



1991 "Baby of the Year"
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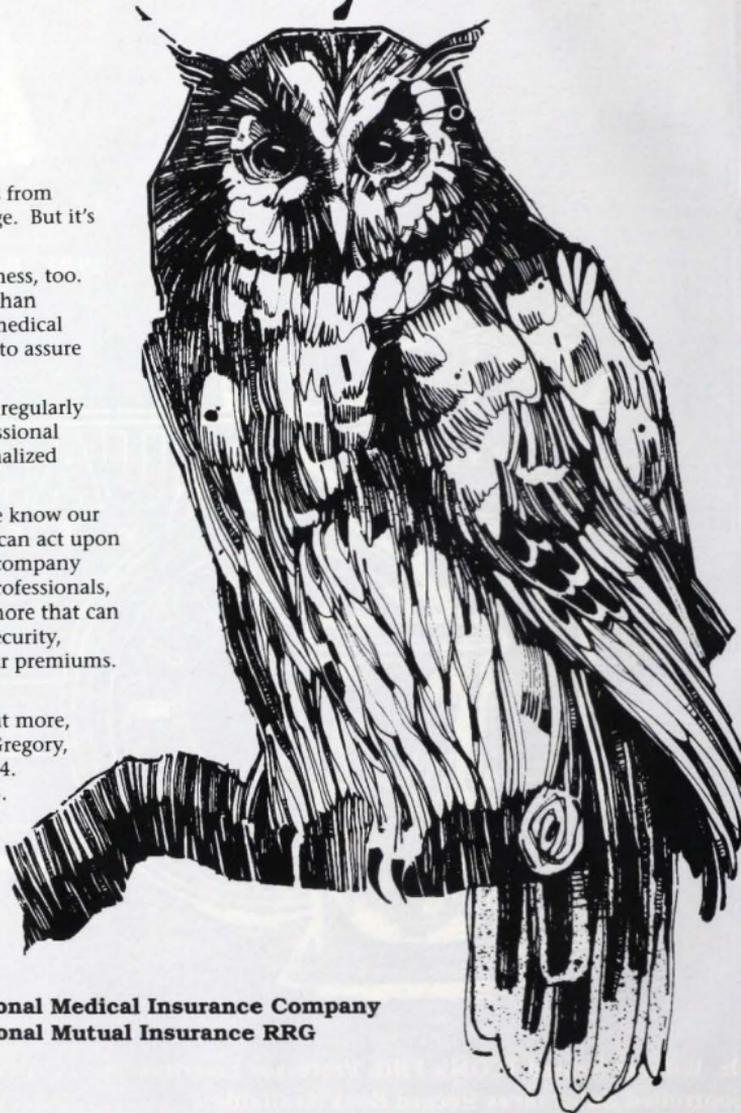
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State Board of Pharmacy	512/832-0661
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	Houston Metro 654-1701
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Texas Industrial Accident Board	
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Drug Enforcement Administration:	
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For DEA number (form 224)	214/767-7250
CANCER INFORMATION:	
Cancer Information Service	713/792-3245
	in Texas 800/392-2040

Texas DO

Texas Osteopathic
Medical Association

January 1991

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ON THE COVER

\$100 off 1991 convention registration fee for the first TOMA physician member to identify the Texas Osteopathic physician pictured on the front cover. HINT: This person is a KCOM graduate, a fellow of the American Academy of Osteopathy and a leader in the osteopathic profession. Send responses to: Editor, *Texas DO*, 226 Bailey Avenue, Fort Worth, Texas 76107. No telephone calls will be accepted.

JANUARY

17

District II Meeting
"Presidential Visit"

Fort Worth

Contact: Monte Troutman, D.O.
817/735-2660

FEBRUARY

11-13

"Urgent Care Medicine"

KCOM

The Mirage

Las Vegas, Nevada

Contact: Rita Gray Harlow,
Coordinator

KCOM, Dept. of CME
1/800/626-2232 ext. 2232

15

District III Meeting
"Presidential Visit"

Tyler

Contact: Rodney Wiseman, D.O.
214/839-4396

19

District I Meeting
"Presidential Visit"

Amarillo

Contact: George Cole, D.O.
806/358-3131

23

"Facilitated Positional Release in
Osteopathic Medicine"

Iowa Academy of Osteopathy and
UOMHS, Des Moines

Olsen Medical Education Center
Des Moines, Iowa

Contact: Genia Alcorn, Coordinator
UOMHS, Dept. of CME
515/271-1480

MARCH

3-7, 1991

Update in Clinical Medicine for
Primary Care Physicians:

A Ski-CME Seminar

Harrah's Lake Tahoe Resort Casino

15 CME Hours Category I-A, AOA

Contact: Karen Trimble
Texas College of
Osteopathic Medicine
Office of Continuing
Medical Education
817/735-2581

14-17

88th Annual Convention
Florida Osteopathic Medical
Association

Doral Ocean Beach Resort

Miami Beach, Florida

Contact: Gail Cooksey

Associate Executive Director
2007 Apalachee Parkway
Tallahassee, Florida 32301
904/878-7364

APRIL

13-16

1991 Sports Medicine Clinical
Conference

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of Sports Medicine
Boston Park Plaza
Boston, MA

Contact: Jerry Collins, AOASM
7611 Elmwood Ave.
Suite 202
Middleton, WI 53562
608/831-4400

MAY

2-5, 1991

92nd Annual Convention & Scientific
Seminar

St. Anthony Hotel/Municipal
Auditorium

San Antonio

Contact: TOMA Headquarters
1/800/444-8662



REMEMBER THE ALAMO !!!

**Theme for
92nd Annual Convention & Scientific Seminar
of the
Texas Osteopathic Medical Association**

May 2-5, 1991

**St. Anthony Hotel/
Municipal Auditorium**

**Timothy Werner, D.O.
Program Chairman**

1991 TOMA Convention Speakers Continued



Paul S. Saenz, D.O., of San Antonio, will present the "Industrial Athlete" during the Sports and Industrial Seminar to be held on Saturday, May 4, during the TOMA convention.

Included in Dr. Saenz' presentation will be an overview of the concept of the industrial athlete as it applies to the current labor force; a discussion of injury epidemiology and some focus on low back injuries; further discussion on the latest diagnostic, therapeutic and rehabilitative techniques; and discussion on the role of preventive programs such as back school, occupational rehabilitation and return to work issues.

A graduate of Texas College of Osteopathic Medicine, Dr. Saenz interned at Phoenix General Hospital and took a sports medicine fellowship at The Sports Medicine Clinic, Seattle Washington. He currently practices sports medicine, occupational medicine and family medicine in San Antonio.

Dr. Saenz is a Diplomate of the National Board of Osteopathic Medical Examiners; received a Certificate of Competence in Sports Medicine from the American Osteopathic Academy of Sports Medicine; has been awarded United States of America/American Boxing Federation Ringside Physician Certification; and is on the adjunct faculty of the Texas Health Science Center at San Antonio.

Sports medicine experience includes team physician for Central Catholic High School and Providence High School, both in San Antonio; club physician for Zarzamora Boxing Club in San Antonio; and medical consultant for Colonnade Athletic Club and the Downtown YMCA, both in San Antonio.

Professional associations include TOMA; TOMA District XVII; American Osteopathic Academy of Sports Medicine; and the American Osteopathic Association. Dr. Saenz holds medical staff privileges at St. Luke's Lutheran Hospital, St. Rose Catholic Hospital and Humana Hospital of San Antonio.



James W. Simmons, M.D., of San Antonio, will speak on "Musculoskeletal Rehabilitation of the Low Back" during the TOMA convention this year.

According to Dr. Simmons, whose specialty is orthopedics, "Musculoskeletal rehabilitation should include a variety of disciplines; independently and collectively clinical therapies provide a comprehensive approach to rehabilitation. Specific treatment components should be directed towards increasing endurance,

strength, flexibility and instructing the patient in self care routines and body mechanics."

Additionally, says Dr. Simmons, "The programs provide physician, insurance carrier and attorney with functional information to help predict and define the course and scope of the patient's treatment. The programs must be medically recognized and established comprehensive rehabilitation programs which include physical therapy, electromyography, back school, functional capacity assessment, work hardening, vocational assessment, stress and pain management, and patient education. These programs recondition the patient's musculoskeletal system and prepares the patient for return to the work force."

Dr. Simmons received his M.D. degree from the University of Mississippi Medical School. He took a residency in pre-specialty surgery at Martin Army Hospital, Fort Benning, Georgia, and an orthopaedic surgery residency at Brooke General Hospital, Fort Sam Houston, Texas. Additional postgraduate education included study of the biomechanics of human motion at Massachusetts Institute of Technology, Cambridge Massachusetts.

Dr. Simmons currently practices at Alamo Bone & Joint Association in San Antonio. He is board certified by the American Board of Orthopaedic Surgeons and is a medical consultant for the Department of Hearing and Appeals, Social Security Administration. He is also chief of spine surgical rotation in the Department of Orthopaedic Surgery at Brooke Army Medical Center.

Numerous professional memberships include the American Academy of Orthopaedic Surgeons, (Fellow); American College of International Physicians, American College of Sports Medicine and the American College of Surgeons, (Fellow of all three); American Medical Association; American Society of Law and Medicine; American Spinal Injury Association; Bexar County Medical Society; American Academy of Pain Management, (Diplomate); American Association of Tissue Banks; American Back Society (Council of Advisors); and the Bioelectrical Repair and Growth Society.

Thomas A. Naegele, D.O., of Albuquerque, New Mexico, will present "Computer Utilization by Office Physicians" during the computer medicine seminar at this year's annual convention.

Dr. Naegele is author of the Hub computer medical system, a prototype physician oriented computer system with a physician-machine interface time of 30-60 seconds per physician-patient encounter. According to Dr. Naegele, "Physicians already have their own system; why should we have to change just to entertain a computer. Physicians will use computers when training time is less than 60 seconds per physician-patient encounter." ▶

He has a B.S. and M.S. in plant biology from Michigan Technological University. A graduate of Michigan State University-College of Osteopathic Medicine, Dr. Naegele interned at Saginaw Osteopathic Hospital. He practices at an urgent care facility in Albuquerque and also is a computer programmer.

Memberships include the American Osteopathic Association; the National ACGP; and the New Mexico Osteopathic Medical Association. He is a certified instructor BLS, ACLS; and is ACLS and ATLS certified.



Bob Goldman, D.O., of Chicago, Illinois, will speak on "Hi-Tech Fitness" during the sports and industrial medicine seminar at the TOMA convention. During his presentation, he will cover such issues as food; physics of joint motion; muscle contractions; exercise equipment; osteoarthritis; rheumatoid arthritis; low back pain; and rehabilitative back system devices, among others.

Dr. Goldman is director of High Tech Fitness and Rehabilitation Laboratory at Chicago College of Osteopathic Medicine (CCOM). He received his D.O. degree from CCOM where he was awarded a three year sportsmedicine research fellowship. Prior to attending

osteopathic medical school, he completed three years of independent study/research exclusively in androgenic anabolic steroids.

He is recognized as one of the world's authorities on androgenic anabolic steroids and high-tech fitness and is author of the widely acclaimed book, *Death in the Locker Room / Steroids, Cocaine and Sports*. He has appeared on over 300 television and radio talk shows and publishes extensively on sports training issues.

As chairman of the International Federation of Body Builders (IFBB) Doping & Medical Committees of the IFBB Medical and Research Committee, the sixth largest sports federation in the world, Dr. Goldman is in charge of sport-drug control for the athletes in 134 countries around the globe. He also serves as chairman of the Amateur Athletic Union Sportsmedicine Committee, which governs 21 sports of the Junior Olympics and Masters Olympics.

Dr. Goldman is founder and chairman of the board of *Elite Sportsmedicine Publications Inc.*, and is chairman of Athletes Against Drug Abuse, an organization made up of sports scientists and world champion athletes who oppose drug abuse in sports. His plans for the future are to further explore sports-science clinical research and continue as a medical educator, author and lecturer. ■

New TCOM Dean Begins Work This Month



Benjamin L. Cohen, D.O., former dean of Osteopathic Medicine of the University of Medicine and Dentistry of New Jersey (UMDNJ), has been named TCOM's vice president for academic affairs and dean after an eight-month national search.

As founding dean of UMDNJ's School of Osteopathic Medicine, Dr. Cohen led the school

through an unprecedented period of growth from 1977 to 1985. More recently, he has served as chief executive officer of two international consulting firms concerned with the design and development of health care facilities — 21st Century Health Corporation and Ameriwell International.

A Fellow of the American College of Osteopathic Pediatricians, Dr. Cohen has been involved in graduate medical education for nearly 20 years and has published

numerous scientific papers on pediatrics and health care.

A native of Brooklyn, New York, Dr. Cohen received his undergraduate education at Purdue University. He earned his D.O. degree from the University of Health Sciences — Kansas City, Missouri, in 1960, and did his internship and pediatric residency at Grandview Hospital in Dayton, Ohio.

Dr. Cohen was selected by a 12-member search committee made up of students, faculty, community physicians and administrators from both TCOM and the University of North Texas. His selection was approved by TCOM's governing board — the TCOM/UNT Board of Regents — at its November 30 meeting. ■



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Texas Osteopathic Medical Association 92nd Annual Convention

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D.O. College _____ Year Graduated _____

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My Guest _____ will _____ will not _____ accompany me.
(first AND last name for badge)

TOMA Annual Golf Tournament Registration

Name _____

Address _____

Handicap _____

\$45 per person
includes
½ cart, green fees, transportation
(Cash Bar)
To Be Announced
Friday, May 3, 1991

CHECK ENCLOSED _____
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Refund Policy

The REFUND POLICY for the 92nd Annual Convention is as follows: All cancellations must be received in writing; no telephone cancellations will be accepted. A \$25.00 processing fee will be charged to all registrants who cancel. If cancellation is necessary, the following policy will apply:

More than 45 days prior to program, FULL REFUND (less processing fee).

30-45 days prior to program, 50 percent of fees paid will be refunded.

15-30 days prior to program, 25 percent of fees paid will be refunded.

Less than 15 days prior to program, NO REFUND.

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¹1985 Commissioners' Individual Disability Table A. Seven-day Continuance Table.

²LIMRA, 1989, as measured in annualized premium in force, new annualized premium and new paid premium.

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CHAMPUS News

Families of Newly Activated Reservists Should Present Proper Documents To Get CHAMPUS Benefits

The call-up of reservists and National Guard members means that more active-duty service members' families are newly eligible for CHAMPUS benefits.

If the activated military sponsor is ordered to duty for more than 30 consecutive days, his or her family members may get civilian health care under CHAMPUS, beginning with the first day of the active-duty period. In order to demonstrate eligibility for CHAMPUS health care benefits, the family members will present one of the following to whoever verifies CHAMPUS eligibility at a health care provider's office:

- A red Department of Defense Guard and Reserve Family Member Identification Card (DD Form 1173-1), along with a copy of the sponsor's active-duty orders; or
- A red Guard/Reserve Dependent ID Card from one of the services (it's an acceptable substitute for the DD Form 1173-1), with a copy of the sponsor's active-duty orders; or
- A tan Uniformed Services Identification and Privilege Card (DD Form 1173); or
- A completed and approved Application for Uniformed Services Identification Card — DEERS Enrollment (DD Form 1172), with a copy of the sponsor's active-duty orders.

Reserve and National Guard family members are enrolled in DEERS (the Defense Enrollment Eligibility Reporting System) when sponsors are activated by the services, and when a family member's individual entitlement is validated — either by normal DEERS enrollment procedures, or from information previously collected from the activated sponsors.

Those who file CHAMPUS claims can help prevent delays in processing by including a copy of any of the red ID cards or a copy of the ID card application, and a copy of the active-duty orders; or a copy of the tan ID and privilege card.

If you've had a CHAMPUS claim denied because of a patient's alleged non-enrollment in DEERS, or if you have questions concerning DEERS enrollment, call the DEERS Beneficiary Telephone Center for assistance. The center can be reached between 6 am. and 3:30 p.m. Pacific Time, Monday through Friday, at the following toll-free numbers:

- 1-800-334-4162 (California only)
- 1-800-527-5602 (Alaska and Hawaii only)
- 1-800-538-9552 (all other states)

Active-Duty Family Inpatient Cost-Share Increases

As of October 1, 1990, the daily amount active-duty families pay for inpatient care in civilian hospitals went up from \$8.35 to \$8.55.

This means that a member of an active-duty service member's family who is admitted to a civilian hospital for care under CHAMPUS will pay the daily rate of \$8.55 times the number of days spent in the hospital — or a flat fee of \$25, whichever figure is greater.

The \$8.55 rate doesn't apply to any other categories of CHAMPUS-eligible patients. Their inpatient hospital care will cost either 25 percent of the billed charges or a fixed daily rate, whichever is less. ■

Rural Health Factline

- In 1988 the total net loss for Texas' rural hospitals was \$10.9 million.*
- In 1988 less than 15 percent of rural Texas hospitals provided occupational therapy as compared to 60 percent of urban Texas hospitals.*
- Ninety-two percent of the state's swing beds were located in rural hospitals in Texas in 1988*
- Rural Texas hospitals accounted for only 11 percent of inpatient hospital days during 1988.*
- The average length of stay in Texas' rural hospitals was 5.08 days, compared to 6.39 days for Texas' urban hospitals.*
- In 1989, 18.9 percent of all births in non-metropolitan counties in Texas occurred to teenagers (under 19 years), contrasted with 14.7 percent for metropolitan counties.**
- Life expectancy for the rural Texan born in 1989 was 76.7 years, contrasted with the life expectancy for the urban Texan of 75.9 years.**
- On an average day in rural Texas there are 81 marriages, 41 divorces, 91 deaths, 129 births, and the population increases by 38 persons.**

*Bureau of State Health Data and Policy Analysis, Texas Department of Health

**Bureau of Vital Statistics, Texas Department of Health

Reprinted from *Rural Health Reporter*, Autumn 1990

An Introduction To Medicare

by Ann Thompson, R.N., Medicare Provider Liaison

Medicare is authorized under Title XVIII of the Social Security Act to provide Health Insurance for the Aged and Disabled. Part A provides Hospital Insurance Benefits while Part B provides Supplementary Medical Insurance Benefits.

Some medical expenses are Medicare program exclusions. They are never covered by the Medicare program, are never subject to waiver of liability and must be paid for by the Medicare Part B enrollee. Examples of program exclusions are: routine physical checkups, eyeglasses, hearing aids, dentures, immunizations, cosmetic surgery, personal comfort items and charges by immediate relatives.

Medicare carriers base medical necessity determinations on section 1862(a)(1)(A) of the Social Security Act. It states that no payment may be made for expenses incurred for items or service which are not reasonable and necessary for the diagnosis or treatment of illness or injury or to improve the functioning of a malformed body member.

These items and services fall into six general categories.

- I Experimental or investigational
- II Not safe and effective
- III Limited coverage based on certain criteria (usually diagnosis)
- IV Obsolete tests
- V Screens which make use of numerical criteria
- VI Concurrent Care

A participating provider is a physician or supplier who signs an agreement to accept assignment for claims submitted for Medicare Part B enrollees. A non-participating provider may submit both assigned and nonassigned claims for Medicare Part B enrollees. When a provider accepts assignment on a claim, he agrees to accept the allowed amount as his full charge for the service(s). He may bill and accept payment from the Part B enrollee an amount equal to 20% of the allowed amount (as co-insurance), any amount applied to the annual \$75 deductible and any charges for services which are Medicare program exclusions. The difference between the submitted charge and the allowed amount cannot be collected.

On assigned claims, when services are denied as not reasonable and necessary, a special message is part of the Explanation of Medicare Benefits form. It states: "If you did not know that Medicare does not pay for this medical service for this condition, you may request a review of this decision." If the initial denial is upheld, the decision of liability is made. The patient's liability can not be waived if the physician gave written notice and that notice was signed and dated by the patient prior to the initiation of treatment.

One of the following four liability determinations may

result concerning services denied as not reasonable and necessary on assigned claims:

1. Both the patient and the physician had prior knowledge. The patient must pay the physician the total charge for the denied service.
2. Neither the patient nor the physician had prior knowledge. Medicare will make its normal payment and the patient will pay any deductible and co-insurance amounts.
3. The patient had prior knowledge but the physician did not. The patient must pay the physician the total charge for the denied service.
4. The patient did not have prior knowledge but the physician did. The physician is restricted from collecting any money from the patient and from Medicare. Any previously collected money for this service must be refunded or adjusted.

The liability on nonassigned claims for services denied as not reasonable and necessary belongs with the physician *unless* the physician gave written notice and that notice was signed and dated by the patient prior to the initiation of treatment. Any money collected (without that prior written notice) must be refunded to the patient (including deductible and co-insurance money). That refund also applies to "reductions" of level of care services.

The following statements would satisfy the statutory requirements of Social Security Act section 1842(1) for the physician's advance notice and the beneficiary's agreement to pay on both assigned and nonassigned claims.

Physician notice:

"Medicare will only pay for services that it determines to be 'reasonable and necessary' under section 1862(a)(1) of the Medicare law. If Medicare determines that a particular service, although it would otherwise be covered, is 'not reasonable and necessary' under Medicare program standards, Medicare will deny payment for that service. I believe that, in your case, Medicare is likely to deny payment for (*specify particular services(s)*) for the following reasons: (*the physician gives the reason(s) for his or her belief*)."

Beneficiary Agreement:

"I have been notified by my physician that he or she believes that, in my case, Medicare is likely to deny payment for the services identified above, for the reasons stated. If Medicare denies payment, I agree to be personally and fully responsible for payment.

Signed,"

(Beneficiary Signature)

Dr. V.L. Jennings Is Honored During Human Service Center Dedication



The United Way Northeast Human Service Center, at 813 Brown Trail in Bedford, was officially opened following a dedication ceremony on November 27. The center is located in the building which formerly housed the practice of Virgil L. Jennings, D.O., FACGP, who sold it at a reduced cost "because the need of this service for the patients of this area is great." (See October *Texas DO*.) Dr. Jennings has since relocated to 2921 Brown Trail in Bedford.

During the dedication ceremonies, at which many health and hospital administrators and Northeast area officials were present, representatives from the United Way and Tarrant County Hospital District presented two special commendation plaques to Dr. Jennings, "in recognition of his 51 years of service to improving the health of citizens of Tarrant County and for his generosity which made possible the Northeast Human Service Center."

"When he (Dr. Jennings) walks in the gate, Saint Peter is going to tell him thank you. Without him, they couldn't have done it," said Warren Fuller, first mayor of Euless.

The center will serve as a community focal point for social and health services and includes the following agencies: Tarrant County Public Health Department, Tarrant County Human Services, WIC (Women, Infants and Children), Tarrant County Mental Health and Mental Retardation, Tarrant County Hospital District Community Health Clinic/Northeast, First Call for Help, Catholic Social Services, Volunteer Center and Northeast Human Services Project.

TOMA congratulates Dr. Jennings on this well deserved recognition. ■



Dr. Robert Adams Is New Chairman Of TCOM OB/GYN Department

Robert C. Adams, D.O., was recently named chairman of Texas College of Osteopathic Medicine's Department of Obstetrics and Gynecology after three years as that department's acting chair.

Dr. Adams joined TCOM's faculty in 1984. A 1979 graduate of Kirksville College of Osteopathic Medicine, he completed a four year OB/GYN residency at Grand Rapids Osteopathic Hospital in Grand Rapids, Michigan, in 1984. He was certified by the American Osteopathic Board of Obstetrics and Gynecology in 1988.

Dr. Adams serves on the Maternal and Child Health Advisory Committee for the State of Texas and the Interagency Family Planning Advisory Council of the Texas Board of Health. In 1987 he received TCOM's M.L. Coleman, D.O., Clinical Faculty Award and the Purdue Frederick Fellowship Award for outstanding presentation at the annual meeting of the American College of Osteopathic Obstetricians and Gynecologists.

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Texas ACGP Update

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

As 1991 gets started, I would like to remind everyone that the Texas ACGP dues statement will include a request for candidates for the annual GP of the Year award.

Only Texas ACGP members in good standing can submit nominees for the General Practitioner of the Year for 1991. The proposed nominee must be offered by a Texas ACGP member and the nominee shall possess the following requirements: 1) must be a member of the National ACGP. (Texas recipients are automatically forwarded to the National ACGP Awards Committee for national consideration); 2) the nominee can be shown to have made outstanding contributions to his or her profession and community, depictive of the unselfish devotion in serving others; 3) the nominee must have been in active general practice for at least the past 15 years, or the past 10 years plus an internship or residency in general practice; 4) the name and completed supportive information shall be forwarded to the secretary of the Texas ACGP for consideration by the Awards Committee.

The nominators should supply as much detail as possible for the consideration of their nominee. The nominator should supply at least one (two preferred) black and white (no color photos, please), four by six or five by seven photos of the nominee, if at all possible. The Texas ACGP secretary-treasurer will contact the nominee, if necessary, in an effort to complete the needed data on all candidates.

This is the highest award that the Texas ACGP can offer to a member. Please take the time to nominate a worthy candidate for 1991.

I had an opportunity to attend the TMF Advisory Committee meeting on 12-8-90, and I would like to share some data from this meeting with you.

The 24 hour limit on observation of Medicare patients in a non-acute care setting (outpatient status) prior to the admission to the hospital (inpatient status) or release to their home, no longer exists. The observation period can now extend for greater than 24 hours; however, there are certain facts that must be remembered: — the patient must pay 20 percent of the hospital bill under Medicare Part B once the \$75 deductible is met. — The hospital gets an hourly fee plus any ancillary services provided such as lab tests, x-rays, etc. It is important to admit the patient to the hospital as soon as the medical necessity is established for acute care.

Texas Medical Foundation Objective Review

The Texas Medical Foundation focuses on cases with short length of stay (3 days or less) in certain diagnosis related groups. Medical review is carried out to determine the medical necessity of the admission to an acute care setting. The following diagnosis related groups are contained in the objective:

- 015 Transient ischemic attack
- 124 Circulatory disorders except AMI, with cardiac catheterization and complex diagnosis
- 125 Circulatory disorders except AMI, with cardiac catheterization without complex diagnosis
- 130 Peripheral vascular disorders with complications or comorbidity
- 131 Peripheral vascular disorders without complications or comorbidity
- 182 Esophagitis, gastroenteritis and miscellaneous disorders, with complications or comorbidity
- 183 Esophagitis, gastroenteritis and miscellaneous disorders, without complications or comorbidity
- 188 Other digestive system diagnoses, with complications or comorbidity
- 189 Other digestive system diagnoses, without complications or comorbidity
- 243 Medical back problems
- 325 Kidney and urinary tract signs and symptoms, with complications or comorbidity
- 326 Kidney and urinary tract signs and symptoms, without complications or comorbidity.

Often patients admitted with diagnoses that group to these diagnosis related groups can safely be treated in settings other than acute care. The physician admitting a patient with these diagnoses should consider providing the medical services in a setting other than acute care. If the medical necessary treatment required by the patient can be safely provided in another setting, the patient should not be admitted to the acute care setting.

When the attending physician determines that the only safe place for the patient to receive the medically necessary treatment is the acute care setting, the patient should be admitted in the rationale substantiating the admission documented. The following guidelines apply:

- 1) *When the patient must be admitted to the acute care setting for a diagnosis or studies that generally could be provided in an outpatient setting and the reason for this*

ACGP Update, Continued

necessity is co-existing or multi-system diagnoses, the admitting physician should not only document the existence of the co-existing condition or multi-system diagnoses, but also should document how such conditions impact the medical necessity of this admission.

2) The acuteness of the condition requiring the acute care hospitalization should be clearly documented. Information about the severity of the symptoms and the length of time the symptoms have occurred must be documented.

3) When the patient is admitted to the acute care setting because they need close monitoring for either the admitting or co-existing conditions, the admitting physician should order close monitoring and the records should reflect that such close monitoring was carried out.

4) When it is anticipated that the patient will require more extensive surgery after a diagnostic study such as cardiac catheterization, unless there are circumstances requiring the diagnostic study to be provided as an inpatient, the study should be performed as an outpatient. Should more extensive surgery be required, the patient can then be admitted to the hospital after the study.

5) The admitting physician should understand that if a complication occurs during or immediately after the diagnostic procedure, the patient can then be admitted to the acute care setting.

6) Any social reason used as rationale for admitting the patient to acute care should be accompanied by an explanation of how, because of that social condition, there would be a negative medical impact on the patient to treat them in a setting other than acute care.

Penalty Acknowledgement Statement

The problem of getting physicians to sign and date the Penalty Acknowledgement Statements for Medicare was discussed at this meeting along with the various ways that physicians have altered the statement. The bottom line is that physicians cannot alter the intent of the acknowledgement statement, it must be signed each year, and properly dated. Failure to comply with this Medicare Penalty Acknowledgment Statement requirement will result in nonpayment and/or recoupment of funds for all cases admitted to the hospital by the offending physician, plus the turning over of that physician's name to the fiscal intermediary of Medicare Part B for recoupments of money paid to that physician for those hospital cases.

Since the last Texas ACGP update, NHIC has clarified its new policy regarding the use of new patient codes in the Texas Medicaid program. Dr. Robert Pendergrass, M.D., Vice President Medical Director of NHIC, in a letter to Tom Hanstrom, dated November 14, 1990, stated

that: "Initially, the Texas Medicaid program in an interim measure used a twelve month time span to apply to the new patient codes to offer an easier transition to our physicians from the old Blue Cross Blue Shield Medicare coding system that allowed a new patient visit any time a new disease state existed.

"The Texas Medicaid program in general follows the Medicare principles of reimbursement. Medicare limits the new patient codes to once per lifetime but based on a 27 month history purge.

"In essence, the Texas Medicaid program has brought our history purge to 27 months to conform with the Medicare actions.

"Basically, the new patient codes will be audited against the 27 month history unless specific regulations cause a shorter purge indicator.

"The practical consequences that a new patient code will be changed to an established patient code is if the 27 month history shows that the same physician has previously furnished a medical service (excluding routine newborn care), a surgical service, or a consult within the preceding 27 months to the same patient."

The question of the effect on referrals to medical specialists under this new policy is still an area of controversy. NHIC has a stated policy that at least 51 percent of codes submitted by a physician over a 12 month period of time must be "routine." Using my personal profile material and "routine" codes for consultations (3-90605 new patient, intermediate and 3-90641 established patient, limited), the reimbursement rate for locality 03, specialty 08 is \$67 for 3-90605 and \$18.50 for 3-90641. The rate for followup consultations is 27.6 percent of the initial consultation rate. In my opinion, this is too large of a differential between initial and followup consultation reimbursement rates to encourage medical specialists to see Medicaid patients for a new problem within a 27 month period of time. It should not adversely affect initial consultations, but it will adversely affect the medical specialist seeing those Medicaid patients again within that 27 month period of time.

Remember, the National ACGP convention will be held at the Ramada Renaissance Hotel in Washington, D.C., from March 6-10, 1991. If you have not done so by now, make plans to attend. ■

1991 NEW YEAR'S RESOLUTION "GEM"

*Be careful of the words you speak,
Make them soft and sweet.
You never know from day to day
Which ones you'll have to eat.*

TOMA's Austin Duplex Is Ready For Occupancy

TOMA's Austin duplex, purchased to assure our higher visibility in Austin, is now available for use. The usage priority is as follows:

- 1) TOMA staff and officers
- 2) TOMA board of trustees
- 3) TOMA appointees to official capacities
- 4) TCOM officials
- 5) Students/postgraduates
- 6) Others (individuals on official business)
- 7) Personal use.

Situated in the northwest section of Austin at 4016 Cima Serena, the property is located approximately 15 minutes from the State Capitol. Side A, with three sleeping locations and two baths, is the available side, while Side B is being rented on a continuous basis to provide TOMA with rental income.

Individuals will be charged \$50 per night and a receipt will be supplied to those being reimbursed by outside entities.

The procedure for renting the duplex is as follows:

- Individuals contact the TOMA receptionist to determine the availability of the duplex;
- Receptionist confirms availability and sends confirmation, map and list of duties to the individual;
- TOMA bills the individual for the number of nights spent at duplex.

The duplex should prove to be a great convenience for those with business in Austin and additionally, is a building of which all members of the association can be proud.

OSTEO-B PLUS

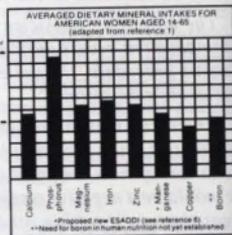
OSTEOPOROSIS...a disease of bone due to deficiency of bone matrix. Fractures of laminae or pedicles of the cervical vertebrae are common.

A recent and extensive survey has revealed the dietary mineral intakes of American women are below the built-in safety margin of the RDA* or ESADDI† for six minerals (1,2). This survey indicates that on the average, American women suffer from multiminer deficiencies during bone-forming and later periods of life (see graph).

Each of these minerals plays important roles in bone and connective tissue metabolism as structural components or activators of enzymes and hormones necessary for proper bone growth and maintenance (3-7).

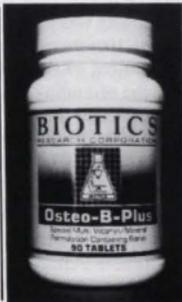
Evidence from animal and human experimental studies, clinical observations and epidemiological data all support findings of bone and connective tissue disorders, especially osteoporosis and impaired healing, when long-term dietary intake of one or more of the listed minerals is deficient (3-9). Combined with lack of exercise and normal or excessive intake of protein, phosphorus, iron and aluminum, which are all antagonistic to uptake and/or metabolism of the listed minerals, effects of deficiencies are aggravated (3-9).

OSTEO-B PLUS was formulated to contain bioavailable forms of minerals along with key synergistic factors such as vitamin C and chondroitin sulfates. Inclusion of judicious amounts of B-complex vitamins and vitamin D allows OSTEO-B PLUS to be used alone or in combination with other nutritional supplements.



References:
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- *United States Required Daily Allowance (2)
†Estimated Safe and Adequate Daily Dietary Intake (2)



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TOMA HAS DISCOVERED AN IMMUNIZATION FOR THE HEALTH INSURANCE "EPIDEMIC"

The high cost, no guarantee system of health insurance coverage is a "disease" that is affecting ALL small employers. Instead of providing long-term, affordable protection from financial losses due to accidents and illness, today's health insurance industry has created tremendous short-term burdens with no certainties of continued coverage in an environment that is as volatile as ever.

A recent item from *Medical Economics* magazine (March 5, 1990) indicates further the troubles that surround small employers, and even more specifically physicians. It reads:

"While state and federal legislators debate the merits of requiring employers to provide health-care coverage for their workers, health insurers are refusing to issue policies to more and more small businesses and professions. Some carriers are even blacklisting physicians and nurses, chiropractors, dentists, and others in the health-care field. One reason that medical workers may be excluded, carriers say, is they tend to have a high rate of utilization."

Although a total cure for these problems may still be far away, TOMA has discovered an "immunization" for its members that can help shield the frustrations that managing health insurance (or the lack of) can cause.

TOMA has appointed DEAN, JACOBSON Financial Services to handle the complexities of health insurance environment for you. They have just negotiated with CNA Insurance Company (an A+, Excellent rated company with a long, successful record in the accident and health business) to offer Major Medical coverage to TOMA members at very competitive rates. Best of all, with CNA's strength in the health insurance market and DEAN, JACOBSON's management of insurance services, TOMA will have a superior Health Insurance Program that has long been needed.

DEAN, JACOBSON Financial Services is recognized statewide for their expertise in insurance and related areas. So regardless of your current situation with health coverage, call DEAN, JACOBSON Financial Services to help you immunize against the health insurance "epidemic."

For information on coverages, costs, and enrollment forms contact:

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Dallas/Fort Worth Metro

ATOMA NEWS

By Sue Urban
Public Relations Chairman
ATOMA District II

District II is looking forward to the first big function of 1991. On February 23 at the Worthington Hotel, the Auxiliary will host the Wintercrest Charity Ball.

As I have mentioned before in this column, the major prize of the evening is the full length, black mink coat obtained from Bifano Furs of Dallas. This, however, is not the only prize. The raffle will also include a four-day, three-night stay at a condominium in Port Aransas and a Radio Shack CD player. A good value for a \$10 ticket and even better at three tickets for \$25. You can purchase tickets from Ellen Hames at 924-6418.

Since there will be a casino party and a silent auction, some of the gifts include two AMERICAN AIRLINES roundtrip tickets to anywhere in the Continental United States. We appreciate the American Airlines donation.

There will also be tickets to Sea World in San Antonio and Disneyland in California. We also have weekend packages from local hotels in Fort Worth and Dallas. Your participation in this event will make it possible for local charities such as the New Lives School, the Epilepsy Summer Camp Program, the Northside High School Magnet Program and Gill Children's Service and others to receive donations from the Auxiliary.

Most importantly however, is the money which goes toward osteopathic scholarships. Over the years, students from TCOM have been recipients of some of these scholarships. Without our support there may be fewer available. You can do a lot by buying your tickets, \$175 per couple, joining us for dining and dancing to Larry and the Blue Notes, and some Las Vegas fun in a "Winter Wonderland."

By Deidre L. Froelich, Ph.D.
Auxiliary News Chairman

Volunteerism, in addition to TOMA auxiliary activities, was suggested in an earlier issue of the *Texas DO* as a means of visibility for osteopathic physicians and their families in their communities. Many ATOMA members were kind enough to provide some examples of our auxiliary representatives at work. (If any of these listings are incorrect, you have my apologies.)

A large group participate in the promotion and support of Fort Worth's Scott Theatre as "Women of the

West." This group includes Myra Schussler, Melinda Teitelbaum, B.J. Czewski, Linda Miers, Lynn Ranelle, Cathy Hayes, Ellen Hames, Loretta Stone and Becky Burrows.

The Edna Gladney Home has enjoyed the services of Sally Beyer, along with Lynn Ranelle and B.J. Czewski, who visits area high schools as part of their Outreach program.

Also, in Fort Worth, ATOMA members Lynn Ranelle, Val Lowry and Melinda Teitelbaum are among those in the Junior League. Mayfest is an annual time of busy service and high visibility for these women.

Volunteering time to programs, such as the Women's Advisory Committee and the Fort Worth Women's Center, are Junior Women's Club members Kathy Hayes, Lynn Ranelle, Jacqueline Sharp and Melinda Teitelbaum. (Notice repetition of many names? It is often said that busy people are those who get more done.)

As several of us donate many hours to our children's schools in many capacities, I was informed that Kathy Hayes helped her school as chairman of the Trinity Valley Auction.

Past ATOMA President Chuckie Hospers was recently proud to announce the placement of a B-17 in the hangar at Meecham Field Airport, where she is diligently working to create a museum.

In Aledo, Chris Brenner provides time and leadership as a part of the Aledo School Board.

Elsewhere, in Tyler, many praises were voiced to me in honor of Geneva Grainger. Geneva has given many years of dedicated service to such notable programs as the Tyler Civic Theatre, the Tyler Rose Festival and, as a board member, the Tyler Day Nursery.

The Heart Association is reportedly the beneficiary of work by Caira Franz of Port Neches and Marilyn Morrell of Port Arthur. Also, Sherry Herndon of Groves in the same District, spends extra time and effort on behalf of her church and its activities.

I know undoubtedly that there are more of you that, in addition to jobs and family, spend valuable hours of goodwill in your community. Most of the above was hearsay, so tell me what else you hear about your peers.

Who among you spend your time and talents as a part of your spouse's clinic or practice? Who of you run your own businesses? We want to hear about it. Please drop me a line. . . Deidre Froelich, 2019 Liberty, Bonham, TX 75418. And many thanks to my informers to date! ■

Jensen Promoted To Associate Vice President



Dan Jensen has been named associate vice president for governmental affairs at Texas College of Osteopathic Medicine (TCOM) after six years as TCOM's executive director of external/governmental affairs. His promotion was approved by the TCOM/University of North Texas Board of Regents at their November meeting.

A 1977 graduate of Texas Tech University, Jensen earned a master of liberal arts degree from Texas Christian University. He headed successful political campaigns for several Texas candidates and worked on the staffs of a congressman and a state senator. As director of membership services for the Texas Osteopathic Medical Association from January 1983 to July 1984, Jensen guided the association's governmental affairs and public relations endeavors.

"Through the able representation of Dan Jensen, the college has established a presence in key agencies and offices at the national, state and local levels," said TCOM President David M. Richards, D.O.

Jensen is director for governmental relations for the Council for the Advancement and Support of Education Southwest District IV, director of Speakers Invitational and a member of the Fort Worth Chamber of Commerce Governmental Affairs Committee. ■

Regents Approve Campus Expansions, Improvements

The TCOM/University of North Texas Board of Regents approved \$747,605 in expansions and improvements to the Medicine Clinic, the former Tarrant County Medical Examiner's building and a former piano store at their November 30 meeting.

A 2,671-square-foot addition to the north side of the Medicine Clinic approved by the board will permit relocation of the Gerontology Assessment and Planning program (an extension of the Department of Medicine) from its current location in leased space on West Seventh Street. That move will allow the two operations to share waiting room space, examination rooms and support staff. The maximum budget for that project, which includes furnishings and improvements to the outside of the clinic, is \$297,605.

The board also approved \$284,323 in interior renovations and new equipment and furnishings for the piano store building at 3420 Camp Bowie Boulevard. The space will be occupied by the Department of Psychiatry and Human Behavior and will allow the department to accommodate its increasing patient load. Also approved were \$165,677 for exterior architectural improvements to the piano store and the Medical Examiner's building (which now houses the Pediatrics Clinic) and landscaping of the area surrounding those buildings.

Construction on both the Medicine Clinic expansion and the piano store and Medical Examiner's building improvements is scheduled to begin in March. The projects should be completed in the fall of 1991. ■

In Memoriam

Harriet Idtse

Harriet Idtse of Beloit, Wisconsin, mother of Constance Jenkins, D.O., passed away October 23, 1990, after a long illness. She was 95 years of age.

She had been a resident of Beloit since 1936. She was born April 18, 1895, in Elbow Lake, Minnesota, the daughter of Paul and Bertha (Amundson) Hanson. She married Frederick Idtse in 1918 in Elbow Lake; he passed away in 1975. She was a member of Our Savior's Lutheran Church.

Mrs. Idtse is survived by seven children, Robert Idtse of Austin, Texas, Betty Reynolds of Maumee, Ohio, and Margaret "Peg" Garside of Ramona, California, and Dr. Constance Jenkins of Fort Worth, Texas, Winifred Pletzt of Milwaukee, Wisconsin, Eleanor Hawkins of Visalia, California, and Dr. Fred Idtse of Fort Atkinson, Wisconsin; 19 grandchildren; 20 great grandchildren; one sister, Evelyne Whaley of San Antonio, Texas; nieces, nephews, other relatives and friends.

Services were held October 26 in Our Savior's Lutheran Church. Memorials may be made in her name to Our Savior's Lutheran Church.

TOMA extends condolences to the family and friends of Mrs. Idtse.

TCOM President Helps Break Ground For New VA Clinic

Texas College of Osteopathic Medicine President David M. Richards, D.O., helped break ground December 10 for construction of the new VA outpatient clinic in Fort Worth, which he said will provide a significant addition to TCOM's teaching program.

The 41,000-square foot clinic (at East Rosedale Street and St. Louis Avenue) will contain general and specialty clinics in medicine and surgery, dialysis, dietetic, social work and audiology units, a substance abuse and mental hygiene clinic and complete laboratory, pharmacy and radiology sections. The clinic, said to be one of the VA's most state-of-the-art health care facilities, will serve the ambulatory health care needs of an estimated 200,000 veterans in a 19-county area.

D.O.s from TCOM and M.D.s from the University of Texas Southwestern Medical Center in Dallas, both state medical schools, will be among those providing medical services at the clinic, scheduled to open in the fall of 1991.

Dr. Richards told the estimated 300 city, state and federal officials, civic leaders and veterans at the groundbreaking that TCOM is "delighted at the prospect of cooperating with not only the Department of Veterans Affairs but also with the University of Texas Southwestern Medical Center faculty in the delivery of health care" that U.S. veterans rightly deserve.

He noted that D.O.s and M.D.s work side-by-side throughout the world in the military services and in the public health service. "This clinic will provide another

opportunity to expand the cooperative relationship. We are looking forward to exploring other ways in which we might work cooperatively with Southwestern Medical Center in joint public service opportunities," he added.

Dr. Richards told the audience of TCOM's successful affiliation relationships with the CHAMPUS Clinic at Carswell Air Force Base and the Sam Rayburn Memorial Veterans Center in Bonham, Texas.

TCOM's affiliation with the VA in Fort Worth and Bonham is recognition by the Department of Veterans Affairs of the college's role in providing quality health care for the nation's veterans, Dr. Richards said.

"All health-related institutions and health professionals no longer can remain islands unto themselves. Rather, we must find ways to work cooperatively to bring better health care to the residents of the Tarrant County area," he said.

Dr. Richards was appointed to the VA's Special Medical Advisory Group in 1988 and is the only D.O. on the 22-member panel.

The main speaker, David E. Lewis, assistant secretary of the Department of Veterans Affairs, echoed Dr. Richards' remarks. "We must be open to change. We would like to increase our coordination and sharing with other federal and private sector health care providers, including our medical schools." Lewis said it is "reassuring" that the new clinic will have the support of the relationship now developing between the VA and TCOM. ■

Dr. Wilkins Named TCOM's Fifth Professor Emeritus

The TCOM/University of North Texas Board of Regents approved professor emeritus status for Frederick M. Wilkins, D.O., former chairman of the Department of Radiology, at its November meeting. He joins distinguished colleagues Marion E. Coy, D.O.; Virginia P. Ellis, D.O.; Irvin Korr, Ph.D.; and Charles Ogilvie, D.O., in holding that honorary title.

Dr. Wilkins joined the TCOM faculty in 1979, and served as acting chairman of the radiology department for several months before being named permanent chairman in February 1984. He retired from TCOM on August 31, but continues to provide consultation in radiology and to contribute to the college's emerging relationship with the Indonesian Ministry of Health.

A native of Collingswood, New Jersey, Dr. Wilkins earned a B.S. degree in chemistry and math from Elizabethtown (Pa.) College in 1951 and a D.O. degree from Philadelphia College of Osteopathic Medicine in 1955. Before joining TCOM, he was in private practice in Scottsdale, Arizona.

In 1975, Dr. Wilkins was made a Fellow of the American Osteopathic College of Radiology (AOCR) after serving as that organization's president. In 1983 he was awarded the AOCR's Trenery Gold Medal for outstanding clinical and academic work in radiology, and in 1985, received its Distinguished Service Award. He has been an invited speaker for numerous programs at both state and national levels. ■

Medicare/Medicaid News

By Don Self
Medical Consultants of Texas

1991 Limiting Charges/Participation Decisions

We recently received from HCFA a copy of the section of OBRA 90 that pertains to the limiting charges that will be imposed for 1991, replacing the MAACs. We also received a copy of the directive from HCFA Baltimore to the Regional HCFA offices, dictating the percentages and actual calculations to be used in determining the 1991 Limiting Charges (LC). WE DID NOT BELIEVE IT, so we checked with Baltimore, Washington, our Congressman and also the Director of Payment Policy with HCFA. The reason we had disbelief is that the actual numbers do not coincide with anything that we have read or heard concerning your 1991 limitations. NOT ONE PUBLICATION has given us the true facts concerning the calculation, and it amazes me. We spent a day double checking these facts and talking with consultants throughout the country, and they were not aware of it. The truth of the matter is that nearly every physician will be taking more cuts. Your LC for 1991 will not be the lower of the complex calculation or the 1990 MAAC! In many instances, your LC will be lower than the 1990 MAAC (by one percent to 60 percent). We ran the numbers on one client, just to see how they would affect the income, and it is catastrophic!

It is extremely doubtful that we will recommend any participating physician to dis-enroll (become non-participating), but we may suggest several to enroll.

The participation period is also "out of whack" this year. Congress did not provide for an extension of the "decision" period this year, as they have in the past. Medicare will not send out the Disclosure Reports for 1991 (listing your LC and Approved Amounts) until January 31, 1991. The only enrollment period (to become participating) has a deadline of December 31, 1990. Therefore, you are being forced to make a participation decision before you receive the needed information. HCFA has made the decision that you may withdraw from the program (become non-participating) during March 1991, but you may not elect to enroll during March.

What they are hoping for is that many physicians will become scared by the reductions in the fees they will be allowed to charge Medicare patients (LC) and then decide to participate, with the option of dis-enrolling three months later. The Congressman that we have discussed this with had no idea that HCFA was doing this and we are disturbed that HCFA has taken these decisions on themselves, when there is no elected body to answer to (since Congress is out of session).

We are also challenging HCFA in that those physicians that signed a participation agreement, signed the "contract" for a specified period of time (1990), and we are working on this angle.

Some Facts About 1991 and Medicare

1. The Limiting Charge (for non-participating providers) will be limited to the same percentage of difference between the 1990 MAAC and the 1990 Non-Participating Prevailing, applied to the 1991 Prevailing, with a maximum ceiling of 140 percent (for Evaluation & Management Services) and 125 percent for other services.
2. The Prevailing for primary care services will be updated two percent. This does not mean the prevailing will increase by two percent, as they take into effect the recalculated prevailing of all physicians over the customary period.
3. Over-valued procedures are further reduced by the same amount as the reduction implemented in April 1990.
4. Most procedural and surgical codes will have a reduction in their 1991 prevailing by 6.5 percent (which further reduces the LC).
5. Assistant at Surgery will have prevailing charge cap reduced from 20 percent to 16 percent.
6. Customary charges will not be updated, except for primary care services. ■

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CONTROLLED SUBSTANCES RECORD BOOK

We would like to remind physicians that Texas law requires that an inventory of controlled drugs (which includes purchases, acquisition or disposal of controlled substances, along with samples) be kept in a special log book. TOMA has made arrangements with the Texas Veterinary Medical Association for our members to purchase the bound record book, which is approved by the Texas Department of Public Safety.

To order the book, address your correspondence to: Texas Veterinary Medical Association, 6633 Highway 290 East, Suite 201, Austin, Texas 78723. The cost is \$17.00 per book, which includes tax and postage, and your check must accompany your order. Also, be sure and specify that you are ordering the Controlled Substances Record Book.

MED-SEARCH PROGRAM — VALUABLE RESOURCE FOR TOMA MEMBERS

The Texas Osteopathic Medical Association, in conjunction with the Texas College of Osteopathic Medicine, operates a Med-Search program for its members. The purpose of this program is to allow physicians the opportunity to have the library searched for various kinds of clinical literature and have it copied and sent to them at TOMA's expense.

TOMA has an established limit of \$50 maximum per month, per physician, for this program. In the few instances where physicians exceed the monthly maximum, they will receive a separate bill from the library for the amount exceeding \$50.

To take advantage of this valuable resource, simply call 1-800-444-TOMA and leave your name and phone number. The library will then contact you as quickly as possible concerning your request.

UPCOMING STATEWIDE RADON SURVEY

The Texas Department of Health and the U.S. Environmental Protection Agency will be conducting a statewide indoor radon survey from January through March 1991. More than 4,000 homes will be randomly selected and the persons living in them offered the opportunity to participate. Those who elect to participate will be mailed radon test cannisters. After use, the cannisters will be sent to the EPA for analysis of radon levels. Results will be individually mailed to participants within a few weeks, and statewide survey results will be announced in the fall.

NATIONAL VACCINE INJURY COMPENSATION PROGRAM

The deadline for filing claims under the National Vaccine Injury Compensation program has been extended from October 1, 1990, to February 12, 1991. The filing deadline pertains to injuries which resulted from immunizations administered prior to October 1, 1988. No deadline for filing a claim has been established for persons who allege they have been injured following an immunization administered since October 1, 1988.

AOHA'S STRANO RESIGNS

AOHA Today! reports that after seven years of service, Richard Strano, CAE, resigned effective November 2 as president of the American Osteopathic Hospital Association (AOHA), according to AOHA Chairman Vic Fresolone, FCOHE. "Mr. Strano notified me prior to the meeting in Dana Point that he would be leaving AOHA," said Fresolone.

Fresolone also said the AOHA Board has selected a search firm to assist in locating a new president for the Association by early this year.

DR. HARVEY MICKLIN ELECTED TO NATIONAL BOARD

Harvey G. Micklin, D.O., a certified psychiatrist in the Department of Psychiatry and Human Behavior at Texas College of Osteopathic Medicine, has been elected to the board of governors of the American College of Neuropsychiatrists. Additionally, he recently became a member of the American Association for Geriatric Psychiatry.

D.O. TALLY

As of November 1990, the Registration Department of the Texas State Board of Medical Examiners reported the following totals for active licensed D.O.s practicing with Texas licenses:

In-State	Out-of-State	Total
1,589	722	2,311

INTERIM TWCC FORMS AND NOTICES AVAILABLE

The Texas Workers' Compensation Commission (TWCC) has compiled a packet of Interim TWCC Forms and Notices to assist employees and their representatives, employers, carriers and health care providers in accessing the workers' compensation system effective January 1, 1991.

The forms and notices are only interim and you will be notified when final TWCC forms and notices are available.

The packets of forms and notices are available through the Reproduction Department of the Texas Workers' Compensation Commission. To order, call Donna Cates or Tim Harrison at (512) 440-3651. The packet costs \$14.80 if picked up, or \$18.25 if mailed.

Are Your Patients Managing Your Finances . . . And, Are They Qualified?

Pat Smith, I.C. System, Inc.

If you didn't write your own policies for managing your accounts receivable, then who did? Are the people who owe you money deciding when and if you will be paid?

Successful managers understand the importance of a comprehensive accounts receivable system. MONEY is the name of the game. Those who have it and use it wisely are successful; those who don't are subject to rapid failure. Take control! Here are some tips for managing this critical function.

First, begin with the establishment of a definite policy regarding the extension of credit. The individual characteristics of your business and competitive environment will affect your policy. You may consider everything from no extension of credit in order to achieve a zero accounts receivable balance, to a liberal granting of terms to selected classes of clients. In particular, your policy should assign the responsibility for managing accounts receivable to only one person, and this person should report and be accountable to senior management.

An example of a simple credit policy might be:

- All credit applicants must complete a credit application.
- All credit applications must be approved by senior management.
- All approved credit applicants must be given an explanation of payment schedules and dollar amount limits.
- Credit will not be extended to any patient whose account is 60 days past due.

Different accounting transactions present unique accounts receivable problems and some require more careful planning and control than others. For instance, a doctor who receives payments from insurance companies may have to institute one policy to handle insurance payments and timing, and another for directly billed patients. A supplier may have a policy for his small retail customers, and a separate policy for large wholesale buyers. The point is, different types of transactions require different handling and timing to maximize accounts receivable results.

Even with a credit policy in place, you may *not* be the manager of your finances. Past due accounts are the nemesis of every business. Yet, if you don't address this issue, you're letting your least profitable customers establish your policy for amounts which might equal or exceed your whole bottom line performance.

Every business which extends credit needs to establish, at the same time, a firm policy for handling past due accounts. Collection policies are as critical as credit policies.

A collection policy can be as simple as your credit policy. For instance:

- The Accounts Receivable Manager is responsible for all collection activity.
- An account becomes eligible for collection activity when it becomes 60 days past due.
- An account receiving collection activity will be pursued for 45 days.
- After 45 days, all unpaid accounts will be turned over to an outside professional collection agency.

You will make collection of past due accounts more consistent and easier by having a written policy which tells whose job it is, when you're going to start, when you're going to stop, and what happens *after* you stop.

I.C. System, the largest privately-owned debt management company in the country, is endorsed by Texas Osteopathic Medical Association as an effective and ethical debt collection service. Since 1962, I.C. System has collected over \$566,400 for TOMA members.

If you need to take a new look at who's managing your finances and could use some help, call the association office at 817-336-0549. Only *you* are qualified to manage your finances.

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- Experienced GI nurses
- Universal precautions practiced on *every* case
- Waiting room conveniently located

Jeffrey A. Mills, DO, Board Certified in Gastroenterology, serves as Medical Director. He is assisted in the lab by Ruth Reed, RN; Gail Geserick, RN; Melissa Garrett, RN; Brenda Wood, RN; and Kathy Edwards, RN, from his office.

To learn more about this new service, or to refer a patient, contact Dr. Mills at his office at (817) 283-3545.



Jeffrey A. Mills, DO

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PDQ: Source of Cancer Information

A computerized resource of clinically oriented cancer treatment information is available to health professionals to increase knowledge about the latest cancer treatments, facilitate access to clinical trials, and accelerate the application of cancer research advances.

Called PDQ (Physician Data Query), the system is sponsored by the National Cancer Institute (NCI). Three files are available:

- a cancer information file, containing state-of-the-art prognostic, staging and treatment information for over 75 types of cancer (reviewed monthly by an editorial board of prominent cancer researchers);
- a protocol file, including more than 1,300 clinical trials open to patients and more than 5,000 closed protocols;
- a directory file, listing organizations and physicians involved in cancer care.

Patient information statements, which complement the cancer information file, contain nontechnical information for patients and their families. All files in PDQ are updated monthly.

The PDQ database can be reached at all times through the National Library of Medicine's MEDLARS system and also through various commercial online vendors by obtaining personal "access codes."

Physicians and patients can also obtain PDQ information by calling the Cancer Information Service of the NCI at 800-4-CANCER 9 a.m. to 10 p.m. Eastern Standard Time, or by contacting their local medical librarian.

For more information about PDQ, CONTACT: PDQ Information, International Cancer Information Center, Building 82, Room DB, National Cancer Institute, Bethesda, Maryland 20892 (fax 301-480-8105). ■

OMT Tapes Available Through TCOM

Copies of VHS tapes on OMT techniques are available to osteopathic physicians throughout the state who wish to borrow them for a period of up to two weeks. These tapes are eligible for Category I-B CME from the AOA. Interested physicians should contact: Learning Resource Center, TCOM Health Sciences Library, 3500 Camp Bowie Boulevard, Fort Worth, Texas 76107; phone: (817) 735-2288. Physicians should note that a library card is necessary to borrow the tapes. Those needing a card should contact the library for an application form.

Tapes Available

WB90 VC1800 1974	KCOM — Manipulative Series Soft Tissue - Lumbar lower thoracic area 46 minutes (one hour Category I-B CME available from AOA)
WB940 VC1799 1975	KCOM — Paul Kimberly, D.O. Part I — Cervical C2 - C4 Side bending left, rotation left, high velocity Part II — T4 - T10 FSR Grps. A. Supine high velocity sitting Part III — T4 - T10 Flexion Extension a. Forward bending, high velocity & spring b. Backward bending, high velocity, muscle cooperation Part IV — T10 L5 FSR Grps. high velocity & muscle energy PTV - Roto - scoliosis (Sitting) 47 minutes (one hour Category I-B CME available from AOA)
WB940 VC1798 1974	KCOM — Pelvis S. I. Innominate Paul Kimberly, D.O. 1. Testing Physiological Motion 2. Symphyseal Lesions Diagnosis & Treatment 3. Sacral Diagnostic Procedures 4. Left Sacral Torsion Findings & Mobilization 5. Left Unilateral Findings & Mobilization 6. Left Innominate Posterior 57 minutes (one hour Category I-B CME available from AOA)
WB940 VC1801 1975	KCOM — Thoraco-Lumbar Junction 32 minutes (one-half hour Category I-B CME available from AOA)
WB940 VC1802 1978	Indirect extremity technique — Anne Wales, D.O. 50 minutes (one hour Category I-B CME available from AOA)
WB940 VC1797 1984	KCOM — Cervical Technique ME & HVLA Cervical Spine-OA-AA Techniques — Counterstrain, Direct, Indirect Jerry Dickey, D.O. Cervical Spine-Direct Method — Lower Spine (Facet Angles) Larry Bader, D.O. 25 minutes (one-half hour Category I-B CME available from AOA)
WB940 VC1591 1976	Counterstrain Part I - Part V Complete Counterstrain Course by Larry Jones, D.O. 3 hrs. 45 minutes (four hours Category I-B CME available from AOA)
WB940 VC1796 1979-82	Michigan State Series Pelvic Region I: Iliosacral Pelvic Region II: Sacroiliac Pelvic Region III: Alternative Direct Technique 42 minutes (one hour Category I-B CME available from AOA)
WB940 VC1803 1980-82	Thoracic Cage Thoracic Region I: True Ribs (1 through 7) Thoracic Region II: Mid Lower Thoracic 26 minutes (one-half hour Category I-B CME available from AOA)

Warning On Use of GHB (Gamma Hydroxybutyric Acid)

The Texas Department of Health (TDH) reports that on November 8, 1990, the U.S. Food and Drug Administration (FDA) and the California State Health Department issued warnings regarding use of GHB (also called Sodium Oxybate or Gamma Hydroxybutyrate Sodium). GHB is an illegally-marketed drug being promoted for strength training, body building, weight loss, and as a replacement for L-tryptophan, which was removed from the market last year. Use of GHB has been associated with symptoms ranging from nausea and vomiting to severe respiratory problems, seizures, and coma. TDH Food and Drug Division reports that GHB is sold through mail order outlets, health food stores, body building gyms, and fitness centers. In addition, TDH Food and Drugs Division is investigating the

related drugs GABA (Gamma aminobutyric acid) and GBL (Gamma butyrolactone). FDA offers the following advice:

1. Anyone taking GHB outside of physician-supervised clinical trials should stop immediately.
2. Anyone who has taken GHB and is experiencing seizures, uncontrolled shaking, headache, unexplained drowsiness, or other central nervous system disorders, nausea, vomiting, or diarrhea should consult their physician immediately.
3. Physicians treating patients taking GHB who are exhibiting these symptoms should immediately report these cases to public health authorities (in Texas call 1-800-252-8239).

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Each tape sells for \$125 plus \$10.31 sales tax, which totals \$135.31. If, after viewing the tape, you do not increase your income by at least \$100 per month, you just return the tape for a full refund. You can order both tapes for the low price of \$200 plus \$18.56 tax, which totals \$218.56. With nothing to lose, you should go ahead and order today!

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Fisons Pharmaceuticals Establishes Award For Allergy/Asthma Residents

Fisons Corporation, a Rochester, New York-based pharmaceutical company, has established an award for osteopathic resident physicians who have done exemplary work in allergy or asthma-related areas.

Fisons will provide grants to at least two osteopathic resident physicians to attend the AOA convention.

"We want to encourage osteopathic resident physicians who might dedicate their career to allergy and asthma therapy and provide them the opportunity to attend AOA activities," said Julie Reynolds, project manager, medical communications for Fisons Pharmaceuticals.

The award provides a \$1,500 stipend to attend the 1991 AOA Convention and Scientific Seminar in New Orleans, Louisiana, where award winners will participate in the four-day program and receive special recognition.

Nominations must be submitted to the Division of Postdoctoral Education, Department of Education, American Osteopathic Association, 142 E. Ontario, Chicago, Illinois 60611-2864. Nominations must be postmarked before midnight, July 31, 1991. Residency program directors may submit nominations; residents may nominate themselves or other residents.

Applications for the AOA-Fisons Pharmaceuticals Award for Residents may be obtained from the AOA at the above address or by phoning 800/621-1773, ext. 5846 or 312/280-5846.

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PHYSICIANS WANTED

PARTNERSHIP — offered in thriving general practice on the Gulf Coast. Coverage available, Intern/Extern approved hospital with TCOM affiliation. Contact Sam Ganz, D.O., 3933 Upriver Road, Corpus Christi, 78408. (51)

FULL AND PART-TIME PHYSICIANS WANTED — for several primary care/minor emergency clinics in the D/FW area. Flexible schedule, excellent potential for growth and financial success. Please send resume or contact: Steve Anders, D.O., Medical Director, Ready-Care Medical Clinic, 4101 Airport Freeway, Suite 101, Bedford, 76021; 817/540-4333. (40)

PHYSICIAN NEEDED — Minor Emergency/Family Practice facility. Full and part time positions. Bilingual. Hobby Airport Area. Contact Dr. Botas at 713/644-3602. (52)

ASSOCIATE NEEDED — for expanding general practice in East Texas. Guaranteed income with a future. Contact: Steve Rowley, D.O., 214/849-607 or Mr. Olie Clem, 214/561-3771. (08)

IMMEDIATE PRIVATE PRACTICE OPPORTUNITIES — One or more family/general practice physicians. Small rural south central Kansas community. Hospital and L.T.C.U. in community. Obstetrical required. 1) guaranteed income; 2) malpractice insurance furnished; 3) clinic fully equipped; 4) modern hospital; 5) housing available. Contact: Administrator, Attica District Hospital, Attica, Kansas 67009; 316/254-7253. (13)

PHYSICIAN OWNED EMERGENCY GROUP — is seeking Full or Part Time D.O. or M.D. emergency physicians who practice quality emergency medicine. BC/BE encouraged, but not required. Flexible schedules, competitive salary with malpractice provided. Send CV to Glenn Calabrese, D.O., FACEP, OPEM Associates, P.A., 100 N. University, Suite 220, Fort Worth, Texas 76107. (817) 332-2313. FAX (817) 335-3837. (14)

D.O. PHYSICIANS — OSTEO-PATHIC ORIENTED. Full or part time, various locations available. Benefits available. No weekends, no night call. Send resume to P.O. Box 64758, Dallas, 75206. (43)

ASSOCIATE URGENTLY NEEDED — for an extremely busy family practice. Fully equipped clinic, lab, x-ray and mammogram facilities. Contact Lufkin R. Moses, D.O. 915/235-1717. (41)

WONDERFUL OPPORTUNITY — for ambitious physician willing to accept thriving small town practice. 30 minutes South of Fort Worth. Will lease or sell; call 817/866-3922 or 817/866-3308. (15)

NEEDED — General/Family Practitioner for Ambulatory/Minor Emergency Clinic located fifteen miles north of Houston. Full-time position at 40 hours/week, no after hours call, Workers Compensation. No HMO, PPO, Medicaid. Salary with paid malpractice. Contact: John Johnstone, D.O. at 713/540-2273. (37)

TYLER — DOCTORS MEMORIAL HOSPITAL IS SEEKING — pediatricians, an OB-Gyn physician; an orthopedic surgeon; family practice physicians; and a general internist to work in an association or solo practice. Financial assistance available. Contact Olie E. Clem, C.E.O., 1400 West Southwest Loop 323, Tyler, 75701; 903/561-3771. (45)

ORTHOPEDIC SURGEON NEEDED — for expanding practice in Southeast Texas serving a population of over 100,000. Excellent potential for growth and coverage available. Please send resume or contact: John Isbell, Doctors Hospital, 5500 39th Street, Groves, 77619; 409/962-5733. (09)

TWO SUCCESSFUL PHYSICIANS — wish to retire and sell their practice and clinic which they have occupied for 35 years. Practices are general/allergy and obesity oriented. Office is 10-20 minutes from six hospitals and on a major thoroughfare. Office is fully equipped with x-ray, EKG, ultrasound and office laboratory. Will discuss terms. Call 214/381-1910 or 214/381-4150 for discussion. (30)

OFFICE SPACE AVAILABLE

FOR LEASE — Medical office; established medical-dental building on Hulen between Vickery and W. Fwy.; approx. 1,400 sq. ft. which includes 3-4 exam rooms, lab, business office, private office, and extras. Recently remodeled and ready to move in. 817/338-4444 (27)

FOR RENT — Medical Office in Arlington. Three to six months free rent with proper lease. Ideal for general practitioner. Call 817/265-1551. (32)

MISCELLANEOUS

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)

WANTED: Used Diathermy Machine. Contact Dr. Mohney, 713/626-0312. (02)

FOR SALE — Vision Chemistry Analyzer. Less than one year old, warranty, reagents. Works perfectly. 8K, or best offer. Reply to: Sue Feliciano, 8736 Highway 80, Fort Worth, 76116; 817/244-2143. (04)

FOR SALE — Hunting - Recreating - Cabin Site. 40 acre Colorado Wilderness sites. Joins San Juan National Forest. Covered with pine forest - good access road. Elevation 7,500 ft. Deer, bear, elk. One and one-half miles to trout fishing lake. 40 minutes to Durango. One hour and 20 minutes to Telluride Skiing Resorts. Call Country Dean for information; 817/335-3214 (metro 817/429-0460). (19)

FOR SALE — Vision Chemistry Analyzer — \$6,000 or best offer. Reply to Dennis Breed, D.O., 900 Whitehead Drive, Granbury, 76048 or call 817/573-7091. (39)

FOR SALE — Holter Unit, \$3,000. Call 817/923-9988 between the hours of 9:00 a.m. and 5:00 p.m. (35) ■

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