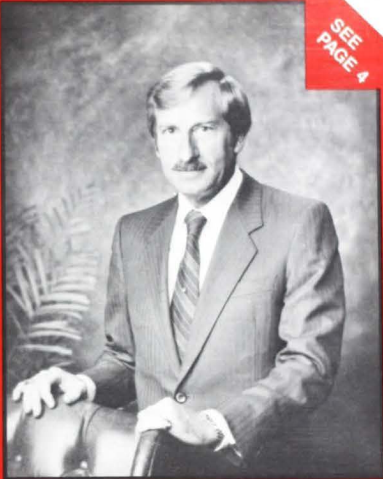


M. Lee Shriner, D.O. Assumes TOMA Presidency



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PHONE

For Your Information

American Osteopathic Association	312/280-5800 800/621-1773
Washington Office	202/783-3434
American Osteopathic Hospital Association	703/684-7700
Professional Mutual Insurance Company	800/821-3515
Risk Retention Group	816/523-1835
TOMA Malpractice Insurance Program:	
For Premium Rates,	
Enrollment & Information	800/544-8560
Texas College of Osteopathic Medicine	817/735-2000
Dallas Metro	429-9120

Medicare Office:	
Part A Telephone Unit	214/470-0222
Part B Telephone Unit	214/647-2282
Profile Questions	214/669-7408
Provider Numbers:	
Established new physician (solo)	214/669-6162
Established new physician (group)	214/669-6163
All changes to existing provider number records	214/669-6158

Texas Medical Foundation	512/329-6610
Medicare/Medicaid General Inquiry	800/252-9216
Medicare Beneficiary Inquiry	800/252-8315
Medicare Preadmission/Preprocedure	800/252-8293
Private Review Preadmission/Preprocedure	800/252-9225
Private Review General Inquiry	800/252-9225

Texas Osteopathic Medical Association	817/336-0549
in Texas	800/444-TOMA
Dallas Metro	429-9755
TOMA Med-Search	in Texas 800/444-TOMA

TEXAS STATE AGENCIES:	
Department of Human Services	512/450-3011
Department of Public Safety:	
Controlled Substances Division	512/465-2188
Triplicate Prescription Section	512/465-2189
State Board of Health	512/458-7111
State Board of Medical Examiners	512/452-1078
State Board of Pharmacy	512/832-0661
State of Texas Poison Center for Doctors & Hospitals Only	713/765-1420
	800/392-8548
Houston Metro	654-1701

FEDERAL AGENCIES:	
Drug Enforcement Administration:	
For state narcotics number	512/465-2000 ext 3074
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
May/June 1988

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Tom Hanstrom, Editor
Diana Finley, Associate Editor
Lydia Anderson Smith, Staff Writer

Calendar of Events



JUNE 10-11

Conference on Aging — "Caring for our Elderly"

Sponsors: Psychiatric Institute of Fort Worth,
Mental Health Assoc. of Tarrant
County
Texas College of Osteopathic
Medicine
Harris College of Nursing-TCU
Alzheimer's Disease & Related
Disorders Assoc.
Convalescent Services, Inc.
City of Fort Worth
North Central Texas Home
Health Agency

Location:

June 10—LifeCenter at
Psychiatric Institute
June 11—TCOM Campus

Contact: Psychiatric Institute
817/882-4440
Mental Health Assoc.
of Tarrant County
817/335-5405

28

Fort Worth Osteopathic Study
Group
Joint effort of TCOM and TAO
"Articulation and Thrusting for
Neck and Upper Thorax"

Speaker: Jack Gramer, D.O.
7:30 p.m.

TCOM Med Ed I — Room 632

2 hours—Category 1-A

Contact: Russell Gamber, D.O.
817/735-2579

24-26

*Eighth Annual General Practice
Update "A Summer Symposium
for the Family Practitioner"*

TCOM Office of CME
Holiday Inn Emerald Beach
Corpus Christi

Hours: 11 CME, Category 1-A

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

JULY 31-August 1

House of Delegates Meeting
American Osteopathic Association
Miami, Florida

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

AUGUST 5-7

Mid-Year Conference/Symposium
Texas Society ACGP
Hilton Hotel
Arlington

Contact: T. R. Sharp, D.O.
Secretary/Treasurer
4224 Gus Thomasson Road
Mesquite, 75150
214/279-2453

SEPTEMBER 25-Oct. 1

*National Osteopathic
Medicine Week*

"Osteopathic Medicine Salutes
the Nation's Seniors"

NOM kits should be out soon!

Contact: AOA Director of Communications
142 East Ontario Street
Chicago, Illinois 60611
312/280-5800

OCTOBER 15-16

*TOMA Mid-Year Seminar/
Legislative Forum*
(formerly)

*Public Health Seminar/Legislative
Forum*

Sheraton CentrePark Hotel
Arlington

12 CME hours expected

Contact: TOMA — 817/336-0549

16-20

Clinical Assembly of Osteopathic
Specialists
Surgeons Group
New York Hilton

Contact: ACAOS Conv. Mgr.
3132 Ponce de Leon Blvd.
Coral Gables, FL 33134
305/444-2267

NOVEMBER 2-5

"Optimizing Management of
Primary Bone
Tumors: An International
Symposium
Emphasizing the Multidisciplinary
Approach"

32nd Annual Clinical Conference
The University of Texas

M.D. Anderson Cancer Center
Contact: Office of Conference Services
M.D. Anderson Cancer Center
1515 Holcombe Blvd.
Houston, 77030
713/792-2222

DECEMBER 4-8

*Annual Convention and Scientific
Seminar*

American Osteopathic Association
Las Vegas, NV

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

6-7

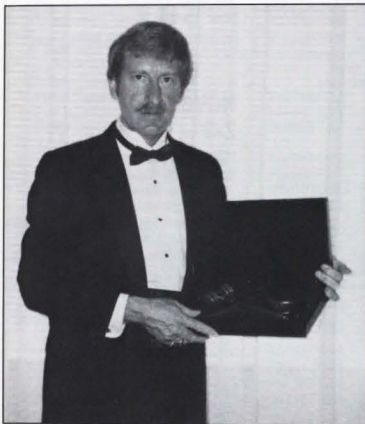
*Educational Conference on
Graduate Medical Education*
American Association of Colleges
of Osteopathic Medicine
Las Vegas, NV

Contact: Tarmara S. Johnstone
Conference Coordinator
6110 Executive Bldg., Suite 405
Rockville, Maryland 20852
301/468-0990

Dr. Shriner New TOMA President

M. Lee Shriner, D.O., FACGP, of Bowie, has been elected president of the Texas Osteopathic Medical Association for 1988-89. Installation ceremonies were held during the Association's 89th Annual Convention and Scientific Seminar in Galveston, April 28-30.

A 1961 graduate of Manchester College, North Manchester, Indiana, Dr. Shriner received his D.O. degree from Chicago College of Osteopathic Medicine in 1965. He interned at Dallas Osteopathic Hospital.



Dr. Shriner opened the Shriner Family Clinic in Bowie in 1971 and still maintains his practice there. He has served as chief-of-staff, secretary of staff, member of the Executive Committee and the Credentials Committee at Bowie Memorial Hospital.

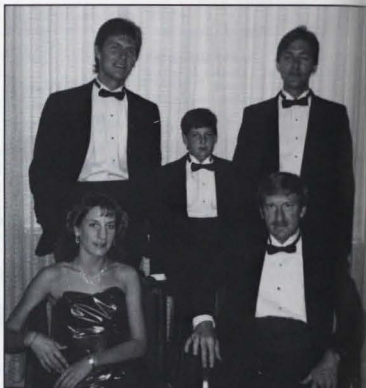
Active on both the state and national levels, Dr. Shriner has served on numerous committees within TOMA and is an active member of TOMA District XV, of which he has served as secretary, vice president, president-elect, president and caucus representative.

On the national level, Dr. Shriner has been involved as a member of the AOA since 1966 and has served as alternate delegate, second alternate delegate and as a seated delegate. He also holds active membership in the American College of General Practitioners in Osteopathic Medicine and Surgery, and is a member of the Texas Medical Foundation. Other memberships include the Texas Society of the ACGP; Chicago College

of Osteopathic Medicine Alumni Association; and member of the TCOM Advisory Council.

He is a diplomate of the American Osteopathic Board of General Practice; a fellow of the ACGP; and a senior aviation medical examiner.

In his inaugural remarks Friday night, April 29, Dr. Shriner urged attendees to "...be proud of being a D.O.", and to "...flaunt it." He also challenged D.O.s to become role models for future D.O.s by maintaining the uniqueness of the osteopathic philosophy in their practices as well as their teachings.



Dr. Shriner is the father of four children: David, a student at Tulane Medical School; Dwayne, a student at Midwestern University; Denise, a senior at Bowie High school and a member of the National Honor Society; and Derrin, an honor student in the sixth grade at Bowie Junior High School.

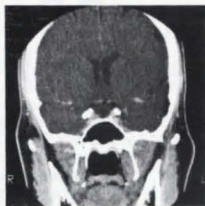


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Pathology
Services**

George E. Miller, D.O., F.A.O.C.P.
Richard R. Keene, M.D., F.C.A.P.

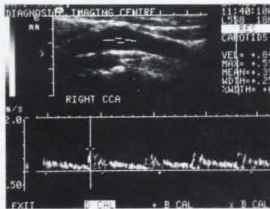
P.O. Box 64682 Dallas, Texas 75206

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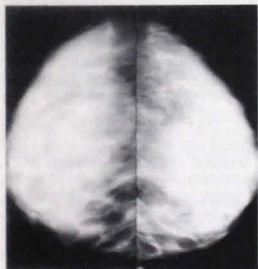


GE 9800
High Resolution Computed Tomography
Pituitary Gland Study

Toshiba
Radiographic/Fluoroscopic Double Contrast
Upper Gastrointestinal Study



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Sonogram Carotid Artery
Doppler Study



Phillips
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Lateral Oblique

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Dr. Shriner Urges D.O.s to Flaunt Their Professional Pride

Editors note: *The following speech was given by Dr. M. Lee Shriner on President's Night as he assumed the TOMA presidency for 1988-89.*

Dr. Puryear, Dr. Jenkins, Fellow Osteopathic Physicians, families and friends of the profession, I welcome you here to participate in a great profession. Being installed as the president of the Texas Osteopathic Medical Association is my lifetime dream. To me there is no greater honor than to be privileged to serve a great profession in a great state in the greatest country in the world.

My question to you is, "Do you really know who we are?" Osteopathic medicine was founded by Dr. A.T. Still 114 years ago. The first school of osteopathy was formed 96 years ago. The Texas Osteopathic Medical Association was organized 88 years ago. The Texas College of Osteopathic Medicine was chartered 22 years ago.

During the past 22 years, I have practiced general osteopathic medicine in Texas. This is nearly one-half of my life! During this time I have been closely acquainted with most of the TOMA presidents, members of the TOMA Board of Trustees, and our recently retired Executive Director, Mr. Tex Roberts. I have the greatest respect for the skills, the endurance, and the dedication by all of these very honorable leaders of our profession. I have observed, listened, participated, and have been advised by these leaders. I am very privileged and challenged to serve this association in a manner which has been consistent with my predecessors.

During my tenure in serving you as your president, I plan to challenge the new Board of Trustees, which is composed of a balance of representatives from throughout the state who have proven themselves as leaders of their respective districts. I hope to challenge all committee chairmen for activity in their departments within the confinement of our proposed budget. To coordinate all of these activities, the center and mainstay of this association will be dependent upon our new executive director, Mr. Tom Hanstrom, and our associate executive director, Ms. Diana Finley, and their talented staff.

We present ourselves as being mainly wholistic primary care physicians, stressing the importance of the relationship of structure and function of the human organism and how man relates to his environment as a psychological, social being. We stress that we have a unique approach to the healing of our fellow man, in that by normalizing the body we, in essence, are practicing preventative medicine. Experts are predicting that medicine in the 21st century will be with an ever increasing

focus on preventive medicine, rather than focusing as in the past, on progressively invasive medicine. This is not a change of approach for osteopathic medicine. We have always been ahead of allopathic medicine in our approach in being health oriented, rather than disease oriented.

Osteopathic medicine has not been readily accepted because we have been ahead of time. The acceptance of our success has been slow, like that of the 1933 Studebaker. This Studebaker model, by its sleek design, was too far ahead of other models in its time. It is one of the few American cars in the National Museum of Art. Sales of this model were very low. Artists in France stated the failure of the Studebaker was because it was 10 years ahead of other cars in design, and the public was not ready for such a drastic change. I feel this has been the fate of osteopathic medicine—we are just beginning to enjoy the recognition by the public as a successful alternative of medical care.

We must maintain the uniqueness of the osteopathic philosophy in our practices and in our teachings of future D.O.s. It now becomes imperative for every individual D.O. to maintain this personal hands on approach to patient care, to avoid all the current intrusions on close doctor-patient relationships. This close personal care we give our patients has enabled our profession to increase patient support, state support, and government support. We must also increase our education of the public, to dispel uninformed criticism, and inaccurate rumors of our profession. In the coming years, the whole profession will be challenged for more individual involvement rather than merely depending upon a handful of leaders, to solve our problems. We, as a profession, are in our adolescence, and we are experiencing the growing pains of progressive recognition and acceptance.

The AMA and TMA would like to accept the osteopathic profession into oblivion. However, with the present trend of invasion of doctor autonomy and fee-for-service care by HMO's, PPO's, IPA's, Medicare, and other third party payors, plus the increased numbers of D.O.s being trained in allopathically oriented institutions due to a limited number of training slots, it becomes imperative that we become allies with the allopathic profession as partners, SEPARATE but EQUAL, to slow this progressive invasion into our hospitals and our offices in order to preserve the doctor as the patient's advocate.

In order for the Texas Osteopathic Medical Association to adequately seek solutions to the problems of liability reform, unfair health care reimbursement, peer review, and to develop strategic legislative planning, it will take an increased involvement and commitment from each member of the association to give your time, your dues, and your contributions to our sustaining membership and TOPAC funds. Additionally, you must become personally involved in community activities, service on medical boards, public health service, and insurance committees. We, as the association representatives, will help you prioritize and focus your efforts so that even though our members and dollars are limited, we can get full mileage from our assets.

It is very important for the osteopathic profession to maintain a good self image for self preservation. The osteopathic profession's worse enemies are apathy and indifference of its individual members to the profession,

to osteopathic hospitals, and to fellow D.O.s. This is a direct result of inadequate self image. We sometimes tend to believe adversaries of the profession. I like to refer to Dr. Robert Schuller's theme, "Be happy you are loved!" If we, as D.O.s, love ourselves, so will the world love us. Be proud of being a D.O., don't hide it, **FLAUNT IT!**

In closing, I would like to challenge every D.O. to become role models for our young D.O.s and be the best American Texas Osteopathic Physicians in the world. Do not be second rate by trying to be something other than what the osteopathic medical profession represents. Remember, we are very special wholistic physicians, with a special hands on, doctor-patient relationship, promoting an optimal quality of life for our patients, and for mankind.

Thank you for allowing me the honor and responsibility of serving you as your president. ■

Activities of the TOMA House of Delegates

A resolution expressing concern over the financial burden facing millions of older Americans lacking insurance protection for long-term care, and subsequently, supporting tax breaks to insurance companies offering such policies and to consumers, was among the major actions taken during the April 27 annual meeting of the TOMA House of Delegates.

The House also voted to establish a policy on AIDS that would allow Texas osteopathic physicians to freely choose to treat or refer AIDS patients for specialized care; however, D.O.s should not abandon or deny emergency care to AIDS patients. In the area of tort reform, the House supported the concept of establishing a new system for compensating victims of medical negligence while reducing the incidence of substandard care through a fault-based administrative system.

Another area of concern addressed by the House was the call for reforms for certified disabled Medicare patients, preventing them from losing their primary home care eligibility automatically when transferred from hospitals to "skilled" nursing facilities.

The election of officers highlighted the meeting with Joseph Montgomery-Davis, D.O., of Raymondville, elected as president-elect and Robert L. Peters, Jr., D.O.,

of Round Rock, as vice president. M. Lee Shriner, D.O., of Bowie, assumed the presidency during the three-day meeting, succeeding Bill H. Puryear, D.O., of Fort Worth.

Re-elected to three-year terms on the TOMA Board of Trustees were Larry G. Burrows, D.O. of Fort Worth; Donald F. Vedral, D.O., of Cedar Hill; William D. Hospers, D.O., of Bedford; and Jerry E. Smola, D.O., of Sweetwater. Additionally, Gilbert E. D'Alonzo, D.O., of Houston, was elected to a two-year term, and R. Greg Maul, D.O., of Arlington, to a one-year term.

Re-elected as Speaker of the House of Delegates was T. Eugene Zachary, D.O., of Fort Worth, with David F. Norris, D.O., of Tyler, re-elected as Vice-speaker.

Four TOMA members elected to three-year terms to the AOA House of Delegates were John H. Burnett, D.O., of Dallas; Jerome L. Armbruster, D.O., of Pearland; David R. Armbruster, D.O., of Pearland; and Frank J. Bradley, D.O., of Dallas.

Elected as alternates to the AOA House were Dr. Puryear, as first alternate; Dr. Peters, as second alternate; Mary Burnett, D.O., of Dallas, as third alternate; Dr. Shriner; Brian G. Knight, D.O., of Corpus Christi; Dr. D'Alonzo; Dr. Hospers; Arthur J. Speece, D.O., of Grand Prairie; Richard M. Hall, D.O., of Eden; Tom W. Essex, D.O., of Dumas; and Dr. Maul. ■

The High Cost Of Malpractice Insurance Is Turning Us All Into Mad Doctors.



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Major Actions of the T

MOTION: That life memberships in TOMA be approved for Drs. Joe P. Alexander, Russell B. Bunn, Keith L. Hull, Melvin E. Johnson, William J. Mosheim, Charles D. Ogilvie, Paul D. Siefkes, Ralph L. Willard, Thomas A. Williams, and William E. Winslow.

CARRIED

MOTION: That the House of Delegates instruct the AOA Delegates to support Dr. T. Eugene Zachary as Speaker of the AOA House of Delegates.

CARRIED

RESOLUTION NO. 1 PERTAINING TO CREATING A TOMA DISTRICT XVIII: The House of Delegates goes on record as approving formation of a new district, XVIII, to encompass the counties of McLennan, Hill, Falls, Limestone, Freestone, Bosque, Hamilton, Bell, Leon, Coryell and Robertson, for reasons of convenience of attendance at district meetings.

CARRIED

RESOLUTION NO. 2 PERTAINING TO MANDATORY MEDICARE ASSIGNMENT: The House of Delegates goes on record as opposing any attempt to tie licensure in the State of Texas to mandatory participation in state or federally funded health care programs.

CARRIED

RESOLUTION NO. 3 PERTAINING TO SUPPORTING PHYSICIAN-DIRECTED MEDICAL PEER REVIEW THAT GUARANTEES CONFIDENTIALITY OF MEDICAL RECORDS: The House of Delegates goes on record as supporting physician-directed medical peer review that guarantees confidentiality of medical records, due process for all potentially sanctioned health care providers, and educational rather than punitive methods to correct inappropriate patterns of medical care when an imminent danger to patients does not exist.

CARRIED

RESOLUTION NO. 4 PERTAINING TO AIDS: The House of Delegates goes on record as establishing a policy on AIDS that would allow Texas osteopathic physicians to freely choose to treat or refer AIDS patients to another physician for specialized care; however, osteopathic physicians should not abandon or deny emergency care to AIDS patients.

CARRIED

RESOLUTION NO. 5 PERTAINING TO DISCRIMINATION AGAINST EARNED DEGREES: The House of Delegates goes on record as supporting legislation in the Texas State Legislature which would prohibit health care service plans, non-profit hospital service plans, disability insurance policies, and self-insured employer welfare benefit plans from discriminating against physicians based upon whether they hold D.O. or M.D. degrees, or whether their postgraduate training is AOA or AMA approved.

CARRIED

RESOLUTION NO. 6 PERTAINING TO OSTEOPATHIC HOSPITALS: The House of Delegates goes on record as supporting protective language in any selective contracting law that may be considered by the Texas State Legislature which would allow a mutual insurance company which had merged or consolidated with a hospital service association to terminate its contract with a hospital, based upon such hospital's charges in relation to the charges of other hospitals operating in the same geographical area, where such hospital is the ONLY osteopathic hospital operating in a county in this State.

CARRIED

RESOLUTION NO. 7 PERTAINING TO LEGISLATIVE OMT: The House of Delegates goes on record as supporting the concept of providing some type of organized program whereby Texas osteopathic physicians will be available during each Texas Legislative session to provide a "hands on experience" in the context of the osteopathic philosophy in the practice of medicine.

CARRIED

RESOLUTION NO. 8 PERTAINING TO PURSUING A CHANGE IN TEXAS LICENSURE REQUIREMENTS FOR D.O.S WHEREBY APPLICANTS WOULD ALSO HAVE TO PASS AN EXAM IN OSTEOPATHIC THEORY AND PRACTICE:

WITHDRAWN

RESOLUTION NO. 9 PERTAINING TO TORT REFORM: The House of Delegates goes on record as supporting the concept of establishing a new system for compensating victims of medical negligence while reducing the incidence of substandard care through a fault-based administrative system, under the jurisdiction of strengthened state medical boards or new state agencies which would totally replace the existing court/jury system.

CARRIED

RESOLUTION NO. 10 PERTAINING TO TAX INCENTIVES FOR LONG TERM CARE COVERAGE: The House of Delegates goes on record as expressing concern over the financial burden facing millions of older Americans lacking insurance protection for long term care, and supports the concept of giving tax breaks to insurance companies that offer such policies, and to consumers who buy them.

CARRIED

RESOLUTION NO. 11 PERTAINING TO MEDICAL STAFF BYLAWS: The House of Delegates goes on record as opposing unilateral changing of hospital medical staff bylaws or any attempt to destroy medical staff self-governance.

CARRIED

RESOLUTION NO. 12 PERTAINING TO MEDICAID OMT RECOUPMENT: The House of Delegates goes on record as supporting legal action against the Texas Department of Human Services to recoup the monies owed to Texas D.O.s who have received less than their legitimate fees for OMT provided to Texas Medicaid recipients, and instructs the TOMA Executive Director to defend and protect the integrity of OMT by whatever legal means necessary as a viable treatment modality that is readily available to Texas Medicaid recipients.

CARRIED

TMA House of Delegates

RESOLUTION NO. 13 PERTAINING TO TOMA-TMA INSURANCE LIAISON: The House of Delegates goes on record calling for "formal" liaison between the TOMA and the TMA when dealing with third-party payors over health care issues that impact on all practicing Texas physicians.

CARRIED

RESOLUTION NO. 14 PERTAINING TO HOSPITAL PRIVILEGES AND AOA BOARD CERTIFICATION: The House of Delegates goes on record as supporting legislation in the Texas State Legislature that would consider AOA or AMA board eligibility or certification acceptable to meet any board certification requirement in a Texas licensed health care facility.

CARRIED

RESOLUTION NO. 15 PERTAINING TO OSTEOPATHIC PALPATORY DIAGNOSIS: The House of Delegates goes on record as opposing the use of the term "acute" in the context of some specific period of time, and supports the proposition that "acute" and "chronic" musculoskeletal problems be defined on the basis of osteopathic palpatory diagnostic findings, and opposes and seeks to change the policy of third-party payors to restrict OMT reimbursement to only "acute" musculoskeletal problems.

CARRIED

RESOLUTION NO. 16 PERTAINING TO THE PHARMACEUTICAL INDUSTRY:

WITHDRAWN

RESOLUTION NO. 17 PERTAINING TO MEDICARE DISCHARGE PLANNING HOME CARE: The House of Delegates goes on record as calling for reforms in the Medicare program that would mandate discharge planning from "skilled" nursing facilities, and additionally calls for reforms in "Primary Home Care" program whereby a waiver can be obtained for certified disabled Medicare patients that would prevent them from losing their eligibility automatically when transferred from hospitals to "skilled" nursing facilities.

CARRIED

RESOLUTION NO. 18 PERTAINING TO GENERIC SUBSTITUTION: The House of Delegates goes on record as opposing generic substitution for brand name products with type "B" drug products and supports only generic substitution for brand name products with "generically equivalent" (type "A") drug products in Texas, with prior physician approval only.

CARRIED

RESOLUTION NO. 19 PERTAINING TO TOMA POLICY STATEMENTS: The House of Delegates goes on record as supporting the concept that policy statements be printed in their entirety, when adopted, as a standard feature in the TOMA Annual Directory, and that the policy statements relating to health care, health planning and health delivery be reviewed by the TOMA House of Delegates every five years for affirmation, revision or deletion.

CARRIED

RESOLUTION NO. 20 PERTAINING TO DISTRICT VI SERVING AS THE HOST CITY FOR THE 1988 CONVENTION: The House of Delegates goes on record expressing their sincere appreciation to District VI for serving as the host city.

CARRIED

RESOLUTION NO. 21 PERTAINING TO SUPPORTING THE USE OF THE AOA AND AMA NATIONAL BOARD CERTIFICATE AS AN ALTERNATIVE TO FLEX FOR LICENSURE AS A PHYSICIAN IN TEXAS:

WITHDRAWN

New officers elected by the House are listed elsewhere in this issue, along with department and committee appointments of President M. Lee Shriner, D.O.

The House of Delegates observed a minute of silence for the following members, family and friends who died during the past year: Robert H. Spell, D.O., Colonel D. Brashier, D.O., Alice Peterman Peckham MacBain, Donald L. Eakin, D.O., E. W. Cain, D.O., Edward R. Mayer, Jr., D.O., Mickie G. Holcomb, D.O., William E. Button, D.O., Jason Kirk Liverman, V. A. Kelley, D.O., Richard W. Hall, D.O., Martha V. Winkler, D.O., and Mrs. Andraea M. Norrid.

The following physicians were recognized for their service in the TOMA House of Delegates:

- 5 YEARS: Bryce D. Beyer, Robert J. Breckenridge, Linus J. Miller, I. Philip Reese, Arthur J. Speece, III, Rodney M. Wiseman
- 10 YEARS: David L. Bilyea
- 11 YEARS: James G. Matthews, Robert L. Peters
- 12 YEARS: Donald F. Vedral
- 13 YEARS: Richard M. Hall
- 14 YEARS: M. Lee Shriner
- 15 YEARS: Mary M. Burnett
- 16 YEARS: Jerome L. Armbruster, Robert G. Maul, David F. Norris, Bill H. Puryear
- 17 YEARS: Arthur S. Wiley
- 18 YEARS: John J. Cegelski, Jr., Selden E. Smith
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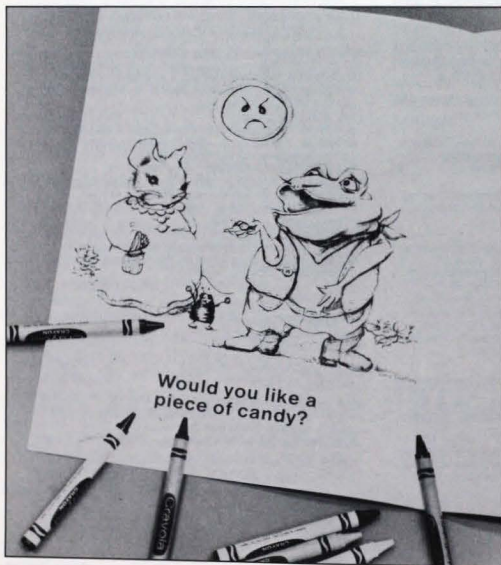
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Little Mice Send Big Message

ATOMA Coloring Book
And Stories
Teach Child Safety



Maxwell Mouse won't get in a car with a stranger. Little Lee Mously doesn't let anyone in the house when his mother isn't home, and Bat Mousterson's family has a secret code word. These characters and others have important messages to tell children in *Smart Kids*, *Safe Kids* — *Aware Not Afraid*, a coloring book and stories developed by the Auxiliary to the Texas Osteopathic Medical Association.

Nationwide, 2.2 million children were reported as abused or neglected in 1986. At the close of 1987, more than half a million children were missing from their custodial families.

In light of these alarming statistics, ATOMA has developed a 16-page coloring book and six related stories to assist parents in teaching their children basic personal safety precautions to use in everyday settings. The coloring book and stories, illustrated and written by auxiliary member Chris Schellin of Fort Worth, are designed to teach children how to react in potentially dangerous situations through the use of charming animal characters to which small children easily relate. They serve as excellent tools to teach children to deal cautiously with strangers and offer a convenient fun vehicle through which parents may introduce serious subjects to their children.

Children from two to 10 years of age will benefit from the coloring book. Whereas a younger child may simply color the pictures while his parent reads the stories to him, an older child can color, read the stories himself and role play with his parents.

The coloring books and stories are available to groups and individuals associated with the osteopathic profession for distribution to the general public or various organizations such as schools or police departments. Local auxiliaries, hospital guilds and public relations departments, and individual physicians and clinics are all encouraged to order the coloring book and stories, which would make excellent National Osteopathic Medicine Week (Sept. 25—Oct. 1) projects.

The coloring book comes in a packet that contains the six supplemental stories, a press release developed by Freda Calabrese (Fort Worth), to be used by local auxiliaries and a sheet of suggestions for use.

To make the project more attractive to teachers and extremely easy for them to use in their classrooms, auxiliary member Mitzi Hulise (Fort Worth), a fourth grade teacher, developed special suggestions for use in the school. In addition, she tied the coloring book to the essential elements, which is extremely important because of the emphasis placed on essential elements in the Texas educational system.

Marilyn Mohney, past president of ATOMA and a pre-school teacher in Houston, tested the coloring book on her young students with glowing reviews.

The idea for the coloring book was that of Chris Brenner (Aledo). As state auxiliary Public Health and Education Chairperson, Chris was looking for a quality project to embrace. "I wanted to develop an educational project that would be of significant benefit to the community and one in which the osteopathic profession could be proud," Chris said.

Chris contacted Carol Szutowicz of the Auxiliary to the Pennsylvania Osteopathic Medical Association who sent her a packet of materials that

had been very successful at a community-wide health fair in Philadelphia. Among those materials was a small pamphlet on child safety called *Smart Kids, Safe Kids* — *Aware Not Afraid*. That theme caught Chris' imagination, and from there she developed the idea of the coloring book and stories.

Chris presented her idea and a mock-up coloring book at the state auxiliary's 1987 mid-year meeting in Fort Worth, and although the group wholeheartedly supported the project, there were no funds for developing it.

Funds for printing 1000 pilot project packets were eventually donated by Health Care of Texas, Inc., the parent company of Fort Worth Osteopathic Medical Center. Chris presented her ideas to Jay Sandelin, board member of Health Care of Texas and chairman of the board of FWOMC, who saw tremendous public service and awareness opportunities for the osteopathic profession. Executive Printing, a subsidiary of Health Care of Texas, printed the pilot project and Westside Medical Associates of Fort Worth donated the funds for folders to hold the various materials.

After presenting the pilot project packet to the board of the state auxiliary at the April TOMA Convention in Galveston, the project was introduced to physicians at their House of Delegates meeting. Physician support was strong and widespread. Alex Guevara, D.O. (Fort Worth) is excited about the possibility of distributing the coloring books from his office. Dr. Guevara has a large Hispanic patient population and has agreed to translate the coloring book and stories into Spanish for future publication.

It looks like Chris Brenner has found her quality project to embrace. "I am extremely excited about the potential of this project," Chris said. "So many people believe in it and so many people have helped with it. Chris Schellin's illustration and writing are absolutely great and I don't know what we would have done without Jay Sandelin's support. This is truly a project the osteopathic profession can be proud of."

Please contact Chris Brenner for order forms at Route 2, Box 77BB, Aledo, Texas, 76008; 817/441-9770. Coloring books are 75 cents each and the set of six stories are 50 cents.

Artist Turns Talents to Child Safety

"Art is simply Xeroxing nature." That's how auxiliary member Chris Schellin sees her sizeable artistic talent, a talent she put to good use by creating the characters in the coloring book, *Smart Kids, Safe Kids—Aware Not Afraid*.

Although Chris Brenner had the idea for the coloring book, she readily admits she has no artistic abilities, so she called on Chris Schellin to not only illustrate the coloring book, but write the six supplemental stories.

"I wanted to do animals because kids relate well to them," the artist said. I chose the little mice because they're loveable and completely non-threatening."

For the antagonists in the coloring book and stories, Chris chose animals that she felt children associate with "bad," such as lizards and moles. "That way it's really easy for kids to distinguish who are the



Chris Schellin

good guys and who are the bad guys."

In Chris' stories, the characters

are found in normal settings and events like playing in the park, practicing baseball or celebrating a holiday. "At these times kids are less prone to know danger might be around," Chris said. "They can land in a potentially dangerous situation before they know it, and they need to know 'What do we do now?'"

Chris has spent much of her life studying art either informally or formally. Chris' mother is an artist and taught her during her childhood. "My mom is one of the best artists I've ever seen. I was fortunate that she taught me from the time I was a little girl."

Later Chris studied at the Art Institute of Chicago. She has sold her works in both Chicago and California and currently has a studio in her home. Chris works mainly in pen and ink, pencil and chalk and accepts jobs by commission.



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ATOMA Installation Combines Dignity with Outrageous Fun

Friday, April 29 was the date for the important ATOMA Installation Luncheon, held at the beautiful Tremont House in the Sam Houston Room. Special guest was Mrs. N. Lewis (Janice) Schoon, AAOA President-elect, who hails from Fraser, Michigan. Mrs. Schoon performed the dignified task of installation of new officers, at which time Mrs. Stephen (Sue) Urban of Fort Worth was named the new ATOMA President, succeeding Mrs. John (Marilyn) Mohnhey of Houston.

Upon accepting the state presidency, Mrs. Urban stated a major priority for the coming year will be to encourage more spouses to become active members in ATOMA in order to foster the vital role Auxiliary members play in providing a network of caring for those in the profession. According to Mrs. Urban, ATOMA's aim is to promote osteopathic medicine, which cannot be done effectively without the support of the physicians' spouses. She challenged those present to make the 1988-89 year the most successful year in terms of membership and activity.

Also installed as officers with Mrs. Urban were Mrs. William (Chuckie) Hoppers of Fort Worth as president-elect; Mrs. Charles (Reva) Ogilvie of Ben Wheeler as vice-president; Mrs. Richard (Bessanne) Anderson of Dallas as treasurer; and Mrs. Clifford (Jeanette) Hammond of Houston as recording secretary.



At the conclusion of the installation ceremonies, ATOMA members were treated to revelries which lightened everyone's spirits. Featured entertainment was a "Flavor of Mardi Gras" show, which included a commentator who discussed the Krewe and Galveston Mardi Gras. The show stopper was the impromptu parade of costumes, ranging from the merely curious to the politely outrageous. Those parading in all their finery are members of Krewe and/or are involved in various aspects of the Galveston Mardi Gras, such as "King Neptune", who is the same person who performs during the Galveston Mardi Gras. Incidentally, the Galveston Mardi Gras, which is held the two weekends before Lent, is actually older than the New Orleans Mardi Gras, however, according to the commentator, it died out for a number of years and has now been resumed in all its splendor. The parade of costumes, led by King Neptune, was absolutely fantastic, according to those present, making for a utterly breath-taking event.

Congratulations to the new ATOMA officers! ■



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What To Look For In Medical Malpractice Insurance

By Eli P. Bernzweig, J.D.

Although the malpractice problem significantly affects many facets of the health care delivery system, physicians understandably tend to be more directly concerned about their ability to obtain adequate malpractice insurance at costs they can afford. Osteopathic physicians who take a realistic view of their liability exposure should be wary of insurance bargains. Price is certainly a legitimate consideration, but it should never be the sole factor in deciding how much, what type, or from whom to buy such coverage.

The prudent practitioner will look for malpractice protection that will give peace of mind by guaranteeing against financial ruin. In practical terms that means a policy with the highest coverage limits the doctor can afford. There are no two ways about it—relying on a malpractice policy with low coverage is like driving a car on tread-bare tires. Comes a blowout, the thrifty physician will wish he had economized elsewhere.

The risk of being underinsured confronts every practicing physician whose coverage isn't enough to pay the top-dollar prices that jurors are putting on personal injuries today. Still, how much insurance should a doctor carry? Most insurance experts believe that the individual practitioner should buy enough insurance to cover the top damages a court might award for a patient's death or total disability in his particular locality.

Obviously, there will be a range of reasonable coverages for different specialties and different geographic areas. In general, however, an osteopathic physician in a non-surgical specialty who has a policy affording coverage of \$200,000/\$600,000 is not likely to be overinsured if present malpractice awards trends continue. The principal exception would be for physicians practicing in rural areas where verdicts traditionally have been lower than the national average.

Although it's natural to be concerned about cost, most insurance consultants emphasize that a doctor should be more concerned about the terms of the policy and the reliability of the underwriter. "Buy the best and hang the cost" they say. But, how can you judge whether you're getting the best?

In the past decade professional liability insurers have been moving toward a more nearly standard insurance contract. That's why the vast majority of medical professional liability policies today are "claims-made" policies, with only minor variations in coverage and policy language from one company's policy to another's.

Don't subordinate coverage to cost, but do compare rates on the type of coverage you need. If an insurer offers a price substantially lower than a comparable policy offered by another insurer, the so-called "savings" are probably coming from cost-cuts in policyholder service, such as high caliber claims handling. Bear in mind that your need for protection is paramount.

When it comes to reliability of the underwriter, satisfy yourself that the insurer you are considering has enough financial strength to stay around for a long while. Look for the item on the insurer's balance sheet that is called policyholder's surplus. That's the amount available to meet claims and other obligations on behalf of policyholders.

Finally, if a carrier offers an opportunity to participate in its profitability, gained through less-than-expected claims frequency and/or severity or other loss control measures, consider that an additional incentive to place your coverage with that insurer.

(Editor's Note: *Universal Liability*™, the malpractice insurance program sponsored and endorsed by TOMA, offers coverage up to \$1 million per medical incident/\$1 million annual aggregate. Policyholders also share financially in the program's results. The policy-issuing carrier, Security Insurance Company of Hartford, has a surplus of over \$90 million.) ■

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Updated OMT Recommendations From TOMA

Blue Cross-Blue Shield of Texas, the Medicare intermediary, has supplied updated April 1, 1988, reimbursement figures for the 10 distinctive OMT codes.

The OMT procedure codes, MO702 through MO730, are reimbursed according to statewide fees, and not according to profile.

Therefore, Maximum Allowable Actual Charges (MAAC's) do not apply to statewide fees. The allowable charges are applicable to both Medicare participating and non-participating physicians.

CODES FOR OSTEOPATHIC MANIPULATIVE THERAPY (OMT)

Code	Description	Medicare Allowable
MO702	Brief—OMT performed in office or location other than inpatient hospital; includes up to two body regions; physician administered.	\$ 36.90
MO704	Limited—OMT performed in office or location other than inpatient hospital; includes up to four body regions; physician administered.	\$ 73.80
MO706	Intermediate—OMT performed in office or location other than inpatient hospital; includes up to six body regions; physician administered.	\$110.70
MO708	Extended—OMT performed in office or location other than inpatient hospital; includes up to eight body regions; physician administered.	\$147.60
MO710	Comprehensive—OMT performed in office or location other than inpatient hospital; includes up to ten body regions; physician administered.	\$184.50
MO722	Brief inpatient hospital OMT; includes up to two body regions; physician administered.	\$ 36.90
MO724	Limited inpatient hospital OMT; includes up to four body regions; physician administered.	\$ 73.80
MO726	Intermediate inpatient hospital OMT; includes up to six body regions; physician administered.	\$110.70
MO728	Extended inpatient hospital OMT; includes up to eight body regions; physician administered.	\$147.60
MO730	Comprehensive inpatient hospital OMT; includes up to ten body regions; physician administered.	\$184.50

All osteopathic physicians should select the appropriate code based on the number of body regions treated, making specific reference to codes MO702-MO710 and MO722-MO730.

The physician's chart should reflect the osteopathic findings for the body regions treated.

Physical therapy modalities used in conjunction with OMT should be listed separately.

OSTEOPATHIC DIAGNOSIS AND PROCEDURE CODES

Osteopathic Structural Diagnosis includes: Somatic Dysfunction (by region).

1. Head Region
2. Cervical Region
3. Thoracic Region
4. Lumbar Region
5. Sacral Region
6. Pelvic Region
7. Lower Extremities
8. Upper Extremities
9. Rib Cage
10. Abdomen and Other

REIMBURSEMENT FOR OSTEOPATHIC MANIPULATIVE THERAPY

Reimbursement for Osteopathic Manipulative Therapy (OMT) in Texas is based on a relative value scale.

Brief	1.0
Limited	2.0
Intermediate	3.0
Extended	4.0
Comprehensive	5.0

It should be anticipated that patients will be billed for the initial office visit, in addition to any modalities employed, and separate charges will be billed for Osteopathic Manipulative Therapy (OMT) when this method is appropriately indicated by the osteopathic diagnosis, codes MO702-MO710 and MO722-MO730, and properly documented on the patient's chart.

In subsequent office visits for the same complaint, with only a palpatory physical examination prior to OMT, there would normally be a charge only for OMT and any modality employed. However, if a physical examination takes place in excess of the palpatory component for OMT purposes, then a follow-up office visit charge would be anticipated along with separate charges for OMT and any modalities employed.

The codes and documentation should be used uniformly for all osteopathic physician's private pay patients and third party carriers.

The Texas Osteopathic Medical Association, through its Hospitals and Insurance and Peer Review Committee, will work directly with all fiscal intermediaries in developing utilization parameters, guidelines for reimbursement, as well as work with these carriers in effecting both general oversight and specific peer review

activities. This committee is available to third party carriers and physicians and will make specific recommendations and determinations regarding misuse and abuse of coding for Osteopathic Manipulative Therapy.

Texas osteopathic physicians can obtain copies of the fee list for Medicare OMT procedures upon written request to: Karen Foxall, Medicare Part B, P.O. Box 660156, Dallas, Texas 75266-0156. ■

AOA Modifies CME Requirements

The AOA reports that members of the AOA Board of Trustees, at their March meeting, approved changes in continuing medical education (CME) requirements. The changes are tentatively scheduled to take effect on January 1, 1989, the beginning of the next three-year CME period.

The changes requires board certified and board eligible physicians to earn a minimum of 50 credit hours in their primary specialty during each three-year cycle. Certifying boards may also set limits greater than 50 hours. The credits may be earned in either Category 1 or Category 2, but failure to earn the minimum hours will result in loss of certification or board eligibility.

Practicing AOA life members will no longer be exempt

from the CME program, however, life members who only practice part time would have their CME requirements prorated. This would be accomplished by notifying, in writing, the AOA's Committee on Continuing Medical Education and specifying the amount of hours practiced.

Additionally, a recommendation was approved to simplify the AOA's system of recording CME credits, whereby the number of subcategories will be reduced from 11 to four. Category 1-A and Category 2-A credits will be given for formal educational programs of recognized osteopathic and allopathic sponsors, respectively, while all other CME credits will be awarded in Category 1-B and Category 2-B. ■

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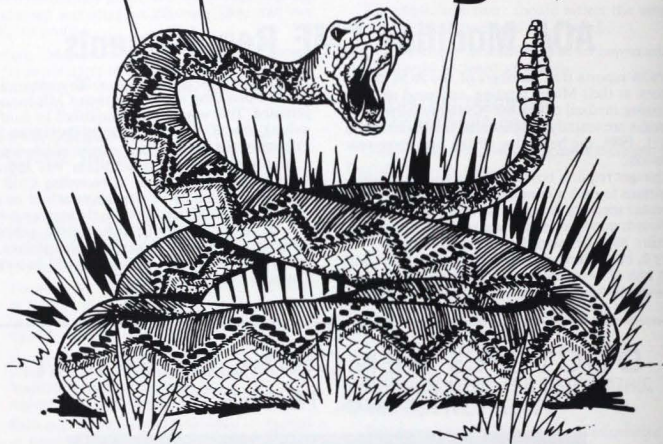
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TOMA Membership Survey Responses Needed

Editor's note: The following membership survey was given to TOMA members attending the 89th Annual TOMA Convention and Scientific Seminar in Galveston. If you have not yet completed the survey, please do so and send to the TOMA State Headquarters. For those not attending the convention, we ask that you complete this form, tear out and send at your earliest convenience.

We are attempting to assess TOMA in as many aspects as possible, and cannot do an adequate job without your input. Results generated from the survey will be published in an upcoming issue at the *Texas DO*.

Thanks for your cooperation.

1. Which of the following TOMA services do you participate in?

☐ Major Medical Insurance
☐ Disability Insurance
☐ Auto Leasing
☐ VISA/MC

☐ Collection Agency
☐ Med-Search
☐ Malpractice Insurance
☐ Physician Placement Service

2. What other membership services should be offered?

3. Are you on a TOMA Committee or Board? ☐ Yes ☐ No

If not, on which committee(s) would you be willing to serve?

4. Do you read the "Texas DO" magazine regularly? ☐ Yes ☐ No

How can it be improved?

5. Please rank these major issues facing the profession from 1 to 9 (1 being most important, 9 as least)

☐ Tort Reform
☐ Hospital Privilege Discrimination
☐ Physician Shortage/Distribution
☐ Post Graduate Education
☐ Medicare/caid Reimbursement Issues

☐ Peer Review Organizations
☐ Malpractice Rates
☐ Mandatory CME
☐ Intrusion into Practice
By Other Providers (P.A.s, R.N.s)

Other _____

6. Do you know any state for federal legislators personally? ☐ Yes ☐ No

If yes, please list names

7. Do you contribute to TOPAC? ☐ Yes ☐ No

If no, why not?

8. Do you attend the TOMA Annual Convention? ☐ Yes ☐ No

If no, why not?

9. Please rank convention site preferences: (beginning with 1 as highest)

_____ Amarillo
_____ Austin
_____ Corpus Christi
_____ El Paso
_____ Galveston
_____ Houston

_____ Lubbock
_____ Metroplex
_____ San Antonio
_____ The Valley
_____ Other _____

10. Would you favor the convention being held in the same city, at the same hotel every year?
_____ Yes _____ No

11. Do you attend the TOMA Mid-Year Meeting and Legislative Seminar? (formerly the Public Health Seminar)
_____ Yes _____ No

If no, why not?

12. Would you or your staff attend half-day mini-seminars at the TOMA Office on topics such as:

Flexible Sigmoidoscopy	_____ Yes	_____ No
Medicaid Reimbursement	_____ Yes	_____ No
Workman's Compensation	_____ Yes	_____ No
Medicare Reimbursement	_____ Yes	_____ No
Weight Control and Nutrition	_____ Yes	_____ No
Office Management	_____ Yes	_____ No
Controlled Substance Regulations	_____ Yes	_____ No
Stress Management	_____ Yes	_____ No
Malpractice Prevention	_____ Yes	_____ No
Other _____		

13. Do you attend District meetings? _____ Yes _____ No
District Number _____
If no, why not?

14. Do you feel your dues are a good investment? _____ Yes _____ No
If no, why not?

15. Does your spouse belong to the Auxiliary? _____ Yes _____ No _____ N/A
If no, why not?

16. What percentage of your practice do you use OMT?

_____ 0	_____ 50
_____ 10	_____ 75
_____ 25	_____ 100
_____ 50	

17. Do you take new Medicare patients? _____ Yes _____ No

18. Do you take new Medicaid patients? _____ Yes _____ No

19. Do you sometimes use locum tenens for replacement help? _____ Yes _____ No

20. Are you willing to work as a locum tenens from time to time? _____ Yes _____ No

21. Name _____ Date _____

Return to TOMA, 226 Bailey Avenue, Fort Worth, Texas 76107.

Texas ACGP Update

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

The Texas ACGP Board would like to thank our membership for the excellent turnout for breakfast during the TOMA convention in Galveston on April 29, 1988.

The handout distributed at the breakfast with the statewide OMT Medicare fees generated a lot of comments. In answer to the most frequently asked question—the Medicare statewide fees for OMT are not subject to MAAC's.

Since the majority of OMT procedures are performed by Texas D.O.-G.P.s, it will be up to us to carry the ball on OMT reimbursement problems in the state. We should not depend on other Texas D.O.s who are not G.P.s and who do not utilize OMT procedures, to pursue OMT reimbursement problems with the same zeal and determination as we do.

On the lighter side, Dr. Joe Love once again had the honor of blowing out the candle on the birthday cake commemorating the 35th birthday of our state society.

The PACER meeting, which was also held on April 29, 1988, generated a lot of lively debate on issues confronting Texas D.O.-G.P.s at this time, as well as in the foreseeable future. The past presidents of the Texas ACGP do a fine job as our long range planning committee.

One of the topics that was considered extremely important to the PACERS was the generic drug product substitution in Texas. Therefore, at this time I would like to discuss the substitution of generic medications for brand name medications in Texas, specifically, how the prescribing physician and the patient may come out holding the "short end of the stick." The Texas Pharmacy Act (Article 4542a-1) covers drug substitution and several pertinent sections will be reviewed.

A pharmacist selects a "generically equivalent" drug which is defined under Section 40.(c)-(1). "Generically equivalent" means a drug product that is "pharmaceutically equivalent (chemically equivalent)" and "therapeutically equivalent" to the drug prescribed. Section 40.(j) states "there shall be no liability on the prescriber for an act or omission by a pharmacist in selecting, preparation, or dispensing a drug product pursuant to this section."

The FDA has two basic categories into which multi-source drugs (generic) have been placed — type "A" and type "B."

"A" codes are assigned to drug products that are considered to be "therapeutically equivalent" to other "phar-

maceutically equivalent" products. "B" codes are assigned to drug products that are considered at this time not to be "therapeutically equivalent" to other "pharmaceutically equivalent" products.

Therefore, "B" coded drug products are not covered under Article 4542 a-1 and liability does exist for prescribing "non-therapeutic" multi-source drug products. There shall be no liability on the prescriber only when he or she prescribes "A" coded generic drug products.

Consider the following hypothetical situation: A Texas physician writes for a generic drug product or signs on the "Product Selection Permitted" line on the prescription blank. The physician is not aware that a type "A" coded drug product is not available. The type "B" coded drug product is dispensed, and the patient fails to obtain therapeutic results from the medication. The physician prescriber, not the pharmacist, is held liable.

How can a physician readily determine whether a generic drug product is a type "A" or type "B" coded drug product? A simple solution to this problem exists in the Texas Vendor Drug Maximum Allowable Actual Cost (MAAC) Program with its approved formulary. Only type "A" coded drug products (multi-source drugs) are listed on this formulary, not type "B."

The physician can ask the pharmacist if there is a generic substitute for the brand name drug product and whether or not it is a MAAC drug. If the pharmacist's answer is no, then the physician should not give a verbal o.k. to dispense a "B" coded drug product. If the physician does give a verbal o.k., the liability is then transferred from the pharmacist to the physician in the event of an adverse outcome.

To further confuse the situation, the Texas Medicaid Program will pay for type "B" coded drug products if the prescribing physician gives a written or verbal o.k. for this transaction to the pharmacist. Physician override authority is not just limited to brand name products.

It would be extremely helpful if multi-source generic drug products had an "A" or "B" code on the bottle; however, this is not a requirement at this time. Physicians and pharmacists in Texas must exercise due care when generic medications are substituted for brand name medications. The patient should always receive "therapeutically equivalent" drug products.

In closing, congratulations to Dr. Robert L. Peters, Jr. for his selection as the Texas ACGP General Practitioner of the Year for 1988. ■

Dr. Peters Recipient of "GP of the Year" Award

Robert L. Peters, Jr., D.O., of Round Rock, received quite an honor during President's Night, Friday, April 29, upon his selection as "General Practitioner of the Year."

The award is presented annually by the Texas Society of the American College of General Practitioners in Osteopathic Medicine and Surgery (ACGP) to an osteopathic physician who has provided exemplary service to the profession. The award was presented by Constance I. Jenkins, D.O., of Fort Worth, current president of the Texas Society ACGP.

Dr. Peters is a 1958 graduate of Kirksville College of Osteopathic Medicine and served an internship at Houston Community Hospital. He practiced four years in Pasadena and nine years in Calvert before relocating to Round Rock in 1972, where he maintains a general practice. Dr. Peters still practices one day a week in Calvert. In 1986, he was named "Outstanding Citizen of the Year" in Round Rock, due to his numerous community and civic activities.



Robert L. Peters, Jr., D.O.

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ATOMA District News

By Claudette M. Miller
District V ATOMA President



(l to r) Dr. Alan Kalich, Dr. Linus Miller and Claudette Miller

District V TOMA and ATOMA joined forces to submit an entry in the Mesquite Rodeo Parade, held April 9, 1988. The theme of the float was "Health for the Whole Family."

Balloons with the AOA insignia were handed out to the spectators, as well as candy, and osteopathic coloring books featuring Ostie the Owl.

The parade was viewed by an estimated 35-40,000 people and our float received several rounds of applause!

Special thanks are extended to the following individuals who donated their time and efforts into making this project such a success: Drs. John and Mary Burnett; Dr. Conrad Speece; Dr. Allan Kalich; Dr. Sibyl Brinkman; Dr. Brad Eames; Dr. Bob Collop; Mrs. Betty Collop; Dr. Barry Burke; Dr. Linus Miller; and Mr. and Mrs. Claude May. ■

Lubbock Group Presents Donation to Medical Center

Fort Worth Osteopathic Medical Center (FWOMC) recently received two \$20,000 education grants for interns donated by the Lubbock Osteopathic Hospital, Inc., Board of Trustees.

Robert G. Maul, D.O., project chairman for the board, presented a \$40,000 check to FWOMC Executive Vice President John P. Hawkins, at the 89th Annual Texas Osteopathic Medical Association Convention in Galveston.

Dr. Maul said the Lubbock Osteopathic Hospital, Inc., board acts as a philanthropic group that promotes the fundamentals and practice of osteopathic medicine.

Osteopathic medicine emphasizes a holistic approach to health care — consideration of the whole person in providing medical treatment.

FWOMC, a 265-bed acute-care facility, is Texas' largest osteopathic hospital. In 1987 FWOMC received a \$20,000 donation from the Lubbock group to fund an internship.

Hawkins said, "The generosity of Dr. Maul and his associates obviously will help our interns fund their training. But, in the long run, this donation will benefit the entire community as our doctors provide health care to a growing population."

The Lubbock philanthropists previously funded education loans to other facilities totaling \$778,655, benefiting 109 students.

Dr. Paul said the board makes donations with coordination assistance provided by Opportunity Plan, Inc., of Canyon.

Loans provided by the osteopathic board include: 83 loans totaling \$481,356 to medical students at Texas



(l to r) Lubbock physician Robert G. Maul, D.O., presents an education grant for medical interns to John P. Hawkins, executive vice president of Fort Worth Osteopathic Medical Center.

College of Osteopathic Medicine, Fort Worth; 16 loans totaling \$208,132 to medical students at Kirksville College of Osteopathic Medicine, Kirksville, Missouri; six loans totaling \$60,827 to medical students at the University of Health Sciences, College of Osteopathic Medicine, Kansas City, Missouri; two loans totaling \$10,312 to nursing students at Amarillo College; an \$8,663 loan to a medical student at Texas Tech University Health Sciences Center; and a \$9,365 loan to a student at Texas Women's University in Denton. ■

Pictorial View of TOMA's 89th Annual Convention









NEWSBRIEFS

FDA RELEASES CONSUMER BROCHURE ON DRUG DEVELOPMENT

The AOA reports that the Food and Drug Administration (FDA) has released a special report entitled, From test tube to patient: New drug development in the United States. The 60-page report examines the Federal Food, Drug, and Cosmetic Act of 1937, the nation's cornerstone drug law that assures that new drugs will be safe and effective. Additionally, the brochure examines how the FDA is working to "fast-track" the development of experimental drugs for specific diseases, such as AIDS.

For a copy of the report, write: FDA (HFI-40), 5600 Fishers Lane, Rockville, Maryland 20857.

MASSACHUSETTS LEGISLATURE PASSES UNIVERSAL HEALTH CARE BILL

By an extremely narrow margin, the Massachusetts Legislature has passed a first-ever health care bill which guarantees health insurance to all state residents by the year 1992. Intense opposition from such groups as businesses, insurers and labor unions resulted in a close vote, 77-75 in the House and 18-15 in the Senate.

The bill stipulates January 1, 1992 as the deadline for all businesses to either offer health insurance to their employees or face a state-imposed surcharge in order to provide insurance for the uninsured. Additionally, the bill calls for tax breaks and exemptions for smaller businesses and state-sponsored pooled insurance. Massachusetts Governor Michael Dukakis, also a presidential hopeful, has been referring to this bill as a possible national model.

CHAMPUS CLARIFIES DRG BILLING RULES

CHAMPUS, the Civilian Health and Medical Program of the Uniformed Services, reminds institutional providers that hospitals and other institutions subject to the CHAMPUS-based DRG payment system may not bill CHAMPUS patients for the difference between the DRG amount and the hospital's billed amount.

The Consolidated Omnibus Budget Reconciliation Act, as amended by the Tax Reform Act of 1986, and CHAMPUS regulations require that hospitals accept the DRG amount as the full fee for care. The government will pay its share of the DRG amount, while the patient must pay his or her cost-share. The CHAMPUS claims processor calculates the cost-share and lists it on the explanation of benefits (EOB).

Hospitals may bill the patient for only non-covered services that aren't related to the treatment regimen, such as TV charges or telephone.

When a patient has other health insurance (OHI), CHAMPUS will pay only up to the difference between the DRG amount and the OHI payment. If the OHI payment exceeds the DRG amount, CHAMPUS will make no payment. The hospital may not bill the patient for the difference between the billed amount and the DRG amount, nor for any patient cost-share amounts, since these amounts would be included in the payment by the other health plan.

Providers who have questions about CHAMPUS DRG payments should contact the claims processor for their area.

Eighth Annual General Practice Update

"A Summer Symposium
for the Family Practitioner"

Friday Evening — Sunday
June 24-26, 1988

PRESENTED BY:

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Medicine's Office of CME

SUPPORTED BY:

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LOCATION:

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TOPICS:

*Newer Trends in Sexually
Transmitted Diseases*
Francis X. Blais, D.O.

*Interpretation and Management of
Abnormal Pap Smears*
John M. Chapman, D.O.

*Diagnosis and Current Treatment of
Congestive Heart Failure*
Russell G. Fisher, D.O.

Pediatric Infectious Diseases
Bruce G. Gilfillan, D.O.

*Overview and Long
Term Care in Geriatrics*
C.T. Maxwell, D.O.

*Update on
Cerebrovascular Disease*
William E. McIntosh, D.O.

11 Hours, Category 1-A, AOA

CONTACT:

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Texas College of Osteopathic Medicine
817/735-2539

FEES:

Non-TCOM Affil. Physicians . . . \$175
TCOM Affiliated Physicians . . . \$85
Allied Health Professionals . . . \$50
Externs/Interns/Residents . . . \$25

Major changes in State Medicaid And Indigent Care Programs

The Intergovernmental Health Policy Project of The George Washington University recently released a report entitled, *Major Changes in State Medicaid and Indigent Care Programs*. The report addresses state Medicaid actions during the period of January-August 1987. The major actions are highlighted below.

Utilization Review — A few states which enacted second surgical opinion programs are either removing or modifying those requirements. These programs require second opinions for certain elective surgical procedures. Arkansas, South Carolina, and Montana added requirements for specific services while Nebraska removed such requirements for a whole range of services.

AIDS — Illinois, California and Wisconsin have provided financial incentives for hospitals who treat AIDS patients. Home and community-based services are being developed as an alternative to institutionalized care in New Jersey, New Mexico, California, Hawaii, Maryland, Ohio and Wisconsin. All states except Alaska, Wyoming, Alabama, Arkansas, Colorado, Florida, Louisiana, and Texas help pay for the drug AZT. Additionally, the Federal government created a \$30 million emergency fund to pay for the drug when patients do not qualify for Medicaid, have no private insurance or live in a state in which drug costs are not covered.

Financing Schemes — Tennessee folds donated funds from private hospitals into the state matching fund. The Health Care Financing Administration agreed to the plan providing that only nonprofit hospitals contribute and the state retains control over the funds. North Carolina, Alabama, Montana and Idaho have also established similar funds.

State Health Insurance Plans — Massachusetts, Maine, Washington and Wisconsin are all debating insurance plans that would cover uninsured residents. While the financing methods for these states' plans differ, they have the following points in common:

1. a desire to cover individuals with private plans;
2. subsidize low-income families so they may purchase insurance and,
3. encourage the use of preventive services.

Changes in Program Structure or Funding — Florida will distribute funds to hospitals providing indigent care. The state's counties will be required to develop plans for primary care programs to serve Medicaid recipients and

other low-income residents. In Nevada, hospitals with more than 100 beds must provide a minimum level of indigent care representing 0.6 percent of net revenue for the preceding fiscal year. If a hospital does not meet its minimum obligation, it can be assessed the difference.

Limiting Liability of Providers Treating the Indigent — Maryland, Georgia, Virginia and South Carolina have exempted physicians rendering health care without expectations of payment from professional liability, except in cases of gross negligence or willful misconduct. These actions are expected to reduce the need for medical malpractice insurance for some obstetricians and emergency room physicians.

Risk Pools for the Medically Uninsurable — Illinois, Maine, New Mexico, Oregon and Washington created risk pools for the uninsurable, bringing the total number of states with such programs to fifteen. In case of losses, most states will assess the pool's member insurance companies. Illinois, however, will fund any deficits by state general revenues.

Nursing Home Reimbursement — States purchasing nursing home care continue to incorporate cost controls and, in some instances, case-mix payment. Many of the cost control plans are tied to quality control. North Dakota enacted provisions to reduce nursing home rates by up to 20 percent if quality of care violations for Medicaid patients continue for 20 days after official notification of substandard care. Colorado reduced maximum allowable costs for administration, property, and room and board from the 90th percentile to the 85th. Massachusetts, Michigan, Minnesota, Tennessee, and Washington also took action on this issue.

If you would like more detailed information on any of these programs, please feel free to call the AOA office on their toll-free number 800/962-9008. ■

DR. HULL RECEIVES CERTIFICATION IN ORTHOPEDIC SURGERY

Christopher K. Hull, D.O., of Fort Worth, has been awarded by the Board of Trustees of the AOA of approval by the American Osteopathic Board of Orthopedic Surgery of certification in orthopedic surgery. This represents a commendable achievement as it takes a tremendous amount of time and effort to attain certification.

A TOMA member since 1979, Dr. Hull is a 1979 TCOM graduate. He interned at Mount Clemens General Hospital in Michigan and served a four year residency in orthopedics, also at Mount Clemens.

Our congratulations to Dr. Hull on this achievement.

TCOM ALUMNI ASSOCIATION ANNOUNCES 1988-89 OFFICERS AND DIRECTORS

The Alumni Association of Texas College of Osteopathic Medicine has announced 1988-89 officers and directors. Serving as president is M. McKim Davis, D.O.; president-elect, Richard C. Hochberger, D.O.; Alex Guevara, Jr., D.O., first vice president; and Richard Ben Zemenick, D.O., second vice president. Immediate past president is Glenn M. Calabrese, D.O., and administrative secretary is Mr. Ray Stokes. Directors include Carla Butts Davenport, D.O.; Charles W. Grayson, D.O.; James T. Hawa, D.O.; Edward A. Luke, Jr., D.O.; and H. Thomas Willard, D.O.

FWOMC ELECTS BOARD OFFICERS

Fort Worth Osteopathic Medical Center, Inc. (FWOMC) has elected board officer for 1988. The board is the governing body of FWOMC.

Re-elected to offices on the 13-member board are Jay E. Sandelin, chairman; David M. Beyer, D.O., president of the corporation; Randall L. Kressler, vice president; and W. Scott Wysong, III, secretary/treasurer. During an earlier meeting, Harris F. Pearson, D.O., was re-elected to a three-year term.

In addition to Sandelin, Drs. Beyer and Pearson, Kressler and Wysong, those serving on the FWOH, Inc., Board of Directors are Barclay R. Ryall; Herman F. Stute; The Honorable Gibson D. Lewis; John W. Burnam; Charles T. Maxvill, D.O.; Jay G. Beckwith, D.O.; William M. Jordan, D.O.; and Irwin Schussler, D.O.

DR. ESSELMAN RECOGNIZED BY TOMA BOARD OF TRUSTEES

At the March, 1988 TOMA Board of Trustees meeting, George Esselman, D.O., was presented a plaque by Bill H. Puryear, D.O., TOMA president, honoring his many years of service and dedication to the profession.

The inscription read as follows:

"Presented to George M. Esselman, D.O., for your many years of service in the Physicians Assistance Program of the Texas Osteopathic Medical Association, and your contributions to the improvement of health care in the State of Texas. By TOMA Board of Trustees, March 19, 1988"

We tip our hats to Dr. Esselman for his immeasurable loyalty to the osteopathic profession.

NEW OFFICERS FOR TAO

Election of officers for the Texas Academy of Osteopathy (TAO) took place during the TOMA annual convention in Galveston.

The officers are: David Teitelbaum, D.O., president; David Vick, D.O., vice president; and Catherine Kenney Carlton, D.O., secretary-treasurer.

Our congratulations!

NEW OFFICERS FOR KIRKSVILLE ALUMNI ASSOCIATION

Newly elected officers for the Texas Chapter of the Kirksville Osteopathic Alumni Association are as follows:

Evalyn Kennedy, D.O., of Beeville, president; Ernest Schwaiger, D.O., of Houston, vice president; and Catherine Kenney Carlton, D.O., of Fort Worth, as secretary.

Congratulations from TOMA!

In Memoriam

Henry B. Hardt, Ph.D.

Henry B. Hardt, Ph.D., the first dean of Texas College of Osteopathic Medicine, passed away May 3. He was 90 years of age.

Funeral services were held May 6 at Greenwood Funeral Home, with burial at Greenwood Memorial Park. Dr. Hardt was hired as the "founding dean" at TCOM in 1969, before doors opened to students in 1970. He served in that capacity until his retirement in 1984. He was given the first honorary degree granted by TCOM in 1975 and a TCOM Founders' Medal in 1980.

Dr. Hardt began his tenure at TCOM following a long career at Texas Christian University, where he served as chairman of the chemistry department from 1946 until 1961 and as a faculty member until his retirement at age 70 in 1967. During most of his years at TCU, he was head of the faculty athletic committee and was the school's representative to the Southwest Conference and a representative to the National Collegiate Athletic Association. Dr. Hardt was president of the Texas Board of Examiners in the Basic Sciences from 1949 to 1969.

After that first retirement from TCU, he joined the faculty of Jarvis Christian College in Hawkins, Texas, and retired again one year later. His retirement from TCOM was his third.

The Yancey, Texas, native earned his B.A. and M.A. degrees in chemistry from Southwestern University in Georgetown, Texas, and his Ph.D. in chemistry from Columbia University in New York. He served in the Navy during World War I. His career in education included high school principal and superintendent positions in De Leon, Texas, and faculty positions at Columbia; Westminster College in Fulton, Missouri; Stephen F. Austin State University in Nacogdoches, Texas; and Texas Wesleyan College in Fort Worth.

Dr. Hardt and his wife, Marion Tyson Hardt, were married for 57 years before her death in 1982. Survivors include one son, Dr. David Hardt of Waco; one daughter, Janet Dominey of Fort Worth; and four grandchildren.

The family suggests expressions of sympathy be in the form of contributions to the Southwest Texas Conference United Methodist Church Fund for Peace, Box 28098, San Antonio, 78284, or to the First United Methodist Church in Fort Worth.

TOMA extends its condolences to the family of Dr. Hardt.

Roger D. Hamilton, D.O.

Roger D. Hamilton, D.O., of Granbury, son of TOMA member Robert L. Hamilton, D.O., of Mabank, passed away May 3 at a Granbury hospital. He was 40 years of age. Funeral services were held May 5 at Martin's Funeral Chapel in Granbury.

Dr. Hamilton received a B.S. degree in pharmacy from the University of Texas at Austin in 1971. He received his D.O. degree in 1975 from Texas College of Osteopathic Medicine and interned at Grand Prairie Community Hospital. While at TCOM, Dr. Hamilton served as president of the American Academy of Osteopathy. He had been a TOMA member since 1975.

Dr. Hamilton had been a practicing osteopathic physician in Granbury since 1977 and was past vice president of the medical staff at Hood General Hospital in Granbury. He was also a member of the American Osteopathic Association.

He was very active in the Granbury Optimist Club, coaching soccer for several years and was the instigator of a summer day camp through the Club.

Survivors include his wife, Cynthia; one daughter, Staci; and one son, Brady, all of Granbury. In lieu of usual remembrances, the family has suggested that contributions be made to either the American Cancer Society or the Granbury Optimist Club.

TOMA extends its condolences to the family of Dr. Hamilton.

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FULL AND PART-TIME FAMILY 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. (13)

EXPANDING PHYSICIAN OWNED EMERGENCY GROUP — is seeking board eligible/board certified full-time and part-time primary care physicians. Flexible schedule. Competitive compensation package. Please send C.V. to Henry Underwood, D.O., P.O. Box 260701, Plano, 75026 or call 214/867-5998 or 588-7977 (beeper). (46)

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)

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 medical specialists, including internal medicine, pediatrics, OB/Gyn, and orthopedic surgery. Northeast Community is a full service, state-of-the-art acute care hospital. Northeast offers emergency medicine, ICU/CCU, five surgical suites, CT scanning, MRI, and nuclear medicine. 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)

KNOX — Family practice opportunity available now! Meets National Health Service Corps requirements and Physicians Student Loan Program Repayment Requirement. Solo practice in Texas County of around 6,000 population. Town approximately 1,800 population, good school, golf course, and churches. Rent free, furnished clinic and monthly guarantee for first year. Rural tax supported hospital of 28-beds with one other physician on medical staff to relieve call. First year expected earnings, gross over \$100,000. Call collect 817/658-3535 or send C.V. to D.L. Stout, 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 of clinic. Reasonable schedule with ample vacation time and CME opportunity. 45 miles to city of 80,000 with State University. Compensation negotiable. Phone 915/869-6171. (06)

DALLAS, FORT WORTH, MINERAL WELLS — Opportunities for full or part-time D.O. or M.D. emergency physicians who practice quality emergency medicine. BC/BE encouraged, but not required. Several low and medium volume osteopathic and mixed staff hospitals in North Texas area available. Competitive hourly guarantee with malpractice stipend. Send C.V. to Glenn Calabrese, D.O., OPEM Associates, P.A., 100 N. University Drive, #220, Fort Worth, 76107. 817/332-2313. (21)

EXCELLENT OPPORTUNITY — G.P.s and F.P.s; North Central Texas; 55 miles south of Fort Worth and 30 miles northwest of Waco. Clinic with staff and equipment plus insurance provided. Income guarantee negotiable. Solo or group. Two clinics adjacent to modern, well equipped hospital. Physician retirement plus lure of VA hospitals leave 10,000+ population with one physician. Modern school system with over 1,100 students. Golf, sailing, fishing, hunting, etc. at your doorstep. Conversation will not obligate or cost you anything. Let's Talk...call H. Findley, Hospital Administrator 817/694-3165. (41)

APPLICATIONS BEING SOUGHT — for Assistant or Associate Professor position to teach in a Department of Manipulative Medicine. Prior teaching experience required. Salary negotiable. Please submit C.V. to Jerry L. Dickey, D.O., TCOM, 3516 Camp Bowie, Fort Worth, Texas 76107. TCOM IS AN EQUAL OPPORTUNITY EMPLOYER. (33)

PHYSICIANS NEEDED IMMEDIATELY — full or part-time for busy ambulatory care clinic in beautiful East Texas. Must have own malpractice insurance. Call 409/564-1188 in Nacogdoches for more information. (45)

OPENING IN NORTHWEST HOUSTON — D.O. for immediate care center. Salary or commission. To start immediately, call Dr. Buczek at 713/367-1357. (42)

WANTED—Family/Industrial Physician to join two busy practitioners in Deer Park, Texas. Excellent recreational facilities in nearby Galveston or Houston. No OB. Competitive compensation package. Send C.V. to Don Metz, D.O., 1920 Center, Deer Park, 77536. Call 713/479-5941. (19)

DALLAS/MID-CITIES PHYSICIANS — Full-time or part-time positions available. Five day week. 9:00 a.m. to 6:00 p.m.—no night call—no hospital—small amount of general practice. Physical examinations and physical therapy protocols primary responsibility. Salary minimum of \$67,000/year full-time. Part-time negotiable. Send resume to: P.O. Box 64758, Dallas, 75206. (36)

FORT WORTH — New clinic seeking energetic general practitioner to work full-time and act as medical director. Salary open. Contact Bill Puryear, D.O. or Jim Czewski, D.O. at 817/322-9767. (10)

NEPHROLOGIST—Board certified nephrologist in private practice to support a full-service 265-bed osteopathic medical center located in the Dallas/Fort Worth metroplex. Contact TOMA, Box 11, 226 Bailey Avenue, Fort Worth, 76107. (11)

POSITIONS AVAILABLE—We have unadvertised practice opportunities available for F/P; OB/GYN; Ped; EM; and Urologist. **GUARANTEED INCOMES!** Contact: MRI at 713/359-6171 or 800/323-1434. Write 1110 Kingwood Drive, Suite 200, Kingwood, 77339. (43)

NEEDED — General Family Practice Physician to practice in Comanche—North Central Texas. To join a group practice with two busy general practitioners. City of 4,000, excellent fishing and hunting, good schools. Hospital is willing to provide guaranteed income incentive of \$6,000 a month plus moving expenses. Contact: Paul Livingston, D.O., 105 Valley Forge, Comanche, 76442; phone: 915/356-5211. (48)

FOR SALE — Well established but still growing large general practice, upper Texas gulf coast. Now solo but space and patient load for two. Large modern clinic with x-ray, lab, minor emergency room, etc. Friendly area with abundant coverage; DO and MD hospitals nearby, with OB and surgical privileges if you wish. Financing available. Will retire when new doctor is comfortably acclimated, or immediately. Please send inquiries to TOMA, Box 49, 226 Bailey Avenue, Fort Worth, 76107. (49)

PHYSICIANS WANTED IN TEXAS — Family Practice, General Practice, General Surgery, Internal Medicine, OB/GYN, Orthopedic Surgery; excellent quality of life, first year guarantee, etc. Other opportunities available also. Reply with C/V or call, Armando L. Frezza, Medical Support Services, 8806 Balcones Club Drive, Austin, 78750; 512/331-4164. (09)

POSITIONS DESIRED

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. Henevadi, 1111 N. O'Connor Road, # 121, Irving, 75061. Phone: 214/254-6523. (07)

PHYSICIANS ASSISTANT — former Army PA (CS3) who is currently a first-year student at TCOM. Desires consideration for part-time and summer employment. Over five years of family practice and emergency room experience. Contact: William J. Williams, 345 Hallmark Drive West, Fort Worth, 76134, 817/551-5211. (34)

BOOKKEEPER — Fort Worth area. Experienced in payables, payroll, quarterly and annual tax reports, monthly financial reports. Contact Patti S. Rose, 3716 Winifred Drive, Fort Worth, 76133. 817/294-3831. (22)

Student DOCTOR NEEDS ASSISTANCE — in financing his education. S/D is a freshman student at the University of New England, College of

Osteopathic Medicine. He is proposing a contractual agreement in which he agrees to practice in your area as a municipal or hospital physician for an agreed number of years. In return, your community, (or hospital) would assist him in paying for his medical school tuition and expenses. If interested write TOMA, Box 1, 226 Bailey Avenue, Fort Worth, 76107. (1)

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)

NORTH DALLAS/PARK CITIES — Ideal office space available. Over 1,000 square feet finished out space. Located in Highland Park, near North Central Expressway, it is a perfect location for an osteopathic practice. For further information contact John Hawkins 214/522-9767. (52)

CLINIC FOR SALE — Walk-in Clinic/Family Practice in rapidly growing D/FW Metroplex. Three exam rooms, fully equipped X-ray and lab, established patient load. Room for ex-

pansion. Multiple financial options available for purchase. Contact: TOMA, Box "410", 226 Bailey Avenue, Fort Worth, 76107. (32)

MISCELLANEOUS

BUSINESS LOANS — Reduce taxes by sale/leaseback. Other loans, equipment lease. Buying or selling a practice? Contact: Dr. W. Atchley, 100 S. Washington, Enid, Oklahoma 73701. 405/234-5135. (27)

TRANSCRIPTION — let us do your office transcription, for reasonable rates, pickup and delivery; call Joyce 817/297-4965. (53)

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)

FOR SALE — Defibrillator — Top of Line — Cost \$6,000.00 — Never used. MAKE ME AN OFFER. Contact: Ray Rollins, D.O., 3900 Buckner Blvd., Dallas, Texas 75227. 214/388-4486. (18)

FOR SALE — DT60 Kodak Ektachem Chistry Analyzer DTSC and DTE Modules. 1987 model. \$5,500. Contact: M.J. Barfield 817/447-1208. (39)

FOR SALE — Doctors practice, equipment and clinic in small north Texas town; one hour from Dallas and Fort Worth. Excellent schools and churches. Patient census approximately 35-40 per day; two large nursing homes in town. Lots of good will. Excellent opportunity for a young active physician. Call Dr. Groff 817/686-5463 (residence) or 817/686-2254 (office). (40)

EQUIPMENT FOR SALE — A variety of office equipment such as McManus table (like new), ultrasound equipment, etc. Contact Ted R. Krohn, D.O., 325 Hamilton Building, Wichita Falls, 76301; or call 817/767-6923. (45)

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