credits Anticipated



Bear Droppings... ..

by Loren H. Rex, D.O.

Last time we were talking about seeing the first Circus Poster of the summer, the herald of a traveling show that would transform your world of various shades of green to one of beautiful colors and unimaginable sights of rare and exotic animals from the four corners of the world. I suppose that kids today don't have the time for fantasies with their carefully scripted, parent pleasing existence. If that is true, it is too bad that we have managed to rob them of the chance to use their minds. It would be similar to when radio, which was called the "theatre of the mind" was replaced by television which was mind-numbing brain pabulum.

About three or more months before a circus opens, what is called "the advance" begins their work to make the show happen. A person called the Agent leaves winter quarters and begins to book the show route for the season. The shows I was with wintered in Hugo Oklahoma and spent its season, for the most part, in the Midwest. One year the show made it as far west as Washington State but usually we didn't cross the Rockies. This person meets with different groups who are civic boosters and who want to make some money for their cause. My own personal favorite was the Volunteer Fire Departments and my least favorite was the Jaycees. Our agent had been at this job for probably 30+ years and really knew his way around. He would file a report of each town with the necessary information and that would go to staff on a need to know basis.

Next came the Advertising people which in this case, were Sharelle, my ex that many of you know, and yours truly. In the business these people are called Bill Posters. This name was derived from Handbills that were the earliest form of advertising and were finally referred to simply as Bills, thus Billboards are just today's giant handbills. Actually there is a set size to posters as bills are called in the circus business. Originally, they were printed from limestone plates

measuring a standard 28 x 42 utilizing bright colored oiled ink. Today they are lithographs. A bill poster in my day had an assortment of posters at his disposal. These ranged from regular colored posters which went together to make a display to what were called panels that measured "21 x 54" and were called one-sheet panels to Half-sheet panels, printed with either vertical or horizontal designs, measuring 14" x 42." These latter things were called tack sheets and were tacked to telephone poles. Although it has been nearly 50 years, Sharelle is still somewhat miffed about me stapling her fingers to a telephone pole in Michigan. Obviously a woman with an intact memory. There were also window cards or placards which were about a quarter sheet in size. These were somewhat safer than telephone cards.

As a bill poster, it was my job to look at the Agent's day sheet and determine if I had any tips to make my job easier, such as an empty building with a civic spirited owner that would let me in to place a big hit of papers in the windows. This made my life a lot easier. Otherwise, it meant tracking down an owner of an empty building. Likely as not, the owner wasn't usually especially happy with the idea of circus paper being stuck in their empty building, civic pride or not. Each day there was an allotment of paper that was to be hung in the town and the surrounding smaller towns in the area. The paper was shipped from the printer about every week or so and had to be picked up at either the bus station or the rail station. Sometimes it was very hard to get all the paper hung, resulting in what is known in the world of Bill Posters as "Charlieing the paper". As you might imagine, a practice considered a No-No by management. I only got caught once and that was by the 24 hour man and he was good about it. Seems he had once been a Bill Poster and was sympathetic.

The big trick to Bill Posting is learning to put up displays over your head in an empty building and getting the multiple

sheets level. We had a 4 sheet grouping of a Lion and a 3 sheet grouping of an Elephant and her calf that could be a real pain to put together when the windows were 12 to 16 feet high. That probably added to my deep feeling about Elephants. So it was Sharelle's and my role to start the process of getting the whole town excited at the prospect of the circus coming to town. Using the available collection of sheets, we would put together displays based on the amount of space we had to fill. It was always good to use the poster with a brave man in a Jungle Jim outfit and a knee weakening woman working with him to subdue an entire cage of the King of beasts with only a chair and a pistol. There were, of course, other posters of a beautiful woman walking on a tight wire looking feminine with a parasol over her shoulder and her feet in ballet slippers. The clincher was the poster of a handsome young man performing on a trapeze or the poster of a gorgeous lady flying through the air to the outstretched and waiting arms of a man on another trapeze. Never mind that the sheets we had did not in any way reflect the acts we actually had on the show. But that is, of course, the great thing about the mind. The pictures only conjured up the possibilities of what those acts would actually be on show day. The discussions were long and heated as to what would be the acts on that day.

It was almost more than a young boy could take.

Bear

AOA House of Delegates – A Student’s Perspective

by Whitney Fix-Lanes, OMSII

It’s summertime again and that means summer picnics, July 4th fireworks, summer sports physicals and of course the annual AOA business meeting in Chicago. While Seattle might have had less than 2 hours of summer weather above 80 degrees, Chicago was gearing up for a heat wave during the House of Delegates (HOD) meeting. Over 600 delegates and alternates were present as we debated over 130 resolutions. Some of the most intense discussion occurred at the committee meetings. I was able to attend the Committee on Education.

Although many of the resolutions presented stirred debate, the most contentious subjects were CME and an osteopathic glossary. The resolutions regarding changes to classifications for CME were sent back to committee, so we may or may not see them again. A resolution calling for the AOA to recognize the ECOP osteopathic glossary (the one used by osteopathic medical schools) as the glossary for osteopathic medicine was met with resistance because currently the AOA does not have a voice on the ECOP board. It is a board of the American Association of Colleges of Osteopathic Medicine (AACOM). That resolution sent back to committee to further investigate the lack of AOA voice on the ECOP board. One education resolution that did make it to a floor vote was Resolution H-204 that voiced AOA support for a recent decision by the National Residency Matching Program (NRMP) to disallow allopathic residency programs to sign pre-Match contracts with osteopathic students. Many feel this gave an unfair advantage to osteopathic students, so you can understand why students were opposed to the change. However, the resolution was passed by the HOD and signs point to NRMP ending the pre-Match as of June 2012.

Here are just a few of the resolutions that passed.

H-434 AOA support of Tobacco Free Colleges of Osteopathic Medicine campuses

H-502 The creation of a New Physician in Practice AOA Board of Trustees position

H-621 AOA opposition to the requirement for physician prescription for OTC medications for flexible spending accounts.

One resolution that did not make it to the floor vote was the student-submitted H-505, rejected because it failed to follow proper procedures. SOMA proposed amending the code of ethics to include “sexual orientation or gender identity or expression” in the nondiscriminatory statement. However, that resolution was not published in the JAOA as required by the HOD, so it was ruled out of order and not presented for a vote. The students have vowed to ensure that next year procedure is followed and expect to see it again next year.

Friday and Saturday morning meant listening to some great reports. There was so much information we ran a little behind schedule. Each of the reports is available online to any AOA members who want to know more about any particular subject. However the energetic report of the day was Karen J. Nichols D.O. last report as the President of the AOA. She sang a special rewrite of Jonny Cash’s “I’ve Been Everywhere” highlighting all the locations she visited the past year including all current Osteopathic Medical schools and attending WOMA’s summer convention this past June. Dr. Nichols was the first AOA president who visited all of the Osteopathic Medical schools in one year.

On Saturday evening Dr. Nichols passed her title and duties on to Martin Levine, DO, a family practice doctor from New Jersey. From his speech on how we need to “Think Osteopathically” it seems the AOA will have another great leader this year who will promote

osteopathic medicine on a national level and within the AOA.

The House of Delegates also elected new trustees, including adding, for the first time, a New Physician in Practice position on the board. We also elected the President-Elect, Ray E Stowers DO, a family physician from Oklahoma. If you want to learn more about the AOA leadership, their information is available on the AOA website osteopathic.org

Another great highlight included Barbara Ross-Lee DO presenting the A.T. Still Memorial Lecture and called for all D.O.’s to incorporate more OMT into their daily practice. Her speech was very inspirational and a call to all osteopathic physicians to remember that A.T. Still was not a follower, it was his leadership and vision that has brought this profession to the great place it is today.

The greatest highlight for me was being able to stand up in front of the entire HOD and present my own view on a resolution to cap the number of delegates to the AOA HOD. As a student and delegate for WOMA I stood up and voiced my concerns that the resolution did not account for medical student delegates like myself. In other professional circles I might have been discouraged from speaking or told that my lack of experience caused me to misread the resolution and that the grown-ups had it under control. Instead, I was treated like a peer and thanked for pointing out the inconsistency of the wording of the resolution. Throughout the rest of the HOD DOs congratulated me for standing up and representing the students (and our state) so eloquently. The fact that I was able to represent both our wonderful state and my fellow students and have my voice heard on equal footing with the 438 other delegates made me so proud of our profession and reminded me why I chose to join the ranks of such a great family.