TEXAS D.O.

The Journal of the Texas Osteopathic Medical Association

Volume LVIII, No. 7

July/August 2001

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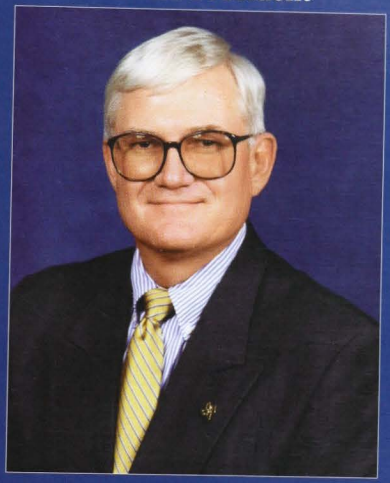
Mark A. Baker, D.O.
2001 - 2002
TOMA President



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TOMA's 102nd
Annual Convention
& Scientific Seminar
Special Pictorial Review

pages 14 – 18

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TEXAS D.O.
The Journal of the Texas Osteopathic Medical Association

JULY/AUGUST 2001

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CALENDAR OF EVENTS

AUGUST 8 - 12
"OMM: Osteopathic Millennium Medicine"
Sponsored by the Arkansas Osteopathic Medical Association
CME: 26 category 1-A hours anticipated
Contact: AOMA: 501-374-8900
FAX: 501-374-8959; E-mail: osteomed@ipa.net

AUGUST 25 - 26
"Ligamentous Articular Strain Techniques for Treating the Rest of the Body Based on Sutherland's Methods"
Sponsored by the Dallas Osteopathic Study Group
Location: Doubletree Hotel Campbell Centre
8250 North Central Expressway
Dallas, TX
CME: 16 category 1-A hours anticipated
Contact: Conrad Speece, D.O., Course Director
214-321-2673

SEPTEMBER 13 - 16
"OPSO Annual Convention"
Sponsored by the Osteopathic Physicians and Surgeons of Oregon
Location: Embassy Suites – Washington Square
Tigard, Oregon
Contact: 800-533-6776; www.opso.com

SEPTEMBER 14 - 16
"2001 Mid-year Seminar"
Sponsored by the Florida Osteopathic Medical Association
Location: Hyatt Regency Westshore, Tampa, FL
CME: 21 category1-A hours anticipated
Contact: Florida Osteopathic Medical Association
The Hull Building, 2007 Apalachee Parkway
Tallahassee, FL 32301
800-226-FOMA

OCTOBER 21 - 25
"106th AOA Annual Convention"
Sponsored by the American Osteopathic Association
Location: San Diego Convention Center, San Diego, CA
Contact: Ann Wittner, 800-621-1773
E-mail: mthompson@aoa-net.org

www.txosteo.org

ON THE WEB in July & August

ON THE WEB is a monthly feature of the *Texas D.O.* announcing headlines and trailers of timely osteopathic news articles, pertinent information on healthcare and education, legislative updates and much more; all of which can be found on our website <www.txosteo.org>.

- **Health Notes**
- **From the Texas Medical Foundation**
- **News from the AOA**
- **News from UNTHSC at Fort Worth**
- **In Brief**

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Mark A. Baker, D.O. New TOMA President

Mark A. Baker, D.O., a Fort Worth diagnostic radiologist, has been elected president of the Texas Osteopathic Medical Association for 2001-2002. Installation ceremonies took place June 9, during TOMA's 102nd Annual Convention and Scientific Seminar, held June 6-10 at the Arlington Convention Center in Arlington.

A 1976 graduate of the University of North Texas Health Science Center/Texas College of Osteopathic Medicine in Fort Worth (UNTHSC/TCOM), Dr. Baker interned at Public Health Service Hospital, New Orleans, Louisiana. He completed a diagnostic radiology residency at Osteopathic Medical Center of Texas (OMCT) in Fort Worth in 1986.

Dr. Baker practices at OMCT and Westside Radiology Consultants, also in Fort Worth and of which he is the current president. In addition, he is a clinical associate professor and the acting chairman of the Department of Radiology at UNTHSC/TCOM.

He is certified in Diagnostic Radiology by the American Osteopathic Board of Radiology, and a Diplomat of the National Board of Examiners for Osteopathic Physicians and Surgeons.

An active member of TOMA since 1978, Dr. Baker serves on, and has chaired, numerous Association committees. He has been a member of the Board of Trustees since 1989; speaker of the House of Delegates, the policy-making body of TOMA, from 1993-2000; and has held the offices of vice speaker, vice president and president-elect. He has also been active in his divisional society, TOMA District 2, serving as president from 1989-90 and from 1999-2000.

Other memberships include the American Osteopathic Association, in which he serves as speaker of its House of Delegates; American Institute of Ultrasound in Medicine; American Osteopathic College of Radiology; Radiological Society of North America, Inc.; American College of Radiology; Texas Radiological Society; Texas Medical Association; Texas Independent Osteopathic Physicians Association, of which he is a board member; and life member of the Texas College of Osteopathic Medicine Alumni Association.

He is also a physician reviewer for the Texas Medical Foundation, and a member of the Medical Radiological Technologist Advisory Committee of the Texas Department of Health.

Dr. Baker and his wife, Rita, reside in Fort Worth. They are the parents of two children, Christopher Allen and Carrie Arlene.

New TOMA President Pledges Membership Increase as Top Priority

Dr. Baker Presents Innovative Approaches to Achieve Goal

Editor's note: The following is the speech presented by Mark A. Baker, D.O., upon assuming the TOMA presidency for 2001-2002.

Donald Krpan, D.O., AOA President (r), administers the Presidential Oath of Office to Mark A. Baker, D.O., during the President's Banquet on Saturday, June 9th.

As I stand before you this evening, I am filled with a sense of great pride in our osteopathic profession here in Texas. We have served the health care needs of the citizens of our state for over 100 years, and our patients know us as caring, competent and compassionate physicians. We have established and continue to support the finest osteopathic medical school in the United States, the Texas College of Osteopathic Medicine in Fort Worth. We also have one of the premiere hospitals in our profession, the Osteopathic Medical Center of Texas.

Through the years, we have been successful in maintaining three D.O.s on the Texas State Board of Medical Examiners. Through our legislative efforts we have protected the public and our profession with the managed care legislation of the past several years. We should be proud of our accomplishments.

My goal for this year is to increase membership in our state organization – the Texas Osteopathic Medical Association. We will accomplish this goal by taking the following steps:

#1) TOMA applied for a grant through the AOA/State Society Partnership program, which was approved at the midyear 2001 AOA Board of Trustees meeting. This grant will be used to fund a program that targets osteopathic physicians practicing in Texas who have completed allopathic residencies and who are not members of either TOMA or the AOA.

According to the April 2001 list published by the Texas State Board of Medical Examiners, there are 2,904 osteopathic physicians licensed by the State of Texas. TOMA currently has a membership of 1,379 active practicing osteopathic physicians, plus an additional 503 resident physicians. The goals of this 3-year program are to:

a) Identify non-members who served allopathic residencies

b) Design a recruitment marketing plan to reach out to these physicians, using the slogan, "Return to Your Osteopathic Roots" through the AOA Re-entry Program for Board Certification

c) Educate targeted D.O.s about the re-entry program

d) Analyze the success of this marketing plan to bring these physicians into our membership ranks.

#2) As Terry Boucher, TOMA's Executive Director, and I make our district visitation trips during this next year, forums will be set up with non-members to hear first-hand their concerns and comments about TOMA and our profession. We will, in turn, share with them the value that TOMA membership has to offer each and every osteopathic physician in Texas. With this open dialogue I feel certain that we can alleviate many of their concerns and we can welcome them back into the TOMA family.

#3) We must increase D.O. residency slots in Texas. TOMA, in conjunction with the AOA, TCOM, and the Texas Osteopathic Post-doctoral Training Institution, is developing relationships with several allopathic residency programs in the state to establish dual accredited residency slots for our Texas D.O. graduates. I am sure you know that currently there are not enough osteopathic residency slots in our state. A survey conducted by the AOA and the Gary Siegel Organization of first year D.O. residents revealed that the most important factors in making their residency decision were LOCATION and quality of the program. In other words "Texans want to stay in Texas." Combine this with the fact that D.O.s taking allopathic (ACGME) residencies are less likely to be members of TOMA and the AOA and the answer seems very clear. By helping our Texas osteopathic graduates find appropriate residencies within the state, including dual accredited programs, their affiliation with TOMA and the AOA will be strengthened. We hope this will lay the foundation for their future involvement in the osteopathic profession and insure their membership in TOMA. Plans are currently underway to establish dual accredited residency programs with Texas Tech Medical School in both Lubbock and Odessa, which will start in 2002. Other potential sites have also been identified.

As some of you may know, I was fortunate enough to be born into an osteopathic family. My father, Frank Baker, was an osteopathic general practitioner in Fort Worth, Texas. From an early age I learned the importance of supporting and protecting the osteopathic profession. We all are a family – the osteopathic family, and we must look out for our own. Like the osteopathic physicians who have gone before us, we must continue to ensure the success of the osteopathic profession in Texas. I encourage each of you to give back to our profession. Serve in whatever capacity that you can. Be involved in your communities, let the public know who and what we are. Emphasize our distinctiveness. Learn and use our tag line: "D.O.s: physicians treating people, not just symptoms."

continued on next page

Above all we must exhibit unity, whether your involvement is through TOMA, TCOM, ACOFP, AOA or the auxiliary. We are a family – and every member is of great value and necessary for our success. This profession has been good to everyone in this room and to our families - providing us with a way of life that most can only imagine. We owe the profession more than we can ever repay.

We must support our future – the current osteopathic medical students – whether by donating money for scholarships, taking students into your practice for rotations, or merely making yourself available to meet with a student who wants to talk with a "real" doctor. Welcome them into our profession. The graduates of TCOM have swelled the membership ranks of TOMA and provided our association with several of our current leaders.

Remember: today's student is tomorrow's colleague and TOMA member.

While TOMA is a very strong and successful association, we can and will do a better job. Each of us can do our part by encouraging our colleagues, if they are not members, to join TOMA, and for everyone to attend our annual conventions. We have increased our membership services to better fit the needs of our physicians. We provide quality CME at a reasonable cost.

Each of us should pledge to make annual contributions to TOMA-PAC. These funds allow us to get our message out in Austin and to support our friends in the Texas Legislature. As legislation is introduced that may affect the osteopathic profession in Texas or infringe on our practice rights, we will have established relationships that will ensure that our point of view will be heard. With the changes in medicine today, the need for TOMA-PAC funds is taking on ever increasing importance. I hope that each of you will please consider donating. This is one way in which we all can support our profession.

Without a doubt the group that does the most to promote and support the osteopathic profession is the Auxiliary. The women and men of the auxiliary increase the public's knowledge of osteopathic medicine through their many worthwhile projects including the "Yellow Ribbon Suicide program." Every D.O. in Texas owes the auxiliary a great big "Thank You". Each of you should support the Auxiliary by paying your spouses dues at the district, state and national levels and become involved in their programs.

As your president, I have a vision of what I would like all TOMA members to be. I would like each of you to:

- Support and help preserve the osteopathic hospitals within our state.
- Attend and support your district meetings and events.
- Become a leader in your district, state or national osteopathic associations.
- Become involved in training and/or mentoring our students, interns and residents wherever you may practice.
- Let your patients and colleagues know how you are unique and distinctive.
- Get to know the elected officials in your area who are making health policy decisions and offer to serve as their source of information about our profession.
- Donate to the TOMA PAC fund.
- Support the TOMA auxiliary by paying your spouse's membership dues and getting involved in auxiliary's excellent projects.
- Contact non-members that you know, explaining the benefits of TOMA membership, and bring them back into the "family."

Just think what we could accomplish with dedicated members like this!

We should all be proud to be members of the osteopathic profession here in Texas. We have a strong association, a nationally recognized osteopathic medical school, and a good relationship with the state legislature. We must, however, be ever vigilant to protect our profession and to insure its future success. We must all do our part! By working together we can assure that TOMA will remain a strong association for future generations of Texas D.O.s.

In closing, I would like to quote Dr. Andrew Taylor Still who said, "Let your light so shine.... that the world will know you are an osteopathic physician, pure and simple, and that no greater title can follow a human name. Unless you teach it, preach it and practice it, neither you nor osteopathic medicine will survive."

Well ladies and gentleman, if A.T. Still could see the TOMA of today he would realize that not only has the osteopathic profession in Texas survived, it has flourished. As we continue to work together for our common good, our profession will continue to shine brightly over the health care of our great state.

We are a family – the osteopathic family

Thank you, good night!

Donald M. Peterson, D.O.

Recipient of the DISTINGUISHED SERVICE AWARD 2001

Donald M. Peterson, D.O., a Mesquite family physician, has received the Texas Osteopathic Medical Association's Distinguished Service Award. The award represents the highest honor that TOMA can bestow upon an osteopathic physician in recognition of outstanding service and contributions to the osteopathic profession in Texas. The award was presented to Dr. Peterson during TOMA's 102nd Annual Convention and Scientific Seminar, held June 6-10 at the Arlington Convention Center in Arlington, Texas.

Dr. Peterson earned his D.O. degree in 1959 from the University of Health Sciences, College of Osteopathic Medicine in Kansas City, Missouri, and served an internship at Dallas Osteopathic Hospital. He currently maintains a private practice in Mesquite.

He is board certified and a fellow of the American College of Osteopathic Family Physicians, a fellow of the American College of Utilization Review Physicians and a fellow of the American College of Medical Technology.

Throughout the years, Dr. Peterson has represented the osteopathic profession on all levels with honor and excellence. On the national level, he has been a member of the American Osteopathic Association since 1960, serving as a member of the Ad Hoc, Bylaws and Resolutions Committees. Other national memberships and activities include the American College of Osteopathic Family Physicians, the American College of Osteopathic Obstetricians and Gynecologists, the American Board of Quality Assurance and Utilization Review Physicians, the American College of Utilization Review Physicians and Sigma Sigma Phi. Dr. Peterson has the distinction of being the first osteopathic physician elected to the Board of Trustees of the American Medical Peer Review Association, in which he has held numerous positions during the years.

On the state level, he has been extremely active in TOMA affairs, serving as president from 1985-86. He was a representative to the Texas Medical Foundation for 21 years, during which time he held numerous positions including vice president and member of the TMF Board of Trustees. In addition, he served as a member of the Texas Board of Health from 1989-1993, and is a past president of the Texas Society of the American College of Osteopathic Family Physicians.

Locally, Dr. Peterson has held all officer positions in his divisional society, TOMA District 5, and has served as chairman of the Medical Advisory Committee at Tarrant County Mental Health/Mental Retardation Authority. He has also been heavily involved in teaching activities at Tri-City Health Centre, Dallas Memorial Hospital, and at the Texas College of Osteopathic Medicine in Fort Worth.

Special honors include the Phil Overton Award for Outstanding Leadership in Furtherance of Quality Medical Review in Texas in 1990, from the Texas Medical Foundation, and General Practitioner of the Year in 1986 from the Texas Society of the American College of Osteopathic Family Physicians.

TOMA takes great pride in congratulating Dr. Peterson on receiving this well deserved award.

Bill V. Way, D.O., Immediate Past President of TOMA (L), with award recipient Donald M. Peterson, D.O.

Morton L. Rubin, D.O.

Recipient of the COMMUNITY SERVICE AWARD 2001

Morton L. Rubin, D.O. (R), accepts his award from Immediate Past President of TOMA, Bill V. Way, D.O.

Morton L. Rubin, D.O., a Houston family physician, has received the Texas Osteopathic Medical Association's Community Service Award. The award represents the highest honor that TOMA can bestow upon an osteopathic physician in recognition of outstanding service to their community through the promotion of and dedication to osteopathic medicine in their practice. The award winner also exemplifies what the profession perceives to be the "typical" osteopathic physician who cares for patients and is an unsung, local hero. The award was presented to Dr. Rubin during TOMA's 102nd Annual Convention and Scientific Seminar, held June 6-10 in Arlington, Texas.

Dr. Rubin was lauded for his longtime contributions as a physician volunteer at the Eastwood Health Clinic, located at 412 Telephone Road in Houston. The inner-city clinic, supported mainly by volunteers, provides low-cost (or free) health care to area residents. In addition to providing medical care to clinic patients, Dr. Rubin has been actively involved in numerous events sponsored by his divisional society, the Harris County Society of Osteopathic Medicine-TOMA District 6, from which funds have been raised to meet special needs of the clinic.

Dr. Rubin earned his D.O. degree in 1956 from the University of Osteopathic Medicine and Health Sciences/College of Osteopathic Medicine and Surgery, Des Moines, Iowa, and interned at Bay View Hospital, Bay Village, Ohio. He is certified in Family Practice.

He has maintained a family practice in Houston since 1977, when he relocated from Pennsylvania. He also serves as a preceptor to students of Baylor College of Medicine.

An active member of TOMA since 1977, he has served for two years as a member of the TOMA House of Delegates, the policy-making body of the association. He has been honored with life membership, which is awarded only to those osteopathic physicians who have given exemplary service to the profession.

Also active in the Harris County Society of Osteopathic Medicine-TOMA District 6, Dr. Rubin served as president from 1985-1986 and 1995-1996. He was honored as Physician of the Year in 1996.

Other memberships include the American Osteopathic Association, American College of Osteopathic Family Physicians, the Harris County Medical Society, and the Scholastic Honorary Society, of which he is a life member.

TOMA is proud to extend congratulations to Dr. Rubin on receiving this award.

Susan Selman Assumes ATOMA Presidency for 2001-2002
"Attitude of Gratitude through Service"

Susan Selman of Arlington, has been installed as president of the Auxiliary to the Texas Osteopathic Medical Association (ATOMA) for 2001-2002. Installation ceremonies took place June 8 at the Wyndham Arlington Hotel in Arlington, Texas, in conjunction with the 102nd Annual Convention and Scientific Seminar of the Texas Osteopathic Medical Association, held June 6-10.

Also installed as officers with Mrs. Selman were Pam Adams, president-elect; Barbara Galarneau, vice president; Linda Garza, secretary; and Shirley Meyer, as treasurer.

Upon accepting the state presidency, Mrs. Selman outlined her goals for the coming year, one of which will be the furtherance of the Yellow Ribbon Teen Suicide Prevention Program in Texas. The program provides Yellow Ribbon Cards to children/teens, giving them a safe and simple way to ask for help. Adults are subsequently educated to respond appropriately when presented with a Yellow Ribbon Card. Mrs. Selman noted that she hopes to introduce this much-needed program to more youth through presentations at schools, churches, youth organizations, and the like. She will also concentrate on the promotion of the osteopathic profession, as well as direct attention to the need for all osteopathic physicians to have a voice about their future by participating in their osteopathic political action committee.

Mrs. Selman has been active in ATOMA as well as her divisional auxiliary, ATOMA District 2. She has previously served as ATOMA treasurer and president-elect. She is currently an Independent Sales Director for May Kay, Inc. Prior to that, she worked as a legal secretary for 27 years.

Memberships include St. Matthew Cumberland Presbyterian Church and the Arlington Chamber of Commerce.

Mrs. Selman and her husband, A. Duane Selman, D.O., an emergency room physician at North Hills Hospital in North Richland Hills, reside in Arlington. They have two sons, Weston, 23, and Carter, 18.

The following is the inaugural speech presented by Mrs. Selman during the President's Banquet on Saturday, June 9.

"Welcome to Arlington–my hometown! I'm so excited and honored to be the new President of ATOMA.

First of all, I'd like to introduce my family. Most of you already know my best half, A. Duane, our son Carter, our son Weston and his date Jenny, Duane's brother Don Selman and his wife, Ellen.

My theme for this year is having an "Attitude of Gratitude through Service." I chose this particular theme because of one of my first experiences with our osteopathic family. Since Duane was president of his freshman class at TCOM back in 1982, we were invited to a whole day of festivities centered around the Sixth Annual Convocation, including dinner with President Willard, the Founders' Medal recipients, and other VIPs from the profession. My own experience with this family started out when Dr. Margaret Willard invited me to a luncheon at the Women's Club and then to join her and some other wives at the Convocation. Oh, by the way, that was the first "white coat ceremony" at Convocation, initiated and organized by Duane as a demonstration of student unity to the faculty – a "unity campaign" 20 years before its time. When the big day came, Dr. Margaret introduced me to lots of people, but Merilyn Richards, Nancy Zachary, and Dr. Virginia Ellis particularly stick out in my mind because they all made me feel like I was one of them. Dr. Virginia was the luncheon speaker and she was the first person I ever heard say these words, "we pay for our place in life by serving others...and I've loved the place I've occupied." Her whole countenance lit up when she said those words. It is easy to understand why she received a Founders Medal later that day.

Well, I love the place I've occupied and I'm grateful to osteopathic medicine for providing that place. Without it, my family and I would not have been nearly as comfortable, nor would I have known all of you.

The main objectives listed in ATOMA's constitution and bylaws are to further the objectives and ideals of TOMA for the purpose of creating a better understanding of the osteopathic profession and to aid in the improvement of the public health through service to TOMA. In other words, ATOMA is in existence to serve and support TOMA and the osteopathic profession as a whole.

In serving and supporting TOMA and the osteopathic profession, my main focus areas will be introducing the Yellow Ribbon Teen Suicide Prevention Program to more schools, churches and youth organizations and the distribution of book covers promoting osteopathic medicine and the Yellow Ribbon Program. I see doors opening to the Yellow Ribbon Program through the new U.S. Surgeon General's spotlight on suicide prevention.

To further support the future of the osteopathic profession in Texas, attention must be given to our Political Action Committee. I'll be emphasizing support of TOMA-PAC in my district visits. It is my intention to dedicate one of our fund-raisers at next year's convention to TOMA-PAC – that is, you will donate your money directly to TOMA-PAC instead of through the ATOMA treasury.

Joining me in support of TOMA is an incredible group of people. [ATOMA board introductions were made.] I'm truly honored by their willingness to serve — this is going to be a great board!

Some of the best friends I could ever ask for have come through being a member of the Auxiliary. If you're not yet a part of this family, become one and get involved. You'll make some of the best friends you'll ever have – friends who understand what it's like being married to a D.O. or to someone who works with the profession. Doctors, encourage your spouse or significant other to join.

A special thank-you goes to my good friends at TOMA Headquarters in Austin - Paula, Sherry, Jill, Lucy, and Trisha - you make us all look good and I love working with you. And to Terry Boucher, who keeps everything running and still has time to have fun with us–you and Cindy mean the world to me. As a token of our appreciation to the TOMA Officers and our Executive Director, I'd like to present you with your own personalized official 2001 scrub tops.

I'm grateful for the opportunity to serve our osteopathic family and I'm looking forward to a great year. God bless you all for your support of ATOMA.

Thank you to every one of you!

Palapa Beach Club, Hotel Finisterra
Cabo San Lucas, Mexico

It Just Doesn't Get Any Better Than This!

AOA Annual Convention, San Diego, California and TOMA's Post-Convention CME Seminar, Cabo San Lucas, Mexico October 20 – 28, 2001

Six (6) hours of AOA Category 1-A CME credits will be awarded for the *Post-Convention Seminar* in Cabo. Lectures will include family medicine, managed care, emergency medicine and other medical subjects. The seminar will be conducted in two 3-hour morning sessions at the Hotel Finisterra. The price of the TOMA CME seminar is included in the cost of the trip. *Cost does not include the registration fee for the AOA Annual Convention.*

SAN DIEGO HYATT REGENCY

While at the AOA Annual Convention in San Diego, TOMA travelers will stay at the new San Diego Hyatt Regency. The San Diego Hyatt Regency is the ultimate convention hotel. It is located on prime waterfront property between the San Diego Convention Center and Seaport Village. The hotel is within easy walking distance of the Covention Center, site of the AOA Annual Convention.

HOTEL FINISTERRA

Resting at the tip of the Baja Peninsula, Cabo San Lucas has reached resort stardom. In the last ten years, it has evolved from a sleepy hide-away for fishermen and yacht owners, into one of Mexico's most popular resort destinations. Hotel Finisterra, located a short walk from downtown Cabo, is built on cliffs overlooking the Pacific Ocean and Solmar Beach.

PRICE INCLUSIONS AND EXCLUSIONS

The cost of the AOA Convention/TOMA Post-Convention CME Seminar is priced per couple and based on double occupancy. The quoted price includes hotel accommodations at the San Diego Hyatt Regency and Hotel Finisterra; all ground transportation, tips and baggage handling between airport and hotel in Cabo San Lucas and departing San Diego.

TOMA and Carlson Wagonlit/Spears Travel recommend travelers purchase nominal cost trip insurance to cover cancellation charges, trip interruption costs, accident and baggage loss or damage.

AIR RESERVATIONS

Due to the almost daily changes in airfares, TOMA travelers will be contacted by Carlson Wagonlit/Spears Travel to make individual reservations from the departure city of their choice. This methodology will enable Carlson Wagonlit/Spears Travel to obtain the lowest airfare possible during this time of varying fares within the airline industry. The TOMA group will come together in San Diego and continue on to Cabo San Lucas.

SPACE IS LIMITED

Reservations will be accepted on a "first-come, first served" basis as payments are received at Carlson Wagonlit/Spears Travel. Carlson Wagonlit/Spears Travel acts as a tour agent and assumes no liability in connection with the service of any carriage, aircraft or other conveyance that is used in the performance of its duty to the passenger nor of hotel or resort properties.

PRICE PER COUPLE

***Total Price – $2,140.00**

Price per couple includes hotel accommodations, TOMA CME registration, ground transportation, baggage handling and tips where applicable.

* **Charges for round-trip airfares are *in addition* to the price quoted above which is for ground services only.**

DEPOSITS AND PAYMENTS

The total payment for the trip must be received by Carlson Wagonlit/Spears Travel on or before September 1, 2001. Cancellations received before September 1, 2001 will be charged a $100 per person cancellation fee plus airline penalties any time after the airline ticket has been issued. After September 1st, the cancellation fee will be subject to airline and hotel fees.

All prices are in effect as of the printing of this brochure and are subject to change without notice until full payment is made.

RESERVATION INFORMATION

Reservations and deposits must be made no later than SEPTEMBER 1, 2001.

Contact Barbara or Terri
CARLSON WAGONLIT/SPEARS TRAVEL
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Elmer Baum, D.O., Receives UNT Health Science Center's Highest Honor

Ronald Blanck, D.O., president of the UNT Health Science Center (L), looks on as Dr. Elmer Baum shows his newly awarded Founders Medal.

The University of North Texas Health Science Center at Fort Worth has recognized Elmer Baum, D.O., an Austin physician, by giving him its highest honor, the Texas College of Osteopathic Medicine's Founders Medal.

The honor was presented during the annual AOA Luncheon on June 7. The ceremony was held in Arlington as part of TOMA's annual convention.

"Dr. Baum has repeatedly demonstrated his dedication to the profession," said Ronald Blanck, D.O., president of the UNT Health Science Center. "His advocacy opened the doors to osteopathic education in Texas. He was instrumental to the early development of our own Texas College of Osteopathic Medicine."

In the mid-1960s, Dr. Baum worked with then Governor Preston Smith to obtain private scholarships for osteopathic students from Texas. Following this, the state of Texas approved general appropriations for the Texas College of Osteopathic Medicine and provided initial financing for building the college. Shortly thereafter, the Texas College of Osteopathic Medicine became a Texas state college under the University of North Texas system.

Among his many other honors, Dr. Baum received the prestigious Distinguished Service Certificate award in 1999 from the American Osteopathic Association. Some of his other awards include the General Practitioner of the Year in 1958 and the Distinguished Service Award in 1995 from TOMA.

Dr. Baum has served as a member of the Bureau of Insurance, chairman of the Council on Federal Health Programs, a committee member of the Council on Federal Health Programs, and Vice President of the American Osteopathic Association. Dr. Baum has been a member of the White House Conference on Health and chairman of the Bureau of Public Education on Health. On the state level, Dr. Baum was a member of the Texas State Board of Health for over 18 years.

The Founders Medal, awarded in honor of the health science center's medical school founders, George Luibel, D.O., Carl E. Everett, D.O. and the late D.D. Beyer, D.O., has been presented since 1978. The honor is awarded to "deserving individuals in recognition of significant contributions to healthcare and/or osteopathic medical education."

LETTER TO THE EDITOR

Dear Editor;

On behalf of the Christian Medical Association of the University of North Texas Health Science Center at Fort Worth, I wish to express my gratitude for your recent donation to our Spring Break Medical Mission Trip. With your help, we had the privilege of providing free medical care to over 400 patients in the Piedras Negras, Mexico area.

More than 32 medical students participated in this endeavor, and the poverty and medical need around them impacted many. It was a tremendous learning experience for all involved, both in their medical education and in developing a compassion for the medically underserved.

Planning is already underway for the spring 2002 Medical Mission Trip. Our location is as yet unknown, but I will keep you informed of our plans. If you have any questions or would like to be involved in our future charitable projects, please contact me at <joannajoy1@juno.com>.

Thank you again for your generous support.

Sincerely yours,

Joanna Barsness
CMA President – 2001-2002

TOMA'S 102ND ANNUAL CONVENTION AND SCIENTIFIC SEMINAR ARLINGTON, TEXAS JUNE 6 – 10, 2001

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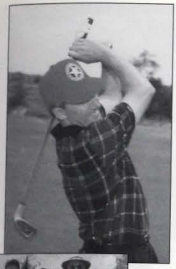

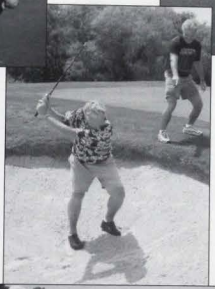

To view all of the photos taken during the convention as well as order prints, go to <www.jowdy.com> and click on Client Gateway. Under "Events", click on TOMA. Key in password "2521l".

TOMA thanks the many sponsors and exhibitors who contributed so generously to the success of the 102nd Annual Convention and Scientific Seminar

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Self's
Tips & Tidings

By Don Self

This month's article on coding, collections, Medicare and reimbursements will be a little bit different from past months. Over the past few years, the scope of my business practice has changed somewhat. No longer am I just "fixing problems" when a client calls. Now, we are assisting physician practices in Texas and elsewhere plan, organize, and implement enhancements designed to modernize administrative tools and focus on the problems of today as well as the needs of tomorrow. No longer am I just "reacting" to the problems my clients have, but now I am responding to their needs – even if those needs are ill defined and only suspected.

No, I'm not about to try to tell you how to clinically treat your patients but I do want to share with you a piece that was written by my trusted colleague and partner, Wayne Clark, JD. These are the basic principles we utilize with our clients. So far, we have seen increases ranging from 15% to 120% in their monthly collections by using these ideas. The principles expressed in the following article will work for you in your own practice - try it and see for yourself if you begin to feel better about your practice while increasing your own monthly income.

Reactive vs. Responsive Medicine

Everyone seems to know the difference between the words 'reactive' and 'responsive' when asked. However, when applied to the medical care of patients, more and more physicians are responding favorably when we explore all the implications this can have in their practice. It means we can begin to get better patient outcomes AND concurrently enhance the economics of the practice.

Every day physicians are bombarded by faxes, letters, policy bulletins, payor advices and communiqués designed solely to call attention to new requirements and prohibitions regarding documentation, claims submission, compliance, local medical review policies, contractual changes, reduced fee schedules, practice administration issues and the like. Sometimes, if you are really lucky, you may even get a 'thank you' note from a patient or information about a new medication, procedure or test that may really help some of your patients. Instead, we seem to have our focus drawn to the negative or prohibitive aspects of our profession. Let's see if we can find a way to change our perspective.

Consider this. The law, as well as most rules, regulations, and guidelines established by regulatory agencies are generally classed as either 'prohibitive' or 'permissive.' This is an important and often overlooked aspect governing the duties and conduct of a professional. It is central to developing a thought process and attitude that can lead to positive change.

The physician, when presented with a chief complaint, reacts professionally to resolve the current complaint using the tools at their disposal. But is that enough? Have we become so focused on the immediate problem we fail to appropriately consider what other specific actions we could or should take for the well being of the patient? Have we become so jaded and focused on the prohibitions of our practice and patient encounters that we fail to take time to pay attention? You may be surprised, but I really think the answer is a resounding NO!

What does take place, I believe, is the physician intuitively considers the signs, symptoms, and history of the patient, initiates an appropriate treatment and then moves on to the next case. Why? Because to take the next step the physician may believe to be appropriate and warranted for their patient, they are confronted with questions regarding issues of perceived medical necessity, onerous documentation requirements, or some other negative factor that limits their actions.

So, how do we apply the concept of 'prohibitive' versus 'permissive' to change our perspective? We re-visit the Medical Practice Act of our particular State to actually see what we are 'permitted' and expected to do in the practice of medicine. Once you have reviewed what you are 'permitted' and/or expected to do, you re-read the Code of Ethics governing your chosen vocation. Once you have completed this simple assignment (and I do mean you need to actually take the time to read them), ask yourself and determine if you are practicing 'reactive' or 'responsive' medicine.

"Responsive medicine means the physician asserts their belief in the permissive aspects of the practice of medicine and takes the next step, most specifically with their established patients. Instead of just reacting to today's chief complaint, the RESPONSIVE physician considers the history of their patient and moves to interdict with appropriate tests, diagnostics and planned programs to either resolve and/or arrest the progressive disease states of their patient. (This is what we have our clients doing in their practices. This results in lives being saved, improved patient care, and practices discovering this change in focus almost always results in an increase in their monthly income).

They develop programs that implement measured responses to their patient needs by more comprehensive scheduling and use of ancillaries and laboratory services. Why send a patient elsewhere where they'll have another co-pay or new patient charge? Learn what you can do in your own office to better serve your patients. Ask yourself if you are a referral service or are you their primary care physician?

They establish Coordination of Care services that better manage the co-

morbidities of their patients (if you wait for the patient to present with a serious complaint, it may not happen and if it does, it is often too late).

They utilize physician extenders to assist in the review of patient charts and history to remind them of necessary and appropriate tests and diagnostics (we set up a flagging or tickler system in the office and require it to be used by all personnel).

They inspect set-ups and charts to ensure all vitals are appropriately measured and reported during every visit. (Remember, your nurse can actually perform part of the exam elements needed to comply with documentation requirements.)

They establish controls to ensure that all ordered tests and diagnostic services are actually performed. (In 75% of offices we have worked with, we have found a number of services being done - but not billed or not completed due to scheduling conflicts or inconsistent support staff.)

They no longer wait for the patient to come to them with a problem. They set up a recall system to monitor their patients with serious co-morbitidies on a regular schedule. (This has resulted in several lives being saved and has consistently provided needed and timely interventions.)

They set aside some time to review and question their performance with specific patients. Every other professional business requires quality control checks - so should physicians.

And, most importantly, they schedule personal time to objectively reflect upon their professional performance. My prescription: take a 5-10 minute leisurely walk around the block by yourself every day. You may have a surprising outcome.

"Physician, heal thyself. Apply some of the same diagnostic tools you use every day to your practice and listen to the answers with your head and heart. You may find there are more pearls and diamonds in your own backyard than you ever imagined." Wayne Clark

Doctor, for too long you've been listening to NAYSAYER people tell you what you CANNOT do in your practice. You cannot do this test on the patient or you cannot do annual exams or preventive medicine or you can't get paid for this or that. It's high time that you investigate and learn what you CAN do for your patient. It's time you learned what you CAN bill and what you CAN be paid for. It's time to put the physician & patient back in control of the patient's needs instead of the accountants and bookkeepers and managed care executives. So, you have a choice. You can continue to react to your patient's complaints and illnesses or you can start MANAGING your patients, your practice and your income. The next two month's issue will touch on a few more pointers that are working for our clients. If you don't want to wait till then, email me at <donself@donself.com> with your name and mention the *TEXAS D.O.*, and we'll start sending you e-mail tips as we can, wherever you are.

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FAX: 903-839-7069
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ATOMA News

Many thanks to the companies and individuals for all the items donated to the Annual ATOMA Silent Auction held during TOMA's Annual Convention in June

TOTAL RAISED: $6,732

$1,000+

Abrahams Oriental Rugs, Houston, TX
Hart Galleries, Houston, TX

$500-$999

Brian Armbruster
Dr. George & Linda Cole
Dr. Nelda Cunnif-Isenberg
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Dr. Bobby & Beth Howard
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Rita Baker
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District 6
Dr. Hector & Mireya Lopez

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Dr. Jim & BJ Czewski
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Dr. Karen & Chris Hull
Maggiano's Little Italy, Houston, TX
Marjorie Croushore, Mesa General Hospital Gift Shop
Lois Mitten
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Westin Oaks Galleria
Dr. Rodney & Marie Wiseman
Dr. Eugene & Nancy Zachary

This Is Not Your Ordinary T-Shirt

Round Rock D.O., Robert Peters, Jr., and his staff, model the new ATOMA scrub shirts. The reversible, white top has a navy blue, official TOMA seal on the pocket (on both sides) and is available in sizes Youth Large – Adult XXXL.

At just $20 each, this is a great opportunity to contribute to this ATOMA fund raiser and get a cool shirt to boot!

To purchase your very own scrub shirt(s), please contact ATOMA president, Susan Selman at 817-483-0302.

Independent Investor

A monthly update on money and markets from Dean, Jacobson Financial Services, LLC

July 2001

New Law May Provide "EGTRRA" Money For Retirement

It has always been a wise financial practice to save for retirement by utilizing tax-advantaged investment vehicles such as the traditional individual retirement account (IRA) or Roth IRA, or an employer-sponsored plan such as a 401(k) or 403(b).

It is simply hard to match the benefits associated with tax-deferred investing, multiplied over time by compounding interest. Many investors wish they could contribute money to their retirement plan.

A new law known as the Economic Growth and Tax Relief Reconciliation Act of 2001 (EGTRRA) is poised to make that wish a reality. Signed by President Bush on June 7, the law dramatically increases contribution limits for Americans investing for retirement.

The law will gradually raise the maximum annual IRA contribution limit for both traditional and Roth IRAs. Today's limit of $2,000 climbs to $3,000 from 2002 through 2004. The limit will then reach $4,000 in 2005 through 2007, and $5,000 by 2008. There will be no change to income limits.

IRAs are not the only retirement savings vehicles to benefit from increased contribution limits. Investors who contribute to a 401(k) or 403(b) plan are currently limited to a $10,500 annual ceiling. This increases to $11,000 in 2002, and will rise by $1,000 yearly thereafter, topping out at $15,000 in 2006. EGTRRA also contains a "catch-up" provision that allows those ages 50 and above to contribute an extra $1,000 per year starting in 2002, until an increased contribution limit of $5,000 is met. After 2006, the $5,000 limit will be indexed for inflation in $500 increments.

EGTRRA also eliminates the percentage-of-compensation guideline for the 401(k) and 403(b). As it stands now, employees can contribute up to 25 percent of yearly compensation or $10,500, whichever is lower. Beginning in 2002, employees may contribute up to 100 percent of compensation, so long as it does not exceed that year's dollar limit. Combined employer and employee contributions can be the lower of up to $40,000 or 100 percent of compensation.

Starting in 2006, the plan even creates another potential method of achieving tax-free growth for retirement assets. In that year, 401(k) and 403(b) plans may allow employees to make after-tax contributions to a separate account. Withdrawals will not be subject to income tax, provided the participant holds the account at least five years and is age 59 1/2 or older at the time of distribution.

Those are simply a few of the new options that EGTRRA will provide to smart investors who take advantage of the benefits of tax-advantaged retirement investing. While they are exciting, it is interesting to note that unless lawmakers renew the bill in the future, these increased contribution limits are scheduled to revert back to current levels in 2011. So while it is up to Congress to extend these contribution limits down the road, it is up to all of us to put EGTRRA to work starting in 2002.

Call us.

Country Dean, CFP
Jake Jacobson, CLU, ChFC
Jeff Schmeltekopf, ChFC, CFP

Fort Worth	**817-335-3214**
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Toll Free	**800-321-0246**

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Legislative Wrap-up

Monday, May 28, was the final day of the 140-day session of the 77th regular session. Gov. Rick Perry vetoed a record 82 bills, more than any other governor in recent history. Seventy-eight bills were vetoed on Sunday (June 17) alone, which was the final day for the governor to act on legislation approved by lawmakers.

The following are bills of interest to the medical community. For more information, log on to <www.capitol.state.tx.us>. For veto messages, log on to <www.governor.state.tx.us>.

HB 42 – Rep. Ruth J. McClendon – The Texas A&M University System is granted the authority to conduct a feasibility study regarding the creation of a doctor of medicine degree program at Prairie View A&M University. Effective 6-11-2001

HB 606 – Rep. John Smithee – Health benefit plans are prohibited from requiring the use of hospitalists for hospital in-patient care. Effective 9-1-2001

HB 767 – Rep. Glen Maxey – CME requirements for licensed chemical dependency counselors are amended to include training relating to HIV, hepatitis C and STDs. Effective 5-21-2001.

HB 1688 – Rep. Ruth McClendon – Public school students will be allowed to possess and self-administer prescription asthma medication while on school property or at a school-related event, provided a written authorization is signed by the student's physician. Effective 6-11-2001.

HB 1862 – Rep. Craig Eiland – Known as the prompt pay bill, this legislation would have increased state requirements that health insurance plans pay medical claims on time. In effect, it would have closed loopholes in a previous law requiring insurance companies to pay off claims within 45 days or provide an explanation for the delay. Vetoed 6-17-2001.

HB 2584 – Rep. Norma Chavez – Establishes a Commission on Geriatrics Study Requirement for Medical Schools to conduct studies and make recommendations as to the feasibility of making the study of geriatrics a requisite for graduation from a medical school in Texas. Effective 9-1-01

HB 2600 – Rep. Kim Brimer – Requires that a medical advisor position be established at the Texas Workers' Compensation Committee; calls for the creation of a Medical Quality Review Panel, to be composed of physicians and other health care professionals; and specifies that questions regarding medical necessity are to be resolved by an independent review organization. Effective 6-17-2001.

HB 2828 – Rep. John Smithee – Requires financial reserves when networks assume financial risks for services other that those normally provided by the network or health care entity. Effective 9-1-2001.

HB 2831 – Rep. John Smithee – Upon written request by an out-of-network health care provider, a managed care entity must provide a written description of the factors considered by the managed care entity in determining the amount of reimbursement for the out-of-network provider. Effective 9-1-01.

HB 2989 – Rep. Roberto Gutierrez – Establishes an acanthosis nigricans screening program in certain public and private schools. Effective 9-1-2001.

HB 3600 – Rep. Jaime Capelo – Preserves the confidentiality of records regarding the compliance monitoring of physicians by the Texas State Board of Medical Examiners. Effective 6-15-2001.

SB 11 – Sen. Jane Nelson – Bans health entities from sharing patient data with marketers or advertisers without previous consent and gives patients access to their medical records. Effective 9-1-2001, except Section 2 effective 1-1-2002.

SB 19 – Sen. Jane Nelson – Authorizes the State Board of Education to require school districts to offer 30 minutes of physical activity each day. Effective 6-14-2001.

SB 31 – Sen. Judith Zaffirini – Institutions of higher education must provide information relating to bacterial meningitis to new students, such information to include symptoms, transmission methods, and the availability and effectiveness of vaccination. Effective 5-22-2001.

SB 43 – Sen. Judith Zaffirini – This legislation simplifies the Medicaid enrollment process by eliminating personal interviews with Medicaid applicants, allowing applications to be filed by mail. Additionally, it provides 12 months of continuous coverage for children under five, although older children will have to re-enroll every six months. Effective 1-1-2001 except Section 32.0261, Human Resources Code effective 9-1-2002.

SB 55 – Sen. Judith Zaffirini – Implements a statewide education program to prevent infant mortality. Effective 9-1-01.

SB 126 – Sen. Frank Madla – Creates the Rural Communities Health Care Investment Program to attract and retain rural health care professionals. Effective 5-28-2001.

SB 280 – Sen. Jane Nelson – The Texas Department of Health is authorized to seek proposals from private entities to provide a more effective means of storage and distribution of the state's vaccine supply. Effective 9-1-2001.

SB 282 – Sen. Jane Nelson – Requires the Texas Department of Health to promote the vaccines for children program to health care providers not currently enrolled in the program. Effective 5-22-2001.

continued on next page

SB 285 – Sen. Jane Nelson – Modernizes the cancer-reporting statute to meet federal guidelines. Effective 9-1-2001.

SB 332 – Sen. Mike Moncrief – Adds a provision to the Occupations Code that allows a physician to supply a patient, free-of-charge, with a drug provided by a drug manufacturer for an indigent pharmaceutical program if the physician feels it is in the best interest of the patient. Effective 6-13-2001.

SB 338 – Sen. Frank Madla – Relating to a state plan and continuing education relating to the prevention and treatment of hepatitis C. Effective 6-14-2001.

SB 516 – Sen. Frank Madla – Would have established the Rural Physician Relief Program to provide affordable relief services to rural physicians. Vetoed 6-17-2001.

SB 616 – Sen. Leticia Van de Putte – Establishes a medical assistance pilot program for the management of children's asthma and establishes an asthma and allergy research advisory committee. Effective 9-1-2001.

SB 789 – Sen. Mike Moncrief – Relates to the development of reimbursement parameters for telemedicine medical services under Medicaid. Effective 6-15-2001.

SB 940 – Sen. Teel Bivins – Establishes the Joint Admission Medical Program to increase minority medical school enrollment. Effective 6-11-2001.

SB 1156 – Sen. Judith Zaffirini – Known as the Medicaid restructuring bill, it would have streamlined program administration, and was expected to save approximately $416.8 million over five years. Vetoed 6-17-2001.

SB 1300 – Sen. David Cain – Amends the Occupations Code to stipulate that practicing medicine after the expiration of the 30-day grace period following expiration of an annual registration permit that has not been renewed for that year has the same effect as practicing medicine without a license. Effective 6-13-2001.

SB 1304 – Sen. Chris Harris – Creates a missing persons DNA database at the University of North Texas Health Science Center at Fort Worth. Effective 9-1-2001.

SB 1456 – Sen. Eduardo Lucio – Establishes a pediatric diabetes research advisory committee in the Texas Department of Health. Effective 5-22-2001.

SB 1467 – Sen. Mike Moncrief – Requires certain health benefit plans to provide benefits for diagnostic exams for the detection of colorectal cancer. Effective 9-1-01.

Med Care Now

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FAX or e-mail a copy of your CV to 972-745-0323
or shannanb@carenow.com

New TOMA Officers & Trustees

The following physicians formally took office at the conclusion of the 2001 TOMA annual convention in Arlington.

James E. Froelich, III, D.O., a Bonham family physician, is the new president-elect of TOMA.

James W. Czewski, D.O., a Fort Worth family physician, was elected TOMA vice president.

A. Duane Selman, D.O., an Arlington emergency medicine physician, was re-elected speaker of the TOMA House of Delegates.

Ray L. Morrison, D.O., a Crockett family physician and general surgeon, was re-elected vice speaker of the TOMA House of Delegates.

Hector Lopez, D.O., an El Paso family physician, was re-elected to a three-year term on the Board of Trustees.

Jack McCarty, D.O., a Lubbock family physician, was re-elected to a three-year term on the Board of Trustees.

Monte E. Troutman, D.O., a Fort Worth gastroenterologist, was re-elected to a three-year term on the Board of Trustees.

Patrick J. Hanford, D.O., a Lubbock family physician, was re-elected to a three year term on the Board of Trustees.

Paul S. Worrell, D.O., a Dallas family physician, was elected to fill a two-year unexpired term on the Board of Trustees.

TOMA extends congratulations to these officers and trustees.

In Memoriam

Mrs. Willie Mae Bonner Elliot

Mrs. Willie Mae Bonner Elliot of Rockport, passed away May 7, 2001. She was 74. Funeral services were held May 11 at Charlie Marshall Chapel in Rockport.

A 1943 graduate of Gregory High School, Mrs. Elliot served as a cadet nurse at the University of Texas Breckenridge Hospital in Austin during World War II. She and her husband, Homer F. Elliot, D.O., moved to Rockport in 1948, and have resided there since that time.

Mrs. Elliot was a founding member and past president of the Aransas County Women's Club. She was elected as Democratic Precinct Chairman for Aransas County Precinct 1 and 1A for many years, also serving on the Democratic Executive Committee for the county and as a past president of the Aransas County Democratic Women. She had also served as director of the Rockport-Fulton Chamber of Commerce; as a den mother for Cub Scouts; and as a Girl Scout leader. Mrs. Elliot was a past president of the Auxiliary to the Texas Osteopathic Medical Association.

Survivors include her husband, Dr. Homer F. Elliot, of Rockport; son, Roger Elliot of Little Rock, Arkansas; daughter, Rose Ann Elliot of Dallas; brother, John Bonner of Taft; three sisters, Ann Boyd of Yoakum, Kathryn Bean and Lola L. Bonner.

In lieu of flowers, the family has suggested a donation to Aransas County Medical Services, Inc., P.O. Box 821, Rockport, TX 78381.

Alan R. Boyd, D.O.

Alan R. Boyd, D.O., of New Orleans, Louisiana, passed away on May 9, 2001. He was 50. Services were held May 16 at Tulane University where he was an Assistant Professor in Psychiatry since 1996.

Dr. Boyd was a 1990 graduate of Texas College of Osteopathic Medicine in Fort Worth and completed his psychiatry residency at Tulane University Medical Center in 1995.

Survivors include his wife, Bonnie, of New Orleans; son and daughter-in-law, Scott and Carolyn of Beaumont; mother, Lenore Boyd of Bryan; brothers and sisters-in-law, John and Mary of Neuvo, California, and Robin and Rose of Bryan; father, John H. Boyd, D.O., and his wife, Myrtle, of Eden; adopted siblings, Teresa Boyd, D.O., of San Antonio, Ann Boyd Maxwell of San Angelo, Debbie Boyd Carrigan of Lubbock, Melody Boyd Medders of Eden, and Robert Boyd of San Antonio.

Donations to the American Cancer Society or any favorite charity would be appropriate.

Mrs. Ted C. (Betty) Alexander, Sr.

Mrs. Ted C. (Betty) Alexander, Sr., of Wichita Falls, passed away on June 15, 2001. She was 83. Funeral services were held June 18 at Floral Heights United Methodist Church, with interment at Rosemont Cemetery.

Mrs. Alexander was born in Rolla, Missouri in 1917, and received her teaching certificate from Truman State University, Kirksville, Missouri. In 1942, she married Ted C. Alexander, D.O., in Kirksville. Dr. Alexander preceded her in death in 1992.

A Wichita Falls resident since 1948, she was a member of Floral Heights United Methodist Church, where she was a member of the Faith Class and a youth Sunday School teacher. She was the past Queen of the Daughters of the Nile, a member of the Widows of the Shrine, past president of the Fun Band, and a member of the Order of the Eastern Star. Mrs. Alexander was the #1 charter member and a five-time past president of the Does. In addition, she was a 50-year member and past president of the Social Order of Beaucean.

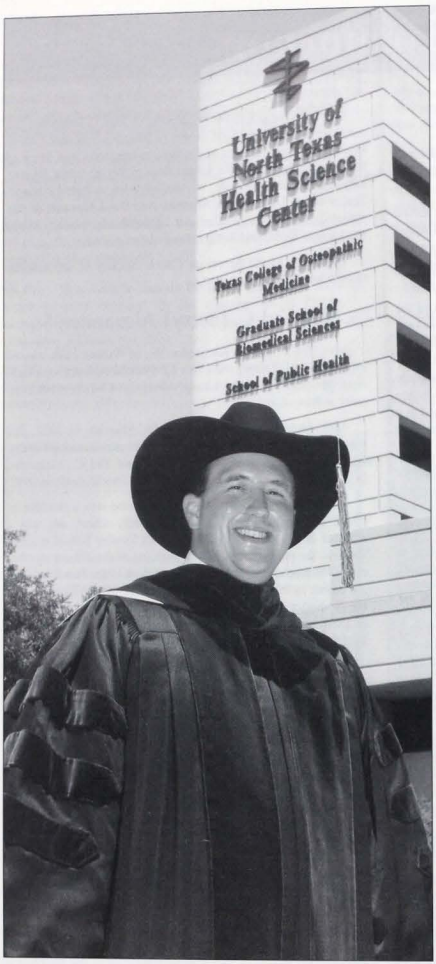
Survivors include her children, Ted C. Alexander, Jr., D.O., Pat Alexander, and her daughter-in-law, Charlene Alexander of Wichita Falls; nine grandchildren and five great-grandchildren.

Memorial contributions may be made to the Kirksville College of Osteopathic Medicine in Kirksville, Missouri or to the Building Fund of Floral Heights United Methodist Church in Wichita Falls, Texas.

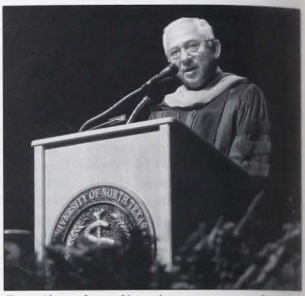
F Y I on Fungus Treatment

The FDA is issuing a public health advisory concerning Sporanox and Lamisil, systemic drug therapies to treat onychomycosis (fungal nail infections). Healthcare professionals are notified of the possible association of serious cardiac and hepatic adverse events with the administration of these therapies. New labeling for both Sporanox and Lamisil recommends that healthcare providers obtain nail specimens for laboratory testing prior to prescribing the medications for onychomycosis to confirm the diagnosis. FDA's concerns do not apply to the over-the-counter versions of Lamisil, which are topical creams. For additional information, including links to the FDA Talk Paper, FDA Public Health Advisory, FDA Q's and A's, and the revised Sporanox and Lamisil labels, go to the MedWatch Safety Summary entry for Sporanox and Lamisil at <www.fda.gov/medwatch/safety/2001/safety01.htm#sporan>.

Health Science Center Graduates Medical Professionals During 28th Commencement



Bobby Wayne Smith, D.O., shows his Texas pride at commencement ceremonies. Having received his degree from TCOM, he and his family head to Detroit, Michigan where he will begin a traditional internship at St. John's Riverview Hospital.



Everett Alvarez, Jr. was this year's commencement speaker.

Dr. Charles Ogilvie hoods his granddaughter, Chere Elizabeth McCormick, as she receives her degree. For the first time, family members were allowed to hood graduates.

More than 140 students graduated from the University of North Texas Health Science Center at Fort Worth on May 19 at Will Rogers Coliseum in Fort Worth. The graduating class included 108 doctors of osteopathic medicine from the health science center's Texas College of Osteopathic Medicine.

Everett Alvarez, Jr., the first American aviator shot down on North Vietnam, was the guest speaker at the health science center's 28th commencement.

Mr. Alvarez was taken prisoner of war August 5, 1964, and held in Vietnam for eight and a half years until the general release of prisoners February 12,

1973. He continued to serve in the U.S. Navy until his retirement in 1980. He now owns a consulting firm, Conwal Incorporated, in McLean, Virginia.

Following are the names and residency appointments of the TCOM Class of 2001:

Ruth Ann Adell, D.O. - McLennan County Medical Education and Research Foundation, Waco, TX

Kay Elizabeth Atkins, D.O. - John Peter Smith Hospital, Fort Worth, TX

Brian James Batdorf, D.O. - Grandview Hospital and Medical Center, Dayton, OH

Pavani Bellary, D.O. - Plaza Medical Center of Fort Worth, Fort Worth, TX

Juan Pablo Benavides, D.O. - Doctors Hospital of Stark County, Massillon, OH

Nicolle Rocina Marlene Benz, D.O. - Maine Medical Center, Portland, ME

Mark Nicholas Blaser, D.O. - Northeastern Ohio University College of Medicine, Children's Hospital Medical Center of Akron, Akron, OH

Nancy Ann Blum, D.O. - University of Texas Southwestern Medical School, Parkland Health and Medical System, Dallas, TX

Tara Christine Boedeker, D.O. - Methodist Hospitals of Dallas, Dallas, TX

James Joseph Boehmke, Jr., D.O. - Wilford Hall Medical Center, San Antonio, TX

Bascom Kyle Bradshaw, D.O. - Eisenhower Army Medical Center, Augusta, GA

David Pearce Bryant, D.O. - Louisiana State University School of Medicine, New Orleans, LA

Oanh Ngoc Thi Bui, D.O. - John Peter Smith Hospital, Fort Worth, TX

Tada K. Butler, D.O. - University of Arkansas, Little Rock, AR

Jennifer Leigh Caffey, D.O. - University of Texas Medical Branch, Galveston, TX

Maricela Cantu, D.O. - Texas Tech University, Thomason Hospital, El Paso, TX

Roberto Cardarelli, D.O. - Baylor College of Medicine, St. Luke's Hospital, Houston, TX

Aaron Lawrence Cernero, D.O. - Plaza Medical Center of Fort Worth, Fort Worth, TX

Annie Yu Chang, D.O. - Scott and White Memorial Hospital, Temple, TX

Barbara Monique Chavez, D.O. - Osteopathic Medical Center of Texas, Fort Worth, TX

Amy Eunice Clark, D.O. - Texas Tech University Health Science Center, University Medical Center, Lubbock, TX

Brent Kelly Combs, D.O. - Tulane University School of Medicine, New Orleans, LA

Jason Douglas Creel, D.O. - John Peter Smith Hospital, Fort Worth, TX

Yen Kim Dao, D.O. - Central Texas Medical Foundation, Brackenridge Hospital, Austin, TX

Brian Mitchell Darnell, D.O. - University of Wyoming College of Health Sciences, Wyoming Medical Center, Casper, WY

Carolyn Dale Denton, D.O. - Osteopathic Medical Center of Texas, Fort Worth, TX

William Kevin Denton, D.O - Plaza Medical Center of Fort Worth, Fort Worth, TX

Michelle Kathleen Doroz, D.O. - Phoenix Baptist Hospital and Medical Center, Phoenix, AZ

Timothy John Doyle, D.O. - Osteopathic Medical Center of Texas, Fort Worth, TX

Jeffrey Frederick Erdner, D.O. - Texas Tech University, Thomason Hospital, El Paso, TX

Scott Evan Ewing, D.O. - Plaza Medical Center of Fort Worth, Fort Worth, TX

Theresa Nguyen Garza, D.O. - University of Texas Southwestern, Charlton Methodist Hospital, Dallas, TX

Daniel Philip Gilday, D.O. - Christiana Care Health System, Newark, DE

Laura Glendene Golightly, D.O. - Osteopathic Medical Center of Texas, Fort Worth, TX

Grider Glenn Gordon, D.O. - Plaza Medical Center of Fort Worth, Fort Worth, TX

Sharon M. Gustowski, D.O. - Bay Area Medical Center, Corpus Christi, TX

Tracey Ann Haas, D.O. - Maine Medical Center, Portland, ME

Rose Marie Haisler, D.O. - University of Illinois, St. Francis Medical Center, Peoria, IL

Sandra L. Hartline, D.O. - Philadelphia College of Osteopathic Medicine, Geisinger Health System, Danville, PA

Nadya Hasham-Jiwa, D.O. - University of Texas Medical Branch, Galveston, TX

Tammy Sue Hooker, D.O. - University of Arkansas, Arkansas Children's Hospital, Little Rock, AR *continued on next page*

Ronald James Jensen, D.O. - Doctors Hospital North, Columbus, OH

Vishal Subbash Kancherla, D.O. - New York College of Osteopathic Medicine, St. Clare's Hospital, New York, NY

Jeremiah N. Keng, D.O. - Central Texas Medical Foundation, Austin, TX

Wendy Alison Kindrick, D.O. - University of Kansas Medical Center, Kansas City, KS

Michele Kreisberg, D.O. - Naval Medical Center, San Diego, CA

Shital Desai Kumar, D.O. - MacNeal Hospital, Berwyn, IL

Quang Trong Le, D.O. - Plaza Medical Center of Fort Worth, Fort Worth, TX

Rick Jui Han Lin, D.O. - St. Paul Medical Center, Dallas, TX

Chun-Tsai (Kirk) Liu, D.O. - St. Paul Medical Center, Dallas, TX

Michael Francis Lorich, D.O. - Darnall Army Community Hospital, Fort Hood, TX

Rebecca Anne Mantsch, D.O. - Rush Presbyterian, Chicago, IL

Matthew Wight Margolis, D.O. - University of Arkansas Medical Sciences, University of Arkansas Hospital, Little Rock, AR

Shane Alan Maxwell, D.O. - Wake Forest University Baptist Medical Center, Winston-Salem, NC

Chere Elizabeth McCormick, D.O. - Baylor Garland Medical Center, Garland, TX

Jared E. McElhaney, D.O. - Dallas Southwestern Medical Center, Dallas, TX

Brian Randle McMillan, D.O. - Brooke Army Medical Center, Fort Sam Houston, TX

Richard Scott McPherson, D.O. - University of Pittsburgh Medical Center, Pittsburgh, PA

Niraj Mahendra Mehta, D.O. - Plaza Medical Center of Fort Worth, Fort Worth, TX

Wajid Ali Mirza, D.O. - University of Texas Medical Branch, Galveston, TX

Nance D. Mitchell, D.O. - University of Oklahoma Health Sciences Center Rural Program, Ramona, OK

William Edward Moss, D.O. - Virginia Commonwealth University, Medical College of Virginia, Richmond, VA

Minh Quang Nghi, D.O. - Osteopathic Medical Center of Texas, Fort Worth, TX

Manuel Alejandro Padilla, Jr., D.O. - Plaza Medical Center of Fort Worth, Fort Worth, TX

Manuel Jesus Palafox, D.O. - Plaza Medical Center of Fort Worth, Fort Worth, TX

Amit Pravin Parikh, D.O. - Scott & White Hospital, Temple, TX

Maria Elisa Perez-Johnson, D.O. - Driscoll Children's Hospital, Corpus Christi, TX

Andrew Dodd Petersen, D.O. - Altoona Hospital, Altoona, PA

Sindhu Elizabeth Philip, D.O. - Texas Tech University Health Science Center, Thomason Hospital/Providence Memorial Hospital, El Paso, TX

Anush Sasidharan Pillai, D.O. - Univeristy of Texas Health Science Center, Hermann Hospital/Lyndon B. Johnson Hospital, Houston, TX

Julia Dawn Quinlan, D.O. - University of Texas Health Science Center, Wilford Hall/Lackland AFB, San Antonio, TX

Samiya Rashid, D.O. - University of Illinois at Chicago, University of Illinois, Chicago, IL

Chandana Reddy, D.O. - Scott & White Hospital, Temple, TX

Christopher Orren Restad, D.O. - St. Louis University School of Medicine, Belleville, IL

Martha Jeanette Rodriguez, D.O. - Valley Baptist Medical Center, Harlingen, TX

Christine J. Sandoval, D.O. - University of Texas Health Science Center, University Hospital, San Antonio, TX

Alberto Santos III, D.O. - Bay Area Hospital, Corpus Christi, TX

Lesley Ann Schmitz, D.O. - Southwestern Medical Center, Dallas, TX

Keisha M. Shaheed, D.O. - Texas Tech University Health Science Center, University Medical Center, Lubbock, TX

Erik Tabakin Shaw, D.O. - University of Texas Health Science Center, University Hospital, San Antonio, TX

Kelvin Dwayne Shepherd, D.O. - University of Illinois at Chicago, Cook County Hospital, Chicago, IL

Philip T. H. Shie, D.O. - Scottsdale Healthcare, Scottsdale, AZ

Leonid D. Shturman, D.O. - Tuft's University School of Medicine, St. Elizabeth Medical Center, Boston, MA

Milana M. Shturman, D.O. - Tuft's University School of Medicine, St. Elizabeth Medical Center, Boston, MA

James Lee Slater II, D.O. - University of Texas Southwestern Medical School, Dallas, TX

Sharlet Gayl Slough, D.O. - John Peter Smith Hospital, Fort Worth, TX

Janis Lea Smeal, D.O. - University of Texas Health Science Center, Houston, TX

Bobby Wayne Smith, D.O. - St. John's Riverview Hospital, Detroit, MI

Heidi Suzanne Smith, D.O. - University of Texas Health Science Center, San Antonio, TX

Iveth Soza, D.O. - University of Texas Health Science Center, University Hospital – San Antonio, San Antonio, TX

Laura Lee Spies, D.O. - Osteopathic Medical Center of Texas, Fort Worth, TX

Robert Neil Suter, D.O. - Plaza Medical Center of Fort Worth, Fort Worth, TX

Kent S. Sutterer, D.O. - Kirksville College of Osteopathic Medicine, Regional Medical Center, Kirksville, MO

Jon N. Swift, Jr., D.O. - John Peter Smith Hospital, Fort Worth, TX

Joseph Murry Szczytowski, D.O. - Scott & White Memorial Hospital, Temple, TX

Mo-Ping Marlene Tham, D.O. - New York College of Osteopathic Medicine, Maimonides Medical Center, Brooklyn, NY

Christopher William Tidwell, D.O. - Ohio University College of Osteopathic Medicine, Grandview Medical Center, Dayton, OH

Ngoc Van Tran, D.O. - University of Texas Health Science Center, University Hospital - South Texas Medical Center, San Antonio, TX

Peterson Tsai, D.O. - Western University, Arrowhead Regional Medical Center, Colton, CA

Diana Cypress Wagner, D.O. - Baylor Medical Center, Dallas, TX

Fang Wang, D.O. - Methodist Hospital of Dallas, Dallas, TX

Phillip Andrew Ward, D.O. - Corpus Christi Bay Area Medical Center, Corpus Christi, TX

Joanna Dean Wilson, D.O. - Southwestern Medical School, St. Paul Medical Center, Dallas, TX

William Byron Winn, D.O. - University of Arkansas Medical School, University Hospital, Little Rock, AR

John Raymond Winningham, D.O. - Martin Army Community Hospital, Fort Benning, GA

Min W. Yi, D.O. - St. Luke's - Roosevelt Hospital Center, New York, NY

Anthony John Zachria, D.O. - University of Texas Health Science Center, Houston, TX

Congratualtions and all the best in your continuing osteopathic medical education from the Texas Osteopathic Medical Association!

TOMA Members Assume Positions on the Federation of State Medical Boards of the United States

During the recent annual meeting of the Federation of State Medical Boards held in Atlanta, Georgia, the following physicians assumed leadership positions:

David E. Garza, D.O., a Laredo family physician, was elected as a member of the Editorial Committee of the Federation. Elected for a three-year term, Dr. Garza will join the Committee to work with the editor in establishing editorial policy for the Federation's Journal of Medical Licensure and Discipline.

A fellow of the American Academy of Family Physicians and a diplomate of the National Board of Osteopathic Medical Examiners, Dr. Garza has served the Texas medical community well. He is a member of the Texas State Board of Medical Examiners, and currently chairs the board's Licensure Committee. He also serves on the Finance Committee, the Non-profit Health Organizations Committee, and the Ad Hoc Committee for Optometric Issues. For more than five years, Dr. Garza has provided leadership to the Texas Society of the American College of Osteopathic Family Physicians, serving as vice president, chair of the Government and Legislative Committee, and currently as a member of the Board of Governors. He is a past president of both the Texas Association of Mexican-American Medical Students and of Healthcare Alliance of Laredo.

Dr. Garza received his D.O. degree in 1989 from the University of North Texas Health Science Center/Texas College of Osteopathic Medicine in Fort Worth. He completed an internship at Osteopathic Medical Center, also in Fort Worth, followed by a family medicine residency at Memorial Medical Center in Corpus Christi. Currently, he is chief of staff at Doctor's Hospital and has a private family practice in Laredo, Texas.

R. Russell Thomas, Jr., D.O., M.P.H., of Austin, was installed as a member of the Board of Directors of the Federation of State Medical Boards. He was elected to a three-year term.

Dr. Thomas has offered leadership to the Federation for more than five years, serving on the Special Committee to Evaluate Licensure Examinations, the Special Committee on Uniform Standards and Procedures, the Strategic Planning Committee, the Nominating Committee, and as chair of a Federation Reference Committee. Dr. Thomas was a guest speaker at FSMB's 1999 Annual Meeting. Presently, he serves as a member of the Post Licensure Assessment System's SPEX Program Committee.

A diplomate of the American Board of Family Physicians and a fellow of the American Academy of Family Physicians, Dr. Thomas has a distinguished record of service in the Texas medical community. He has served eight years on the Texas State Board of Medical Examiners, including a term as vice president, and as chair of the board's Endorsement Committee and the Standing Orders Committee. Dr. Thomas is currently the chair of the board's Ad Hoc Committee on Complementary/Integrative Medicine. He has also been involved in the development of the

Acupuncture Board for the State of Texas. He has served as a member of the Texas Academy of Family Physicians, the Texas Medical Foundation, the Texas Osteopathic Medical Association and the Texas Medical Association.

Dr. Thomas graduated from the University of Texas in Austin before attending the University of Texas School of Public Health in Houston to receive his masters in public health and disease control. He received his D.O. degree in 1980 from the University of North Texas Health Science Center/Texas College of Osteopathic Medicine, and completed his family practice residency at the University of Texas Southwest Memorial Hospital in Houston.

After 17 years of family practice for a rural community in Eagle Lake, Texas, Dr. Thomas became program director of Austin Medical Education Programs Family Practice Residency in February 2000.

The Federation of State Medical Boards of the United States, Inc., is the membership organization of 68 licensing and disciplinary boards, which include osteopathic and allopathic boards across the U.S. and its territories. The Federation's mission is to promote high standards for physician licensure and practice through assisting state medical boards collectively and individually in the regulation of medical practices and the protection of the public.

TRICARE NEWS and Related Military Issues

TRICARE Senior Pharmacy Program Begins With Great Success

For approximately 1.4 million uniformed services beneficiaries age 65 and older, April 1, 2001, was not a typical spring day. The new TRICARE Senior Pharmacy Program sprang into action, availing them of one of the best pharmacy benefits in the United States.

"Overall the new pharmacy program is extremely successful. The response from beneficiaries 65 and older has been overwhelmingly positive," said Army Col. William Davies, director, Department of Defense (DoD) pharmacy programs. "The managed care support contractors (MCSCs) provided exceptional support at the regional level, ensuring a smooth beginning to the program," added Davies.

Among the few difficulties encountered by users were denied claims resulting from erroneous social security numbers (beneficiary's instead of the sponsor's) and incorrect information in the claims processor's database about the beneficiary having other health insurance (OHI).

"In these situations, the DoD's toll-free TRICARE Pharmacy Help Line 1-877-DOD-MEDS (1-877-363-6337) proved to be an invaluable resource," said Davies. "As problems which caused a claim to be denied were identified, corrective action was taken on the spot by the network pharmacy and help line staffs to contact the beneficiary, update or correct erroneous information and process the claim."

From April 1 to 28, approximately 450,000 prescriptions were processed. The TRICARE retail networks processed 317,000 prescriptions, and the National Mail Order Pharmacy (NMOP) processed 133,000 prescriptions. Users of the expanded senior pharmacy benefit have reported their satisfaction to TRICARE Management Activity (TMA) officials and leaders of military organizations.

One beneficiary said his spouse previously spent $423 for 90 tablets of a certain medication. The same prescription submitted through a TRICARE network pharmacy cost only $9 for 180 tablets. The beneficiary also reported previously paying $48 for a bottle of eye-drops to treat his wife's glaucoma. Using TRICARE, his wife was able to receive two bottles of the same eye-drops for only $9.

Another beneficiary reports being prescribed a new medication that had no generic substitute. Purchased locally, the prescription would have cost $17 per tablet. Filling the prescription using the NMOP, the beneficiary received a 90-day supply costing $9 (10 cents per tablet).

"For some beneficiaries, the previous pharmacy co-payment system was confusing. Co-payments were determined by the member's enrollment status (TRICARE Prime, Extra or Standard), beneficiary category, and place of pharmacy service. Under the new TRICARE pharmacy program with the new rate structure, prescription medications, for the most part, will cost less," explains Davies.

Davies added, "The military treatment facility (MTF) remains the best value for all users of the TRICARE pharmacy program. By filling prescriptions at the MTF, TRICARE beneficiaries can eliminate their out-of-pocket costs. As long as the "prescribed medication is listed on the MTF's formulary, eligible beneficiaries may continue using this option."

Prescriptions filled using the National Mail Order Pharmacy cost $3 for a 90-day supply for a generic medication, and $9 for a 90-day supply for most non-generic medications. Prescriptions filled using a retail network pharmacy cost $3 for a 30-day supply of a generic medication, and $9 for a 30-day supply for most non-generic medications.

Beneficiaries choosing to fill prescriptions using a non-network pharmacy will pay either $9 or 20 percent of the total cost of the prescription, whichever amount is greater, and meet the annual TRICARE deductible of $150 per individual or $300 per family.

Up-to-date information on the TRICARE Senior Pharmacy Program and the new TRICARE pharmacy co-payments, are available on the MHS/TRICARE Web site at <www.tricare.osd.mil/pharmacy>. Eligible uniformed services beneficiaries may also contact the Department of Defense toll-free TRICARE Pharmacy Help Line 1-877-DOD-MEDS (1-877-363-6337). Beneficiaries may also contact a local TRICARE service center or health benefits adviser to find out more about their new pharmacy benefits.

Blue Cross and Blue Shield of Texas and Subsidiaries of Tenet Healthcare Corp. Agree to a New, Multi-Year Contract

The agreement will provide access for members of Blue Choice PPO, HMO Blue and HMO Blue Texas programs, to all Tenet hospitals in the Dallas area, including Doctors Hospital of Dallas, Garland Community Hospital, Lake Pointe Medical Center in Rowlett, RHD Memorial Medical Center in Farmers Branch and Trinity Medical Center in Carrollton. Under a previous contract, now expired, only HMO Blue Texas members had access to most of Tenet's Dallas hospitals.
(Dallas Business Journal, 6-4-2001)

Construction Underway for Two Hospital Upgrade Projects

A $4.5 million project, slated for a Nov. 1 completion date, will add 25,000 square feet for All Saints Episcopal Hospital's cardiac service telemetry unit, will provide 28 private patient rooms, including three suites, and replaces 24 beds in an area built decades ago. A $575,000 construction project, expected to be completed in September, also began at Zale Lipshy University Hospital, where the health center is being renovated and expanded.
(Dallas Business Journal, 6-4-2001)

Driscoll Children's Hospital and Foundation Agreed to Pay $14.5 Million to Settle Medicaid Overpayment Probe

The Corpus Christi hospital did not admit wrongdoing in an agreement reached with the Texas Attorney General's office, ending a dispute about whether the hospital provided false information to the Texas Department of Health, which led Medicaid to overpay the hospital. The hospital was accused of filing erroneous cost reports to the health department from 1994 to 1999 for various expenses not allowed for reimbursement, reporting inflated figures on charity work and participating in possible violations of state and federal anti-kickback statutes.
(Corpus Christi Caller-Times, 5-25-2001)

The University of Texas System Regents Approved Plans to Construct $300 Million Outpatient Care Building

The building is the first in a series of facilities planned for the site now occupied by the Houston Main Building and will house facilities for breast, ovarian and gynecological, and prostate and genito-urinary cancers, as well as provide space for a radiation center and for screening and counseling. M.D. Anderson has grown by 40 percent in the past five years and has seen a ten percent increase in outpatient clinic visits, treatments and procedures in 2000 over the previous year.
(Houston Chronicle, 5-10-2001)

TSBME Executive Director Resigns

The Texas State Board of Medical Examiners recently announced the resignation of its executive director, F. M. "Skip" Langle, M.D. Chief operating officer, Jerry T. Walker, was named as interim executive director, effective May 11. A search committee composed of the following has been formed and are working to locate a new executive director: Lee S. Anderson, M.D.; David E. Garza, D.O.; Ed Hicks, Sr.; Thomas D. Kirksey, M. D.; Janet Tornelli-Mitchell, M.D.; Larry Price, D.O.; and Nancy M. Seliger.

Intracorp Fined for Not Giving External Review Notices

Texas Department of Insurance (TDI) Commissioner Jose Montemayor has fined International Rehabilitation Associations $17,500 for failing to tell patients of their right to a binding independent review of decisions not to pay for medical treatments recommended by their doctors.

When it failed to notify patients of their independent review rights, Intracorp was under contract to perform utilization review for Connecticut General Life Insurance Co., an affiliate within the same holding company system. Connecticut General agreed to pay a $15,000 fine for its failure to discover and prevent Intracorp's violation of the independent review law.

Intracorp agreed to the $17,500 fine and to Montemayor's order requiring its immediate compliance with the law. The consent order was signed May 30.

Several similar cases are under investigation by the Legal and Compliance Division of TDI.

Three independent review organizations (IROs) are certified by the TDI. Through the end of April 2001, IROs had performed almost 1,300 reviews. In 50 percent of the cases, the reviewers overturned decisions of the utilization review agent. Determinations that treatments were unnecessary were upheld in 42 percent of the cases. In 8 percent of the cases, the decisions were partly upheld, partly overturned.

HHS Calls on Congress to Reform Medicare Contracting Rules

On June 28, HHS Secretary Tommy G. Thompson called on Congress to enact the Bush administration's proposed legislation to begin strengthening and modernizing Medicare by opening up the program's claims-processing contracts to competitive bidding. By law, Medicare must contract with private health insurance companies to process and pay Medicare claims without needed flexibility available under other government contracts.

"Reforming the processes that are used to select Medicare contractors will help us to serve our beneficiaries more efficiently," Secretary Thompson said. "Changing the law will allow us to better meet the needs of beneficiaries, physicians and healthcare providers, now and in the future."

Since Medicare was created in 1965, the Centers for Medicare & Medicaid Services (formerly the Health Care Financing Administration) has used private health insurance companies to process Medicare claims and perform related administrative services for beneficiaries and health care providers. Today, CMS uses 49 contractors, located all across the country, to process nearly a billion Medicare claims every year, from more than 1 million doctors and other health care providers.

"The current arrangement is one of the worst remnants of Medicare's original design," CMS Administrator Tom Scully said. "To move Medicare into the 21st century successfully, we must take aggressive action to reform the current contracting system."

The legislative proposal, unveiled at a hearing of the House Energy and Commerce Committee's subcommittees on Health and Oversight and Investigations, would allow the HHS Secretary more flexibility in contracting with the private companies that process Medicare claims under the Federal Acquisition Rules. The legislation would also increase CMS' ability to reward well-performing contractors.

Through this legislation, CMS hopes to accomplish the following:

- Provide flexibility to CMS and its contractors to work together more effectively and better adapt to changes in the Medicare program.
- Promote competition, leading to more flexible efficiency and greater accountability.
- Establish better coordination and communication between CMS, its contractors and health care providers.
- Promote CMS' ability to negotiate incentives for Medicare contractors to perform well.

New HHS Initiative to Expand Access to Prescription Drugs for Safety-Net Patients

A new initiative announced June 18 by HHS Secretary Tommy G. Thompson will help community health centers and other safety-net providers develop new ways to expand their ability to buy drugs and improve access to prescription drugs for patients.

"Through this initiative, organizations will be able to stretch scarce resources and buy more of the drugs their patients need," Secretary Thompson said. "The initiative responds to proposals from local safety-net providers and it exemplifies our commitment to support grassroots efforts that improve primary care services for uninsured and underserved Americans."

Through demonstration projects, the new initiative will allow organizations that participate in the 340B drug discount program to take actions to reduce administrative costs and make buying drugs easier for patients. Entities approved for the demonstrations will be able to:

- participate in single purchasing and dispensing systems that serve covered entity networks;
- contract with multiple pharmacy services providers; and
- use contracted pharmacy services to supplement in-house pharmacy services.

By being able to undertake these activities, community health center networks and other covered entities will improve their economies of scale, allowing individual centers to purchase more drugs without increasing total expenditures. Contracting with multiple pharmacy service providers and supplementing in-house pharmacy services will improve patients' access to prescription drugs by increasing the number of pharmacy sites where these drugs can be obtained. This is an important improvement because patients of safety-net providers often cannot afford to travel from their neighborhoods to a distant pharmacy to have prescriptions filled.

Currently, organizations eligible to participate in the drug discount program - established by Section 340B of the Public Health Service Act - cannot take these cost-saving steps.

The 340B discount program requires drug manufacturers to sell drugs to specified safety-net health care providers at a discount rate determined by a formula in the legislation that created the program. Discounts average 25 percent to 40 percent on most drugs.

Approved demonstration projects will be time limited and will be evaluated on benefits provided as well as on compliance with requirements of the 340B law. If the demonstrations are successful, the new methods of accessing discounted drugs will be incorporated into the 340B program's published guidelines. Eligible organizations should submit proposals to HHS Administration's Office of Pharmacy Affairs. HRSA is the lead HHS agency for improving access to health care for individuals and families nationwide.

For a description of the proposal requirements and to review criteria, go to <www.hrsa.gov/odpp>. Then click on What's New.

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