



CHICAGO MEDICAL SOCIETY
THE MEDICAL SOCIETY
OF COOK COUNTY

chicago medicine

Newsletter, April 2008, Vol. 111, No. 5

CARDIOVASCULAR DISEASE IN THE ELDERLY
DATE: SATURDAY, MAY 10 TIME: 7 A.M.-1 P.M. SEE PAGES 8-9
FREE 3.5 HRS. CME

MESSAGE FROM YOUR PRESIDENT

More roadblocks on judicial trail

Judge rules in favor of plaintiffs; refuses to "stay" reform law until high court review



There is new activity as ISMS continues the journey to preserve critical medical liability reforms in Illinois. On March 10, Cook County Court Judge Diane Larsen ruled against ISMS' request for a delay in enforcement

(known as a "stay" in legal terms) of her order declaring the law unconstitutional. This signals the circuit court's unwillingness to keep the law in place, even temporarily, until high court review. While this adverse decision technically affects only the individual lawsuit to which it pertains, it may be considered a precedent

by some Chicago-area civil courts.

The deadline for legal briefs on the constitutional case is set for the first part of June. ISMS and ISMIE Mutual will be filing briefs, to which the plaintiff will respond. ISMS will then have two weeks to prepare its rebuttal. The entire briefing process could last from two to three months, from start to finish.

On the educational front, ISMS and ISMIE Mutual are producing a series of radio ads to air around the state. Their purpose is to heighten public awareness on the important issue of medical liability and its potential consequences for patient access to medical care.

Visit www.realitymedicine.com to hear these ads or for more information, including news releases, posters, or a copy of the *Reality Medicine* issue booklet.

We will continue to provide updates.

Sincerely,

Saroja Bharati M.D.

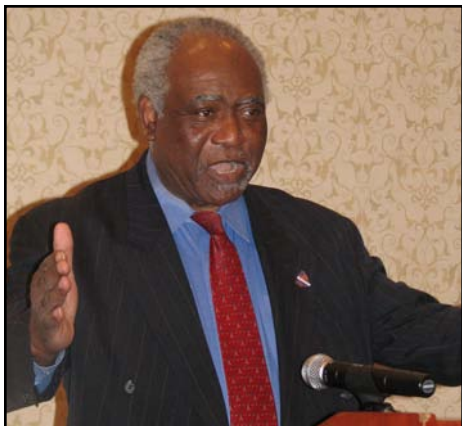
Saroja Bharati, MD

President, Chicago Medical Society

Source: ISMS and ISMIE Mutual's *Reality Medicine*

MIDWEST CLINICAL CONFERENCE 2008

A cornucopia of timely CME offerings draws praise from participants



U.S. Congressman Danny K. Davis, PhD.



Dr. Bharati bestows honorary CMS membership status on Nobel Prize winner Louis Ignarro, PhD.



Assistant Surgeon General James M. Galloway, MD.

THE LATEST SCIENTIFIC AND CLINICAL ADVANCES in medicine were on display this March at CMS' Annual Midwest Clinical Conference in Oak Brook.

Experts from Chicago's leading teaching institutions led sessions on robotic assisted surgery, diabetes, hypertension, coronary heart disease, and women's health. They educated your colleagues on psychiatry for primary care, cancer in adults, telemedicine and humanitarian relief, organ transplantation, and stem cell transplantation.

On the business side, MCC offered courses on pay-for-performance, Medicare 2008, contract negotiations, and OSHA 2008. Other sessions dealt with end-of-life care and the physician/patient relationship.

Nearly 200 attended the three-day educational and networking event held March 27-29.

The line-up of distinguished keynote speakers, introduced by CMS President Saroja Bharati, MD, included Nobel Laureate Louis Ignarro, PhD; Assistant Surgeon General James M. Galloway, MD; ISMS President Rodney Osborn, MD; and Illinois Congressman Danny K. Davis, PhD.

CMS honored pediatrician Rabi F. Sulayman, MD, of Advocate Hope Children's Hospital, with its Annual Public Service Award. Dr. Sulayman is credited with single-handedly "developing, planning and bringing people together to create a new" children's hospital 10 years ago. (The spring issue of *Chicago Medicine* will feature an article on Dr. Sulayman.)

Altogether, MCC 2008 offered more than 30 courses, providing attendees with up to 20 CME credits.



Daniel Yohanna, MD, (left) and Shastri Swaminathan, MD, ISMS president-elect, lead the session "Psychiatry Update for Primary Care."



Attorney Terrell J. Isselhard gives insight into "Negotiating Physician Employment Agreements."

(continued on page 4)



ILLINOIS MEDICAL LAWSUIT REFORM

AFTER TWO YEARS OF HEALING

TRIAL LAWYERS WANT TO REOPEN THE WOUNDS.

Imagine being seriously injured in an accident. You receive prompt, professional medical treatment that saves your life. Then, just as you're on the brink of recovery, that treatment is taken away.

Prior to 2005, when medical lawsuit reforms became Illinois law, out-of-control liability premiums and jury awards had seriously injured our state's health care system. This forced many doctors to cut back services, leave Illinois, or retire early. The result? Many patients could not access the care they desperately needed.

Since the reforms were enacted, we've begun a near-miraculous recovery. We've stemmed the flow of doctors leaving the state, assuring greater access to care for patients. We've reduced skyrocketing medical liability premiums that are ultimately passed on to employers, workers and their families in higher health insurance costs. In short, we've started to mend a medical liability system that was on the brink of collapse.

Now, trial lawyers want to overturn this fair, sensible—and *necessary*—reform and take us back to the dark days of excessive jury awards, higher medical liability premiums, escalating health care costs, and reduced access to care for patients.

Don't let trial lawyers destroy the progress we've made on medical lawsuit reform. Let's continue working to close the wounds, provide patients with the care they deserve, and keep physicians in Illinois.

FOR MORE INFO, VISIT WWW.REALITYMEDICINE.COM.



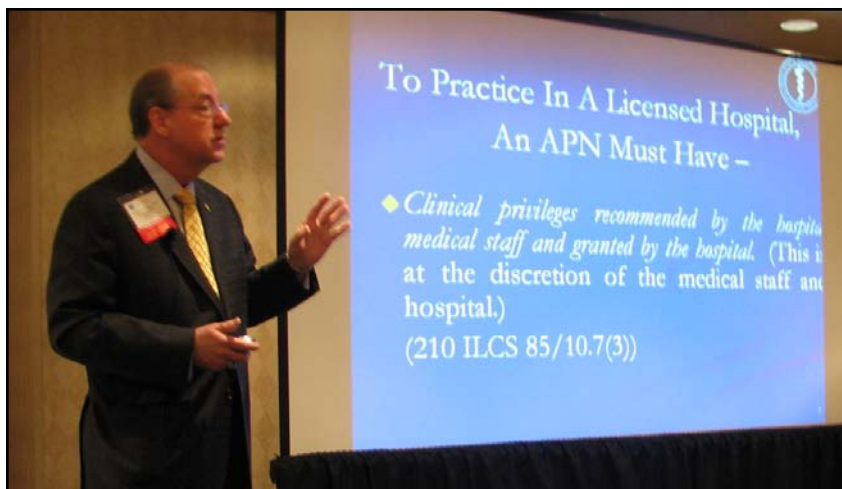
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ISMS President Rodney C. Osborn, MD, spoke on "Allied Health Professionals: Scope of Practice Changes." CMS President Saroja Bharati, MD, served as course director and moderator.



Kelly E. Guglielmi, MD, course director, on Clinical Updates in Hypertension.

CHAMP: Building a Healthier Chicago

Whether working with individuals or large entities, cardiologist and keynote speaker, James Galloway, MD, is on a mission to improve the nation's public health. Appointed by the U.S. Assistant Secretary of Health and Science (Joxel Garcia, MD, MBA) to boost prevention efforts in Chicago, Dr. Galloway brings to the job a background in the U.S. Public Health Service and 23 years' experience working with Native Americans.

Speaking before the MCC opening breakfast session on March 27, the Regional Health Administrator and Assistant Surgeon General described his role as "building synergies among public health organizations." He said he is currently spearheading "Building a Healthier Chicago," a

community-wide collaboration involving CMS, AMA, the Chicago Department of Public Health, and many others, in a partnership that will be replicated nationwide.

An important early step of the program will be capturing data for study.

"We will be gathering anthropometric information and BP, and in some cases other parameters as well, such as lipids, A1c, etc., on a longitudinal basis from numerous sources, attempting to capture a broad representation of our city population," he explained.

Each organization will promote, track and reinforce each others' efforts in prevention activities, according to Dr. Galloway, who says change must be made at the environmental, system and policy

(continued on page 5)

NEWS FOR CHICAGO PHYSICIANS

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Newsletter, April 2008, Vol. 111, No. 5

515 N. Dearborn St.
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Dr. Bharati presents Rabi F. Sulayman, MD, of Advocate Hope Children's Hospital, with the CMS Annual Public Service Award.

With rates for obesity, diabetes and high blood pressure on the rise (28% of adult Chicagoans have been told their blood pressure is high), the need for intervention has never been greater.

What can doctors do? Dr. Galloway recommends they "advocate on their patients' behalf, promote good work, share their talents, distribute information, and join CHAMP (Community HeAlth Mobilization Program)." The program is building a presence in schools, having lobbied against junk food in vending machines and arranged public health screenings.

Doctors can join CHAMP/Building a Healthier Chicago by volunteering to assist in planning and implementation, mentoring, speaking at community and professional events, placing materials in their waiting rooms and directly referring patients to activities.

Look for more details on the CHAMP program in coming months.

Nobel Laureate describes body's natural anti-aging molecule

Keynote speaker Louis Ignarro, PhD, was awarded the 1998 Nobel Prize in Medicine for discovering that nitric oxide (NO), an organically produced signaling molecule, helps control blood flow to every part of the body.

While his work was instrumental in the development of Viagra, it also revolutionized the science of arterial aging. NO is now considered the body's natural internal medicine for cardiovascular health.

levels. He cited the dearth of fresh produce in poor neighborhoods, the residents' lack of access to education, and the low reimbursements to physicians.

With rates for obesity,

By relaxing and enlarging blood vessels, NO regulates blood pressure, prevents blood clots and protects against the accumulation of vascular plaque. It further improves the function of cells lining the blood vessels of the body, including those in the heart. And there's a lot people can do to enhance it, states Dr. Ignarro. Exercise stimulates NO production in the arteries; in athletes there is well-defined chronic NO production, he says.

Inspired by these findings, Dr. Ignarro changed his own lifestyle, running his first marathon four years ago, at age 62. Since then he has competed in 12 more.

Dr. Ignarro is the Jerome J. Belzer, MD, Distinguished Professor of Pharmacology at UCLA School of Medicine.

CMS bestowed honorary membership status upon Dr. Ignarro for his outstanding contributions to the advancement of medicine.

Scope of practice changes and concerns

Analyzing how scope of practice changes will affect physicians and hospitals was the subject of an interactive session led by ISMS President Rodney C. Osborn, MD. Teaming up with Legal Counsel Robert John Kane, Dr. Osborn focused on advanced practice registered nurses (APNs), physician assistants (PAs), and pharmacists. He distinguished between APN and PA hospital practice while identifying key medical staff issues (See article in the winter issue of *Chicago Medicine* magazine.) ISMS is developing model medical staff by-laws provisions for its membership, Dr. Osborn reported. He also highlighted the widely expanded scope of practice for pharmacists, which includes the new responsibility of medication therapy management. At the session's end, Dr. Osborn stressed the importance of building relationships with patients and encouraging them to share details of their medical histories and medications with physicians. Patients, he said, need to seek regular preventive care from a physician and keep in mind that pharmacy personnel have varying levels of education.

For Health Care: It's the Best of Times, Worst of Times

U.S. Congressman Danny K. Davis' district in-

(continued on page 6)

MCC (continued)

cludes 21 hospitals, with more hospital beds than any congressional district in the country.

"But one can go a mile from the medical center and see the most dire health needs in North America," Rep. Davis told doctors during his MCC keynote address.

These disparities exist because the United States, the most technologically proficient country on earth, does not put enough resources into the health-care system.

"We can't say everyone should have access to doctors but we're going to cut Medicaid and Medicare," Rep. Davis explained, noting that when people don't feel well, they can't be productive members of society.

Doctors, he believes, are looking for new ways to influence public policy.

"Wherever the most money goes, that's what influences decisions."

Rep. Davis says he strongly favors change. "We have the greatest budget deficit in history. For the first time, today's children can't project they'll be better off than their parents."

But Rep. Davis ended on a hopeful note.

When challenged, this country has always connected to something within, and found the inner strength to pull through the worst of times, he said.

CMS congratulated Rep. Davis for his sponsorship of the Second Chance Act, which both the House and Senate have passed. As of press time, the bill was on its way to the president to be signed into law. The legislation will provide transitional assistance to assist ex-offenders in coping with the challenges of reentry.

(continued on page 7)

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Our thanks to special sponsors, exhibitors

MCC Special Sponsors

IN APPRECIATION OF THEIR GENEROUS SUPPORT of the Midwest Clinical Conference, CMS gives a special thanks to **ISMIE Mutual Insurance** for being this year's **Diamond Level Sponsor**; to **National City Bank** and **Pfizer Pharmaceuticals** for being **Gold Sponsors**; and to **AdvanDx, Inc.**, **Diamond Headache Clinic Research and Educational Foundation**, **Eli Lilly**, **Medical Protective**, **Physicians' Benefits Trust**, and **Takeda Pharmaceuticals** for being **Silver Sponsors**.

Salute to Exhibitors

CMS THANKS THE FOLLOWING EXHIBITORS for their financial support of the Midwest Clinical Conference:

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Chicago Prostate Cancer Center

CMS Insurance Agency, Inc.

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More than 30 exhibitors showcased their wares and services at the MCC.

ISPR- Illinois Staff Physician Recruiters

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Sanofi-Aventis

Sepracor

Takeda Pharmaceuticals North America, Inc.

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Tarek Karaman, MD, Lead Hospitalist, Advocate Health Centers, served as MCC Chairman.



The Bluhm Cardiovascular Institute of Northwestern Memorial Hospital
In conjunction with the Chicago Medical Society

Presents a Complimentary 3.5 CME credit activity

Cardiovascular Disease in the Elderly

Date: Saturday, May 10, 2008

Time: 7:00 a.m. – 1:00 p.m.

**Location: Pritzker Auditorium of
Northwestern Memorial Hospital
251 E. Huron, 3rd Floor Feinberg Pavilion**

Audience: Primary Care Physicians and all interested physicians.

7:00-8:00	Registration and Continental Breakfast
8:00-8:10	Welcome Saroja Bharati, MD, President, Chicago Medical Society, Professor of Pathology and Robert O. Bonow, MD, Goldberg Distinguished Professor at Northwestern University Feinberg School of Medicine, Chief of the Division of Cardiology at Northwestern Memorial Hospital
8:10-8:40	Epidemiology of Cardiovascular Disease in the Elderly: Perspectives on Management of Hypertension Donald Lloyd-Jones, MD, Associate Professor of Medicine and Preventive Medicine
8:40-9:10	Management of Lipid Disorders in the Elderly Neil J. Stone, MD, Medical Director of the Vascular Center at the Bluhm Cardiovascular Institute, Professor of Clinical Medicine at the Feinberg School of Medicine
9:10-9:40	Acute Coronary Syndromes: Risks vs. Benefits in the Elderly Patient Dan J. Fintel, MD, Director of the Coronary Care Unit, Professor of Medicine at the Feinberg School of Medicine
9:40-10:00	Break
10:00-10:30	Heart Failure in the Elderly John B. O'Connell, MD, Associate Director at the Bluhm Cardiovascular Institute, Director of the Center for Heart Failure
10:30-11:00	Elderly Women with Heart Disease: Management Quandaries Marla Mendelson, MD, Director, Women's Cardiology Center, Bluhm Cardiovascular Institute
11:00-11:30	Management of Atrial Fibrillation: Rate Control vs. Rhythm Control and Anticoagulation Management Rod S. Passman, MD, Associate Professor, Cardiac Electrophysiology
11:30-12:00	Valvular Heart Disease: A Growing Problem with an Aging Population Robert O. Bonow, MD, Co-Director, Bluhm Cardiovascular Institute, Chief, Division of Cardiology
12:00-1:00	Lunch

(Registration Form, Learning Objective and CME on the Next Page)

At the conclusion of this learning activity, participants should be able to:

- 1) discuss the epidemiology of cardiovascular diseases in the elderly.**
- 2) describe the management of lipid disorders, acute coronary syndromes, risks and benefits in the elderly.**
- 3) explain the management of atrial fibrillation, valvular heart disease as well as elderly women with heart disease.**

This activity has been planned and implemented in accordance with the Essential Areas and Policies of the Accreditation Council for Continuing Medical Education (ACCME) through the joint sponsorship of the Chicago Medical Society and the Bluhm Cardiovascular Institute of Northwestern Memorial Hospital.

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 3.5 category 1 credits towards the AMA Physician's Recognition Award. Each physician should claim only those hours of credit that he/she actually spent in the educational activity.

Register: For the complimentary 3.5 CME credit activity "Cardiovascular Disease in the Elderly" on May 10, 2008, please provide the following information and fax back to:
Att: Annette Boksa at 312-670-3646:

Name: _____

Please check: ____ CMS Member ____ Non-Member

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Questions: Contact Annette Boksa at (312) 329-7340 or aboksa@cmsdocs.org



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CMS Alliance underway; reinforces support for your Society

By Linda Izquierdo, President, ISMS Alliance

CONGRATULATIONS TO THE CHICAGO MEDICAL Society. You are the benefactor of an organization that will prove through the coming years to be a major source of support for you and for medicine: the Chicago Medical Society Alliance. Through careful planning and support from CMS leaders, this dream was realized. The icing on the cake is that the newest Alliance members are sharp, enthusiastic and ready to get rolling! We are off to a great start!

On March 19, 2008, leaders from the CMS, the ISMS Alliance, and the AMA Alliance met with physician spouses interested in forming a new Chicago Alliance. After introductions, the mission of the Alliance was explained; the budget and by-laws were introduced, discussed and approved. Community outreach initiatives were discussed, with the understanding that the Alliance will work with CMS to identify specific needs of the Chicago community.

Finally, the group voted unanimously on a president to take the reins of the new Alliance. Jennifer McDade graciously accepted the role of the presidency. Jennifer comes to the Alliance with two master's degrees, one in English and another in special education. Jennifer also has vast experience in the area of fundraising. Since she tragically lost her sister seven years ago to sickle cell anemia, she has become involved in charitable events to raise money for research and education. Jennifer runs a not-for-profit organization, "Jackie's House," a sickle cell foundation. She also volun-



Members of the newly formed CMS Alliance are shown following their first meeting in the CMS Building: From left: Tara Swaminathan; President Jennifer McDade; and Christine Gilmore. Not pictured are Mary Nage, Erica Pilkinton, and Lisa Glathar.

teers for several charitable events, including the Lupus Foundation. Jennifer, along with her husband, CMS President-elect Dr. William A. McDade, are raising her niece. Currently, Jennifer is a high school teacher in Highland Park.

She states: "I am elated with the endless possibilities that await us and am extremely honored to be a part of such an historical moment."

Jennifer will be attending the AMA Alliance Annual Meeting in June. Other members who have joined the new Alliance are: Tara Swaminathan, Christine Gilmore, Lisa Glathar, Erica Pilkinton and Mary Nage. They are a small but mighty group.

We are very fortunate to start off with such dynamic, motivated members. However, our work has just begun. We need to rally around this new Alliance to give them the support to move forward and grow strong.



Leaders from the CMS, the ISMS Alliance, and the AMA Alliance met with physician spouses on March 19 to form a new Chicago Alliance.

I ask you to please encourage your spouse to fill out the membership form (see page 12) and submit it to Kris Johnson, ISMSA Membership Director.

The CMS Alliance will hold their next meeting in conjunction with the CMS' meeting on May 6. Such a bright future awaits the CMS Alliance, and its future begins with you!



Illinois State Medical Society Alliance

~ Physicians' Spouses Dedicated to the Health of Illinois ~

What is the Alliance?

The Alliance is the most important organization that represents the family of medicine in the United States. The Illinois State Medical Society Alliance, the American Medical Association Alliance and county alliances form a unified force to improve our communities and the lives of physicians and families.

Personal Information

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Home Address	City	State	Zip
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Belong to the family of medicine ~

Develop lifelong friendships, build an effective network of co-workers, and find a ready-made support system for the unique challenges of life in a medical family. If you are the spouse of a physician, fellow, resident physician, or medical student, or if you are a physician, you are invited to join the Alliance.

County Dues

Adams	\$80	Peoria	\$80
Chicago	\$90	Rock-Island	\$85
Effingham	\$70	Saint Clair	\$95
Jefferson-Hamilton	\$80	Sangamon	\$85/\$65
Kankakee	\$80/\$70	Vermilion	\$75
Macon	\$80	Williamson	\$90
Madison	\$75	Winnebago	\$90
McLean	\$95	Members-at-Large	\$65

☐ Are you interested in starting a county alliance?

Make a difference in your community ~

The Alliance raises funds for scholarships, research, and grants, participates in health projects to improve people's lives in our communities, and protects the future of medicine through legislative advocacy.

Please make check payable to Illinois State Medical Society Alliance

Submit application and payment to:

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c/o Kris Johnson
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Chicago, IL 60602



CMS IN D.C.

CMS leaders join "house call" on Congress

YOUR CMS LEADERS, LED BY PRESIDENT-elect William A. McDade, MD, PhD, joined their AMA counterparts in Washington this April to address the Medicare crisis with members of Congress as part of the AMA National Advocacy Conference.

Held April 1-2, the conference included a physician rally at Capitol Hill's Upper Senate Park in support of the new Medicare bill (see below). Members of the AMA Alliance gave their support.

Attendees also heard from insiders about the political climate on Capitol Hill and got the latest on medicine's legislative priorities. Former White House Press Secretary Tony Snow delivered the keynote address.

Read more about Dr. McDade's advocacy and testimony on health-care disparities in the May *Chicago Medicine* newsletter.

Senate bill to stop Medicare physician cuts

THE SAVE MEDICARE ACT OF 2008 (S. 2785), introduced in March by U.S. Sen. Debbie Stabenow (D-Mich.) would prevent a 10.6 percent cut in Medicare physician payments planned for July 1, retain current levels for the remainder of 2008 and enact a 1.8 percent increase for 2009. It would also continue rural extender provisions that are set to expire, such as the floor for Work Geographic Practice Cost Indices and the bonus for physician scarcity areas.

The 18-month time-frame in the Save Medicare Act of 2008 (S. 2785) will inject some stability into the system for seniors as well as physicians forced to make difficult practice decisions because of planned payment cuts. It will also give Congress time to begin working on a long-term solution to the broken payment system without having to take action to stop the cuts twice in one year.

www.cmsdocs.org

The Chicago Medical Society encourages all members

to go to your new Website.

We have added online blogs and forum sections to increase our communication.

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TIP #9

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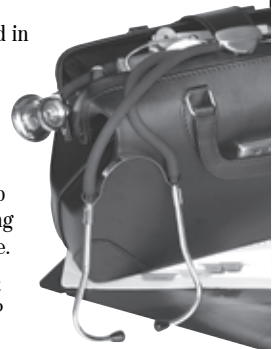


There is a big difference in operating philosophy among medical malpractice carriers. With some, defense against claims may be half-hearted at best. Many good physicians have been hurt by frivolous lawsuits when their good work went undefended in favor of quick-? x settlements. Clearly, this does not serve you or the profession well.

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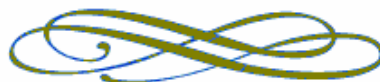
William Mc Dade, MD, Ph.D.

as President of the Chicago Medical Society

Sunday, June 1, 2008

6:00 p.m. Cocktail Reception

7:00 p.m. Dinner



Union League Club of Chicago

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Chicago, Illinois*

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Entrée Choice: ____ Beef ____ Fish ____ Vegetarian

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Reservations by mail should be sent to:

Chicago Medical Society, Annual Dinner, 515 N. Dearborn Street, Chicago, IL 60610

Please respond on or before May 23, 2008 to Amanda Worley
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aworley@cmsdocs.org

HTTP://CHICAGO.CERVANTES.ES



Inactivity equals apathy

By Jere E. Freidheim, MD, Chair, IMPAC



Dr. Freidheim

Every year, it gets increasingly complicated to do what we all signed up to do—take care of our patients. Decreasing reimbursements, an extremely litigious practice environment, and health plan hassles are added burdens that make practicing medicine extremely difficult, and in some cases, impossible.

While the outlook seems daunting, we cannot afford to idly stand by. We have choices; we must be active and diligent to protect our profession and to ensure continued access to quality care for our patients. There are many ways to get involved but unless we *all* get involved, we will not be an effective force.

One of the easiest ways to get involved is to get to know your legislators. Everyone has a state representative and a state senator working for them in Springfield. In addition, we all have a federal representative in Washington. If you do not know who your legislators are, take the first step and visit www.elections.state.il.us/DistrictLocator/Select-SearchType.aspx. This will take you to the Illinois State Board of Elections site to identify your representatives.

The next step is to schedule an appointment. When the General Assembly and Congress are not in session, they are home in the district and regularly see constituents as part of their official duties. This is the perfect time to establish a relationship and to open a dialogue with your representatives on the health-care issues impacting our profession. It is not uncommon for legislators to call physicians they have a relationship with to explain pending legislation or to further clarify some of our most important issues.

During the first week of April, in conjunction with the AMA's National Advocacy Conference, a group of physicians from around the state attended visits on Capitol Hill to many of our Illinois

congressional representatives. The physicians present talked about the impending Medicare cuts and urged our representatives for their support on a fix. This is truly an example of democracy in action and ensured that those making our critical policy decisions have heard from the physicians of Illinois.

An even easier way to get involved is through our political action committee, IMPAC. IMPAC supports the candidates who share our views and ultimately, helps to shape the laws and regulations that affect us every day. IMPAC gives you the opportunity to enhance your participation in the political process—don't physicians owe it to themselves to become involved in political action. Can you afford not to?

An interesting thing about IMPAC is that 100% of your contributions are given to selected candidates who seek public office; absolutely no funds are used for administration purposes. Those candidates are chosen upon recommendation from a 30-person IMPAC Council representing all areas of the state. The IMPAC Council makes the final decision on the distribution and size of contributions based on the candidate's needs in a race. Candidates are continually scrutinized based on past records and political realities.

So now you're asking yourselves, "How do I get involved?" Joining IMPAC is simple – you can log on to www.impaconline.org and click the "Join IMPAC" link on the left. You can also call Kate Jarvie at (312) 580-6443 and become a member over the phone.

You will also see several solicitations per year in your mail, the opportunity to get politically active and preserve our profession and protect our patients' access to quality care is ongoing.

If you'd like help scheduling a meeting with your legislators, we'd also be happy to help with that. We can provide you with talking points and tips for a successful meeting, so please don't hesitate to call.

The importance of everyone getting involved cannot be stressed enough. Unless we are all on board in opening up a dialogue with our legislators and building a stronger IMPAC, we will be drowned out by all of the other interests who *are* politically active, like trial lawyers. As the saying goes, if we are not part of the solution, we are part of the problem.



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MEDICAID, MEDICARE AND MORE

Medicaid patient access bill gets hearing

ISMS PRESIDENT RODNEY C. OSBORN, MD, recently testified in support of a bill that would boost the abysmally low Medicaid physician reimbursement rates. Senate Bill 2173, sponsored by William Delgado (D-Chicago), is aimed at improving access to Illinois' health care safety net programs, Medicaid and *All Kids*.

"Without increasing Medicaid rates, we're risking patients' access to care in Illinois," Dr. Osborn stated. "While as physicians, we're strongly committed to serving those in need; we cannot continue to do so when our practice expenses increase far more rapidly than Medicaid reimbursement."

In his testimony before the Senate Public Health Committee, Dr. Osborn expressed concern that Medicaid expansion programs like *All Kids* and *Family Care* will be nothing more than an empty promise without Medicaid rate reform.

Increasing Medicaid rates is a step towards a solution

AT A MINIMUM, MEDICAID RATES NEED TO be increased to equal Medicare rates with annual updates linked to inflation. While Medicare is experiencing its own problems in terms of keeping up with practice cost increases, using Medicare as a benchmark at least initially would help Illinois physicians.

Without increased rates, access to needed medical care, especially specialty care for Medicaid/*All Kids* patients will suffer. Physician reimbursement must be adequate and fair in order for physicians to continue to serve Medicaid/*All Kids* patients.

Physician Medicare payments in Illinois are just 9% of total Medicaid program costs.

Both the Adequate Health Care Task Force and the Legislative Joint Task Force on Rural Health & Medically Underserved Areas have recommended significant increases in physician reimbursement as a means to increase access to care and attract more physicians to Illinois.

For these reasons, we urge you to support Senate Bill 2173.

Retail health clinic bill promotes patient safety

A NEW BILL INTRODUCED BY MIKE MCAULIFFE (R-Chicago) would protect the health and safety of

patients seeking care at retail health clinics. House Bill 5372, the "Retail Health Care Facility Permit Act" calls for regulating in-store clinics to ensure that patients receive proper follow-up care.

"We are concerned that since these clinics deliver only episodic or single-instance care, we must work to ensure patients receive needed follow-up care—an important medical consideration routinely handled by primary care doctors but not retail clinics," said ISMS President Rodney C. Osborn, MD.

The concept of retail health clinics contrasts sharply with the need for patients to have a medical home.

If enacted, SB 5372 would establish requirements for retail health clinics to maintain proper patient records, follow-up with a patient's physicians or establish a system with a corresponding hospital for emergencies or for referrals, and employ a physician to ensure enough oversight and quality of care. The legislation also sets parameters that a single physician or a medical director should not oversee more than two clinics.

Information provided courtesy of ISMS.



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