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Revised Handbook of Texas to Include Osteopathic Medicine . . . Page 8

# PHONE

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State Board of Medical Examiners	512/452-1078
State Board of Pharmacy	512/832-0661
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	800/392-8548
	Houston Metro 654-1701

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For DEA number (form 224)	214/767-7250

### CANCER INFORMATION:

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# Texas DO

Texas Osteopathic Medical Association

January 1988

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# Calendar of Events



## FEBRUARY

7-14

Annual Meeting ACPOMS  
Palm Springs, CA

Contact: Bette Vaught, Exec. Director  
2045 S. Arlington Heights  
Road, Suite 104  
Arlington Heights, IL 60005  
800/323-0794

## MARCH

5

*Fourth Annual Conference:  
Fitness in Sports*

*Topic: Diagnosis and Management  
of Common Sports Injuries*

TCOM — Kiva Room, Med Ed II

Contact: Cheryl Cooper,  
Coordinator CME  
TCOM  
817/735-2539

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Board of Trustees Meeting  
TOMA

Fort Worth

Contact: Tom Hanstrom  
Executive Director  
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Fort Worth, 76107  
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1988 Convocation Program  
*A.T. Still: His Philosophy Today*  
American Academy of Osteopathy  
The Broadmoor  
Colorado Springs, CO

Contact: Mrs. Vicki E. Dyson  
AAO Executive Director  
P.O. Box 750  
Newark, OH 43055  
614/349-8701

## APRIL

2

*A Spring Update for the Family  
Practitioner — II*

Dallas Family Hospital

Contact: Cheryl Cooper,  
Coordinator CME  
TCOM  
817/735-2539

26

Board of Trustees Meeting  
TOMA

Galvez Hotel, Galveston

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Executive Director  
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House of Delegates Meeting  
TOMA

Galvez Hotel, Galveston

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28-30

*89th Annual Convention and  
Scientific Seminar*

TOMA

Galvez Hotel/Moody Conv. Ctr.  
Galveston, TX

Contact: Tom Hanstrom  
Executive Director  
226 Bailey Avenue  
Fort Worth, 76107  
817/336-0549 or  
800/772-5993 in TX

## JULY

28-August 1

House of Delegates Meeting  
AOA

Miami, FL

Contact: Ann W. Wittner  
Director of Administration  
142 S. Ontario St.  
Chicago, IL  
60611-2864  
800/621-1773

## NOVEMBER

12-13

*Mid-Year Scientific Seminar/  
Legislative Forum*

(formerly)

*Public Health Seminar/Legislative  
Forum*

TOMA

(place to be announced)

Contact: Tom Hanstrom  
Executive Director  
226 Bailey Avenue  
Fort Worth, 76107  
817/336-0549 or  
800/772-5993 in TX

## DECEMBER

4-8

*Annual Convention and Scientific  
Seminar*

AOA

Las Vegas, NV

Contact: AOA Bureau of Conv.  
142 E. Ontario St.  
Chicago, IL 60611-2864  
800/621/1773



# Remember California



We have made it through yet another year and in order to start 1988 in an optimistic frame of mind, let's talk California. Incidentally, this story DOES have a happy ending!

Remember when the demise of the osteopathic profession looked, to most, to be inevitable? Most of you recall and/or have heard of the California crisis. In 1962, a California public referendum prohibited the issuance of new licenses to D.O.s in the state. The College of Osteopathic Physicians and Surgeons, Los Angeles, was converted into an allopathic institution and granted approximately 2,500 unearned M.D. degrees to D.O.s, for \$65, with the concurrence of the California Medical Association and the California Osteopathic Association. A new osteopathic association by the name of Osteopathic Physicians and Surgeons of California was chartered by the AOA for those D.O.s wishing to maintain their own identity.

At the time, California D.O.s numbered more than 2,600, the state with the largest concentration of D.O.s; staffed Unit II of the Los Angeles County Hospital; had built 65 hospitals, mostly from their own funds; and provided teaching and financial support to their non-profit college. It's no wonder that many believed this to be the beginning of the end of osteopathic medicine. And, it might have been, if not for the remaining D.O.s who refused to give up their degrees under tremendous pressure exerted by those who "converted". The term "little m.d." came to mean a former D.O. in the state.

Alexander Tobin, the attorney who eventually carried the case to the Supreme Court, explained in a speech presented before TOMA on May 11, 1972, how the "merger" was accomplished. According to Tobin, "... strategy called for a 'fifth column' invasion of the California Osteopathic Association, and a gradual infiltration of that association's officialdom. It also called for the eventual merger of the Osteopathic Association with the CMA ... All this is to be accompanied by 'appropriate and necessary legislation'.

"The strategy proved so successful that in May, 1961, the two associations signed an agreement of 'merger' that even the appellate court saw as legitimate when OPSC, the successor D.O. association brought suit against the CMA to have the merger set aside."

As to the question why the D.O.s wishing to remain D.O.s didn't do something about the situation before it got out of hand, an exchange of questions and answers

was carried on before the California State Legislature Assembly Interim Committee on Governmental Efficiency and Economy. This took place during a 1966 hearing on "Restoration of Osteopathic Licensure". Viola Frymann, D.O., then president of OPSC, responded to the statement that the arrangement had been mutually agreed upon by saying, "The professional associations made this agreement. This was not the statement authorized by a ballot of every D.O. in the state."

Thanks to the efforts of a small group of osteopathic die-hards, a 12-year battle began in an attempt to overturn the referendum, eventually leading to the Supreme Court. The justices unanimously overruled the 1962 referendum in 1974, in that it had violated the equal protection provisions of both the state and federal constitutions because of the prohibition of outside D.O.s practicing in California. The Board of Osteopathic Examiners was ordered to resume licensing immediately.

In 1977, the College of Osteopathic Medicine of the Pacific (COMP), Pomona, California, was founded. A charter class of 36 students was admitted in 1978 and classes began on October 2, with Philip Pumerantz, Ph.D., inaugurated as the first president of COMP. In 1979, a second class of 54 students was admitted; in 1980, 72 students were admitted and that year, then Governor Jerry Brown signed into law SB 1461, authorizing COMP to charge for services in health care clinics. In 1981, the Bureau of Health Professions, U.S. Department of Health and Human Services, awarded a \$369,000 grant to COMP to increase off-campus training programs for third and fourth year students. COMP also received a historic first grant from the California Health Manpower Policy Commission under the Song-Brown Family Physician Training Act. In 1982, COMP received full accreditation by the AOA and Governor Brown signed into law SB 1144, sponsored by COMP, which enabled students to participate in California's Graduate Fellowship Program. Also in 1982, in what was hailed as the single biggest victory since the reversal of the 1962 referendum, a new bill, SB 18 was passed, ruling that osteopathically trained physicians and surgeons must seek licensure as D.O.s from the Board of Osteopathic Examiners. For D.O.s to do otherwise would be construed as unprofessional conduct. Dr. Pumerantz stated that the "California Legislature, like the Supreme Court, now recognizes that osteopathic medicine is fully back in place in this state."

As further proof that the D.O.s in California are well on the road to recovery, the *Los Angeles Times* recently ran a front-page article entitled, *California Osteopaths: On the Mend*. The article stated that as the school celebrates its 10th anniversary, "... many hail it as a symbol of osteopathy's resurgence, a kind of phoenix risen from the profession's demise. Fully accredited and privately funded, it is the newest of the nation's 15 osteopathic colleges and the only such school west of the Rockies."

Matt Weyker, executive director of Osteopathic Physicians and Surgeons of California, was quoted as saying, "COMP is the future of osteopathic medicine. It shows that we're back, and stronger than ever." COMP has grown from 36 students to 400 and during that time, the number of D.O.s practicing in California has risen from approximately 70 to 850.

Also quoted was Dr. Forest J. Grunigen, a retired Newport Beach urologist who traded in his D.O. license for an M.D. license 25 years ago. "It was my opinion that the people of California would receive better medical care if we combined the two philosophies," he said. Likewise, Robert M. Garrick, a CMA official who heads a group created 25 years ago, representing the D.O.s who "converted", said, "I see no reason for two schools of medicine." However, Dr. Pumerantz says, "Osteopathic Medicine is here to stay." And indeed, the AOA credits COMP as having helped boost the profession.

Viola Frymann, D.O., now director of COMP's Osteopathic Center for Children in La Jolla, says, "I hate to say this, but the merger was kind of a blessing in disguise. It began a revival in the profession, so that the teaching of true osteopathic principles and practice is vastly stronger today than it was at the time."

W. Robert Finnegan, Director of Public Relations and Alumni Affairs at COMP, when forwarding TOMA a copy of the *Los Angeles Times* article, said the article "... reflects the increasingly positive attitude of the major media and the public toward the osteopathic medical profession and its rapid growth. It also dramatizes the phenomenal rebirth and acceptance of osteopathic medicine in California, something which should encourage us all."

A great lesson can be learned from the California story. First, this gambit can be employed in other states, and in fact, a skirmish did take place in the early 1970's here in Texas. Tobin compared the situation, in California and Texas, to that of the Trojan horse. "The well remembered myth tells us that after a sustained and well mounted defense against the marauding Greeks, the Trojans were duped into defeat with a 'loaded' gift . . . . Texas Physicians and Surgeons who have graduated from osteopathic schools may witness the most recent twist on that old bit of mythological flim-flam, for they too, in my judgment, will be asked shortly to accept a Trojan horse, delivered and installed 'without charge'. On your local

scene there appears to be developing a repetition of some of the 'build-up action' which marked that ancient and original bit of skulduggery, and which was, in recent history, most effective in California."

Fortunately, we learned a lesson from viewing the California mess at that time, and even the thought of amalgamation in Texas was anything but a pretty picture.

Another important lesson to be learned is that it took a mere handful of dedicated osteopathic die-hards, who worked long and valiantly to maintain their principles and the basic principles of osteopathic medicine, in the face of almost insurmountable odds. And, these D.O.s worked not only for themselves, but for the profession everywhere. This is a story that should never be forgotten but rather kept alive in the annals of osteopathic medicine.

Tobin concluded his speech before TOMA in 1972 by stating, "Osteopathy is a healing balm for the people. You are charged with its preservation. I urge you to carry in your consciousness the words of Horace Mann: 'Be ashamed to die until you have earned some victory for mankind'."

The osteopathic profession is indeed proud of the growth and successes of the osteopathic community in California.

## Newsbrief

### MMS Warns Medical Societies To Stay Involved In Legislative Process

The Pennsylvania Osteopathic Medical Association reports that the Massachusetts Medical Society (MMS) recently sent out a resolution to other states' medical societies asserting that Massachusetts is "an undesirable location in which to practice."

The MMS cites over-regulation of physicians as a main reason for the resolution, which cites problems with the administration of Massachusetts Blue Shield, requirements that doctors accept Medicare reimbursements as complete payment, judicial decisions they said had expanded medical liability, and proposals before the Legislature to make participation in Medicaid a requirement of licensing.

The resolution was sent to other medical societies to warn them to stay involved in the legislative process, and to explain why Massachusetts doctors were moving into other states.



# The Perils of Puryear (& Sidekick)

By Tom Hanstrom

July marked a significant change in the operational side of TOMA. It was my privilege to take over the position of chief executive officer. The reins of power had been passed from the very capable hands of Jerome Armbruster, D.O., to Bill Puryear, D.O., in April, at the TOMA annual session in Austin. One of Dr. Puryear's strong commitments was to visit each of the districts during his term as president of TOMA. I heartily concurred with this aggressive agenda and the TOMA central office staff began the necessary gymnastics to arrange 17 such visits prior to the Thanksgiving holidays.

As you can imagine, it became no small task to coordinate all of the necessary dates, times and meeting locations, as well as transportation, to accomplish this feat. I am pleased to report that as of Thanksgiving, Dr. Puryear and I have been able to visit 15 of the 17 TOMA districts. After repeated efforts by TOMA staff, we have been unable to establish visitation in two districts, but we hope that this may still occur before the annual meeting this year. If it doesn't, it will not be for lack of initiative on the part of Dr. Puryear or TOMA staff. We visited with over 275 physicians at the meetings.

In a period of approximately three months, September, October and November, I have traveled the length and breadth of Texas and have begun to appreciate the enormity of the geography of the state. My traveling companion during this time has been a dedicated servant of the profession, Bill Puryear, D.O. Before I provide some comments as to my impressions of the health and welfare of the osteopathic community, let me take a moment to praise Dr. Puryear. Bill is not the type of individual who will look for accolades or praise by his own initiative. At great personal sacrifice, in a very busy solo practice, Dr. Puryear dedicated himself to fulfilling the role of TOMA President as he deemed appropriate. The enthusiasm with which the districts greeted the president, (in some instances only the second time that a president has visited districts in their recollection), was gratifying to see. The precedent which Bill has set is one to be both emulated and respected. When you have occasion to talk or visit with Dr. Puryear, a word of appreciation for the dedication he has shown would be a welcome contribution.

Seventeen districts, ranging in size from 10 to over 300 physicians, offer a great deal of variety, both in terms of the number of individuals attending district meetings, and the scope of discussion in each district. We were in attendance at two meetings where there were only three physicians present. At a number of districts there were 30 or 40 people attending. I wish that it would be possible

for me to say that the larger the district, the better the attendance, but that is not true. There didn't seem to be any particular pattern as to where the attendance was good or bad. Congratulations certainly need to be expressed to the physicians in the Tyler, Corpus Christi and Groves areas because the attendance in those districts was exceptional. For those of you interested in bringing new life into district meetings, I would encourage you to contact the president of any of the above three districts and talk to them concerning what causes their districts to function at the level of attendance that they have achieved.

We looked forward to the good fellowship and conversation in each of the districts. I know I speak for Dr. Puryear as well when I extend a thank you to those of you who were responsible in any way for hosting us during this presidential pilgrimage.

We covered a variety of issues at each of the district meetings. My major disappointment was that the individuals not present needed to hear what Dr. Puryear and I had to say. The individuals that are supportive of TOMA and its activities were, for the most part, in attendance and, I hope, did benefit from the discussions. However, the members that were not present probably could have benefited even more. I fully recognize that there are committed physicians in each district who normally would have attended but had other commitments and could not be with us, and I don't direct the remainder of this paragraph to these individuals. I would like to reinforce the fact that the members who do not attend the district functions, regularly, are missing out on a valuable opportunity to communicate with other osteopathic physicians. Additionally when they don't attend (when the president and executive director visit), they deny themselves an opportunity for communication with the leadership of the organization. These may seem like small benefits, nonetheless, it is an opportunity to voice an opinion and communicate with peers, which is a right which should be exercised.

The intent of this article is not to provide detailed information as to the topics discussed at the district meetings but list the major concerns at the district meetings. I found the major concern is that of low cost malpractice coverage and tort reform. Additionally, other items of discussion were: the Medicare refund issue, the recent changes to the Texas Medical Practice Act, the sunset legislation (1993) related to the Medical Practice Act, the need for districts to be active with local legislators (and continue to contribute to Texas Osteopathic Political Action Committee), the start of the ►

Texas Osteopathic Medical Association Foundation (which hopes to provide additional student loans, and funding for the Physicians Assistance Program), and TOMA's new malpractice insurance company, Universal Liability.

It has been a hectic last few months, visiting the districts. It has been useful and I am getting to know people as well as their concerns. It will help in the days ahead to be able to know these concerns as the leadership attempts to address the issues that most concern the membership at large. I hope each future president will have the dedication of Dr. Puryear in visiting the districts.

I am pleased to report that the osteopathic profession continues to thrive in the State of Texas. TOMA membership continues to grow as new graduates settle down to practice throughout Texas. Lastly, looking ahead, TOMA continues to need your support in terms of time, talents and finances to carry out the mission that it's been given: to protect and preserve the rights of the osteopathic physician. ■

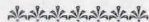
## Newsbrief

### Champus News

Service families and civilian health care providers had until December 31, 1987, to file claims with the Civilian Health and Medical Program of the Uniformed Services (CHAMPUS) for civilian care received or provided in 1986. However, if you received or provided care in 1987, you have until the end of 1988 to file your CHAMPUS claims for 1987.

Please note that the claim is filed with the processor who serves the state in which you received or provided care. For example, if you received care in Texas and now live in Colorado, the claim must be sent to the claims processor responsible for Texas claims. If you are uncertain as to where to send claims, contact the Health Benefits Advisor at the nearest military medical facility for more information.

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# Revised *Handbook of Texas* to Include Osteopathic Medicine

For the first time since the *Handbook of Texas* was issued in two volumes in 1952, with a supplement compiled in 1976, osteopathic medicine will finally find a place in the revised *Handbook*, in the works at the present time. Not just one, but three entries relevant to osteopathic medicine will be included: Osteopathic Medicine, Texas College of Osteopathic Medicine and Texas Osteopathic Medical Association.

The *Handbook* was first conceived by the late Walter Prescott Webb prior to World War II, while serving as director of the Texas State Historical Association (TSHA). His idea was to bring together a reference work, encyclopedic in scope and format, designed to become a starting place for inquiries as to important people, places and events in present day Texas, as well as in the past. Webb desired that the *Handbook* should be "the product of the combined literary genius and scholarly ability of the people of Texas. It will be written by the people of Texas and will be the most adequate representation of the state yet made in book form."

The two-volume *Handbook* was completed in 1952 and received quite a bit of favorable publicity. Walter Muir Whitehill of the Boston Athanaeum called it "the best systematic work of reference on any of the fifty United States". A Yale symposium on regional studies said the *Handbook* "embodies the highest standards of scholarship, editing, and publication, and represents local history at its professional best." Its vast usage is also attested by the fact that it can be found in virtually any public or private library.

No other state has attempted such a unique achievement and, to this day, the *Handbook* is still "the most important single work ever published on Texas." Because of significant people and events which have taken place during the passing of the years, it became necessary to add such issues to the original *Handbook*. Thus, in 1976, the TSHA produced a 1,145-page supplement whereby populations figures were updated, major achievements were added and so forth, resulting in Volume III.

Although the original edition remains invaluable, teachers, librarians, scholars and other users of the *Handbook* believe that a totally revised edition would be extremely beneficial to anyone interested in the state. Thus, fields of study omitted in the first edition, as well as revised and expanded entries on topics already contained in the *Handbook*, is the goal of the new edition.

All manuscripts received are programmed into the University of Texas' mainframe IBM computer, enabling

permanent storage, automatic indexing and alphabetizing and electronic typesetting. This will enable topics to remain as a permanent and accessible repository to all computer users.

The revised *Handbook of Texas* "is to be the primary reference guide to every aspect of the Texas experience. Literally all fields of the humanities as they relate to Texas will be represented in detail. Such a broad-ranging reference work, designed for the easy accessibility of any interested researcher, will be — as the 1952 and 1976 volumes have proved — the single most important resource in all of Texas studies.

"A recent TSHA poll of reference librarians from throughout the state has indicated that the present *Handbook of Texas* is overwhelmingly the most often consulted source on questions concerning Texas history. The goal of the present editorial board is not only to perpetuate that record but to expand the *Handbook's* usefulness into many other phases of the state's cultural heritage."

Keeping the aforementioned in mind, we can be sure that osteopathic medicine has most emphatically made a positive impact in the state. We are proud, indeed, that the profession will be included in this prestigious reference source where it so rightfully belongs. The consensus indicates that the osteopathic profession is undoubtedly here to stay.

## Newsbrief

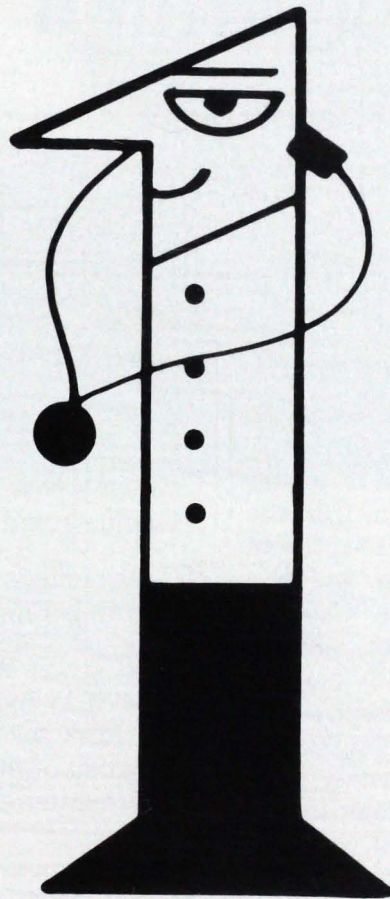
### California Scores A Victory

The AOA Bureau of Public Education on Health has reported that the California State Legislature recently passed landmark legislation which prohibits health care service plans, non-profit hospital service plans, disability insurance policies, and self-insured employer welfare benefit plans from discriminating against physicians based on whether they hold D.O. or M.D. degrees. Governor George Deukmejian signed the measure into law.

The motivating force in the law's enactment was efforts provided by the California osteopathic community.



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(James T. Hawa, D.O. —  
Program Chairman)

# Introducing TOMA's 1988 Program Chairmen



(James E. Froelich, III, D.O.  
— Asst. Program Chairman)

Performing the sometimes difficult, to say the least, task of compiling topics and speakers to fulfill the CME portion of this year's convention, is James T. Hawa, D.O., of Fort Worth. However, the load will be lightened during the seminar with the addition of an assistant program chairman, James E. Froelich, III, D.O., of Bonham.

Dr. Hawa is a 1977 TCOM graduate and served his internship at Mount Clemens General Hospital, Osteopathic, in Michigan. Upon completion of his internship, he served as Medical Consultant for the Michigan Department of Education, Vocational Rehabilitation Service, in Warren, Michigan, and as a full-time emergency room physician at Mt. Clemens General Hospital from July 1978 to November 1979. Dr. Hawa presently maintains an office for family practice and surgery in Benbrook; is a clinical professor of the department of general and family practice at TCOM; and serves as chairman of the department of family practice at FOWMC. Some of his numerous memberships include TOMA; AOA; TOMA District II, of which he is a past president; and the ACGPOMS, among others.

Dr. Froelich is also a TCOM graduate, having received his D.O. degree in 1981. He interned at Sun Coast Hospital in Florida and established a general family practice in Bonham, where he is still practicing. He is on the active staff of Fannin County Hospital, where he served as chief of staff in 1984, and again in 1986, and is a board member of Northeast Medical Center Advisory Board (formerly Fannin County Hospital). Dr. Froelich has been active in TOMA District XIII and served as president from 1984 through 1987; as vice president in 1982 and 1983; and has been a delegate from 1983-87. Other memberships include the AOA; AAO, ACGPOMS; Texas ACGP; and the TCOM Alumni Association.

Dr. Hawa has been working on the topic selections to be presented during the scientific seminar portion of the 1988 TOMA convention, with variety in mind. The lectures will cover a wide range of subjects designed to update all physicians in attendance and, therefore, should prove to be invaluable to all concerned.

Some of the topics to be covered are: "Office Diagnosis of TMJ Dysfunction"; "Current and New Treatment of Peptic Ulcer Disease"; "Dealing With the Hostile Patient"; "Current Topics in Immunology of Serus Otitis Media"; "Spontaneous Dysfunction; Recognition and Reversal"; "Update on EKG Interpretation"; "New Antiarrhythmics From the Layman's Point of View"; "Affective Anxiety Disorders"; "Post Viral Bronchial Hyperactivity Syndrome"; "Non-Q-Wave Infarct"; "What's New in Dermatology"; "Dopplers"; "Diabetes Update"; and "Impedance Audiometry".

Workshops will include "Risk Management" and "Semoto-Emotional Release".

As it now stands, Dr. Hawa is anticipating a possible total of 25 and one-half Category I-A CME credits from the AOA for attending the TOMA convention. Please note that of this total, three hours are obtained by visiting and registering with all exhibit booths.



(Elizabeth Owen, Stephen Hatfield, center, and Commie Hisey, right, all second year students at Texas College of Osteopathic Medicine, are recipients of \$2,000 National Osteopathic Scholarship Awards, given by the Auxiliary to the American Osteopathic Association. The three were among 29 who received the awards nationwide from 115 applications.)

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# TOMA Presents Acapulco '88

*There once was a doctor who lived on the run,  
The demands of his practice left no room for fun,  
For this fatal condition,  
Wrote the perfect prescription,  
Four days and three nights in the Mexican sun!*



If this prescription fits you, join TOMA May 1-4, 1988 on it's Acapulco '88 post-convention tour. What a way to relax after attending the CME sessions during the convention — basking on the beach or poolside under the glorious sun of Acapulco!

By now, all members should have received information on this tour, which is being set up by Main Street Travel and Tours in Fort Worth. Departure will be aboard Mexicana from Houston, and transfer by deluxe motor-coach from the Galvez Hotel (headquarter hotel for the convention) in Galveston to Intercontinental Airport in Houston is available.

The hotel chosen is the incomparable Acapulco Princess Hotel, which features eight superb restaurants with varied cuisine; four exotic bars, including two swim-ups; a pulsating late-night disco; a nightclub resplendent with dazzling entertainment; and 11 indoor and outdoor tennis courts, all lit for night play. Golfers will find two

18-hole golf courses, and water lovers will delight in the tropical saltwater lagoon with a water slide; four freshwater pools, two with waterfalls; a secluded 1,500 foot white sandy beach; and virtually every water sport available nearby. Additionally, a marvelous array of specialty shops will provide some fun shopping, with a complimentary shuttle bus to Pierre Marques, as well as the use of all Pierre Marques facilities.

Please note the conditions of the tour, whereby a deposit of \$100 per person is required at time of booking, to be made to Main Street Travel and Tours, with the balance of \$389 per person due 45 days before departure (March 15, 1988). Cancellation penalties will apply inside of 45 days and accommodation prices are based on double occupancy.

Come and join your colleagues for some rare relaxation during TOMA's Acapulco '88 post-convention tour.

## D.O. Becomes President-Elect of Federation of State Medical Boards

Anthony J. Cortese, D.O., of Portland, Oregon, has become the first osteopathic physician to assume the title of president-elect of the Federation of State Medical Boards of the United States. He will assume the presidency of the Federation in the spring of 1988.

Dr. Cortese, a practicing ob/gyn, has been a member of the Oregon Board of Medical Examiners since 1972, except for a one-year interval during 1981-82. He served as chairman of the Oregon Board in 1975-76 and is presently secretary-treasurer.

Other memberships include the Oregon Osteopathic Association, of which he is a past president; the American Osteopathic Association; member and vice

chairman of the American Osteopathic Board of Obstetrics and Gynecology; and past president and fellow of the American College of Osteopathic Obstetricians and Gynecologists.

Dr. Cortese had been a director-member of the Federation Board of Directors from 1980-83 and also from 1985-86; he was elected treasurer of the Foundation for two one-year terms from 1983-86; and treasurer of the Federation for two one-year terms from 1983-85. Within the Federation, he has served as a member of the bylaws, finance and audit, rules and search committees.

The Federation is composed of the majority of medical licensing boards of the 50 states.



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# Bonus for Early Submission of TOMA Dues

TOMA members will have an added incentive to pay membership dues early this year — their names will be included in a drawing for a complimentary trip for two to Las Vegas. The lucky winner will be treated to three days and two nights at a luxury hotel, as well as two roundtrip coach tickets from American Airlines, to depart from Dallas/Fort Worth.

To enter this drawing, pay your 1988-89 TOMA dues (in full) by February 29, 1988. Please note that in order to be eligible, your check **MUST** be received in the State Headquarters prior to February 29 or in that day's mail. For those interested in being included in the drawing, we would advise mailing as early as possible, as the USPS's system of delivery is, to say the least, often incomprehensible.

Las Vegas, the popular tourist resort and convention center dotted with luxury high-rise hotels and glittering gambling casinos, does not need much of an introduction to most individuals. The city's name, Spanish for "the meadows", is indicative of grassland seen along spring-fed desert streams, as viewed by the early Spanish explorers in the area. The Mormons were the first settlers in Las Vegas, maintaining a colony from 1855-57. In 1864, Fort Baker was erected by the U.S. Army in an effort to guard a route to California, and the emergence

of the railroad in 1905 firmly established the modern community.

It is interesting to note that the State Legislature of Nevada legalized gambling as well as permitted six-week divorces in 1931, in an effort to counteract the economic crisis wreaked by the Great Depression. Thus, in the following years, hotels and dude ranches were constructed for individuals from out-of-state seeking quick divorces, and famous entertainers appearing in the casinos began attracting hordes of tourists. Las Vegas began experiencing a tremendous growth in the 1940's, eventually becoming one of the country's most popular tourist and entertainment centers.

The drawing will be held on Fun Night during this year's annual convention, and the trip will be valid one year from April, 1988. The average annual temperature in Las Vegas is a comfortable 66 degrees so if "gambling fever" abates, the temperature will be conducive for outdoor activities. A word of advice — for those hooked on the "one-armed bandits", rest and/or change arms periodically, otherwise, pray for a D.O. in the house!

Remember, send in your 1988-89 membership dues prior to February 29 and you may be the lucky winner. ■

## TOMA Foundation to be Established

In what will prove to be a most beneficial move for TOMA members, the Board of Trustees has approved the formation of the Texas Osteopathic Medical Association Foundation.

The Foundation is to be organized exclusively for charitable, educational and scientific purposes and, more specifically to perform, in whole or in part, the charitable, educational and scientific purposes of TOMA. Some such purposes include: enhanced funding interest on loans to student doctors by the ability to accept income through the Foundation; help in funding CME programs for practicing physicians in Texas, which would include formation of professional CME programs in the scientific and clinical aspects of delivering health care to the general public; funding for the Physicians Assistance Program; and, among other purposes, to

provide financial assistance for legal initiatives for the preservation of osteopathic medical care, service and facilities for the benefit of the general public who choose osteopathic care.

Incidentally, TOMA members should be noticing a slight change in the dues billing statement, whereby \$12 of the total amount will go towards subscription to the *Texas DO*. This will provide the opportunity for the magazine to be sent by 2nd class postage, through the Foundation, which will save a substantial amount of money, to be utilized in other ways for the benefit of the membership at large.

The Foundation will be a great boon to all concerned, and more definite details will be provided in the near future. ■



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# Universal Liability™ Update:

## Medical Advisory Committee to Meet

TOMA has appointed eight D.O.s to the Medical Advisory Committee for the Universal Liability™ insurance program. These physicians will provide the Universal Liability program underwriters and claims adjusters with technical guidance and information regarding medical issues affecting the underwriting of and claims processing for the program. The Medical Advisory Committee's expertise will be particularly important in the evaluation of classification guidelines, which have an effect upon the rates charged to individual policyholders. The members will help define which procedures are appropriate to a specialty and their counsel will be sought in the consideration of the risk level for new medical procedures and techniques. Final underwriting and claims decisions will remain the responsibility of the policy-issuing carrier.

Medical Advisory Committee members include: Dr. John Chapman, Fort Worth, Obstetrics/Gynecology; Dr. John Deagle, Fort Worth, Emergency Medicine; Dr. Howard Graitzer, Fort Worth, Internal Medicine; Dr. Christopher Hull, Fort Worth, Orthopedic Surgery; Dr. Harold Johnson, Fort Worth, General Practice; Dr. Elmer Kelso, Arlington, Anesthesiology; Dr. Robert McFaul, Fort Worth, Surgery; and Dr. Melissa Martin, Grand Prairie, Radiology.

The physicians will be joined by Sally Chavez, Vice President from Insurance Equities Corporation,

representing the underwriting capacity for the malpractice insurance program. The Medical Advisory Committee will meet next on January 16, 1988 at the TOMA office.

As you know, the Texas Osteopathic Medical Association and the Illinois Association of Osteopathic Physicians and Surgeons both endorse the Universal Liability insurance program. Both state associations chose this program because the association believed that the combination of insurance and investment return offered by Universal Liability, plus the ability to own and thereby control the insuring company, represented a significant benefit to the associations' members.

With this in mind, other state associations soon will be offered the opportunity to sponsor this program for their members. A number of malpractice insurers are in serious financial trouble; some have been forced into bankruptcy while others have required policyholders to make additional "capital contributions" — over and above their regular premium payments. In order to provide a viable alternative, with reliable insurance coverage from a financially sound organization, Universal Liability will be expanded to other states in 1988. As part of that expansion, state associations have the chance to endorse the program, providing yet another important service to their members.

## Professional Liability Notes Available

Universal Liability policyowners now receive a monthly newsletter, *Professional Liability Notes*, from the insurance program manager, Insurance Equities Corporation. The newsletter provides policyowners with suggestions on how to avoid professional liability claims through good practice management. Eli Bernzweig, J.D., newsletter editor, brings to bear over 30 years of experience in the professional liability insurance arena. Among his numerous responsibilities, Mr. Bernzweig has served as Chief Legal Advisor to the U.S. Public Health Service Hospital System and as Executive Director of the Department of Health, Education, and Welfare Commission on Medical Malpractice.

Because of the importance of these issues to all doctors, TOMA members who are not currently covered by

Universal Liability may receive four issues of the newsletter, if they so desire. Simply write to Eli Bernzweig, at Insurance Equities Corporation, 101 University Avenue, Palo Alto, California 94301 and ask to be put on the mailing list for four issues.



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# And The Search Goes On . . .

The most difficult task of attempting to secure photos of all past TOMA presidents still continues. According to Ray Stokes, member of the Archives Committee conducting the search, finding such photos "is the next thing to impossible."

Although some photos have emerged, Stokes says he is still on the lookout for 29. Of these 29 past presidents, 27 are deceased, which makes it even more of a task. The two past presidents still in our midst, Everett W. Wilson, 1934-35, and Ted R. Krohn, 1937-38, have yet to comply with requests for pictures, says Stokes.

The following names, in addition to the two aforementioned, represent the pictures currently being sought: E. C. Link, (1902-03); W. B. Loving, (1903-04); A. P. Terrell, (1907-08); W. E. Noonan, (1908-09); J. T. Elder, (1910-11); George A. Cobb, (1911-12); Alfred J. Tarr, (1913-14); J. F. Bailey, (1916-17); E. Marvin Bailey, (1919-20); A. O. Scharff, (1920-21); Cyrus N. Ray, (1921-22); Genevieve Laughlin (1922-23); E. E. Larkin,

(1926-27); Henry M. Bowers, (1928-29); Mary E. Peck, (1929-30); Mary G. Bedwell, (1931-32); William Roddy, (1932-33); J. R. Alexander, (1935-36); Ben E. Hayman, (1936-37); Chester L. Farquharson, (1938-39); Howard R. Coats, (1939-40); Roy G. Russell, (1940-41); Lester J. Vick, (1941-42); Reginald Platt, (1943-44); Robert E. Morgan, (1946-47); G. W. Thomson, (1961-62); and L. G. Ballard, (1962-63).

"As befitting the dignity of the office held, as well as the contributions made by these individuals, a composite grouping will be mounted and arranged in the President's Room at the TOMA State Headquarters, as permanent recognition to all past presidents", says Stokes.

Stokes has been displaying a most admirable and dogged determination in his pursuit of these elusive photos. An appeal is extended to anyone who can help in this search by either offering a lead or a photo. Any information should be forwarded to the TOMA State Headquarters. Your support is appreciated. ■

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# TEXAS ACGP UPDATE

By Joseph Montgomery-Davis, D.O.  
Texas ACGP Editor

Recently I received profile data from NHIC that revealed underpayment (29 percent) for osteopathic manipulative therapy (OMT), from May 1987 to the present time, on my claims submitted to Medicaid.

As you are aware, the Texas Medicaid Program only reimburses for OMT when used to treat acute musculoskeletal conditions. There is a single code (Z9466) for OMT, regardless of the number of body regions treated, under Medicaid.

The Executive Director of TOMA, Tom Hanstrom, and myself have been in contact with NHIC in regards to these OMT underpayments. However, it is the responsibility of the individual osteopathic physician who has been underpaid for OMT to personally appeal this underpayment to NHIC. I would highly recommend that all osteopathic physicians, who participate in the Texas Medicaid Program and utilize OMT in their practice, examine their "Remittance and Status Reports" from NHIC prior to and after May 1987, and see if their reimbursement rate for OMT was decreased.

If the reimbursement rate for OMT was reduced, appeal each claim on the following basis — "Prior to May 1987, the OMT reimbursement rate was \$ \_\_\_\_\_ (insert), not \$ \_\_\_\_\_ (insert). Since my profile was updated in July 1987, I would expect to be paid more than \$ \_\_\_\_\_ (insert)." Example: OMT (Z9466) reimbursement rates: Prior to May 1987, \$11. After May 1987, \$8. After July 1987 update, greater than \$11.

Osteopathic physicians should insert their own reimbursement data in their appeal to NHIC for each under

payment of an OMT claim. You must appeal each claim or there will be no monetary adjustment of that claim by NHIC.

I encourage every osteopathic physician in Texas to write to NHIC and request their Medicaid updated profile data. Check the data carefully. In general, your reimbursement rates from Medicaid should increase, not decrease, when your profile is updated. If you have questions regarding this OMT matter, contact TOMA or myself.

On the lighter side, the Texas ACGP Board met at the Arlington Hilton Hotel on 12-6-87. The new president of the Zeta Chapter, Student/Doctor Sarah Smiley, was introduced to the Board by the out-going president, Student/Doctor David Garza. Some other issues discussed at this meeting were: staggered terms for Texas ACGP delegates to the Congress of the American College of General Practitioners in Osteopathic Medicine and Surgery; the decision of TOMA to become a named plaintiff in the "Medicare payment recoupment" lawsuit filed against HHS Secretary, Dr. Otis R. Bowen, by the TMA; OMT reimbursement problems; the liquidation of PMIC and how it will affect Texas D.O.s; an updated progress report on both TOMA's Universal Liability Insurance Program and PMICRRG.

In closing, the Texas ACGP applauds TOMA's decision to become a named plaintiff in the previously mentioned lawsuit. This should start the new year off with a bang!

## Dr. Dickey is New TCOM Faculty Member



Jerry L. Dickey, D.O., has been named chairman of the department of manipulative medicine at TCOM. He had been on the faculty of Kirksville College of Osteopathic Medicine since 1976, serving as chairman of the department of manipulative medicine for the last six years.

The Tulsa native was reared in Fort Worth, the son of an osteopathic physician and a registered nurse (C. E. and Vivian Dickey) who practiced on the city's East Side.

Dr. Dickey earned his B.S. degree in biology at Texas Wesleyan College in Fort Worth and his D.O. degree at Kirksville College of Osteopathic Medicine. His internship was served at Kirksville Osteopathic Hospital. He is on the editorial review board of the *Journal of the American Osteopathic Association* and gives presentations frequently at professional meetings.

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# PMIC Update

As this issue of the *Texas DO* went to press, the Attorney General of Texas was preparing to file a request that a court-appointed liquidator be named to begin the process of liquidating claims against Texas D.O.s who held professional liability insurance contracts with PMIC of Kansas City, prior to May 1, 1986.

This is the first step in triggering the involvement of the Texas State Guaranty Fund in the settling of claims against the old PMIC entity. The Circuit Court of Jackson County, Missouri, ordered PMIC into liquidation on October 9, 1987, after having earlier, on September 24, ordered the company to cease settling claims.

It is unclear as to why the delay in seeking action by the Attorney General, naming of the Texas liquidator and triggering the State Guaranty Funds, so that the Kansas City liquidator and the Texas liquidator can coordinate on the use of PMIC reserves and the Guaranty Fund in settling claims.

One action that is expected soon is that the liquidators will set a claims bar date beyond which no claims on the occurrence policies issued by PMIC prior to May 1, 1986, will be recognized or paid.

TOMA members should watch their mail closely for any communications regarding the liquidation of PMIC. The PMIC Deputy Liquidator's office in Kansas City, says that as of September 30, 1987, there were 150 claims from Texas, for which the company has reserved \$6,614,650. The Texas Guaranty Fund maximum limit is \$100,000 per claim.

At this point, as the magazine goes to press, it was impossible to determine where to start if a claim begins to develop, but at a minimum, a TOMA member should call the Deputy Liquidator, Bill O'Bryan at PMIC in Kansas City, at 816-444-4834. For questions pertaining to defense costs, contact Ms. Barbara Tacker, an attorney in the Liquidation Division of the Texas State Board of Insurance, at 512-339-1900. As more information is issued after appointment of the Texas liquidator, TOMA and the *Texas DO* will issue additional information and advisories.

PMIC has approximately \$18 million in liquid assets at this point, with a possible \$80 million in claims. Of the estimated \$80 million, \$37 million represents claims reported, and about \$39 million includes claims incurred but not reported, according to estimates by actuaries advising the Missouri Division of Insurance.

The Guaranty Fund in Texas is financed by carriers, licensed and admitted to do business in Texas, in the field of professional liability insurance.

Keep in mind that the PMIC liquidation is for occurrences prior to May 1, 1986, and it is not to be confused with the PMIC-RRG, which took over as of that date and received the premiums and contributions to surplus beginning May 1, 1986.

Plaintiffs who accept settlement through the Guaranty Fund must release the doctor from further liability; however, plaintiffs can choose to seek settlement of judgment against a doctor's estate. As it is understood here, they have to go one way or the other. As the events unfold regarding PMIC, TOMA and the *Texas DO* will do its best to interpret their meanings for the more than 675 members who were covered a year and a half ago by PMIC.

## Newsbrief

### Medicare Initiative Struck Down By Washington State Voters

Physicians in the State of Washington are breathing easier since the defeat of Initiative 92, voted on in a referendum on November 3. The initiative would have forced physicians who treat elderly individuals to accept Medicare assignment within 30 days, making it illegal to charge more than established charges as set by Medicare. Those failing to comply would have been in violation of the state's Consumer Protection Law and faced with fines of up to \$10,000.

The defeat of the initiative is attributed largely to a massive educational campaign by physicians aimed at the public, drawing attention to the fact that its passage might force physicians to limit their treatment of Medicare patients, tack on additional costs to their other patients to counter a balance, or in some instances, both. More than 400,000 letters were mailed by physician to their patients advising them of what they felt would be the negative outcome if the initiative was passed. The state chapter of the American Association of Retired Persons felt such passage might create higher costs in group health plans and, thus, were also against passing such an initiative.



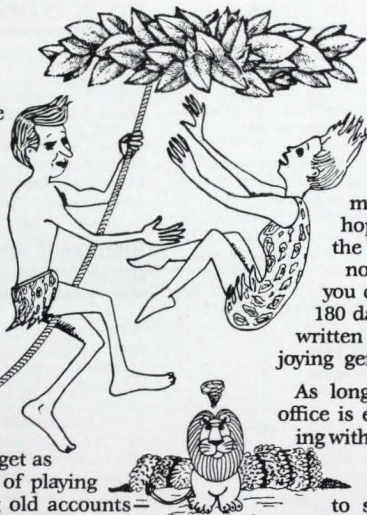
# Use A Hero Wisely

by Thomas Stenklyft, director of association relations

What do these images have in common?

The cavalry charging to the rescue of the wagon train! Tarzan on a vine, sweeping Jane from the lion's jaws! Back-to-back homers in the bottom of the ninth to win the game! And, a debt collector recovering a year-old account! There is excitement and a universal appeal about a last minute rescue. At I.C. System, we get as big a kick as anyone out of playing the hero's role. Collecting old accounts—out-of-state accounts—ones that nobody else could. But all too often, reality gets in the way of our fun.

In the collection business, the cavalry saves the wagon train only twice in ten chances. Eight times out of ten, Tarzan's vine snaps and he falls on his keester. And we have all heard the story of Casey at the bat. The American Collectors Association reports that collection agencies nationally recover about 20 percent of what they go after. Actual percentages vary from one creditor to another, and you can affect how well your agency does for you. The most important factor for you to know is that, on an average, the older the account, the lower the collection possibilities.



Unattended debts die young! At 90 days, your debtor thinks maybe you don't need the money. At 120 days, he hopes you forgot about the bill. At 150 days, he can no longer remember what you did to earn your fee. At 180 days, he is sure you have written off the bill and are enjoying generous tax advantages.

As long as someone in your office is effectively communicating with the debtor, the account is alive. This could go anywhere from 60 days to six months. When the debtor stops returning phone calls or misses agreed-upon payment dates, communications has bogged down. Death is near. Turn in those accounts for collection! If you don't have a trained collector on staff and rely on a billing service, send no more than three bills prior to turning in the account for collection. There comes a point when debtors no longer open those familiar envelopes; it won't matter what reminder messages are printed inside.

I.C. System can be as effective collectors as the age and nature of your accounts allow us to be. So call us in early. Real life heroes like us prefer to save you systematically often, rather than dramatically seldom.

## I.C. System

## TEXAS TICKER TAPE

## MEDICAID RECIPIENTS CAN OBTAIN BRAND-NAME DRUGS

Even though the Texas Department of Human Services capped reimbursement, as of December 1, 1985, on a multitude of brand-name prescription drugs which have so-called equivalent generics, physicians may stipulate brand-name drugs for their Medicaid patients.

In order to assure that brand-name drugs are filled as such, the prescription should be signed on the "Dispense as Written" line, along with the physician's handwritten words, "Brand Necessary", on the face of the prescription. By so doing, the pharmacist will be reimbursed for the full cost of the brand-name. However, pharmacists who state they may not fill Medicaid prescriptions for brand-names should be reported to the Texas State Board of Pharmacy, Austin, at 512-832-0661.

## NEW IUD TO BE MARKETED

A more effective copper IUD will soon be on the market in the United States this year, offering women a wider choice in contraceptive selection. Known as the Copper T 380A, the IUD was developed by researchers at the Population Council, a non-profit research organization in New York City. Approved by the FDA in 1984, the device has been used in other countries, including Canada, since 1982, however it has not been sold in this country. The new device will be marketed, for the first time in the United States, by GynoMed Pharmaceutical of Somerville, New Jersey. This comes approximately two years after a wave of lawsuits and adverse publicity drove similar birth control devices off the market.

## UPDATED TEXAS CONTROLLED SUBSTANCES SCHEDULES AVAILABLE

The Texas Department of Health has republished the Texas Controlled Substances Schedules. The Schedules reflect changes which have occurred since December 1986, the date of the last republication, and have been filed accordingly with the Secretary of State.

Those wishing a copy of this newest republication should contact the TOMA State Headquarters.

## HOSPITAL ADMISSIONS MAY BE EXAMINED MORE CAREFULLY

A new HHS report, conducted by the Office of the Inspector General, has revealed that even though early hospital discharges are encouraged by Medicare's prospective payment system, only around one percent of patients have been dismissed too early. The study also alleges that approximately 10 percent of hospital admissions are medically unnecessary and, furthermore, errors were found in almost nine percent of treatment plans, which is generating concern regarding quality of care.

## INSURANCE BOARD CRACKING DOWN ON MEDICARE POLICY GIMMICKS

The Texas State Board of Insurance has been receiving reports regarding insurance agents masquerading as Medicare representatives, who attempt to sell Texas citizens duplicate supplemental policies. Agents who portray themselves as working for Medicare or other federal government programs violate federal law by committing a felony. Violations for such infractions are harsh, with penalties ranging up to five years in prison, a fine of \$25,000, and possible revocation of an agent's Texas license. Insurers who send out mailings on supplemental insurance under the guise of the federal government violate the Insurance Board's advertising rules. Individuals are urged to send such mailings to the Insurance Board for investigational purposes, and additionally, to report agents, claiming to be affiliated with the government, who try to sell Medicare supplemental policies. Such reports should be forwarded to the Complaints Division, State Board of Insurance, 1110 San Jacinto, Austin, 78701-1998.

The State Board of Insurance encourages Texans to look before they leap when contemplating buying more than one Medicare Supplement policy, as one affordable, comprehensive one can save money, whereas paying for several can run into unforeseen expenses such as company overhead. The Board has a toll-free hotline, 800-252-3439, which is available for individuals with insurance questions or Medicare Supplemental policy complaints. Please note that in order to start a formal investigation, complaints must be forwarded in writing to the Complaints Division of the State Board of Insurance.

## TDH AIDS PHONE LINES ARE NOW IN EFFECT

The AIDS Public Health Issues and Resource telephone line became operational December 1 at the Texas Department of Health (TDH) in Austin. The toll-free number for licensed and certified health professionals to call is 1-800-248-1091. Hours of operation are from 9:30 - 11:30 a.m. and from 1:30 - 3:30 p.m., Monday through Friday.

Health professionals may call the number for information about AIDS resources, referrals, and infection control protocols, HIV testing, risk reduction, and current statistics.

Information also will be available about TDH's current policies on such topics as reporting and testing.

Other AIDS telephone numbers include: 512-458-7504, to report cases or to inquire about the number of AIDS cases from TDH's AIDS Surveillance Program; and 512-458-7260, to request a catalog and information for ordering films and videotapes from the TDH film library.

Health professionals are urged to take advantage of these resources offered by the TDH.

## AMENDMENTS PROPOSED TO FEDERAL DATA BANK

The AOA Council on Federal Health Programs has reported that malpractice data from the Physician Adverse Credentials Data Bank (PAC-DB) would not be accessible to attorneys if amendments recently approved by Congress are signed into law. The amendments modify provisions of the Health Care Quality Improvement Act of 1986 (P.L. 99-660), which created a central federal data bank containing adverse actions on licensing, hospital staff privileges and malpractice payments. Existing law would grant data access to plaintiffs' attorneys in cases concerning malpractice. This would allow lawyers to inspect individual physician files in the data bank. Concerns raised by the medical community regarding confidentiality spurred Congress to amend the law.

The Health Care Quality Improvement Act, as amended, would require a hospital or other health care entity (HMO) to obtain data on physicians as part of the credentialing process. State licensing boards and an individual with a record in the bank would also have access. ■

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Cheryl Cooper, Coordinator  
Continuing Medical Education  
Texas College of  
Osteopathic Medicine  
817/735-2539

#### Accreditation:

7 Hours Category 1-A, AOA



# TOMA Joins in Lawsuit Against HHS and BC/BS

The TOMA Board of Trustees, at its December 4 meeting, made the decision to become a named plaintiff in the Medicare "overpayment" recoupment lawsuit, which has been filed against the HHS and Blue Cross Blue Shield of Texas, Inc. With this move, TOMA joins the TMA, the Texas Ophthalmological Association, other such associations and societies, as well as numerous individual physicians and patients.

On October 16, 1987, the TMA and others first filed a lawsuit against the U.S. Department of Health and Human Services and BC/BS of Texas Inc., over the Medicare recoupment effort. The suit opposed the government's claim that overpayments were made to Texas physicians and patients between July 7, 1985 and April 1, 1986 due to a coding error.

As stated in the December issue of the *Texas DO*, on October 29, the TMA's motion for a preliminary injunction halting the recoupment effort was granted by Federal District Court Judge James Nowlin. Therefore, amounts demanded by HCFA are not required to be paid until

further notice. A court hearing will attempt to obtain refunds for those who have already paid the alleged overpayments and a full trial is anticipated to be held this spring. Members will be kept informed as events progress.

TOMA is seeking all physicians' help to strengthen our stance in regards to this lawsuit. In order to present the strongest and most factual case possible, in opposition to the recoupment effort, your help is needed in identifying:

- \* Patients who have not paid back the amounts sought by Medicare;
- \* Physicians who have not received any recoupment collection letters (did not accept assignment) but have patients who received such letters; and
- \* Physicians who have received significant "underpayments" resulting from the 1985 coding conversion.

Please call Tom Hanstrom, TOMA Executive Director, if you have information on any of the above. It should be noted that it may be necessary to provide this information in writing, in some instances.

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Edmund F. Torma, D.O.

1400 West Southwest Loop 323

Mr. Olie Clem, Administrator  
Tyler, Texas 75701

Phone: 214-561-3771

# Measles Alert — Update

As reported in *Texas Preventable Disease News*, the Bureau of Disease Control and Epidemiology of TDH issues the following alert:

For the week ending October 16, 32 confirmed measles cases have been reported in association with the outbreak in Coryell and Bell counties. These cases have occurred primarily in Copperas Cove, Killeen, Harker Heights, and Fort Hood. To date, the principle group affected has been children less than two years of age. Sixty-three percent of the cases have occurred in children involved in childcare facilities and church nurseries. Public and private school employees have been asked to be alert for suspect measles cases and monitor absentee levels. Rapid reporting is integral to outbreak cessation.

Unimmunized children greater than 12 months of age should receive measles, mumps, and rubella (MMR) vaccine. Infants six through 11 months of age who are exposed to a measles case should receive single-antigen measles vaccine. (These infants should then receive MMR at the recommended age of 15 months.)

Please investigate all reported rash/fever illnesses immediately. If the rash/fever illness resembles measles, outbreak control measures should be implemented immediately. "Available data suggest that live measles virus vaccine, if given within 72 hours of measles exposure, may provide protection" (*Report of the Committee on Infectious Diseases (Red Book)*, 1986, page 235).

## TAX PLANNING and MONEY MANAGEMENT

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DATE: TUESDAY, JANUARY 19, 1988  
THURSDAY, JANUARY 21, 1988  
TIME: 7:00 - 9:30 p.m.  
PLACE: TOMA State Headquarters Building  
226 Bailey Avenue, Fort Worth, Texas

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# Opportunities Unlimited

## PHYSICIANS WANTED

**GENERAL PRACTICE, LUFKIN** — Opportunity available for aggressive physician. Well equipped modern clinic. Flexible hours. Salary negotiable. Contact: Jean Roberts at 409/634-8343. (13)

**PHYSICIAN PRACTICE** — Opportunities are currently available in prospering northeast Tarrant County. The Mid-Cities area of the Dallas/Fort Worth Metroplex is currently experiencing exceptional population growth. Opportunities now exist for aggressive family practitioners and other specialists in areas near Northeast Community Hospital. Northeast Community is a full service, state-of-the-art, acute care hospital. With nine-bed emergency center, twelve-bed ICU/CCU, five surgical suites, CT scanning, MRI, and nuclear medicine. Northeast serves the Mid-Cities with comprehensive total health care. Recruitment assistance is available. Send C.V. and letter of introduction to Mr. Rob Martin, Administrator, and C.E.O., Northeast Community Hospital, 1301 Airport Freeway, Bedford, 76021. (16)

**ASSOCIATE TO JOIN** — Established GP/FP in Irving/Mid-Cities area. Initial income support. Ownership potential. Confidential reply to Box "403", 226 Bailey, Fort Worth, 76107. (27)

**IRAAN** — The community of Iraan is seeking a physician to join with present physician in family practice. Located 85 miles south of Midland-Odessa area, Iraan serves a community of 2,000 residents plus, and an area population of 5,000. Lucrative financial package offered. If interested, call or write Paul Harper, Administrator, General Hospital, P.O. Box 665, Iraan, 79744; 915/639-2871. (03)

**WANTED** — General Internist to join a group of four family doctors and general surgeon — Very busy established practice. Inquiries should contact Dr. Welden Glidden at 817/926-2641 or 1305 E. Seminary Drive, Fort Worth, 76115. (44)

**PRACTICE AND EQUIPMENT FOR SALE** — Office building is also for sale or lease. Contact: Joseph L. Love, D.O., 4400 Red River Street, Austin, 78751 or call 512/452-7641. (30)

**FOR SALE** — Family practice in small central Texas town. Gross 100M. Buy only the real estate at appraised market value, financing available. Contact: TOMA, Box "406", 226 Bailey Avenue, Fort Worth, 76107. (17)

**POSITION AVAILABLE** — Excellent opportunity and growth potential for general practice physician. Looking for enthusiastic, self motivated and aggressive person. Immediate opening in northern Oklahoma. For information contact: Griffith & Associates, William A. Griffith, 6846 South Canton, Suite 410, Tulsa, Oklahoma 74136 or call 918/493-6139. (46)

**GENERAL AND FAMILY PRACTITIONER NEEDED** — for well established and fast growing Minor Emergency Center located south of Fort Worth. Excellent opportunities available. Please send resume or contact B. Craig Nelson, D.O. or William A. Thomas, Jr., D.O., Burleson Minor Emergency Center, 344 S.W. Wilshire Blvd., Burleson, 76028 or call 817/447-1208. (49)

**ORTHOPEDIC SURGEON** — Doctors Memorial Hospital, Tyler, Texas is searching for an orthopedic surgeon. The hospital has recently purchased an additional \$175,000 worth of orthopedic equipment including a new C-arm, orthoscope, fracture table and so forth. Income potential unlimited, free office available. Contact Olie Clem, 1400 West S.W. Loop 323, Tyler, 75701. Phone: 214/561-3771. (50)

**FOR SALE** — Family practice in West Texas, very large clinic. Room for two family practice doctors, high gross, excellent net, six treatment rooms, well equipped osteopathic practice. Other practices available in Bryan and Dallas. Contact: Gary Clenton, PMA, 214/327-7765. Practice appraisal/sales, Health Care Professional Consultant. (43)

**PHYSICIANS WANTED: EXCELLENT TEXAS OPPORTUNITIES** — Cardiology, ENT, Family Practice General Surgery, Internal Medicine OB/GYN (4), Oncology, Orthopedic Surgery (3), Pediatrics (2), Vascular Surgery and Industrial Medicine. Excellent quality of life, first year guarantee, etc. Reply with C.V. or to Armando L. Frezza, Medical Support Services, 8806 Balcones Club Drive, Austin, 78750; 512/331-4164. (08)

**KNOX** — Family practice opportunity available now! Meets National Health Service Corps requirements. Physicians Student Loan Program payment Requirement. Solo practice in Texas County of around 6,000 population. Town approximately 1,800 population, good school, golf course, churches. Rent free, furnished clinic a monthly guarantee for first year. Rural tax supported hospital of 28-beds with one other physician on medical staff relieve call. First year expected earnings gross over \$100,000. Call collect 817/658-3535 or send C.V. to D.L. Stover, Hospital District Administrator, P.O. Box 608, Knox City, 79529. (04)

**WANTED** — General/Family practice physician to join two, too busy, practitioners in progressive vigorous rural community. Good schools and excellent recreational opportunities in smog-free low-crime environment. No OB or major surgery. 20-bed hospital and 82-bed nursing home within walking distance. Reasonable schedule with ample vacation time and CME opportunity. 100 miles to city of 80,000 with State University. Compensation negotiable. Phone 915/869-6171. (06)



## POSITIONS DESIRED

**PHYSICIAN SEEKING** — General practice opportunity in Dallas/Fort Worth and surrounding area or Hill Country areas. Have passed FLEX and will complete General Practice residency in August, 1988. Please send inquiries to: TOMA, Box "405", 226 Bailey, Fort Worth, 76107. (01)

**PHYSICIAN SEEKING GENERAL PRACTICE OPPORTUNITY** — in the East Texas or Hill Country areas. Completes General Practice residency in August, 1988. Please send inquiries to: TOMA Box "408", 226 Bailey, Fort Worth, 76107. (02)

**PHYSICIAN ASSISTANT** (Board Certified) — seeks part-time position; has had five years experience as first assistant to general surgeon. Interested in general surgery, internal medicine and family practice. Contact: John G. Henevad, 1111 N. O'Connor Road, -121, Irving, 75061. Phone: 214/254-6523. (07)

**PHYSICIAN SEEKING** — part-time locum tenens work in Dallas/Fort Worth or Denton area in General/Family practice and/or OMT (no OB/GYN). Available for Mondays, Fridays and Saturdays. Contact Jan T. Hendryx, D.O., at 817/335-8140. (48)

## OFFICE SPACE AVAILABLE

**MEDICAL OFFICE FOR LEASE** — 2,500 sq. ft. office space suitable for two doctors; six exam rooms, dual lab, x-ray and two offices. Good location in Fort Worth. Phone 817/284-4195. (25)

**NEW OFFICE FOR MEDICAL PRACTICE** — 1300 sq. ft. finished and ready for occupancy. Reception area with business office, two examination rooms, private office, x-ray, bathroom and small lab. space. Office can be expanded to 2,660 sq. ft. Located in Grand Prairie, five minutes from D/FW Medical Center. Please call George Miller, D.O., 214/969-7477 for more information or to make an appointment to see the property. (05)

**PROFESSIONAL OFFICE SUITE AVAILABLE** — in prospering northeast Tarrant County, part of Dallas/Fort Worth metroplex. Professional building adjacent to Northeast Community Hospital, 1401 Airport Freeway, Bedford, 76021. Contact: Mr. Phil Young, Northeast Community Hospital, 817/283-6700. (20)

**TWO MEDICAL OFFICE SPACES FOR LEASE** — in Euless, heart of booming Metroplex in established location near Harris HEB and Northeast Community Hospitals. 1500+ and 1600+ square feet — \$9.00 per foot including utilities. X-ray equipment available on premises; pharmacy on premises. Call Bill Wyatt, 817/481-5158 or 817/282-6717; or write 701 W. Pipeline Road, Hurst, 76053. (31)

## MISCELLANEOUS

**50 PERCENT OFF PREVIOUSLY OWNED** — medical, laboratory, x-ray, ultrasound equipment. We buy, sell, broker and repair. APPRAISALS BY CERTIFIED SURGICAL CONSULTANTS. MEDICAL EQUIPMENT RE-SALE, INC., 24026 Haggerty Road, Farmington Hills, Michigan 48018. 800/247-5826 or 313/477-6880. (19)

**FOR SALE** — Ames seralizer in excellent condition. Includes full blood chemistry, pheophylline and potassium. Asking \$2,000.00. Contact: William R. Boone, D.O., 214/391-1168. (11)

**FOR SALE** — Seralizer Blood Analyzer with all modules; used 18 months; new condition; \$1200. Contact: Sylvia Herr, D.O., 109-B North Main, Cleburne, 76031; 817/641-2061. (26)

**RECONDITIONED EQUIPMENT FOR SALE** — Examination tables, electrocardiographs, sterilizers, centrifuges, whirlpools, medical laboratory equipment, view boxes, weight scales, IV stands and much more. 40-70 percent savings. All guaranteed. Mediquip-Scientific, Dallas, 214/630-1660. (29)

**SKI NORTHERN NEW MEXICO** — including Taos, Angel Fire and Red River. Condo in Red River sleeps eight comfortably. Call Stan or Priscilla Briney 817/441-9373. (47)

**FOR SALE** — Bausch-Lomb monocular microscope \$100.00. Pelton electric sterilizer, centrifuge, National ophthalmoscope, miscellaneous instruments, etc. Contact: Dr. Kenneth Ross, Tyler, 214/566-2364. (42)

**FOR PHYSICIANS: UNSECURED SIGNATURE LOANS** — \$5,000 — \$60,000. No points or fees. Best rates-level payments. Up to six years to repay. Call toll free 800/331-4952, MediVersal, Dept. 114. (22)

**FOR SALE** — McMannus table and current patient list from OMT practice of recently deceased D.O. Contact: James T. Russell, 713/526-4491. (35)

## "Left-Over Turkey Syndrome" Is A Serious Affair

For those of you still gobbling away on the Christmas turkey, or perhaps even the foul fowl which appeared over the Thanksgiving holidays, odds are your palate is incredibly bored and rebellious. From a realistic viewpoint, once all of the 101 ways to serve turkey in a standard recipe book have been exhausted, just one more bite, however minute, of (let's call it what it really is) "disguised" turkey could possibly send your taste buds over the edge. We must add that fortitude is the ability to finish the "whole thing".

We extend our sympathies to anyone suffering from this miserable, annual condition, and in order to stress the seriousness and scope of this syndrome, we offer the following quote:

*"Eternity is two people and a turkey."*

— James Dent

Anyone for pizza this year?

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For Information Call:

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**Texas Osteopathic Medical Association**