

PRESIDENT'S MESSAGE

Initiative, Innovation and Medicine



CMS President Dr. David A. Loiterman (left) welcomes AMA Speaker of the House Dr. James A. Lazarus to the CMS Council meeting, as CMS the U.S. is no exception. It is Secretary Dr. Kenneth G. Busch joins in the discussion. (See page 4.)

hose who had a chance to watch President Obama's State of the Union address on January 25th observed that the comments drawing the loudest applause and most standing ovations addressed Americans'

initiation and innovation. From our founders' ex-

longstanding penchant for

perimentation in democratic governance in a world ruled by monarchies, to space travel in the 20th century, to the development of nanotechnology and all its myriad applications, Americans have set the world standard for initiative and innovation.

The medical profession in filled with extraordinary

creativity, resulting in many groundbreaking discoveries and inventions, and their rapid commercialization.

John Maa, MD, a general surgeon practicing at the University of California, San Francisco Medical Center, reporting in the

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Inside

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PRESIDENT'S MESSAGE (continued from first page)

January 2011 *General Surgery News*, outlined the six most important priorities of the American College of Surgeons' Division of Health Policy and Advocacy. As a group their priorities consist of developing creative payment methodologies and working with the government's new Center for Medicare and Medicaid Innovation.

The Chicago Medical Society is also working with its membership, academic, public, and private institutions, and other county medical societies across the nation to explore innovative and meaningful shared governance models for health care delivery systems.

Before attending medical school, I had the opportunity to attend a lecture by the late Nobel Laureate in Economics, Milton Friedman, of the University of Chicago.

Without going into detail, the point of the lecture was that macroeconomic theory was at its core an exercise in mass human psychology.

Whether we are dealing in dollars, gold, euros, doubloons or buttons, our financial systems are manmade creations that enable BOTH the aggregate production and consumption of goods and services by individuals.

We attempt to quantify and measure these interactions, but at the core, fiscal policy and taxation are dependent on the interplay of the public's perceptions.

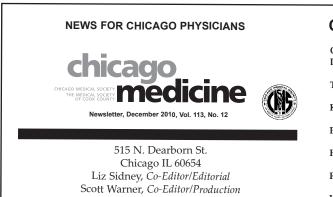
Central to the foundation of the U.S. economy is a strong, educated, diverse middle class empowered to make personal decisions within a framework that promotes and encourages initiative and innovation, AND is perceived as equitable by a majority of citizens.

Most understand that we as a society have an obligation to protect our most vulnerable citizens, but we must do so employing means that do not endanger our overall social fabric.

Protecting the vulnerable requires our nation's leaders to now come together with a unified message and a clear vision of where we are going and how we will get there.

Doul

David A. Loiterman, MD President, Chicago Medical Society



Chicago Medical Society

OFFICERS OF THE SOCIETY David A. Loiterman, MD President Thomas M. Anderson, MD President-elect Kenneth G. Busch, MD Secretary Philip B. Dray, MD Treasurer Howard Axe, MD Chairman of the Council Robert W. Panton, MD Vice-chairman of the Council William N. Werner, MD, MPH, Immediate Past President *Chicago Medicine* (ISSN 0009-3637) is published monthly for \$20 per year for members; \$30 per year for nonmembers, by the Chicago Medical Society, 515 N. Dearborn St. Chicago, Ill. 60610. Periodicals postage paid at Chicago, Ill. and additional mailing offices. Postmaster: Send address changes to *Chicago Medicine*, 515 N. Dearborn St., Chicago, IL 60610. Telephone: (312) 670-2550. Copyright 2010, *Chicago Medicine*. All rights reserved.



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2011 WORKSHOPS:

- □ Wednesday, April 27: Saint Francis Hospital and Resurrection Health Care (Evanston, IL) 2 p.m. to 4 p.m.
- □ Wednesday, May 25: Advocate Christ Medical Center (Oak Lawn, IL) 2 p.m. to 4 p.m.
- □ Wednesday, June 8: Embassy Suites (Downtown Chicago) at 10 a.m. to 12N
- □ Friday, August 5: Advocate Lutheran General Hospital (Park Ridge, IL) 2 p.m. to 4 p.m.
- □ Friday, Sept. 2: Hilton Oak Lawn Hotel (Oak Lawn, IL) 2 p.m. to 4 p.m.
- □ Wednesday, Sept. 21: Embassy Suites (Downtown Chicago) 10 a.m. to 12N
- □ Wednesday, Oct. 19: Advocate Christ Medical Center (Oak Lawn, IL) 2 p.m. to 4 p.m.
- □ Friday, Oct. 21: Doubletree Hotel-Chicago (Oak Brook, IL) 9:30 a.m. to 11:30 a.m.
- □ Friday, Nov. 4: Advocate Lutheran General Hospital (Park Ridge, IL) 2 p.m. to 4 p.m.

SPEAKER: Sukhvir Kaur, MPH, Compliance Assistance Specialist, OSHA-Chicago North Office. *Ms. Kaur has disclosed that she has no relevant financial relationships with commercial interests.*

The following planning members of the Chicago Medical Society's CME Subcommittee on Joint Sponsorship and staff have disclosed the following: Vickie Becker, MD, Chairman, Roger L. Rodrigues, MD, Planning Member, Bapu P. Arekapudi, MD, Planning Member, Marella L. Hanumadass, MD, Planning Member, Vijay Yeldandi, MD, Course Director, and Cecilia Merino, Director of Education, have no relevant financial relationships with commercial interests.

ACCREDITATION AND DESIGNATION STATEMENTS:

This activity has been planned and implemented in accordance with the Essential Areas and Policies of the Accreditation Council for Continuing Medical Education (ACCME). The Chicago Medical Society is accredited by the ACCME to provide continuing medical education for physicians.

The Chicago Medical Society designates this educational activity for a maximum of 2.0 **AMA PRA Category 1 Credits™.** Physicians should only claim credit commensurate with the extent of their participation in the activity.

REGISTRATION: Register Online at <u>www.cmsdocs.org</u> or contact Elvia Medrano at (312) 670-2550, ext. 338, or <u>emedrano@cmsdocs.org</u>

COUNCIL HIGHLIGHTS

AMA's Dr. Lazarus details priorities for 2011



Dr. Jeremy A. Lazarus, AMA Speaker of the House, updates the CMS Council on AMA advocacy to fix Medicare physician payment.

The CMS Council met on Tuesday, Nov. 15, 2010, at Maggiano's Banquets, to hear updates and set policies for the Society through the adoption of resolutions.

Support for Chicago Clean Power Ordinance

Councilors adopted a resolution to support the Chicago Clean Power Ordinance in the form presently being considered in the City Council. The resolution calls upon CMS to support the reduction of particulate matter emissions from power generating facilities and to support prompt passage of the ordinance by the City Council.

The ordinance would correct a grandfathering provision that exempts the Fisk and Crawford Power Plants from meeting state and federal emission requirements. Although costly, both plants are capable of converting to natural gas to comply with the rules, according to the resolution's sponsors. But in the event the owner decides to shut the plants down, the ordinance should pledge to help displaced employees, they stated.

The federal government gave the power plants until 2018 to comply, but the ordinance reduces the time to four years, enough time for the plant owners to comply, the sponsors said. Peter Orris, MD, MPH, Philip B. Dray, MD, Ann Marie Dunlap, MD, Councilors, District 6, sponsored the resolution. As of press time, a hearing was set for the Chicago Clean Power Ordinance on Feb. 14, according to Ald. James A. Balcer (11th Ward), the newly appointed chair of the City Council's Health Committee.

The Council meeting also included presentations from leaders at the AMA and ISMS.

AMA leader describes 2011 priorities

Faced with both historic challenges and new opportunities, the AMA will use 2011 to focus on three priorities, according to Speaker of the House, Jeremy A. Lazarus, MD, and guest speaker at the CMS Council meeting.

Topmost on the agenda is fixing Medicare physician payment and repealing the SGR; shaping and improving provisions in the Affordable Care Act; educating physicians about new payment and delivery models, while also influencing how they are being formed.

Here is an update of AMA advocacy to accomplish these goals, according to Dr. Lazarus:

• Medicare Crisis. Under intense pressure from organized medicine and patients, the lame duck Congress enacted a 13-month payment package in December 2010. The AMA is now urging Congress to spend 2011 developing a permanent solution to this yearly crisis. Last summer, an AMA-convened Task Force sent a joint letter, signed by 66 national physician organizations, 50 state medical societies and the District of Columbia, to every member of Congress. The letter relayed the following consensus points: payment stability is essential; reform can only be accomplished in stages; and physicians should be the ones to propose, develop, and assess new payment models to replace the SGR.

Medicare payment reform will require writing off the accumulated SGR debt, or identifying over \$300 billion in savings or revenue offsets to finance a permanent SGR repeal, according to Dr. Lazarus. The fix alone requires \$15 billion in funding from Congress.

• Patient and Physician Outreach. During elec-

(continues on page 6)



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COUNCIL HIGHLIGHTS (continued from page 4)

tion season, AMPAC reached out to a million people over age 55, urging them to call their senators and representatives and demand they stop the Medicare payment cuts. Over three days, this activity generated more than 34,000 calls via the AMA toll-free hotline to Senate offices, with another 11,500 callers unable to get through because of jammed phone lines. In related efforts that gained widespread media attention, AMA President Cecil B. Wilson, MD, conducted a press conference, wrote an op-ed for use in physician publications, while the AMA ran full-page ads in USA Today and Beltway publications highlighting the crisis and urgent need for action. To help physicians decide whether to change their status with the Medicare program, the AMA offered an updated and expanded Medicare participation guide. And on "White Coat Wednesday" physicians from across the country called their senators using the grassroots hotline (800) 833-6354.

• Medicare private contracting. In June 2010 the House of Delegates directed the AMA to draft legislation to give Medicare patients and their physicians the right to privately contract without penalty. The following November, the House directed the AMA to launch grassroots campaigns in support of this legislation. The AMA's four-part strategy consists of public opinion research and message testing; engaging both physicians and patients to educate Congress; securing a formal bill of in-



Medical student Joshua Williams gives testimony in support of his resolution, asking CMS to adopt an official position on the posting of calorie counts in restaurants, as required by new health reform law.

troduction; and enlisting congressional co-sponsors. Active participation throughout the Federation is necessary to carry out these activities.

The "Medicare Patient Empowerment Act" would create a patient-centered payment category, allowing physicians to contract privately on a patient-by-patient basis for a fee different from the Medicare payment schedule. The patient would retain the right to be reimbursed by Medicare for the allowable fee.

• **Regulatory policies.** Efforts are underway to positively shape key regulatory policies within the



COUNCIL HIGHLIGHTS (continued)



Dr. Peter Orris comments on a resolution, as Dr. Howard Axe waits to share his thoughts.

Affordable Care Act for physicians. Continuing over the next few years, those efforts involve establishing appropriate medical loss ratios; shaping uniform appeal rights under the new law; and providing needed input toward state-level health insurance exchanges.

• **Payment related issues.** The AMA is working to ensure physicians won't be subject to arbitrary cuts by the Independent Payment Advisory Board authorized in the ACA. Efforts are also directed at improving the accountability of Medicare administrative contractors through performance standards, eliminating future penalties for failure to participate in the Medicare quality reporting program, and streamlining the administrative requirements for the PQRI program.

• **Delivery reforms.** The ACA authorizes voluntary testing of new delivery and payment reforms to improve quality and "bend the cost curve," such as including bundling, the medical home, and shared savings. These provisions had strong bipartisan support in Congress. The AMA gave input to the Centers for Medicare and Medicaid Services on the implementation of these models, according to Dr. Lazarus. The AMA also participated in a White House-hosted Physician Summit on Delivery Reform, to give input on delivery and payment reforms. At that time, AMA leaders communicated the new AMA principles on ACOs, which the House adopted last November. In addition to shaping ACOs optimally for physicians, the AMA is educating physicians about the models and opportunities they provide, Dr. Lazarus said. Resources can be accessed through the AMA's website at www.ama-assn/go/pathways.

Mixed support for AMA stance on health care reform

Following Dr. Lazarus' presentation, some councilors expressed disappointment with the AMA for supporting the 2010 health care reform legislation, while others commended the organization. Dr. Lazarus responded that the AMA gave its qualified support, knowing that certain things had to be fixed, but agreeing that the benefits outweighed the problems. The AMA Board acted on policy passed by the House, which itself had mixed opinion, Dr. Lazarus said. He emphasized the ACA is a patient bill, not a physician bill. A few councilors suggested the AMA be more physician-centered, and Dr. Lazarus answered that AMA's mission is "to help doctors and provide value on a day-to-day basis." As an example, he cited the one-stop portal for EMR guidance and resources available on the AMA website.

Returning to a theme of physician unity, Dr. Lazarus emphasized that physicians are living in "historic times, and now is not the time to move away from organized medicine. Physicians have more common ground than the issues dividing them," he concluded.

ISMS looks to 2012 and beyond

Reshaping the legislature, the courts, ISMS programs, services

ISMS President Steven M. Malkin, MD, updated councilors on the latest ISMS initiatives and activities on behalf of members. Here are highlights of his talk:

• State elections. With the election of six Republicans to the Illinois House and two to the Illinois Senate, the Illinois General Assembly moved closer toward achieving a "medical majority." Dr. Malkin defined the medical majority as a group of (continues on page 9)



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COUNCIL HIGHLIGHTS (continued frm page 7)



Dr. Robert W. Panton, Vice-chairman of the CMS Council, addresses the group, flanked by Dr. Thomas M. Anderson, CMS President-elect.

bipartisan legislators whom ISMS and IMPAC can work with to achieve sound medical policy decisions in the state Capitol, in addition to helping stave off bad medical legislation.

• Judicial races. Although the Court's composition remains the same, ISMS/JUSTPAC waged a fierce battle to unseat Justice Thomas Kilbride. Their activism built a solid foundation upon which medicine must expand to achieve success in the 2012 elections and beyond, said Dr. Malkin. In addition, trial lawyers were forced to devote precious resources toward retaining Justice Kilbride's seat. New Supreme Court Justice Mary Jane Theis, who was appointed to replace retiring Chief Justice Thomas Fitzgerald, is up for full election in 2012. In the interim, IMPAC and the Illinois Civil Justice League will be carefully monitoring her record, pledged Dr. Malkin.

• A new conversation urged. Now is the time to start a new conversation about medical policy issues with newly elected or re-elected legislators, regardless of their political party, Dr. Malkin urged. Doctors who need assistance or want to know how to contact their local state representative or senator, should contact the ISMS Division of Governmental Affairs.

• Strategic plan for reshaping the Society. ISMS grassroots physician members, practice managers,

and even non-members are invited to participate as the ISMS Board launches a comprehensive process to explore reshaping the Society. To remain relevant and continue to meet the challenges facing physicians, ISMS will look at everything from membership, activities and programming, to organizational structure and governance. The aim is to broaden the appeal and relevance of organized medicine as physicians shift to new modes of practice and require different forms of advocacy. Findings and recommendations will come before the Board and the ISMS House of Delegates at a future meeting-most likely 2012. For more information, or to participate, physicians should contact Dr. Malkin, or any physician who represents them on the ISMS Board.



CHALLENGES

Workforce study confirms: Illinois faces worsening physician shortage

A NEW ISMS-BACKED WORKFORCE STUDY substantiates that Illinois must develop strategies to keep its medical residents as practicing physicians or risk a worsening physician shortage, especially in underserved areas, Dr. Malkin reported.

The report was conducted by Northwestern University Feinberg School of Medicine, in partnership with the ISMS and the Illinois Hospital Association.

The study also found that Illinois' reputation as a medical liability "hellhole" plays a significant role in dissuading medical graduates from remaining in the state, Dr. Malkin said.

The 2010 Illinois New Physician Workforce Study is the result of a large-scale survey of 561 graduating Illinois residents. The respondents were asked about where they planned to begin practicing medicine and why.

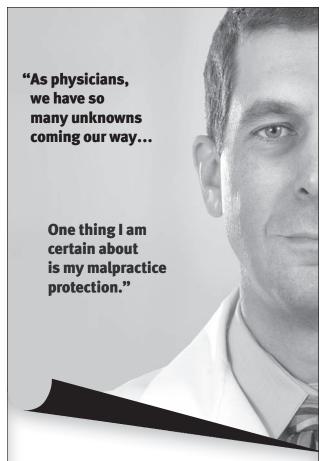
CMS and ISMS member Russell Robertson, MD, professor and chair of family and community medicine at the Feinberg School, and chair of family medicine at Northwestern University, was lead author of the report.

The study found that only 1.5% of graduating residents or fellows plan to practice in an underserved or rural setting. However, 20% of Illinoisans live in already underserved communities. Despite the fact that Illinois' physician job market is quite healthy, many residents do not know how to find employment, Dr. Malkin said.

The study calls for legislators to create an Illinois Physician Workforce Institute to address the many challenges outlined in the study.

Physicians can mentor, educate legislators

ANY INTERESTED PHYSICIAN CAN MENTOR a legislator in a Mini-intership or suggest a Legislative Breakfast. CMS will handle all the arrangements for you. If you would like to attend or suggest a Legislative Breakfast or spend a day in the Mini-internship Program educating a legislator, please contact Ashley Robbins at (312) 670-2550, ext. 326, or arobbins@cmsdocs.org.



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PEER PARTY



CMS Student District members, residents and guests came out in full force to enjoy the festivities at Rock Bottom Brewery in January.

Young members enjoy evening of networking and camaraderie

APPROXIMATELY 70 STUDENTS, RESIDENTS, and young physicians from Cook County's seven medical schools flocked to Rock Bottom Brewery on Jan. 14 to network, shoot pool, and learn about opportunities within CMS.

Karina Shah, Co-chair of the Student District, highlighted member benefits such as the student volunteer event at the Greater Food Depository, held on Saturday, Feb. 12. Ms. Shah, a student at Rosalind Franklin University of Medicine and Science—The Chicago Medical School, also announced upcoming Student District elections and deadlines.



Dr. Mary Jo Fidler, CMS Councilor-at-large (*right*), visits with a medical student.



Karina Shah, Co-chair of the CMS student district, from the Chicago Medical School at Rosalind Franklin University, welcomes her peers with Abdul Baig, student councilor from Midwestern University-Chicago College of Osteopathic Medicine.



Sharing time together, Chicago-area medical students learned about the benefits of joining CMS.

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INVITATION TO JOIN

CMS offers opportunities, services to practice managers

PRACTICE MANAGERS IN COOK COUNTY have a new option for meeting their professional needs and exploring their interests. By joining the Chicago Medical Society's newly established Practice Manager Section, they have access to comprehensive services in a solid, structured program designed especially for them.

The new section offers tools for professional growth, including:

• Networking opportunities with other practice managers in Cook County.

• Educational programs and resources.

• Online forums and blogs to discuss medical management issues with colleagues.

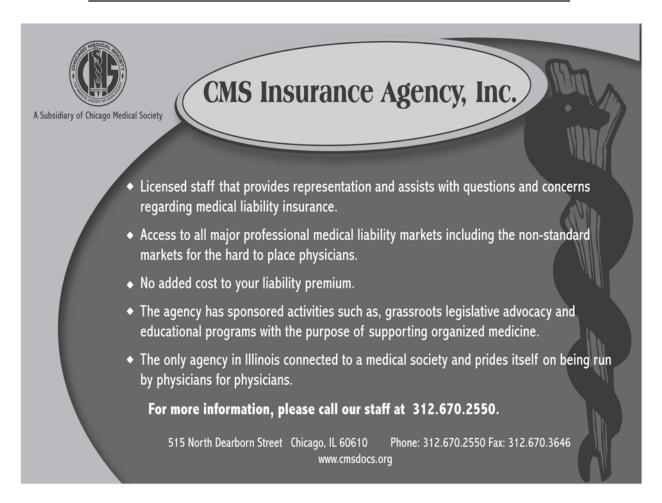
• Online career center.

• Practice solutions.

"All practice managers in Cook County are invited to join the Chicago Medical Society's new Practice Manager Section," said CMS President David A. Loiterman, MD." When you become a member of CMS, you join one of the oldest and largest county medical societies in the U.S., representing 17,000 physicians of all specialties, and their six million patients."

Practice managers who work in the offices of CMS/ISMS members receive the reduced dues rate of \$99. Those in nonmember offices pay \$395.

Please see the application form on page 15 *to learn more and to sign up.*



Practice Manager Application



Practice Manager Section

First name	MI	Last name			
Suffix (e.g. Jr., MD, MB/	A)	Title		What is the number of physicians	in your practice?
				What type of medical practice is y	our organization?
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				Multi-specialty primary/specialty	al care
Address		□ Work	c □ Personal	□ Multi-specialty care only	
				□ Multi-specialty primary care o	only
City	State	ZIP		🗆 Not applicable	
Email				What is your practice's single spec	ialty?
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URGE LEGISLATORS TO VOTE "NO"

Drastic changes to Workers' Compensation Act reintroduced

AS EXPECTED, A PROPOSAL THAT WOULD seriously harm physician practices and injured workers (SB 1349) has been introduced to the Illinois General Assembly. And efforts are underway to severely reduce the medical fee schedule, collapse the geographic fee schedules, remove the patient's ability to choose their own physician and adopt medical guidelines that are not in the injured worker's best interest.

This bill would create a new medical fee schedule that would base reimbursements on the Medicare payment system. It would also allow the employer to choose all medical, surgical and hospital services provided to the injured worker. SB 1349 also provides for a waiver of employee privacy so the employer can obtain necessary decisionmaking information.

Please contact your legislator today and urge a "NO" vote on SB 1349.

This bill would:

•Remove injured workers' first choice of physician and give it to the employer.

•Allow employers to choose "all necessary" medical, surgical and hospital services.

•Reduce workers' comp fee schedule rates to 160 percent of Medicare rates.

•Impose inappropriate utilization review guidelines.

Urge state lawmakers to oppose SB 1349 and all other attempts to change the Illinois Workers' Compensation Act without physician input. Physicians and the larger medical community must be party to any discussions regarding the Illinois Workers' Compensation Act!

Go to the ISMS or CMS Grassroots Advocacy Center at www.isms.org or www.cmsdocs.org

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ISMS House of Delegates approaching: Three dates to remember!

THIS YEAR'S ISMS HOUSE OF DELEGATES meeting will be held at the Oak Brook Hills Marriott Resort, and some important dates are coming up fast.

March 1 – Resolution Deadline: Delegates must submit their resolutions to ISMS by March 1 for inclusion in the House packet.

March 26 – Room Reservation Deadline: ISMS has reserved a block of hotel rooms at the Oak Brook Hills Marriott that are available at a discount to ISMS members. If you wish to take advantage of this special rate, you must make your reservation by clicking the link on www.isms.org/hod by March 26.

April 15-17 – *House of Delegates Meeting:* The meeting itself will be held Friday through Sunday, April 15-17. Registration opens at 3:00 p.m. on Friday, and the House will come to order at 8:00 p.m. Several CME sessions will also be available, so check *www.isms.org/hod* for more details.

Gone but not forgotten: our familiar issues we may see in the 97th General Assembly

If you read last month's legislative update and assumed that the items addressed by the 96th session of the General Assembly were settled, think again! There are at least four issues of primary importance to physicians and patients that are very likely to reappear in the near future, and your action is needed to make our voice heard in Springfield.

Legislation dealing with **physicians accused or convicted of sex crimes** is likely to be a top priority for the 97th General Assembly. ISMS has worked extensively with State Sen. Kirk Dillard to draft strong legislation that addresses flaws in Illinois' physician discipline process, but we also expect challenges from other lawmakers who seek to implement more draconian measures that do not protect physicians' right to due process. The passage of HB 5085 was a setback, but our effort to ensure fair payment for **out-of-network services provided at in-network hospitals** goes on. In February, ISMS will introduce and champion legislation that represents a fair middle ground between insurance companies and out-of-network hospital-based physicians when negotiating reimbursements. Watch your ISMS publications for further updates on this important effort.

Another high priority for the Illinois legislature is **workers' compensation "reform."** No legislation was passed during the last session, but many lawmakers view workers' compensation as an easy target for drastic cuts and other measures that are harmful to patients. Major cuts to the workers' comp fee schedule are being considered, along with a proposal to take away the patient's right to choose a doctor, giving it instead to the employer. We will continue to oppose these and other changes that threaten patient access to care, and we will fight to make sure that input from all stakeholders – including physicians – is considered in this debate.

A proposal to **license direct-entry midwives** with minimal training, allowing them to administer drugs and provide unsupervised home birthing services, was defeated in the closing days of the last session. We expect similar legislation to be introduced in the current session, and will continue to fight this dangerous proposal that threatens the lives of some mothers and their babies.

ISMS is a strong voice for Illinois physicians, but we can only speak as loudly as our members. Watch these and other important legislative issues on ISMS' Legislative Action Hub, in the Governmental Affairs section of *www.isms.org*. Contact your elected representatives directly or through ISMS' Grassroots Action Center, also found on our website. With your help, we can prevent other interests from threatening the quality and availability of patient care in Illinois.

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CALENDAR OF EVENTS

MARCH 3

District 5 Meeting on Diabetes (Sanofi-Aventis) 6:00-9:00 p.m.

Ditka's Restaurant, Oakbrook Terrace

MARCH 16

CMS Online Executive Committee Meeting 8:00 a.m.

MARCH 16

ISMS Executive Committee Meeting 12:00 p.m. **ISMS Headquarters**

MARCH 16

Chicago Gynecological Society Meeting 6:00-8:30 p.m. Maggiano's, Skokie

APRIL 15

ISMS Board Meeting 9:00 a.m.. -3:00 p.m. Oak Brook Hills Marriott Resort

APRIL 15-17

ISMS HOD Meeting Oak Brook Hills Marriott Resort

APRIL 20

CMS Executive Committee Meeting 8:00 a.m. **CMS Headquarters**

APRIL 20

CMS Board of Trustees Meeting 9:00 a.m. **CMS** Headquarters



Your Map to the Road Ahead:

April 15 - 17, Oak Brook, IL

Educational Programs at the 2011 ISMS Annual Meeting



Not the Blame Game: A Systems Approach to Finding Problems and Fixing Them Tom Beckett

Risk Management Consultant Friday, April 15, 3 - 6 p.m.

Experienced risk management consultant Tom Beckett will teach physicians a systems-based approach to problem solving in their practices, taking into account the complexities of running a medical practice. This approach will help physicians deal with administrative problems and adverse medical outcomes in a more context-sensitive way

Health Reform and the Future of the Physician's Practice David Dranove, PhD

Walter McNerney Distinguished Professor of Health Industry Management, Northwestern University Saturday, April 16, 12:15 - 1:30 p.m.

Dr. Dranove will discuss the future of medical practice in the wake of the passage of the Patient Protection and Affordable Care Act (ACA), and how the changing health care landscape will directly affect physicians and their patients. He will provide insight into the changing structure of our health care system and the shifting dynamics of the relationships among physicians, hospitals, patients and payers. Physicians will learn how to strategically anticipate and prepare for these complex changes and challenges, making the best of their situation under the new law



Illinois State Medical Society

The "Seven Pillars" Approach: Improving Patient Safety and Decreasing Liability through Transparency Timothy McDonald, MD, JD Professor of Anesthesiology and Pediatrics, University of Illinois at Chicago; Chief Safety and Risk Officer for Health Affairs, University of Illinois

Saturday, April 16, 2:15 - 3:30 p.m. ISMS member Dr. Tim McDonald will discuss his research into methods of bridging the gap between patient safety and medical liability concerns. This research focuses on preventing medical errors and responding well when they do occur. Dr. McDonald will show how procedural

improvements and appropriate communication with patients in all phases of care can improve patient safety and reduce medical liability costs. In addition, he will focus on the process of ensuring that physicians and hospitals work together to respond appropriately when harm occurs.

Member Advocacy Panel: How to Be Prepared for a Changing Health Care Landscape ISMS Member Advocacy Team

Saturday, April 16, 4:00 - 5:15 p.m.

This session will consist of a panel discussion showcasing ISMS? Member Advocacy team, who will provide concrete insights into the steps individual physicians must take to prepare for the new regulatory changes and accountability measures that are coming as a result of health reform. Physicians will have the opportunity to ask questions and interact with Member Advocacy staff, learning more about their own responsibilities and the services ISMS can provide to help them.

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Chicago Medical Society in Action!

State Rep. Karen Yarbrough participates in the CMS Mini-Internship program with host Dr. John Gianopoulos at the Stritch School of Medicine.



CMS Mini Intership Program State Rep. Karen Yarbrough



State Senator Christine Radogno

State Senator Christine Radogno (right) shares ideas on health care as she tours Adventist La Grange Memorial Hospital with (from left) Dr. Mark Moy, Nancy Burke, RN, and Dr. Vickie Becker.

Dear CMS Member:

The Chicago Medical Society (CMS) has been very active in 2010 serving members and their patients.

Our legislative advocacy programs continue to connect members directly to their legislators. As a result, civic leaders are learning more about the complexities and realities of practicing medicine. Through our ongoing communications with legislators, the Society is positioning itself as a resource on health policy issues, helping to set the stage for a healthier tomorrow

I have included snapshots of our legislative activities in Cook County, as well as in Washington, DC.

In addition to our advocacy programs, (Mini-internship and Legislative Breakfast), CMS is launching a public health campaign to educate communities on hands-only CPR. Called Project Smile, (Saving More Illinois Lives through Education) this program aims to increase bystander participation during witnessed cardiac arrests. Effective bystander CPR has been shown to increase survival rates in communities adopting such programs. In addition to the Chicago area, Project Smile will target communities surrounding Cook County, using CMS members to give presentations.

If you would like to participate in the Mini-internship Program or schedule a Legislative Breakfast at your hospital, please contact CMS at (312) 670-2550, or visit our website www.cmsdocs.org.

Sincerely,

Sil Lateman M.D. 12

David A. Loiterman, MD, FACS President Chicago Medical Society

David A. Loiterman, MD in Washington, D.C. advocating on behalf of Chicago physicians and their patients.



Washington D.C.

Dr. Benedetti (third from left) leads Rep. Soto (far left) and Director Maram through a live-donor kidney transplant at the Walter Payton Liver Center UIC



CMS Mini Internship State Rep. Soto

George Cybulski, MD, Philip Dray, MD, State Rep. Sara Feigenholtz (12th Dist.), Terry Mason, MD and Randall Mark, Director of Intergovernmental Affairs & Policy host the Rep. at John H. Stroger, Jr. Hospital Cook County Health and Hospital System.



CMS Mini Internship State Rep. Feigenholtz



U.S. Congressman Rep. Danny Davis

David A. Loiterman. MD and Dr. Kenneth Busch met with U.S. Congressman Rep. Danny Davis (7th District) to discuss your concerns about the healthcare delivery system in Chicago and the rest of Cook County.



State Rep. Soto

Enrico Benedetti, MD, (left), hosts State Rep. Cynthia Soto and Barry Maram, Director of Healthcare and Family Services of Illinois, for a CMS Mini-Internship at UIC



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