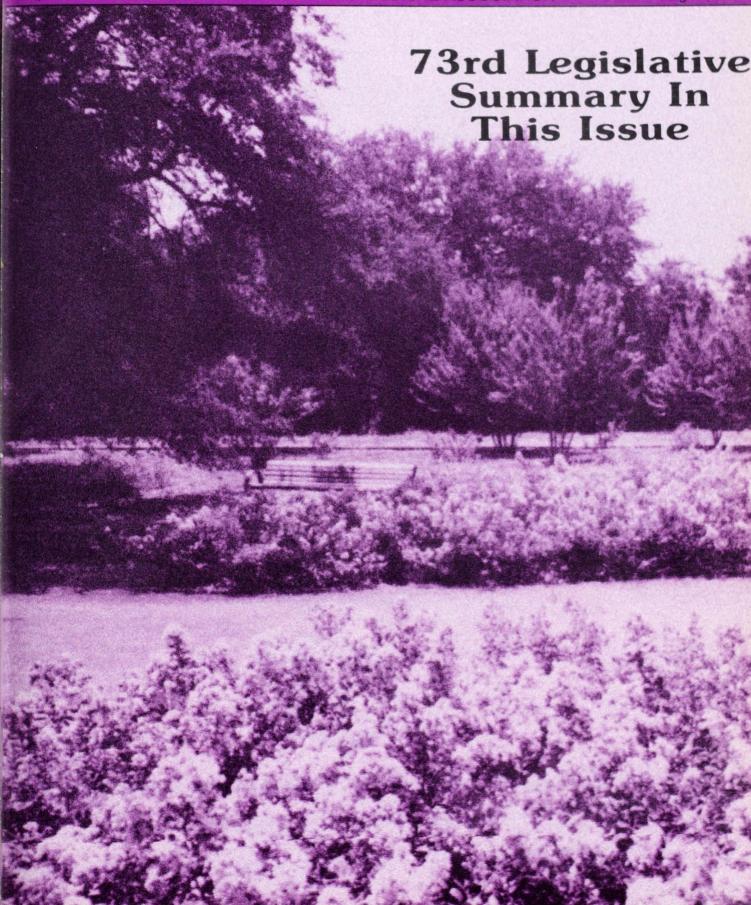
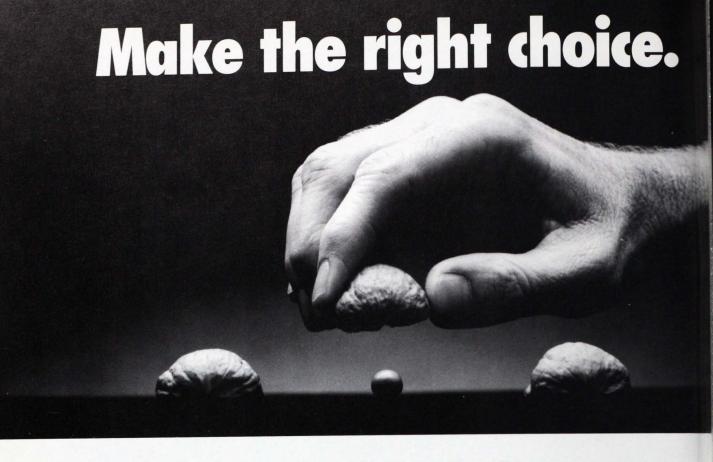
TEXAS DO

XXX, No. 7

TEXAS OSTEOPATHIC MEDICAL ASSOCIATION

August, 1993





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TEXAS DO

TEXAS OSTEOPATHIC MEDICAL ASSOCIATION

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August, 1993

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John Sortore Field Representative

Lydia Kinney Staff Writer

Keri Frugé Executive Assistant/ACGP Secretary

Membership Secretary

Cover photo by Lara M. Anderson, Fort Worth, Texas

Calendar of Events

AUGUST

Hours:

11-15

"Primary Care Update" Alabama Osteopathic Medical

Association

Location: Sandestin Beach Hilton

Destin, Florida 26 Category 1-A

Contact: Diane Pasker, Executive Dir.

Alabama Osteopathic Medical Association P.O. Box 240248

Montgomery, AL 36124-0248

10-12

Florida Osteopathic Medical Association Midyear Seminar

Location: Hyatt Regency Westsho

Tampa, Florida

Hours: 20 Hours Category 1A anticipated plus

Five hours of Risk Man ment and Three hour

HIV/AIDS

Contact: FOMA

2007 Apalachee Parkwa Tallahassee, Florida 323

(904) 878-7364

22-27

"New Advances in Internal Medicine: Clinical Applications"

Location: Hyatt Regency,

Monterey, California

25 Hours Category 1 Hours: 25 Hours AAFP

Contact: Office of Continuing

Medical Education UC Davis Medical Center 2701 Stockton Boulevard Sacramento, California 95817

11-13

OPSC 4th Annual Mid-Year Semi "Who's Minding the Medical Stol

Location: Huntington Beach, Califo 17 Category 1 CME Cr

Osteopathic Physicians Contact: Surgeons of Californ 455 Capitol Mall,

Suite 225

Sacramento, CA 95814

(916) 477-2004, Fax (916) 447-4328

SEPTEMBER

"Intensive Geriatric Review Course"

Location: Hyatt Hotel

Cherry Hill, New Jersey

Sponsors: New Jersey Geriatric **Education Center**

University of Medicine and Dentistry of New Jersey -School of Osteopathic Medicine, Center for Aging Texas College of Osteopathic

Medicine

Institute of Education and

Research in Aging Texas Consortium of Geriatric

Education Centers American College of Osteopathic Internists American College of Osteopathic Family

Physicians

Contact: (609) 346-7141

October 1-3

"Primary Care Update X"

Sponsored by TCOM

Location: Texas College of Osteopa Medicine

3500 Camp Bowie Blvd Fort Worth, Texas 7610

18 CME Hours -Hours:

Category 1-A, AOA

Pam McFadden, Progra Contact: Director

(817) 735-2581

10-14

AOA Annual Convention

Location: Boston, Massachusetts Contact: American Osteopathic

Association

142 E. Ontario Street Chicago, Illinois 60611 (312) 280-5800

1-800-621-1773

Articles in the "Texas DO" that mention the Texas Osteopathic Medical Association's position on state legislation are defined as "legislative advertising," according to Tex Govt Code Ann §305.027. Disclosure of the name and address of the person who contracts with the printer to publish the legislative advertising in the "Texas DO" is required to that law: Terry R. Boucher, Executive Director, TOMA, One Financial Center, 1717 IH 35, Suite 100, Round Rock, Texas 78664-2901.

Dr. John Burnett Honored at TOMA Convention



John H. Burnett, D.O., FACGP, of Dallas, was lauded for his outstanding contributions to the osteopathic profession during TOMA's recent convention in Austin.

During the meeting of the House of Delegates on May 12, then President Jerry Smola, D.O., stated, "You know, as President of the

1A over the past year, it's been my privilege to get a lot of really nice things. But nothing over the can match the satisfaction and the privilege and the or of being able to make the following presentation.

have a plaque that I would like to read to you here, pring John Burnett, and I'd like to present it to John. From the Texas Osteopathic Medical Association. It

Presented to John H. Burnett, D.O.

"In the life of every successful organization are n and women who personify the very essence of t organization — who, by example, unknowingly petuate a spirit of hope. These people, although haps few in number, look beyond themselves when wing the total picture. They accept large amounts responsibility and share the beneficial results hout thought of payment; they stimulate others to ch higher than they would have ordinarily thought ssible; they exhibit such a high degree of dedication their profession that others stand in awe. In a world it decries a lack of heroes, these people stand as the inspirations for the world's judgment.

"It is with these thoughts in mind that the members the Texas Osteopathic Medical Association, through? Board of Trustees, take this time to acknowledge ur secure standing in this small, but select, group people, and extend a collective thank you for your ars of commitment to the osteopathic profession. We, more than ever, the profession and, indeed, the orld, needs men of your stature. You have inspired hers to look beyond their immediate confines and share your vision. It is with a sense of pride in our arts that we point at you and say, "He's a D.O."

dditionally, Dr. Burnett was honored during TOMA's vention by the Texas State Society of the ACGP. ing the group's breakfast meeting on May 14, he had honor of cutting the birthday cake celebrating the 1 birthday of the Texas ACGP.

he Texas ACGP then presented Dr. Burnett with a chment framed print of Theodore Roosevelt,

inscribed with one of President Roosevelt's famous quotes. The inscription read:

"The credit belongs to the man who is actively in the arena, who strives valiantly; who knows the great enthusiams, the great devotions, and spends himself in a worthy cause; who at the best, knows the triumph of high achievement; and who, at the worst, if he fails, at least fails while daring greatly, so that his place shall never be with those cold and timid souls who know neither victory nor defeat."

Born in Abilene in 1921, Dr. Burnett graduated in 1952 from the Kansas City College of Osteopathic Medicine (now known as the University of Health Sciences, College of Osteopathic Medicine).

He has been a practicing osteopathic physician in Dallas and a TOMA member since 1954, receiving TOMA life membership in 1990. He has served TOMA as president; as a member of the House of Delegates; as a board member; on the Executive Committee; and on countless committees throughout the years. Dr. Burnett has maintained his membership in TOMA District V, of which he is a past president.

Nationally, Dr. Burnett has served as president of the American Osteopathic Association; as a member of the AOA House of Delegates; member of the AOA Board of Trustees; and as member of numerous AOA committees. He has been active in the American College of Osteopathic Family Physicians (ACOFP), of which he is a past president. He was twice honored as "GP of the Year" by the ACOFP and again by the Texas State Society of the ACGP. Several years ago, a section of the ACOFP headquaarters was transformed into a learning center, dedicated to Dr. Burnett and his wife, Mary Burnett, D.O. This tribute was in honor of their many years of faithful service to the profession.

Dr. Burnett has been active in the Texas College of Osteopathic Medicine and in 1984, both he and his wife received Founders' Medals, TCOM's highest award for contributions to medical education and health care. He has served as a member of the Texas Medical Foundation; the Texas State Board of Medical Examiners; his local Dallas hospitals; and the list goes on.

In 1966, during his speech as outgoing TOMA President, Dr. Burnett stated, "I hope you agree with me that it is well sometimes to take a broader look at the world before us — at some of the prospects for the future and the role we can best play in it. Our failure to do so may mean we will become passive observers rather than active participants."

We salute Dr. Burnett for his years of active participation. They have immeasurably enriched this great profession known as osteopathic medicine.

Postgraduate Training Locations for TCOM Class of 1993

Baptist Medical Center 6601 Rockhill Road Kansas City, MO 64131-1197 Bryan Joseph Albracht, D.O.

Botsford Hospital 28050 Grand River Avenue Farmington Hills, MI 48336-5933 Kenneth Alan Zaremski, D.O.

Bowman Gray School of Medicine of Wake Forest University Medical Center Boulevard Winston-Salem, NC 27157-1090 Thomas Christopher Curtis, D.O.

Brooke Army Medical Center
Fort Sam Houston
San Antonio, TX 78234
Cynthia Della Ve Roberts, D.O.
Philip Rene Roberts, D.O.
Joe Lease Sellers, III, D.O.
George K. Wilcox, D.O.

Carraway Methodist Hospital 1600 26th Street North Birmingham, AL 35206 Thomas Edward Lockard, D.O.

Children's Medical Center — Dallas 1935 Motor Street Dallas, TX 75235 David Alan Gray, D.O.

Cleveland Clinic Foundation 9500 Euclid Avenue Cleveland, OH 44195 Jerry Wayne Green, D.O.

Community Health Center of Branch County 274 East Chicago Street Coldwater, MI 49036-2088

E. A. Conway Hospital P.O. Box 1881 Monroe, LA 71210 Gary Wayne Lowder, D.O.

Carlos Mario Garcia, D.O.

Cuyahoga Falls General Hospital 1900 23rd Street Cuyahoga Falls, OH 44223 Karen Harris Rickert, D.O.

Dallas Family Hospital 2525 South Hampton Road Dallas, TX 75224-3026 Randall Mark Barron, D.O.

Dallas/Fort Worth Medical Center 2709 Hospital Boulevard Grand Prairie, TX 75051 German Luis Berbel, D.O. Joann Adele Bishop, D.O.

Doctor's Hospital 5500 39th Street Groves, TX 77619 Shaunna Sue Mitchell, D.O. Mary Alice Schaefer, D.O. Doctor's Hospital — North 1087 Dennison Avenue Columbus, OH 43201 Linda Ann Farmer, D.O. Steven Travis Farmer, D.O. James William Smith, D.O.

Eastmoreland Hospital 2900 Southeast Steel Street Portland, OR 97206 H. Kay Wendlandt, D.O.

Fitzsimons Army Medical Center Aurora, CO 80045-5000 Dani Yousef Alkadi, D.O. Randall Stanton Hall, D.O.

Good Samaritan Regional Medical Center 111 East McDowell Road Phoenix, AZ 85006 Ardith Marie Courtney, D.O.

Grandview Medical Center 405 Grand Avenue Dayton, OH 45404 Daniel Edward Fuentes, D.O.

Holston Valley Hospital 201 Cassel Kingsport, TN 37660 Joseph Richard Kalister, D.O.

John Peter Smith Hospital 1500 West Main Street Fort Worth, TX 76104-4941 Deborah Lee Boyd, D.O. Christopher Wayne Bristow, D.O. Charles Squire Gibson, D.O

Kennedy Memorial Hospitals 401 S. Central Plaza, Ste. 112 Stratford, NJ 08084 Guillermo Robles, D.O.

Kern Medical Center 1803 Flower Street Bakersfield, CA 93305 Stephanie Rae Penning, D.O.

Legacy Portland Hospitals 2801 North Gantenbein Avenue Portland, OR 97227 Sharon Ruth McGeeney, D.O.

Memorial Medical Center 2606 Hospital Boulevard Corpus Christi, TX 78405 Duwayne Paul Edge, D.O.

Methodist Hospitals of Dallas Charlton Methodist Family Practice Center 3400 West Wheatland Road Dallas, TX 76237-3498 Grady Mark McMahan, D.O.

The Miriam Hospital 164 Summit Avenue Providence, RI 02906 Sheela Chiman Mistry, D.O.

Mount Sinai Medical Center California at 15th Street Chicago, IL 60608 Gwenda Lyn Breckler, D.O. Northeast Community
1301 Airport Freeway
Bedford, TX 76021-6698
Richard Carlson Erickson, D.O.
James Albert Howton, D.O.
Ronald Tai Young Moon, D.O.
Judith Abigail Moss, D.O.
Robbye Glynn Richards, D.O.
Brian Blake Rogers, D.O.

Ochsner Foundation Hospital 1516 Jefferson Highway New Orleans, LA 70121 William Anthony Strohmeyer, III, D.O.

Oregon Health Sciences University 3181 Southwest Sam Jackson Park Road Portland, OR 97201 Mark Robert Hollemon, D.O.

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Presbyterian/Saint Luke's Medical Center 1601 East 19th Avenue Denver, CO 80203 Robert Alan Paul, D.O. Mike Keith Smith, D.O.

Saint Barnabas Hospital
3rd Avenue and 183rd Street
Bronx, NY 10457-2594
Douglas John Harrison, D.O.

Saint Elizabeth Medical Center 601 Edwin C. Moses Boulevard Dayton, OH 45408 James Woods Rogers, D.O.

Scott and White Memorial Hospital 2401 South 31st Street Temple, TX 76502 Linda Jane Ball, D.O. David Noe Barrera, D.O. Huy Xuan Duong, D.O.

Southside Community Hospital
4626 Weber Road
Corpus Christi, TX 78411
Paul Thomas Duncan, D.O.
Alan Wayne Elliott, D.O.
Edward Jose Escobar, D.O.
Paul Matthew Muratta, D.O.

Texas Tech University Health Science Center — Lubbock University Medical Center 3601 4th Street Lubbock, TX 79430 Ronald Lynn Cook, D.O. Texas Tech University Health Sci Center — Odessa 800 West Fourth Street Odessa, TX 79763

Ricky Joe Coleman, D.O.

Christopher Grayum Maguin

Timberlawn Psychiatric Hospital P.O. Box 11288 Dallas, TX Victoria Kay Borck, D.O.

Tripler Army Medical Center Honolulu, Hawaii 96859-5000 Mary Victoria Mirto, D.O.

Tulsa Regional Medical Center 944 West 9th Tulsa, OK 74127 Robert Brent Scott, D.O.

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San Antonio, TX 78284-7816

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610 Jennie Sealy Hospital
Galveston, TX 77555

James Walter Simmons, D.O.
Jon Chanthakhane Sivoravon

University of Texas Medical Sch at Houston 6431 Fannin Houston, TX 77225 Nancy Ann Allemier, D.O. Bonny Scott Olney, D.O.

Clayton Joseph Olney, D.O.

Walter Reed Army Medical Cem
Washington, D.C. 20307-5000
Bruce Richard Kenwood, D.C.

Waterbury Hospital 62 Robbins Street Waterbury, CT 06708-2600 Christopher E. Blair, D.O.

White Memorial Hospital 1720 Brooklyn Avenue Los Angeles, CA 90033 Maryam Hassanpour, D.O.

William Beaumont Army Medical 5 El Paso, TX 79920 Martha Ann Dodson, D.O. Robert Adam Goldsteen, D.O. Tamara Michelle McReynolds Alexandre Frederyk Migala, 1



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3715 Camp Bowie Boulevard • Fort Worth, Texas 76107

2nd Annual Texas Health Professionals' Peer Assistance Conference

Presented by the Liaison Committee of Health Care Professionals' Peer Assistance Programs

Date and Time: Friday, October 22, 1993

8:00 a.m. - 5:00 p.m.

Location: Texas Pharmaceutical Association

Bergen-Brunswig Seminar Room

1624 East Anderson Lane

Austin, Texas

Program

8:00 a.m. Registration and Continental Breakfast Morning Moderator: Robert O. Hull, Th.M., LCDC, Dallas

8:30 a.m. Welcome: Robert O. Hull, Th.M., LCDC, Dallas

8:45 a.m. Dual Diagnosis: Carlos W. Davis, Ph.D., Dallas

9:30 a.m. Personal Story of a Nurse With Dual Diagnosis: Candice Utley, R.N., B.S.N., San Antonio

10:15 a.m. Break

10:30 a.m. Creative Approaches to Treatment in the Future: Frances B. Hamm, M.A.LCDC, NCAC II, Austin

11:15 a.m. Panel — Back To Work Issues: Jerry T. Davis, D.O., Fort Worth; Perry H. Peterson, D.P.M., Marble Falls; Herbert C. Munden, Jr., M.D., Austin; Chris Good, R.Ph., Center Point

12:30 p.m. Lunch
Afternoon Moderator: Jim Zukowski,
Ed.D., Austin

1:30 p.m. The Disease Concept: Herbert C. Munden, Jr., M.D., Austin

2:30 p.m. Break

2:45 p.m. Drug Screening: David L. Black, Ph.D., DABFT, DABCC, Nashville, Tennessee

4:00 p.m. Questions and Answers (All Speakers)

4:45 p.m. Program Wrap-up

5:00 p.m. Adjournment

Goal

To aid health care professionals in developing new, improving existing, peer professional programs addressing different aspects that must be taken in consideration in order to have an effective program

Objectives

- Registrants will gain knowledge of what symptor are present in a dual diagnosis, ways to treat t disease, and the experience of a nurse with du diagnosis;
- 2. The audience will receive insight into what the future may hold in creative approaches to treatment of chemically dependent health professionals;
- 3. A panel of health care professionals will discue preciences encountered when they returned to the practice of their profession; and
- 4. An expert will discuss the pros and cons of druscreening as part of monitoring of recovering individuals.

Who Should Attend

Health care professionals who work directly with performance professional programs or who are interested impairment, treatment, and return to practice issues whenefit from attending this conference.

Registration Information

To pre-register, please mail the conference registration form, along with your check, no later than October 1993. Notification of registration cancellation must received in writing to obtain a refund. A \$50 fee will charged after October 15.

Housing Information

A block of rooms at a special rate of \$69 (single double) has been set aside for program registrants [Thursday, October 21, at the Red Lion Hotel, 6121] IH 35 at U.S. 290. The hotel is approximately a teminute drive away from the meeting site. Reservationary be made by telephone at (512) 323-5466. To receit the special rate, you will need to identify yourself as conference registrant. The hotel will honor reservation until October 7. Reservations made after this date where the space available basis.

8/Texas DO August 19

REGISTRATION FORM

2nd Annual Texas Health Professionals' Peer Assistance Conference
Texas Pharmaceutical Association Headquarters
1624 East Anderson Lane
Austin, Texas 78752
October 22, 1993

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Austin, Texas 78761

New Food Labeling Regulations Issued

Under new FDA and U.S. Department of Agriculture regulations, food labels will soon offer more complete and accurate nutrition information to help consumers plan healthy diets. USDA governs labeling for meat and poultry products; all other products are under FDA's jurisdiction.

Manufacturers have until May 1994 to comply with most of FDA's new labeling requirements, although some changes may appear before then. The new labels will have the heading "Nutrition Facts" on the top of the nutrition panel. About 90 percent of processed foods will now have to carry nutrition information.

The changes came about, in part, as a result of the Nutrition Labeling and Education Act (NLEA) of 1990. That law, among other things requires nutrition labeling for most foods (except meat and poultry), and also authorizes appropriate FDA-approved health claims on food labels. Although foods regulated by USDA were not covered by NLEA, USDA has issued its own regulations, similar to FDA's, to ensure that all foods will be subject to the same labeling requirements.

Significant changes in the label include:

- nutrition information for almost all foods
- nutrient reference values, expressed as Percent of Daily Values based on a 2,000-calorie diet
- the amount per serving of saturated fat, cholesterol, fiber, and certain other nutrients

- uniform definitions for terms that describe a food nutrient content such as "light," "fat-free," and "lov calorie"
- scientifically supported health claims for seve associations between particular nutrients or foods and the risk of diseases or health-related conditions strike requirements for these claims will avoid overstatements.
- standardized serving sizes (expressed in commo household and metric measures)
- a list of ingredients on all processed foods, includir colorings and other additives, to which some people me be allergic.

In conjunction with these food labeling reforms, FD is developing a major public education campaign to hel consumers use the new label information effectively. Pa of that campaign will involve making education materials available to health professionals so they ca help their patients choose healthier, more nutrious food-

Reference

1. FDA: Food Labeling; General Provisions; Nutrition Labelin Label Format; Nutrient Content Claims; Health Claims; Ingredie Labeling; State and Local Requirements; and Exemptions; Fin Rules. *Federal Register* 58(3), two books, 467-2300, 2301-2964, Ja 6, 1993. (Reprints of this document are available for \$4.50 a set fro the U.S. Government Printing Office (GPO). Write to: Superintende of Documents, Washington, DC 20402, or call (202) 783-3238. TI GPO order number is 069-001-00045-9.)

Dr. Donovan Butter New Chairman of Texas Emergency Medical Services Advisory Council

R. Donovan Butter, D.O., of San Antonio, has been elected chairman of the Texas Emergency Medical Services Advisory Council (TEMSAC). In 1988, Dr. Butter was appointed by the Texas Board of Health to serve on the TEMSAC for a six-year term, becoming the first D.O. to be appointed to this particular council.

The major role of the council is to provide recommendations to the Texas Board of Health concerning the rules and regulations governing emergency medical services in Texas.

A native Texan, Dr. Butter graduated summa cum laude from Southwest Texas State University, and received his D.O. degree in 1986 from Texas College of Osteopathic Medicine. He completed his internship at Corpus Christi Osteopathic Hospital, followed by postgraduate training at Brooke Army Medical Center and Driscoll Foundation Children's Hospital.

Prior to formal medical training, his experient included work as a paramedic and as a representative of the Texas Department of Health, where he develope the first EMS-Instructor curriculum in Texas.

Congratulations to Dr. Butter.

Newsbrief

PHYSICIANS ELECTED TO OIL BOWL HALL OF FAME

The Maskat Shrine Temple of Wichita Falls, Texas, recently elected the following physicians to the Oil Bowl Hall of Fame: the late Ted Alexander, Sr., D.O., Ted Alexander, Jr., D.O., Jerry Alexander, D.O., and Brian Hull, D.O., all of Wichita Falls. The physicians were elected for their many years of service to the Oil Bowl Football game.

10/Texas DO

How do you treat severe paralysis of the paycheck?

Medical school probably covered everything except how to deal with a disability. It can happen to anyone. Even you. In fact, if you're 35 now, you have a 45 percent chance of becoming disabled before age 65.1 Without disability insurance, that's a 45 percent chance your income could wind up in critical condition. Should disability strike, how long could you keep your home? Make car payments? Provide for your family?

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as you own the policy.³

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³ Coverage for mental disorders can be limited in certain circumstances for a reduced premium.

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¹ 1985 Commissioner's Individual Disability Table-A, Seven-day Elimination Continuance Table. Rates are male only. Disability rates are higher for females.

² Life Insurance Marketing and Research Association, 1992 survey, individual, non-cancellable disability income insurance as measured in annualized premium in force, new paid annualized premium, new paid policies, and policies in force.

A Letter from the President of JCOM

June 25, 1993

Dear TCOM family members, friends and supporters,

A long-time dream of many people was realized June 6 when Gov. Ann Richards signed legislation redesignating our medical school as the University of North Texas Health Science Center at Fort Worth. This well-deserved change, to be effective Aug. 30, formally recognizes the synergistic bond that has existed for more than 20 years between Texas' sole osteopathic medical school and the fourth largest university in the state.

Because some of you may have questions about the meaning and implications of this redesignation, we prepared a publication that features an overview of the historical event, comments by several of our "family" members, some commonly asked questions and a brief timeline of TCOM's progress from "paper college" to health science center. As we get closer to the official celebration of our new status this fall, you will hear from us again.

Now is a special time to look back with pride on the hard work and support that you and so many others contributed to make this achievement possible. We still share a dream — of a health science center committed to excellence, unique in Texas because of its *osteopathic* heritage and focus — and each one of us is vital to accomplishing that vision.

We deeply appreciate the exceptional support of UNT/TCOM Chancellor Alfred F. Hurley, Ph.D., the UNT/TCOM Board of Regents, and the principal authors of this legislation, State Senator Mike Moncrief and State Representative Bill Carter, as well as the other members of the Tarrant County legislative delegation, all of whom signed on as cosponsors of the bill.

This is an exhilarating time. I hope you share our pride.

Sincerely,

David M. Richards, D.O. TCOM President

EDITOR'S NOTE:

The following are excerpts from the aforementioned publication:

Questions and Answers

What's the difference between a medical school and a h science center?

The Association of Academic Health Centers has stated the role and scope common to health science centers are ation, research and health care delivery, which are the same defined for TCOM in its current mission statement.

com's transition into a health science center has taken place many years. The action by the Legislature merely provides tory and professional recognition of TCOM's longtime roles oth medical education and graduate biomedical sciences fuction.

health science center has an advantage over stand-alone ical schools in competing for top faculty and students. It also provide access to new federal and private revenue sources.

the multidisciplinary programs of a health science center provide enriched training for students and better prepare them ifelong careers in a rapidly changing health care environment.

: Are most medical schools part of a health science center?

: Yes. All six other state-supported medical schools in Texas part of designated health science centers. Nationally, more 180 percent of the 140 allopathic and osteopathic medical pols are linked to health science centers.

): What will happen to the Texas College of Osteopathic licine?

: Our 23-year-old osteopathic medical school will be the nerstone of the health science center. The mission of the versity of North Texas Health Science Center at Fort Worth be rooted in TCOM's long-standing commitment to primary and clinical service to those in need.

): Will TCOM retain its osteopathic identity?

Let Yes. In fact, TCOM's osteopathic heritage, philosophy and ntity will be strengthened through the health science center's us on primary care and commitment to health promotion and ease prevention, hallmarks of osteopathic medicine. nsidering the critical need for more primary care physicians, college is well-positioned to benefit from changes resulting m the actions of local, state and national governments in sonse to health care delivery inadequacies.

2: Who will head the health science center?

A: The legislation states that the president of the health science ter must be a licensed osteopathic physician. On June 22, the IT/TCOM Board of Regents appointed David M. Richards, D., as the founding president of the health science center and IT Chancellor Alfred F. Hurley, Ph.D., as chancellor of the ter. Richards has served as TCOM president for the past seven irs. Hurley has been chancellor of UNT and TCOM for 11 irs.

Q: Will any new health science programs be offered?

A: Currently, almost 100 percent of the instruction for UNT's ogram in graduate biomedical sciences is conducted on the OM campus by TCOM faculty. So, for all practical purposes, at program is already being taught at TCOM. We have bmitted a request to the Texas Higher Education Coordinating and for administrative authority over the graduate programs is cluding the granting of M.S. and Ph.D. degrees).

While other programs have been considered, they are only areas be explored right now. You could call them a road map. And, could be years before we arrive at our ultimate destination. have to consider all new programs in light of the changing

health care needs of our community and the rest of the state. Any new program will have to be approved by the coordinating board.

Q: Will TCOM start granting M.D. degrees?

A: No. The legislation specifically prohibits the granting of M.D. degrees.

Q: Did changing to a health science center require more state funding?

A: No. The legislation authorizing the redesignation as a health science center did not include any requests for additional funds. Existing funds, faculty and facilities will be used. However, health science centers can provide access to new revenue sources through collaborative research studies and drug trials. Our elevated status also may enhance our competitiveness for private funding. As a health science center, we also can achieve cost savings from the shared use of administrative services and academic programs.

Q: When does the name change become effective?

A: August 30, 1993. As an institution, however, we will mark the name change with a gala celebration later in the year.

* * * * * * * * *



"I would never have dreamed that we would make this much progress in a little more than 20 years. This is such a major step in TCOM's development that right now it's hard to comprehend all the advantages. The osteopathic profession will certainly benefit from the added recognition. It

makes me feel good to see us making positive changes."

Carl E. Everett, D.O.
 TCOM Co-founder



"The University of North Texas is a major university, and the designation will help TCOM receive additional recognition throughout the country. Despite these changes, our medical school is not going away. We will still be the singular source for an osteopathic medical degree in Texas."

George J. Luibel, D.O.
 TCOM Co-founder



"Getting your medical degree from a health science center makes the degree, the experience and the education more viable in today's society. Learning medicine is more than just attending medical school. At a health science center, every student benefits from a more well-rounded experience."

David Wasserman
 Class of '95
 President, TCOM Student Government Association



"This is great news! I think our affiliation with the University of North Texas was a major stepping stone, and to become a health science center will only increase our identity as a leader in medical education. It will strengthen our osteopathic heritage and philosophy of health promotion, disease

prevention and care for the sick. I hope all 1,400-plus alumni will take pride in this great change and join us this fall for the official celebration."

— Dale Brancel, D.O.
Class of '80
President, TCOM Alumni Association

Texas DO/13

What's Happening In Washington D.C.

- SFC On Board. The Senate Finance Committee has now approved a version of the new tax package. This version contains a number of changes from the package previously passed by the House. It is now up to the Conference Committee, who will pound out a compromise this summer.
- Capital Gains Up. The Senate version would increase the capital gains rate for those with taxable incomes over \$250,000. The rate would go up to 29.4% in '93 and 30.8% in '94. Why the jump? Some feel that the spread between the capital gains rate and the new higher ordinary rates needs to be narrowed for the rich.
- Small Business Write-offs Present law allows small businesses to expense \$10,000 or capital improvements each year. The House version would bump the number to \$25,000, while the Senate would increase the lid to \$15,000.
- Rate Phase-In. The increased tax rates would be phased in over two years under the Senate version. The '93 rates would be 33.5% for those with taxable incomes over \$140,000 and 35.3% for those with taxable incomes over \$250,000. The rates will jump to 36% and 39.6% in '94.
- Higher Social Security Tax Hit. Currently, 50% of social security benefits paid to couples with taxable incomes in excess of \$32,000 (\$25,000 for singles) are taxable. Both the House and Senate versions would increase the taxable rate to 85%, but the Senate would increase the income threshold to \$40,000 for couples and \$32,000 for singles.
- BTU Tax Out. The Senate version would eliminate the proposed energy BTU tax. Instead, the Senate would simply increase the tax on gasoline and other transportation fuels about 4.3 cents a gallon and substantially reduce Medicare and Medicaid reimbursements.
- The Doctors' Response. The medical community says the reductions in Medicare and Medicaid reimbursements will result in higher fees for other patients. They claim that it is simply another technique for redistributing wealth among health care users.
- Interest Rate Bonanza. The Administration recently confirmed that if interest rates stay at their current level, the deficit will be reduced by billions of dollars in the form of interest savings. Ironically, having a \$4 trillion deficit means big budget savings when interest rates are below projections.
- A New 7% Payroll Tax? That may be the price tag that small businesses will have to pay for health care reform, according to some Washington insiders. As the dust settles on tax reform, health care will move to center stage.

- Bogus Numbers. During the Presidential campai last year, we heard that tens of billions of dollars contended by making foreign-controlled corporation pay their share of U.S. income taxes. A recent sturb has confirmed that these estimates were gross overstated.
- A Thirty Year Look Back. Approximately 5.1% of individual taxpayers had their federal returns audit thirty years ago. The individual audit rate has dropp to less than one percent in each of the last two yea Some members of Congress would like to see me audits. The IRS says that more audit activity requiremore funding.
- Middle Class Left Out? Although the proposed t and spending package does nothing for the middless, tax cuts for middle America are still being promised. President Clinton recently promised the cuts before the end of his current term.
- Who Cares? A recent AP Poll found that there is littenthusiasm among taxpayers for the Clinton tax planning only 42% favored the plan; 32% opposed it a nearly 50% said it would fail to have any real impage on the government deficit.
- Creative Opposition. Citizens for A Sound Econor are opposing the energy tax by sending them underwear to each member of Congress. The messa is that next winter citizens will need the underwe to keep warm as a result of new energy taxes.

If you would like more information on this issue, c us at 817-335-3214.

The above information was provided by Dean, Jacobson Finance Services, Fort Worth.

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Texas DO/15 gust 1993

MEDICARE PAR RATE FOR 1993

The rate of participating providers increased from 52.2 percent in 1992 to 59.8 percent in 1993, per HCFA. This 7.6 percent increase is attributed to incentives that par docs get. Each year when we review the par vs non-par options for all retainer clients, we also take into consideration how often the client accepts the claim assignment, the provider's current collection ratio and the decreasing difference in income on a claim by claim basis. We will once again perform this service around the end of November, as we usually do.

1994 MEDICARE CUTS & INCREASES

With the Democrats controlling the Senate, House & White House, the bill passed April 28 by Pete Stark's Ways & Means Health Subcommittee will probably become law this year. The bill freezes at ZERO the inflation update providers would receive in 1994 and 1995. This is expected to save an estimated \$475 million in '94 Part B payments and \$2.1 billion in Part A payments. Since this bill also calls for reinstatement of EKG interps and repeals the 5 percent - 20 percent reductions for new doctors, while staying "budget neutral," we can expect to see dramatic cuts in several areas to offset these increases. The bill still has to go through the full committee, which may result in changes, although we do not believe the Republicans will have the clout to do so.

CLINTON'S FUTURE MEDICARE PAYMENTS

Unsurprising to all is President Clinton's reductions in Medicare payments, which sits in front of Congress at this time. If passed, pay rates for codes comprising 12 percent of provider payments would decrease by 15 percent OR MORE by 1996 (when the fee schedule is fully implemented). About 1 percent of the services would see reductions of 35 percent OR MORE, while diagnostic services would fall by 10 percent and global surgical procedures would drop 8 percent. With these anticipated reductions, you have to do all you can to ensure your income and reimbursements are maximized. One way of doing this is by sending us copies of claims and EOMBs each and every month. This is a part of our retainer service that only 50 percent of our retainer clients utilize.

MODIFIER 22 & LIMITING CHARGES FOR NON-PAR PROVIDERS

In past issues of S.T.A.T., we have recommended you

collect the Medicare patient's co-insurance (20 percenate the time of service, if you were not acception assignment on the secondary policy. It has recently come to our attention that Medicare is phasing in slowly, 1989 Medigap Law that entitles patients the right the assign the Medigap payments to the participatine physician, who is required to file the Medigap claim alon with the Medicare claim. If the doc is par, the pt assign the benefits and the plan is a true Medigap, the physicial may not collect the 20 percent up front. They must was for the Medigap carrier to send the 20 percent.

MEDIGAP FILING PROBLEMS

We received a list from Medicare of the primar problems they see on claims that prevent them from forwarding Medigap claims to the Medigap carriers for participating physicians. Those reasons include:

- 1. The name of the Medigap insurer has to be in bloc 9D on the HCFA 1500.
- 2. The Medigap policy number has to be in block 9A
- 3. The Medigap insurer's mailing address is helpfu if listed in box 9C.
- 4. Block 13 must either be signed by the patient c have "SOF" to indicate Medigap benefits ar assigned.
- 5. Block 12 must either be signed by the patient of have "SOF" to indicate Medicare benefits ar assigned.

By ensuring these areas are completed, you wi increase the odds of getting the co-payment an deductible payments within a reasonable time.

FLU VACCINES & MEDICARE

As we reported last year, Medicare has had tear coverage of Flu Vaccines in three states during 1992. The test has apparently been successful, as HCFA has justified coverage plans for flu vaccination coverage ever 12 months, which may start later this year or at the state of 1994. The report reflects an estimated savings of \$108. million, annually, at a cost of \$57.7 million, which result in a \$51.2 million net savings, per year. The first are of coverage will probably be for patients suffering from severe diabetic foot disease, per Donna Shalala (HH Secretary). Once this is in place, we will probably state seeing flu vaccination coverage the same as we now have pneumonia vaccines.

ME CARE/MEDICAID QMB PROGRAM

FA recently mailed out 250,000 letters to low ne Americans advising them that they may qualify the Qualified Medicare Beneficiary program. Covered the QMB program are \$676 in pt hospital describle, \$221 monthly part A premiums, \$36.60 mc hly Part B premium, \$100 annual Part B deductible in the program applies tients eligible for Medicaid. You may wish to advise low income Medicare patients to check with the l security office to see if they qualify for the ram. This makes it easier for you to get your money, edicaid picks up the patient portion, as well as the patient's monthly Medicare premiums.

RVU INCREASES FOR CODES 56302, 35459 AND 35470

January 1 for the above three codes because HCFA upgraded the practice and malpractice RVUs active to Jan. 1, 1993. The increased income should be abstantial for code 56302, as the overall RVUs have ased 50 percent. Medicare will NOT locate these as paid incorrectly, so the burden is on YOU. While won't help you locate the incorrectly paid claims, must reprocess any resubmitted claims.

IC 1-192 (SUPPLIER NUMBER APPLICATION) PROBLEMS

have had to return 50 percent of the HCFA-192 is they have received, which are requests for a HCFA or an in that providers supplying DME, thetics/orthotics claims must have one by October 1, in order to be paid. As we have previously stated, we elieve eventually you will need one to be paid for supplies, such as surgical trays, splints, slings and injectables. The problems that have caused these e returned include:

Blocks 1A & 1B — Supplier name and business not completed

Block 1E — Tax ID # incorrect (Must be 9 digits)

Signature of provider not on back page

Block 7B — Who will be submitting the claims (Name of insurance clerk or billing service)

Blocks 4A, 4B & 4C — Ownership info.

TE: WE ARE IN THE PROCESS OF CHANGING IR NAME FROM MEDICAL CONSULTANTS OF KAS TO DON SELF & ASSOCIATES, AS MORE OPLE IN TEXAS ARE FAMILIAR WITH DON SLF THAN MEDICAL CONSULTANTS OF KAS.

TCOM Continuing Medical Education

Primary Care Update

October 1-3, 1993

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Read All About It . . .

CHARGING INJECTION CODE FOR ANESTHETIC IN ADDITION TO NERVE BLOCK CODES

Medicare's newsletter 120, dated June 17, 1993 reports that you are NOT allowed to charge for the anesthetic agent (Xylocaine, Lidocaine, etc), in addition to procedure codes 64400 through 64450. They report the agent is considered to be part of the procedure and therefore is not billable separately.

HEALTH PROFESSIONAL SHORTAGE AREAS (HPSA)

Newsletter 120 also gives an updated list of those counties and parts of counties that are designated HPSAs. If you render services in any of these counties (even if your office is not located within one of the areas), you are entitled to a 10 percent incentive payment (bonus). The 10 percent is based on the amount Medicare has paid for services rendered in the HPSA, and not on the fees charged or approved amounts. To enable Medicare to pay these payments to the physician (not to be applied to any patient accounts,) you need to use the correct modifier:

QB Services in a rural HPSA

QU Services in an urban HPSA

If you need assistance in determining whether you render services in an urban HPSA, call Medicare (Kitty Beard) at 214-669-7399.

CHANGE OF SPECIALTY

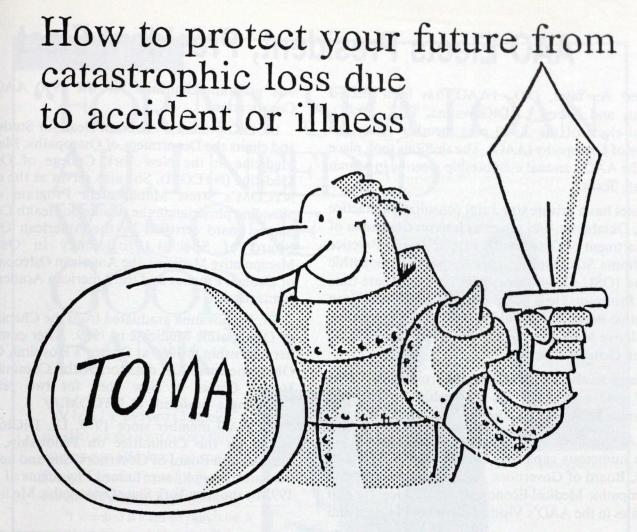
If you receive a notice from Medicare stating you may be coding outside of the parameters of your peers, you may wish to ensure you are catagorized correctly, per your specialty, in Medicare's computer. This is something we watch on the quarterly Provider Treatment Analysis Reports from Medicare. While Medicare does not pay differently, dependent upon your specialty, the comparison of coding, which prompts them to audit certain physicians, do have an impact. For this reason, we have listed the following different specialties:

35 Chiropractic 01 General Practice 36 Nuclear Medicine 02 General Surgery 03 Allergy/Immunology 37 Pediatric Medicine 38 Geriatric Medicine 04 Otolaryngology 05 Anesthesiology 39 Nephrology 40 Hand Surgery 07 Dermatology 41 Optometrist 08 Family Practice 44 Infectious Disease 10 Gastroenterology 11 Internal Medicine 46 Endocrinology 12 Osteopathic Manipulative 48 Podiatry 13 Neurology 66 Rheumatology 76 Periph. Vasc. Disease 14 Neurosurgery 16 Obstetrics/Gynecology 77 Vascular Surgery 78 Cardiac Surgery 18 Ophthalmology 79 Addiction Medicine 19 Oral Surgery (Dentist) 81 Critical Care (Intensive) 20 Orthopedic Surgery 83 Hematology/Oncology 22 Pathology 24 Plastic/Recon. Surgery 84 Preventive Medicine 25 Phys. Med. & Rehab 85 Maxilliofacial Surgery 86 Neuropsychiatry 26 Psychiatry 90 Medical Oncology 28 Colorectal Surgery 29 Pulmonary Disease 91 Surgical Oncology 30 Diagnostic Radiology 92 Radiation Oncology 93 Emergency Medicine 33 Thoracic Surgery 34 Urology 94 Interventional Radiology

If you wish to change the specialty Medicare has you listed as, you need to send a letter to Medicare Provider Relations, at the following address: P.O. Box 655924 Dallas, TX 75265-5924, giving them the specialty number listed above, your provider number, your UPIN and your billing address. You also need to include the statement: I wish my specialty code to be changed from ______ to _____ since approximately

percent of my business is oriented. You may guess at your percentage of specialty patients, as documentation is not required. Also not required is a fellowship of license in that specialty. Of course, to change your specialty, you must render services pursuant to that specialty more than 50 percent of the time. Please send us a copy of the request, as we need this information on all retainer clients.

Don Self 903-839-7045



HEALTH INSURANCE - A Strategy For The '90s

The high cost, no guarantee system of health insurance coverage is an enemy that is battling ALL small employers, especially physicians.

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AAO Elects President, President-Elect

Herbert A. Yates, D.O., FAAO, has been elected president, and Eileen L. DiGiovanna, D.O., FAAO, president-elect, of the 3,400 plus member American Academy of Osteopathy (AAO). The elections took place during the AAO's annual membership meeting in March in Dallas, Texas.

Dr. Yates has a private structural consultation practice in Tulsa, Oklahoma, and serves as Interim Chairman of the Department of Osteopathic Principles and Practice at Oklahoma State University, College of Osteopathic Medicine (OSU-COM), where he is also a part-time Clinical Professor. He is board certified by the American Osteopathic Board of Special Proficiency in Osteopathic Manipulative Medicine and the American Osteopathic Board of General Practice.

Dr. Yates received his D.O. degree from OSU-COM in 1977 and completed his internship at Hillcrest Osteopathic Hospital, Oklahoma City, Oklahoma.

An AAO member since 1981, Dr. Yates has served the AAO in numerous capacities, including the Board of Trustees, Board of Governors, Awards Committee, and the Osteopathic Medical Economics Committee. He also participates in the AAO's Visiting Clinician Program and

was program chairman for the 1990 AAO Annua Convocation.

Dr. DiGiovanna is Assistant Dean for Student Affair and chairs the Department of Osteopathic Manipulativ Medicine at the New York College of Osteopathi Medicine (NYCOM). She also serves as the director on NYCOM's Stress Management Program and is a attending physician in the Academic Health Care Center She is board certified by the American Osteopathi Board of Special Proficiency in Osteopathi Manipulative Medicine, the American Osteopathic Board of General Practice and the American Academy of Pai Management.

Dr. DiGiovanna graduated from the Chicago Colleg of Osteopathic Medicine in 1959. After completion cher internship in 1960 at Doctor's Hospital, Columbus Ohio, she served as director of the Commack Famil Health Center in New York for two years befor becoming a professor at NYCOM.

An AAO member since 1979, Dr. DiGiovanna has served on the Committee on Fellowship, Board of Trustees and Board of Governors. She and her physicia husband, Joseph, were named Physicians of the Year i 1992 by the New York State Osteopathic Medical Society

DEA License Registration Fee

The AOA Washington office has notified us that in a final rule published on March 22, 1993, the Drug Enforcement Agency raised the fee for its practitioner license from \$60 to \$210 so that the DEA could adequately recover the federal costs associated with the Diversion Control Program. This action was mandated by the Department of Justice and Related Agencies Appropriations Act, 1993 (P.L. 102-395).

The new fee schedule affects all <u>new</u> applications postmarked on April 21, 1993 or later, and all renewal applications with an expiration date of May 21, 1993. The DEA practitioner license is renewed every three years.

The AOA says that at a meeting of the DEA Practitioner's Working Committee on May 26, representatives of several practitioner groups said they had never received a copy of a letter sent by the DEA, dated December 18, 1992, regarding the fee change and thus, had no idea the fee change was being proposed. According to the AOA, the change was put into the Federal Register during the holiday season and allowed only a 30-day period for comment. DEA officials say

they found out about the proposed fee increase only on day before it appeared in the *Federal Register*.

The AOA contacted the American Medica Association (AMA) regarding this problem and wa informed that the AMA is filing a lawsuit against th DEA and is interested in having the AOA join them. I response will be forthcoming.

FAA Reconsidering Age Rule for Pilots

The Federal Aviation Administration is reconsidering its rule that prohibits commercial airline pilots from flying after the age of 60. The reconsideration is due to a new study, conducted for the FAA's Civil Aeromedical Institute in Oklahoma City, Oklahoma. The study found that pilots nearing 60 do not have more accidents than younger pilots.

20/Texas DO

"FOR MY SBA LOAN, ALL I NEEDED WAS ONE GOOD"

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▲ Dr. Richard Chatfield

◀ Dr. Chatfield and Don Waters, President of Bank of North Texas

Chatfield found the loan application process surprisingly simple.

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BANK OF NORTH TEXAS, N.A. – ARLINGTON I-20 at Little Rd. Arlington 817/478-9271

MEMBER FDIC AND NORTH TEXAS BANCSHARES, INC.

In Memoriam

Patrick D. Philben, D.O.

Dr. Patrick D. Philben passed away on July 13 at home on his ranch near Ennis, Texas. He was 76 years of age.

Funeral services were held July 17 at the Grove Hill Funeral Home Chapel in Dallas, with interment in Grove Hill Memorial Park.

Dr. Philben was born March 29, 1917 in Butte, Nebraska, and was preceded in death by his parents, Josephine and Perry Philben, and brother Chet of Wymore, Nebraska.

He received his D.O. degree in 1939 from Kirksville College of Osteopathic Medicine, Kirksville, Missouri. He started practice and founded the Columbia Clinic in 1939. He completed a pediatric residency at Philadelphia College of Osteopathic Medicine and in 1947, founded the Grove Clinic in Pleasant Grove. This grew into a large clinic that still serves the community.

Dr. Philben was certified in pediatrics and was a Fellow of the American College of Osteopathic Pediatricians, of which he served as president. He was a TOMA Life member and an active member of TOMA District V. Additionally, Dr. Philben was Associate Clinical Professor at Texas College of Osteopathic Medicine and served as Chief of Staff in several area hospitals throughout the years.

In 1985, Dr. Philben moved his practice to Family Medical Clinic on Bruton Road in Dallas, where he continued to practice fulltime until his illness.

Survivors include his wife of 53 years, Lee O. Philben; nephews, Richard M. Olson, D.O., of Dallas, Larry Olson of Houston and Jim Kelly of Hawaii; nieces, Marlene Anderson of Thousand Oaks, California, Judy Pope of Lewisville, Texas; brother-in-law, Gordon B. Olson of East Tawakoni, Texas; and sister-in-law, Helen Kelly of Lewisville, Texas.

Since Dr. Philben dedicated his life to children and their health care, the family requests that, in lieu of flowers, donations be made in his memory to the Southeast Dallas Branch of The YMCA, 2818 Prichard, Dallas, 75227.

TOMA extends condolences to the family and friends of Dr. Philben.

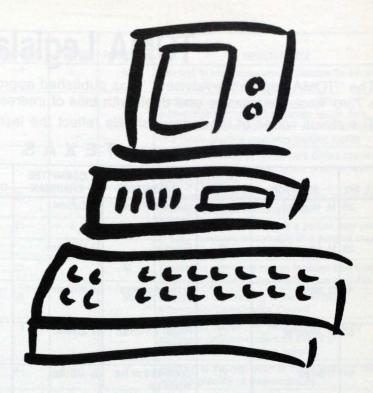
REMINDER: NOM Week is October 10-16

National Osteopathic Medicine Week will be celebrated October 10-16 this year. The theme, "Osteopathic Medicine: Caring for America" will highlight the Share the Care Program and overall physician volunteerism, as well as focus on how osteopathic physicians provide care throughout the U.S., in both rural and urban settings. The AOA will once again produce a catalog of NOM Week promotional items. If you'd like more information on these materials or on how you can participate in NOM Week, call the AOA at 1-800-621-1773, Extension 5855.

Don't forget to send information and photos as to how you and/or your facility celebrated NOM Week to TOMA for publication in the "Texas DO."

22/Texas DO August 199

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Texas DO/23

TOMA Legislative Advisory

The "TOMA Legislative Advisory" was published approximately every three weeks during the regular session the 73rd Texas Legislature and dealt with bills of interest to the osteopathic profession.

The status codes of the individual bills reflect the last status as received from Capitol Information Services

TEXAS SENATE

BILL	NO.	SPONSOR	DISTRICT	COMMITTEE	COMMITTEE	DISTRICT	STATUS	POSTURE	DESCRIPTION
SB		M. Moncrief	12	Health & Human Services	J. Zaffirini	21	L	М	Relating to procedural and fire safety requirem relating to long term care facilities licensed by Texas Department of Health.
	29	M. Moncrief	12	Finance	J. Montford	28	L	М	Relating to procedural requirements regarding licensing fees charged a convalescent or nursi home or related institution; making an appropriate or related or related institution; making an appropriate or related or
	47	D. Sibley	9	Criminal Justice	J. Whitmire	15	Α	0	Relating to requiring certain information to be p on a practitioner's prescription pad before prescription may be dispensed.
	57	M. Moncrief	12	Health & Human Services	J. Zaffirini	21	L	М	Relating to the screening and treatment for tuber of employees, volunteers, and inmates in coun municipal jails and other correctional facilities.
	64	T. Bivins	31	Committee of the Whole on Redistricting Ethics & Elections	S. Carriker	30	A	F	Relating to the representation of persons executive agencies by members of the legis
	79	J. Zaffirini	21	Finance	J. Montford	28	L	0	Relating to the requirement that the state development of selective contracting with health providers for the provision of certain service Medicaid recipients.
	89	C. Truan	20	Health & Human Services	J. Zaffirini	21	L	М	Relating to establishing a birth defects registry
	90	C. Truan	20	Health & Human Services	J. Zaffirini	21	L	М	Relating to the access to information for epidem and toxicologic investigations by the Texas Depa of Health.
	91	C. Truan	20	Health & Human Services	J. Zaffirini	21	E	F	Relating to the identification of children suffering lead poisoning and to control measures for contamination.
	101	C. Harris	10	Economic Development	C. Parker	4	A	М	Relating to health insurance policies, policy applications, and claim forms.
	134	E. Lucio	27	Jurisprudence	D. Henderson	7	A	М	Relating to mandatory arbitration of claims for personal injury or death resulting from medica malpractice.
	144	F Madla	24	Health & Human Services	J. Zaffirini	21	A	0	Relating to the authority of a therapeutic optometrist to act as a practitioner under the Controlled Substances Act.
1	160	M. Moncrief	12	Health & Human Services	J. Zaffirini	21	L	М	Relating to the provision of mental health and rehabilitative services.
	176	C. Parker	4				L	М	Relating to the adoption of the Durable Power Attorney Act.
	198	D. Shelley	6	Economic Development	C. Parker	4	A	F	Relating to the creation and operation of a proto to provide access to health insurance for employees of small groups.
	201	C. Parker	4	Education	B. Ratliff	1	L	М	Relating to contractual agreements between I Texas Higher Education Coordinating Board a Texas Chiropractic College.
	206	C. Harris	10	Re-referred Health & Human Services	J. Zaffirini	21	G	М	Relating to claims, review of claims, and fraud claims for benefits for certain health care and mental health care services covered by insura
	212	J. Zaffirini	21	Health & Human Services	J. Zaffirini	21	L	М	Relating to the regulation of medical rehability services.
	215	D. Sibley	9	Economic Development	C. Parker	4	A	F	Relating to availability of group health insurar coverage following a change of employment.
	216	D. Sibley	9	Economic Development	C. Parker	4	A	F	Relating to uniform health insurance claims to
10.10	217	D Ciblan	0	Farmente					

217 D. Sibley

9

Economic

Development

C. Parker

Relating to purchase of group health coverage th

funds established by certain small employers.

10.		DISTRICT	COMMITTEE	COMMITTEE CHAIRMAN	DISTRICT	STATUS	POSTURE	DESCRIPTION
84	D. Sibley	9	Education	B. Ratliff	1	L	М	Relating to loan repayment assistance for certain family practice physicians.
	D. Sibley	9	State Affairs	O.H. Harris	8	A	F	Relating to state identification for medical malpractice claims against certain health care professionals who provide free services to patients of a family practice residency training facility.
	D. Sibley	9	Education	B. Ratliff	1	A	F	Relating to liability of health care clinics operated in conjunction with approved family practice residency training programs.
266	J. Zaffirini	21	Health & Human Services	J. Zaffirini	21	L	F	Relating to mandatory immunizations and to the provision of those immunizations.
	P. Rosson	29	Health & Human Services	J. Zaffirini	21	L	М	Relating to the form in which a person may provide a copy, summary, or narrative of a patients medical records.
	J. Wentworth	26	Health & Human Services	J. Zaffirini	21	L	М	Relating to exempting certain facilities from licensure under the Personal Care Facility Licensing Act.
286	R. Ellis	13	Health & Human Services	J. Zaffirini	21	L	М	Relating to the creating of the HIV/AIDS Interagency Coordinating Council
332	M. Moncrief	12	Re-referred Jurisprudence	D. Henderson	7	L	М	Relating to consent for medical treatment by surrogate decision-makers on behalf of incapacitated or comatose patients.
	F. Shapiro	2	Health & Human Services	J. Zaffirini	21	A	F	Relating to the regulation of mammography devices and the practice of mammography.
343	F. Madla	24	Economic Development	C. Parker	4	L	М	Relating to the selection of podiatrists.
344	F. Madla	24	Economic Development	C. Parker	4	Α	М	Relating to the selection of podiatrists.
346	M. Moncrief	12	Education	B. Ratliff	1	L	F	Relating to changing the name of the Texas College of Osteopathic Medicine to the University of North Texas Health Science Center of Fort Worth.
364	M. Moncrief	12	Health & Human Services	J. Zaffirini	21	Α	М	Relating to infant and child immunization requirements.
368	K. Armbrister	18	Health & Human Services	J. Zaffirini	21	E	М	Relating to the regulation of the practice of dentistry.
370	D. Henderson	7	State Affairs	O. H. Harris	8	Е	0	Relating to the designation of benzodiazepine as a controlled substance under the Texas Controlled Substance Act.
376	B. Haley	3	Health & Human Services	J. Zaffirini	21	L	F	Relating to use of osteopathic hospitals by health maintenance and preferred provider organizations.
386	D. Shelley	6	Jurisprudence	D. Henderson	7	L	М	Relating to the liability of persons providing emergency care.
388	J. Zaffirini	21	Health & Human Services	J. Zaffirini	21	Α	М	Relating to the reporting of certain injuries to the Department of Public Health.
392	R. West	23	Health & Human Services	J. Zaffirini	21	Е	М	Relating to minimum standards for medical procedures involving sedation or contrast media.
419	S. Carriker	30	Education	B. Ratliff	1	L	М	Relating to the University of North Texas.
422	J. Whitmire	15	Health & Human Services	J. Zaffirini	21	A	М	Relating to the regulation of the practice of podiatry.
426	D. Sibley	9	Education	B. Ratliff	1	L	М	Relating to family practice residency training pilot programs.
427	R. Ellis	13	Health & Human Services	J. Zaffirini	21	L	М	Relating to the duty of non-profit, tax-exempt hospitals to provide charity care.
445	M. Moncrief	12	Health & Human Services	J. Zaffirini	21	Α	F	Relating to the Board of Public Health.
455	J. Patterson	11	Health & Human Services	J. Zaffirini	21	Α	М	Relating to mandatory premarital testing for sexually transmitted diseases.
458	B. Haley	3	Economic Development	C. Parker	4	С	М	Relating to health insurance benefits for the treatment of certain bones and joints of the human body.
472	F. Madla	24	Health & Human Services	J. Zaffirini	21	L Junitas la	М	Relating to the practice of pharmacy, including the Texas State Board of Pharmacy, dangerous drugs, and controlled substances.
486	J. Wentworth	26	Economic Development	C. Parker	4	A	M	Relating to the inclusion of the services of certain licensed hearing aid fitters and dispensers in health insurance coverage.

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BILL	NO.	SPONSOR	DISTRICT	COMMITTEE	COMMITTEE CHAIRMAN	DISTRICT	STATUS	POSTURE	DESCRIPTION
SB			30	Health & Human Services	J. Zaffirini	21	A	М	Relating to temporary reciprocal licenses for c physicians, the relationship between hospitals other health care providers in rural areas, and establishing a program to assist in recruiting a retaining health professionals.
	555	J. Patterson	11	Economic Development	C. Parker	4	М	М	Relating to provision of certain mental health a substance abuse services through single services through single services through single services.
	589	M. Moncrief	12	Health & Human Services	J. Zaffirini	21	А	М	Relating to the Health Care Provider Referral.
CARGO BOHAN	621	S. Carriker	30	Health & Human Services	J. Zaffirini	21	L	М	Relating to the continuation and functions of the Texas State Board of Pharmacy and to the regulation of the practice of pharmacy.
	674	M. Moncrief	12	Health & Human Services	J. Zaffirini	21	L	М	Relating to the creation of the Health Professi Council, continuation of the Midwifery Board a the Texas State Board of Examiners of Dietitio and abolition of the Texas Board of Licensure Nursing Home Administrators.
	690	S. Carriker	30	Health & Human Services	J. Zaffirini	21	L	М	Relating to the regulation of the practice of ph therapy and occupational therapy and to the creation of a state board to replace the Texas of Physical Therapy Examiners and Texas Adv Board of Occupational Therapy.
	701	J. Leedom	16	Intergovernment Relations	K. Armbrister	18	L	М	Relating to interlocal cooperation contrasts for health care and hospital services.
	702	J. Leedom	16	Intergovernment Relations	K. Armbrister	18	L	М	Relating to the application of the Texas Health Maintenance Organization Act to hospital distr
10,2	708	J. Patterson	11	Economic Development	C. Parker	4	А	М	Relating to group health insurance for certain employers.
	725	F. Madla	24	Health & Human Services	J. Zaffirini	21	А	М	Relating to regulation of medical radiologic techn
НВ	771	P. Rosson	29	Health & Human Services	J. Zaffirini	21	L	М	Relating to medical records 100 years or
All I	799	J. Patterson	11	Health & Human Services	J. Zaffirini	21	A	М	Relating to mandatory premarital testing for limmunodeficiency virus infection.
	834	J. Zaffirini	21	Health & Human Services	J. Zaffirini	21	L	М	Relating to treatment of chemically dependent po
	839	M. Moncrief	12	Health & Human Services	J. Zaffirini	21	L	М	Relating to the regulation of the practice of nursi to the creation of a new state board to replace the of Nurse Examiners and the Board of Vocational Examiners.
	842	M. Moncrief	12	State Affairs	O. Harris	8	L	М	Relating to the power of certain licensing agen issue subpoenas in enforcement proceedings.
	872	F. Madla	24	Health & Human Services	J. Zaffirini	21	A	М	Relating to the regulation of the practice of per
	873	F. Madla	24	Health & Human Services	J. Zaffirini	21	G	М	Relating to the regulation of massage therapy
SB	886	D. Sibley	9	Jurisprudence	D. Henderson	7	Α	М	Relating to cooperative agreements among hos
	913	E. Lucio	27	Economic Development	C. Parker	4	Α	М	Relating to the selection of health care provid
	921	E. Lucio	27	Economic Development	C. Parker	4	A	М	Relating to recovery of damages for medical malpractice.
	924	M. Moncrief	12	Health & Human Services	J. Zaffirini	21	A	М	Relating to the regulation of certain clinical laboratory science practitioners.
	929	D. Sibley	9	Economic Development	C. Parker	4	Α	М	Relating to finding arbitration of claims for per injury or death resulting from negligence of a care provider.
	980	J. Brown	17	Economic Development	C. Parker	4	A	0	Relating to the inclusion of the services of list physical therapists in health insurance covera
	981	J. Patterson	11	Health & Human Services	J. Zaffirini	21	J	М	Relating to the approval of certain laboratories the Texas Department of Health.
	1003	S. Carriker	30	Health & Human Services	J. Zaffirini	21	А	F	Relating to the regulation of physician assista

D.	SPONSOR	DISTRICT	COMMITTEE	COMMITTEE CHAIRMAN	DISTRICT	STATUS	POSTURE	DESCRIPTION
	C. Parker	4	Health & Human Services	J. Zaffirini	21	A	М	Relating to the regulation of psychologists, professional counselors, social workers, and marriage and family therapists and to the creation of a new state board.
	M. Moncrief	12	Health & Human Services	J. Zaffirini	21	L	М	Relating to the continuation and function of the Texas State Board of Chiropractic Examiners and to the regulation of the practice of chiropractic.
52	C. Parker	4	Health & Human Services	J. Zaffirini	21	L	E	Relating to the continuation and operation of the Texas State Board of Medical Examiners and to the regulation of the practice of medicine.
65	C. Parker	4	Health & Human Services	C. Parker	4	Α	М	Relating to health insurance and health costs and the availability of health insurance coverage for certain individuals and small employers.
78	I. Harris	8	Health & Human Services	J. Zaffirini	21	Α	М	Relating to the regulation of the practice of chiropractic.
.30	I. Harris	8	Health & Human Services	J. Zaffirini	21	L	М	Relating to the regulation of podiatry and to the continuation and functions of the Texas State Board of Podiatry Examiners.
97	F. Madla	24	Health & Human Services	J. Zaffirini	21	A	М	Relating to granting licensed psychologists membership or privileges on the staff of a hospital or private mental hospital or other mental health facility.
98	F. Madla	24	Health & Human Services	J. Zaffirini	21	С	М	Relating to the disclosure of health and mental health care information by a provider.
05	F. Shapiro	2	Health & Human Services	J. Zaffirini	21	Α	М	Relating to parental notification before an abortion may be performed on a minor.
07	S. Carriker	30	Health & Human Services	J. Zaffirini	21	Α	F	Relating to the regulation of physician assistants.
44	R. Ellis	13	Jurisprudence	D. Henderson	7	L	М	Relating to the consent of a person seventeen years of age to donate blood or blood components.
45	R. Ellis	13	State Affairs	O. Harris	8	F	М	Relating to clarification of the procedures for organ donation.
65	G. Barrientos	14	State Affairs	O. Harris	8	A	М	Relating to compliance with certain federal standards concerning the prevention of transmission of the human immunodeficiency virus and other bloodborne pathogens.
86	F. Madla	24	Health & Human Services	J. Zaffirini	21	В	М	Relating to the Texas Natural Death Act.
97	K. Armbrister	18	Criminal Justice	J. Whitmire	15	L	М	Relating to the exemption of certain substances from Schedule I-V of the Texas Controlled Substances Act.
52	E. Lucio	27	Economic Development	C. Parker	4	Α	М	Relating to selection of doctors under the Texas Workers' Compensation Act.
09	C. Parker	4	Economic Development	C. Parker	4	L	М	Relating to medical liability actions and medical liability insurance.
110	C. Parker	4	Economic Development	C. Parker	4	L	М	Relating to state identification of, and certain liability insurance premiums for certain health care claims.
113	Luna	19	Health & Human Services	J. Zaffirini	21	F	М	Relating to fees charged by health care providers or health care facilities for medical or mental health records.
32	Luna	19	Health & Human Services	J. Zaffirini	21	A	0	Relating to the regulation of the practice of naturopathic medicine.

Texas DO/27

TEXAS HOUSE OF REPRESENTATIVES

BILL NO.	SPONSOR	DISTRICT	COMMITTEE	COMMITTEE CHAIRMAN	DISTRICT	STATUS	POSTURE	DESCRIPTION
	J. Carona	108	Business & Industry	K. Brimer	96	Α	М	Relating to limiting damage awards in certain workers' compensation claims.
7	J. Carona	108	Business & Industry	K. Brimer	96	L	М	Relating to covenants not to compete.
50	D. R. Uher	29	Criminal Jurisprudence	A. Place	59	А	0	Relating to reports of overdoses of controlled substances to law enforcement authorities.
56	B. McCall	66	Insurance	J. Smithee	86	A	F	Relating to the creation and operation of a prog to provide access to health insurance for employees of small groups.
59	B. Rabuck	16	Public Health	H. Berlanga	34	А	М	Relating to mandatory premarital testing for huminmunodeficiency virus testing.
63	B. Turner	73	Transportation	D. Cain	107	L	F	Relating to the regulation of mammography devand the practice of mammography.
79	J. Zaffirini	21	Human Services	H. Hilderbran	53	G	М	Relating to the requirement that the state development of selective contracting with health care providers for the provision of certain services to Medicaid recipients.
97	T. Goolsby	102	Public Health	H. Berlanga	34	G	М	Relating to the right of a patient or the patient's representation to a copy of the patient's medica records and to the charge for providing the cop
105	B. McCall	66	Licensing & Admin Procedures	R. Wilson	131	Α	М	Relating to casino gaming conducted by certain charitable organizations; to certain gaming conducted on Indian lands.
114	P. Haggerty	79	Public Health	H. Berlanga	34	A	F	Relating to the application of the prohibition on illegal renumeration to preferred provider organizations.
125	B. Hunter	71	Ways & Means	T. Craddick	82	G	М	Relating to fees paid by certain psychologists.
139	K. Bailey	140	Public Health	H. Berlanga	34	A	М	Relating to the use of administrative penalties for violations of the law regulating nursing hom and related institutions.
140	K. Bailey	140	Insurance	J. Smithee	86	А	М	Relating to basic health care coverage for certa persons.
	D. Danburg	137	Insurance	J. Smithee	86	A	F	Relating to mandatory health insurance coverage for certain medical examinations.
ALLE	W. Delco	50	Higher Education	A. Smith	136	G	М	Relating to establishing a minority doctoral incentive program.
SB 176						J		The second of th
	K. Brimer	96	Insurance	J. Smithee	86	L	F	Relating to basic group health insurance covera for certain small employers.
HB 233	K. Bailey	140	Public Health	H. Berlanga	34	A	М	Relating to cost estimates for procedures and services by hospitals and nursing homes and to reports on the status of health care services.
241	D. Kubiak	13	Public Health	H. Berlanga	34	L	F	Relating to the recertification of emergency me services personnel.
	H. Giddings	109	Insurance	J. Smithee	86	Α	F	Relating to benefits for immunizations of certain children under group health insurance policies.
SB 266	W 01:					J		
	W. Chisum	88	Public Safety	K. Oakley	4	Α	0	Relating to drug testing of applicants for original driver's licenses.
	D. Smith	135	Ways & Means	T. Craddick	82	Α	М	Relating to the application of certain profession fees and taxes.
	P. Gallego	74	County Affairs	B. Campbell	65	В	М	Relating to permitting hospital districts to vote representatives to appraisal district boards.
	B. Glaze	5	Public Health	H. Berlanga	34	L	L	Relating to the reporting of certain injuries to the Department of Public Health.
	T. Kamel	6	State Affairs	C. Seidlits	62	Α	М	Relating to funding for emergency and trauma provided to indigent persons from a portion of exemplary damages awarded in certain civil ca
	F. Bosse	128	Insurance	J. Smithee	86	Α	М	Relating to overpayments made by health insur
486	J. Hirschi	69	Public Health	H. Berlanga	34	G	М	Relating to the screening and treatment for tuberculosis of employees, volunteers, and inm in county and municipal jails and other correct facilities.

1	SPONSOR	DISTRICT	COMMITTEE	COMMITTEE CHAIRMAN	DISTRICT	STATUS	POSTURE	DESCRIPTION
	R. Junell	72	Human Services	H. Hilderbran	53	А	F	Relating to mandatory immunization of children in child-care facilities.
	D. Delisi	55	Public Safety	K. Oakley	4	L	G	Relating to the printing of a statement regarding a health care directive on the reverse side of a drivers license.
9	J. Culberson	130	State Affairs	C. Seidlits	62	Α	М	Relating to proof of a health care liability claim.
	J. Culberson	130	State Affairs	C. Seidlits	62	Α	М	Relating to the designation of expert witnesses by the claimant in a professional malpractice claim.
0	T. Kamel	6	State Affairs	C. Seidlits	62	Α	М	Relating to review of medical malpractice claims.
0	R. Junnell	72	Public Health	H. Berlanga	34	Α	М	Relating to approval by the Texas Department of Health for new drugs used in treating progressive, fatal diseases.
11	J. Harris	25	State Affairs	C. Seidlits	62	Α	F	Relating to the civil liability of certain persons providing uncompensated health care and health screening services.
	J. Harris	25	State Affairs	C. Seidlits	62	Α	F	Relating to liability for damages arising from emergency care.
	J. Harris	25	Insurance	J. Smithee	86	А	F	Relating to basic group health insurance coverage for certain small employers.
	J. Harris	25	Insurance	J. Smithee	86	A	F	Relating to premium rates and termination of coverage for health insurance sold to certain small employer groups.
97	J. Harris	25	Public Health	H. Berlanga	34	F	F	Relating to hospital staff privileges for doctors of medicine and doctors of osteopathy.
16	S. Schechter	134	Public Health	H. Berlanga	34	L	0	Relating to the exemption of certain psychologists from career counseling services requirements.
71	S. Thompson	141	Judicial Affairs	S. Thompson	141	Α	М	Relating to the adoption of the Durable Power of Attorney Act.
13	R. Lewis	19	Insurance	J. Smithee	86	Α	М	Relating to dental care benefits.
17	J. Smithee	86	Business & Industry	K. Brimer	96	A	М	Relating to qualified claims servicing contractors for workers' compensation insurance offered by certified self-insurers.
56	N. McDonald	76	Public Health	H. Berlanga	34	L	М	Relating to the regulation of the practice of professional nursing.
71	E. Naishtat	49	Public Health	H. Berlanga	34	L	М	Relating to treatment and care of persons with mental retardation.
95	C. Rodriguez	118	County Affairs	B. Campbell	65	L	М	Relating to the contracting authority and procedures of certain hospital districts.
61	M. Jackson	129	Higher Education	A. Smith	136	Α	М	Relating to contractual agreements between the Texas Higher Education Coordinating Board and Texas Chiropractic College.
34	J. Culberson	130	State Affairs	C. Seidlits	62	Α	F	Relating to the liability of a physician for certain health care liability claims.
07	R. Gutierrez	41	State Affairs	C. Seidlits	62	A	М	Relating to the liability of an independent contractor providing emergency medical services on behalf of a governmental agency.
15	K. Bailey	140	Insurance	J. Smithee	86	A	М	Relating to the regulation of certain managed health care firms.
16	N. McDonald	76	Public Health	H. Berlanga	34	С	М	Relating to infant and child immunization requiremtns.
33	H. Berlanga	34	Public Health	H. Berlanga	34	٦	М	Relating to the regulation of the practice of dentistry.
55	G. Maxey	51	Public Health	H. Berlanga	34	G	М	Relating to the duty of non-profit, tax exempt hospitals to provide charity care.
78	G. Maxey	51	Judicial Affairs	S. Thompson	141	A	М	Relating to the power of certain minors to consent to health care services.
34	K. Oakley	4	Insurance	J. Smithee	86	A	M	Relating to health insurance benefits for the treatment of certain bones and joints of the human body.
36	M. Stiles	21	Insurance	J. Smithee	86	Α	М	Relating to the selection of podiatrists.
00	R. Gutierrez	41	State Affairs	C. Seidlits	62	A	М	Relating to the liability for exemplary damages of certain emergency medical services personnel.
34	D. Danburg	137	Public Health	H. Berlanga	34	Α	М	Relating to the regulation of the practice of podiatry.

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BILL NO.	SPONSOR	DISTRICT	COMMITTEE	COMMITTEE CHAIRMAN	DISTRICT	STATUS	POSTURE	DESCRIPTION
	G. Maxey	51	Public Health	H. Berlanga	34	Α	М	Relating to the regulation of the practice of me physics.
1161	B. Turner	73	Public Health	H. Berlanga	34	А	0	Relating to the prescription of drugs or device an advanced nurse practitioner.
1184	B. McCall	66	Public Health	H. Berlanga	34	А	М	Relating to regulation of medical radiologic technology.
1189	L. Van de Putte	115	Public Health	H. Berlanga	34	G	М	Relating to the practice of pharmacy, including Texas State Board of Pharmacy, dangerous drand controlled substances.
1191	H. Berlanga	34	Public Health	H. Berlanga	34	A	F	Relating to use of osteopathic hospitals by he maintenance and preferred provider organizati
1206	R. Lewis	19	Public Health	H. Berlanga	34	L	F	Relating to anatomical gifts.
1315	M. Stiles	21	Insurance	J. Smithee	86	Α	М	Relating to the selection of podiatrists.
1330	J. Longoria	117	State Affairs	C. Seidlits	62	Α	М	Relating to the regulation of abortion.
1338	H. Berlanga	34	Public Health	H. Berlanga	34	A	М	Relating to temporary reciprocal licenses for c physicians, the relationship between hospitals other health care providers in rural areas and establishing a program to assist in recruiting a retaining health professionals.
1345	B. McCall	66	Public Health	H. Berlanga	34	L	М	Relating to licensing of adult day-care and adday health care facilities.
1424	G. Maxey	51	Public Health	H. Berlanga	34	A	М	Clarifying certain definitions in the Medical Pr Act.
1435	F. Hill	112	State Affairs	C. Seidlits	62	A	М	Relating to parental notification before an abomay be performed on a minor.
1449	C. Seidlits	62	Business & Industry	K. Brimer	96	A	М	Relating to medical benefits under the Texas Workers' Compensation Act.
1457	R. Wilson	131	Public Health	H. Berlanga	34	A	М	Relating to prohibiting hospital employees and medical staff from wearing surgical attire or he uniforms on the premises of certain food-relations businesses.
1462	L. Van de Putte	115	Public Health	H. Berlanga	34	L	М	Relating to the disclosure of certain information about certain patients of a physician.
1470	G. Maxey	51	Public Health	H. Berlanga	34	Α	М	Relating to immunizations for children.
1472	T. Hunter	32	Insurance	J. Smithee	86	Α	М	Relating to the selection of health care provide
1479	D. Cain	107	Public Health	H. Berlanga	34	L	М	Relating to the regulation of optometry and to continuation and functions of the Texas Optom Board.
1488	H. Giddings	109	Human Services	H. Hilderbran	53	А	М	Relating to the creation of the Center for Mind Health Development.
1513	L. Black	54	Public Health	H. Berlanga	34	G	М	Relating to the continuation and functions of t Texas State Board of Pharmacy and to the regulation of the practice of pharmacy.
1514	L. Black	54	Public Health	H. Berlanga	34	G	М	Relating to the regulation of podiatry and to continuation and functions of the Texas State of Podiatry Examiners.
1532	G. Coleman	147	Public Health	H. Berlanga	34	G	М	Relating to the consent of a person seventeen years of age to donate blood or blood components
1543	B. Carter	91	Higher Education	A. Smith	136	А	F	Relating to changing the name of the Texas C of Osteopathic Medicine to the University of N Texas Health Science Center of Fort Worth.
1569	J. Smithee	86	Insurance	J. Smithee	86	Α	F	Relating to uniform health insurance claim for
HB 1633	B. Rabuck	16	Human Services	H. Hilderbran	53	A	М	Relating to the payment rates for Medicaid so provided by certain providers.
1654	S. Wolens	103	Insurance	J. Smithee	86	A	М	Relating to the application of the Texas Health Maintenance Organization Act to hospital distr
1655	S. Wolens	103	State Affairs	C. Seidlits	62	A	М	Relating to interlocal cooperation contracts for health care and hospital services.
1665	D. Cain	107	Public Health	H. Berlanga	34	G	М	Relating to the creation of the Health Professi Council, continuation of the Midwifery Board at the Texas State Board of Examiners of Dietitic and abolition of the Texas Board of Licensure Nursing Home Administrators.

lo.	SPONSOR	DISTRICT	COMMITTEE	COMMITTEE CHAIRMAN	DISTRICT	STATUS	POSTURE	DESCRIPTION
	D. Cain	107	Public Health	H. Berlanga	34	G	М	Relating to the continuation and operation of the Texas State Board of Medical Examiners and to the regulation of the practice of medicine.
	G. Maxey	51	Public Health	H. Berlanga	34	L	М	Relating to the use of clozaril for schizophrenics.
4-10	D. Danburg	137	Criminal Jurisprudence	A. Place	59	A	М	Relating to the creation of the offense of sexual exploitation by a psychotherapist.
	K. Brady	15	Public Health	H. Berlanga	34	А	М	Relating to establishing a birth defects registry.
122	S. Turner	139	Public Health	H. Berlanga	34	Α	М	Relating to the regulation of certain clinical laboratory science practitioners.
	H. Berlanga	34	Public Health	H. Berlanga	34	L	М	Relating to the regulation of the practice of perfusion.
	B. Rabuck	16	Public Health	H. Berlanga	34	Α	М	Relating to mandatory premarital testing for sexually transmitted diseases.
	G. Maxey	51	Public Health	H. Berlanga	34	А	М	Relating to the creation, operation, and funding of the Texas Health Plan.
.49	W. Delco	50	Public Health	H. Berlanga	34	Α	М	Relating to regulating the practice of midwifery.
	D. Counts	70	Public Health	H. Berlanga	34	G	М	Relating to the regulation of the practice of physical therapy and occupational therapy and to creation of a new state board to replace the Texas Board of Physical Therapy Examiners and Texas Advisory Board of Occupational Therapy.
-	S. Wolens	103	Public Health	H. Berlanga	34	L	М	Relating to cooperative agreements among hospitals.
	J. Shields	122	Public Health	H. Berlanga	34	В	М	Relating to the confidentiality of the records and proceedings of a medical committee.
	D. Kubiak	13	State Affairs	C. Seidlits	62	A	М	Relating to the power of certain licensing agencies to issue subpoenas in enforcement proceedings.
972	N. McDonald	76	Public Health	H. Berlanga	34	L	М	Relating to the approval and certification of certain health organizations by the Texas State Board of Medical Examiners.
)01	J. Vowell	78	Public Health	H. Berlanga	34	A	М	Relating to the regulation of medical rehabilitation services.
145	G. Maxey	51	Human Services	H. Hilderbran	53	A	М	Relating to prescription drugs dispensed under the Medicaid Program.
)98	W. Delco	50	State Affairs	C. Seidlits	62	Α	М	Relating to exceptions to open meeting requirements for certain deliberations of municipal hospitals and municipal hospital authorities.
199	W. Delco	50	Public Health	H. Berlanga	34	G	ATT 10 Francisco	Relating to the containment of health care costs and to ensuring the quality of the delivery of health care services; creating the Texas Health Care Cost Containment Council; making appropriations.
80	L. Black	54	Public Health	H. Berlanga	34	L	М	Relating to the regulation of the practice of nursing and to the creation of a new state board to replace the Board of Nurse Examiners and the Board of Vocational Nurse Examiners.
83	R. Lewis	19	Insurance	J. Smithee	86	Α	0	Relating to the inclusion of the services of licensed physical therapists in health insurance coverage.
267	M. Martin	24	State Affairs	C. Seidlits	62	Α	М	Relating to medical liability actions and medical liability insurance.
:68	M. Martin	24	State Affairs	C. Seidlits	62	A	М	Relating to medical liability actions and medical liability insurance.
:69	M. Martin	24	State Affairs	C. Seidlits	62	A	М	Relating to state indemnification and liability insurance premiums for certain health care claims.
319	D. Counts	70	Business & Industry	K. Brifmer	96	A	М	Relating to the authority of the Texas Workers' Compensation Insurance Fund.
345	D. Uher	29	State Affairs	C. Seidlits	62	Α	М	Relating to liens of health care practitioners.
357	J. Culberson	130	State Affairs	C. Seidlits	62	A	M	Relating to expert witnesses in certain professional malpractice suits.
385	L. Van de Putte	115	Public Health	H. Berlanga	34	L	М	Relating to pediatric emergency medical services.
i64	E. Kuempel	45	Insurance	J. Smithee	86	A	M	Relating to the inclusion of the services of certain licensed hearing aid fitters and dispensers in health insurance coverage.
<u>4</u> 81	C. Rodriguez	118	Insurance	J. Smithee	86	Α	М	Relating to the inclusion of the services of certified psychological associates in health insurance coverage.
198	H. Berlanga	34	Public Health	H. Berlanga	34	L	F	Relating to the regulation of physician assistants.

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BILL NO.	SPONSOR	DISTRICT	COMMITTEE	COMMITTEE	DISTRICT	STATUS	POSTURE	DESCRIPTION			
HB 2507	R. Duncan	84	84	84	The second second	Insurance	J. Smithee	86	А	М	Relating to the assignment of health care been payments and waiver of deductibles and coinsurance coverage.
2532	N. McDonald	76	Public Health	H. Berlanga	34	Α	М	Relating to the Health Care Provider Referral			
2533	N. McDonald	76	Public Health	H. Berlanga	34	Α	М	Relating to membership or privileges on a homedical staff and to the authority of hospital medical personnel.			
2545	J. Hirschi	69	Public Health	H. Berlanga	34	A	М	Relating to consent for medical treatment by surrogate decision-makers on behalf of incapacitated or comatose patients.			
2548	J. Hirschi	69	Public Health	H. Berlanga	34	F	М	Relating to compliance with certain federal standards concerning the prevention of transmission of the human immunodeficiency and other bloodborne pathogens.			
2570	R. Lewis	19	Environmental Regulations	W. Chisum	88	А	М	Relating to medical waste disposal facilities.			
2635	W. Chisum	88	State Affairs	C. Seidlits	62	Α	М	Relating to abortions.			
2645	D. Counts	70	Public Health	H. Berlanga	34	G	М	Relating to the continuation and functions of Texas Board of Chiropractic Examiners and to regulation of the practice of chiropractic.			
2712	J. Johnson	9	Investments & Banking	K. Marchant	99	С	М	Relating to the assignment of health care be payments.			
2741	C. Rodriguez	118	Public Health	H. Berlanga	34	L	М	Relating to the regulation of professional counselors.			
2758	S. Hochburg	132	Public Health	H. Berlanga	34	Α	М	Relating to clarification of the procedures for donation.			
2763	J. Shields	122	State Affairs	C. Seidlits	62	А	М	Relating to indemnifying physicians who prov free medical care to indigent patients.			

If you are interested in further information on any of these bills, or if you want to know about other bills way have been filed and are not on this list, please contact the central office with your request.

BILL TYPE

SB Senate Bill
SCR Senate Concurrent Resolution
SJR Senate Joint Resolution
SR Senate Resolution

HB House Bill

HCR House Concurrent Resolution

HJR House Joint Resolution

HR House Resolution

LEGEND

- A Not Yet Scheduled
- B Passed Senate Committee
- C Passed Senate Committee Amended
- D Failed Senate Committee
- E Passed Senate
- F Passed House Committee
- G Passed House Committee Amended
- H Failed House Committee
- J Passed House
- K Conference Committee
- L Governor Signed
- M Governor Vetoed
- N Became Law Without Gover Signature

POSTURE

F Favor O Oppose M Monitor

Texas ACGP Update

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

The political debate over health care and how it will funded at the state and national level is heating up ng with the summer weather.

Several states are beginning to tax physician revenues fund Medicaid and other programs that extend dical benefits to the poor and uninsured. There is a nd for states to place taxes on physician revenues in ler to offset their budgetary shortfall.

in lieu of taxes, many states are imposing other essments on physicians, such as a licensing surcharge. me of the physicians who are affected by these new es or assessments are fighting back by filing suits ough their medical associations in state courts and allenging the idea in their state legislature. Many ysicians oppose provider taxes to cover Medicaid cause once provider taxes are established, they will come a source of revenue for purposes not related to alth care.

The opening salvo in Texas occurred at the Medical re Advisory Committee meeting on July 9, 1993. One the items on the agenda was rules to implement the propriation rider for the Governor's Health Care Cost nationment.

The reimbursement rules for services reimbursed by ource-based reimbursement fees under the Texas Edicaid Reimbursement Methodology (TMRM) Islude a cost-of-living adjustment (COLA). The propriations bill for the FY 94 - FY 95 biennium minates any funding for COLA increases. In thermore, any future COLA's are dependent on milable funding.

The bottom line is that Texas physicians should see 1/-8 percent cut on their Medicaid fees. Because of a ccessful suit by the hospital association, Texas hospitals full not be included in these cuts. It amounts to a leze on Texas Medicaid physician reimbursement for least the next two years.

In the interest of fairness, most Texas physicians would refer across-the-board cuts on all health care providers ther than being singled out as the group who must rovide the bulk of \$200 million in cost savings.

The MCAC voted against this proposal; however, these les must be effective on September 1, 1993, to meet intent of the appropriations bill. The Health and Iman Services Commission will vote on this issue later is month and simultaneous publication of emergency les and proposed rules in the *Texas Register* will take

place in August 1993. It will be effective on September 1, 1993. Legal action by the Texas Medical Association and TOMA may occur depending on the outcome of future events.

Given free choice of participation in Medicaid, physicians who choose not to participate would simply be immune to any cuts in fees under the TMRM. However, common sense should tell us that these programs, such as Medicaid and Medicare, could not remain viable without significant physician participation. The real question we should be asking ourselves is how far will the State of Texas and the federal government go to coerce physicians to participate in health programs against their free will? You and I both know the answer to this question. It is mandatory participation in health programs as a condition of licensure. Non-participation will equate to no license to practice medicine in the State of Texas.

You may say, wait a minute, national health insurance will solve this dilemma. What we tend to forget is that physicians have subsidized federally funded health programs for years by accepting payment well below market prices for similar services. In fact, state and federal health care policies have been, and will continue to be, predicated on the principle of physician subsidy of patient care.

What mechanism will be utilized against physicians?? Will it be a fee freeze, provider taxes on gross receipts of physicians, special assessments, or mandatory participation in certain health care programs as a condition of state licensure? Indentured servitude is not appealing to any physician.

This is the message that I now bring to all of you. The battle over health care policies has started with or without you. The outcome is in doubt. The stakes are high for all physicians. Your personal involvement is needed at all levels of government — local, state and national.

Changes in health care policies at the local, state and national level is inevitable. Organized medicine cannot stop these changes from occuring, but can help mold change in such a way as to prevent the destruction of the private practice of medicine as we now know it.

The Texas ACGP is calling upon all Texas D.O.s to stand ready to assist TOMA in whatever manner feasible as the health care debate is played out at all levels. We will need your active involvement in order to make a difference in the eventual outcome. Personal involvement is called self-preservation.

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News from TCOM

Hospital District Chief Named to TCOM Advisory Council



Tim Philpot, president and chief executive officer of the Tarrant County Hospital District, has been elected to the Texas College of Osteopathic Medicine Advisory Council by the TCOM Board of Regents. Philpot was elected to a three-year term.

"Tim Philpot has worked diligently to promote health

care in the local community and nationally," said TCOM President David M. Richards, D.O., in recommending Philpot's election. "During the past two years, he has been instrumental in the organization of the Tarrant Medical Education Consortium. He worked cooperatively with TCOM, the University of North Texas and other members of the consortium to find ways of improving the quality of medical education and the availability of medical care in Tarrant County." The consortium also includes the hospital district, Harris Methodist Health System and the University of Texas Southwestern Medical Center at Dallas.

Philpot has served as the hospital district president and CEO since 1978. He is the representative of the American Hospital Association on the board of directors of the National Board of Medical Examiners. Richards recently became the first osteopathic physician to be elected as an at-large, voting member of the NBME.

Philpot also is a member of the Texas Hospital Association's Board of Directors and the American College of Hospital Executives. He serves as secretary of the Texas Health Facilities Development Corporation and as a member of the Texas Commission on Health Care Reimbursement Alternatives and the Family Practice Residency Advisory Committee to the Coordinating Board on Higher Education for Texas.

TCOM Hires First Planned-Giving Director



Rod Hailey, a former Fort Worth bank vice president and trust officer, joined Texas College of Osteopathic Medicine as its first director of planned giving May 3.

Hailey will design and implement a program to identify prospective donors, focusing on alumni, past donors and local residents. His role is an essen-

tial part of an aggressive development program, said

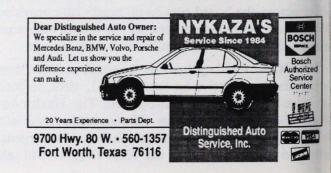
TCOM Associate Vice President for Development M Davenport, C.P.A. "Corporate donations, anni campaigns and phonathons are important — they're i first level of giving — but the way to establish a lai endowment and move ahead is through planned givin Rod's a Fort Worth native and has the contacts and i credibility to excel in this job."

A 1966 graduate of Texas Christian University, Hai believes the key to success in any planned-giving progres is an institution's visibility within the community. The need to get and keep our name in front of potent donors and their estate planners so that when they thin of the ultimate disposition of their assets, they think TCOM," Hailey said. "We want to be at the top of the list when they think of organizations that deserve the support."

Through their wills, participants in TCOM's planne giving program can make long-term contributions to t TCOM Foundation of donating cash, securities or restate; a percentage of their estate; or property remaini after other bequests have been fulfilled, all withorisking their current financial security, Hailey explaine "Gifts can be specified as unrestricted or for a spec purpose (such as scholarships or establishment of endowed chair). Other methods of tax-deductily planned giving include charitable trusts and I Insurance."

Hailey brings more than 26 years of trust experien—nearly all of it in banking—to his new position. I has been vice president and and trust officer at t former First National Bank of Fort Worth, senior vi president and trust officer at the former Republic Bar Ridglea and senior vice president and trust officer at t East Texas National Bank in Palestine, Texas. He serv on the board of directors of the Palestine Chamber Commerce, is a past member and treasurer of the Tarra County Association for the Blind and is a past memb of the board of directors of the YMCA Westside Branc

TCOM is a state-supported osteopathic medical schounder the direction of the University of North Tex Board of Regents. TCOM will be redesignated as t University of North Texas Health Science Center at Fo Worth August 30.



Blood Bank Briefs for Physicians

Coronary Artery Bypass Surgery and Cold Agglutinins

Margie B. Peschel, M.D., Medical Director — Carter Blood Center, Fort Worth, Texas



Some 368,000 coronary artery bypass graft (CABG) procedures were performed in 1989. An analysis of the data on transfusion practices revealed 70% of the patients were transfused with red blood cells. The transfusion practices were shown to be highly variable in laboratory as well as clinical

ctices. Physicians providing CABG must be familiar h the effects of cardiopulmonary bypass on blood enents and the special concerns related to serologic ing peculiar to patients undergoing CABG.

A key integral component of cardiopulmonary bypass buits are heat exchangers used to warm and cool the ient's blood. Hypothermia decreases metabolic nand, facilitating artificial oxygenation of diopulmonary bypass. Patients are often systemically oled by the heat exchange component of the diopulmonary bypass system. Moderate hypothermia the range of 28 °C to 32 °C is most often used. In lition, cardioplegia techniques are designed to provide bloodless operative field while preserving the ocardium during aortic cross clamping. The dioplegic solutions range from 4 °C to 10 °C.

This hypothermic environment in CABG surgery reases the potential for adverse clinical effects of coldictive proteins. These include otherwise benign cold ibodies such as low-titered auto antibodies, e.g., antilal naturally occurring cold reactive allo-antibodies, e.g., i-P1 occurring in healthy patients as well as the hologic cryoproteins including cold agglutinins and oprecipitate. Clinical complications of these hologic cold antibodies include hemolysis, crovascular occlusion and renal failure.

Based on reported clinical studies and the rarity of orted adverse effects in patients with non-pathologic d antibodies, it appears patients can undergo pothermic cardiopulmonary bypass without risk of nolysis or microvascular occlusion. It also seems warranted to use extended laboratory evaluation for d antibodies in asymptompatic patients with benign d antibodies.

in cases involving *pathologic* cold antibodies, e.g., ients with cold hemagglutinin disease, one must use asures as reducing antibody effect or normothermic diopulmonary bypass with blood cardioplegia. One all also determine the thermal threshold of the

antibody and use a systemic cardiopulmonary bypass temperature above the threshold of reactivity.

The issue of detection of cold antibodies takes on special significance in patients undergoing cardiopulmonary bypass and the biologic effect of cold antibodies can become significant in CABG patients.

References:

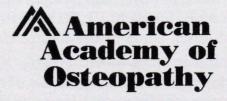
- 1. Surgeonor DM, Wallace EL, Churchill WH, Hao SHS, Chapman RH, Collins JJ. Red cell transfusions in coronary artery bypass surgery (DRGs 106 and 107). Transfusion. 1992;32:458-464.
- 2. Bracey A. Cold agglutinins and coronary artery bypass surgery. ASCP-Transfusion Medicine 92-6, 1992.
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THIRD ANNUAL OMT UPDATE

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Doctors Hospital Scholarship Foundation in Grove Awards Annual Scholarship



Doctors Hospital Scholarship Foundation in Groves has awarded its annual scholarship to Thomas Huff, a Junior at Texas College of Osteopathic Medicine in Fort Worth, announced Foundation President Mrs. Marilyn Morrell. A 1976 graduate of Bishop Byrne High School, Huff is the son of Mrs. Heloise Huff of Port

Arthur.

On the Dean's List for Fall 1992 (highest average for semester) Huff is a member of the Emergency Medicine Club, American Osteopathic Association, Texas Pharmaceutical Association, and recently coordinated the drug utilization evaluation at the Osteopathic Medical Center of Fort Worth.

Huff says, "The status of my career orientation continues to evolve with my studies." Before being accepted at TCOM, Huff was a pharmacist.

"The Foundation is planning a Luau Party fundraiser Saturday, September 11, in order to increase our award amount and help keep up with the rising cost of tuition," stated Morrell. "Last year our Sock Hop with an Elv Presley imitator was a tremendous success, raising ov-\$6,000."

The Foundation has no paid directors or personn and last year, many people volunteeered their service or time for the first fundraiser party.

TCOM students from this area are the primar candidates for receiving this scholarship, based uposcholastic achievement, motivation toward patient camedicine, and character.

Graduates of TCOM have a Doctor of Osteopath (D.O.) degree which allows them to offer a comprehensive range of modern medical services, including preventive medicine, diagnosis, drug therapy, surgery, and hospit referral. In addition, their unique training in OM (osteopathic manipulative therapy) provides patients with still another dimension of care. More than 50 million patient-visits are made to D.O.'s each year. Over half of the country's D.O.'s practice in small towns and ruraneas — demonstrating their desire to bring health can to those communities with the greatest need.

TOMA Develops New "Texas Controlled Substance Record Book"

The Texas Osteopathic Medical Association (TOMA) is pleased to announce the development of the TOMA "Controlled Substance Record Book." This 125-page record book was created specifically by physicians, for physician use. Development of such a book was the brainchild of James E. Froelich, III, D.O., of Bonham, who felt a log book designed just for physicians would lessen some of the frustration of having to keep such an inventory.

Special features of the TOMA "Controlled Substance Record Book" include complete and easy directions for proper use of the book; general information; a brief guide to controlled substance schedules; and laws and rules pertaining to controlled substance recordkeeping. The book is spiral bound and has a laminated cover to ensure long life even with heavy usage.

Texas law requires that an inventory of controlled drugs, which includes purchases, acquisitions or disposal of controlled substances, along with samples, be kept in a special log book. This book has been approved for use by the Texas Department of Public Safety.

This book is available to TOMA members for \$15; TOMA non-members may purchase it for \$20. To order, send your check made payable to: Texas Osteopathic Medical Association, One Financial Center, 1717 IH 35, Suite 100, Round Rock, Texas 78664-2901 or call 1-800-444-TOMA.

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Public Health Notes

Thoughts On Conquering Nature and The Evolution of Hantaviruses Nick U. Curry, M.D., M.P.H, F.A.C.P.M.



The lead article in the July 2, 1993 edition of MMWR begins, "During the 1980s, human immunodeficiency virus (HIV) infection emerged as a leading cause of death in the United States." The first cases of Pneumocystis carinii pneumonia and Kaposi's sarcoma in gay men were reported in

summer of 1981. This condition was later to be given broader definition and the name Acquired munodeficiency Syndrome (AIDS). Nearly twelve rs later we have reported 300,000 cases of AIDS and r 180,000 deaths from the condition in the United tes. While our understanding of the epidemiology and ology of AIDS has grown a great deal over the past eade, understanding of the origin of HIV-1 is still udy. Current thought is that the virus moved from human primates to humans in central Africa in recent ades (1950s-1960s) and then to other human oulations throughout the world, or alternatively from torically resistant African populations to susceptible pulations in Africa and elsewhere as a result of ruralan and international migration trends. At this point, re is no conclusive evidence for either scenario. There those who argue that the case for true African origin till in doubt. In 1993 we still are not clear as to the gin of HIV and the explanation for its emergence as killer of the 1980s.

in the same issue of MMWR quoted above, the final icle is titled, "Update: Hantavirus Infection — United tes." In the June 11, 1993 MMWR, a report was made an acute illness consisting of fever, myalgias, headache, I cough which were followed by the development of piratory failure. Unlike the situation with AIDS, public alth workers rapidly identified a serologic pattern in se cases consistent with hantavirus infection. It is most bught-provoking to witness the emergence of a deadly w viral syndrome one decade after the emergence of DS.

Hantaviruses are RNA viruses, and members of the nily Bunyoviridae. Hantavirus associated illnesses have en reported from China, Korea, Scandinavia, Russia, Balkans, and other areas of eastern and southern rope as well as Brazil. There have been periodic

reports of human hantavirus disease in the United States during the 1980s and 1990s. Until the reports beginning in June of this year, however, hantavirus disease had not been identified in the southwest United States. Another unusual aspect of these recently reported cases is the respiratory component which results in rapid respiratory failure and death in most of the cases who have ranged in age from the 20s to the 50s. Previous reports of hantavirus disease have described a renal syndrome with hemorrhagic fever. In previously reported cases, findings have been backache, headache, abdominal pain, anorexia, vomiting, proteinuria, hypotension and shock at times, but no respiratory failure. Such illnesses have been reported since the 1930s. The disease now being reported appears to be caused by a "newly recognized" hantavirus whose primary reservoir is Peromyscus maniculatus, the deer mouse. The modes of transmission are inhalation of aerosolized rodent urine, feces or saliva or direct inoculation of these materials.

Cases of hantavirus disease are now being reported in Texas. Physicians who suspect hantavirus disease should report it to the Texas Department of Health (1-800-252-8239). One tube of blood should be drawn (red top) and any tissue specimens saved. Ribavirin given IV has been of some therapeutic benefit when given early in the disease. It is not yet FDA approved. Rodents should be avoided, and rodent populations should be eliminated from areas of human habitation. Rodents and their excreta should not be touched with bare hands.

It was a beautiful spring day in 1981. I had recently completed my training at the University of Alabama at Birmingham. I was musing about the power of modern medicine, in particular about how we had or were about to conquer all the significant infectious diseases, at least in the United States. Humans would soon be free of infectious diseases forever. It appears I was somewhat premature. I was soon to begin a painful journey into the reality of our existence. Nature continues to confound and challenge us. Are there other deadly infectious agents out there which one day will be labeled "newly discovered?" Doubtless there are and they will be our new challenges far into the future.

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FYI

NEW WARNING APPROVED FOR OTC VAGINAL CANDIDIASIS PRODUCTS

Women who use nonprescription drugs for vaginal candidiasis will now be warned that frequent or persistent yeast infections may be due to one of many medical conditions, including infection with the AIDS virus.

Manufacturers of these products agreed in October 1992 to add new statements to the patient package leaflet and the product's carton. The statements say, in part: "Various medical conditions can damage the body's normal defenses against infection. One of the most serious of these conditions is infection with the human immunodeficiency virus (HIV — the virus that causes AIDS). Infection with HIV causes the body to be more susceptible to infections, including vaginal yeast infections."

Women who experience frequent or fpersistent yeast infections that do not respond to proper treatment are advised to see their physicians promptly to determine the cause. The labeling already states that recurrent infections may result from hormonal changes or from the use of oral contraceptives or antibiotics.

WOMEN'S HEALTH INITIATIVE BEGINS THIS FALL

Clinical investigation into the causes of disease and death in midlife and older women is due to begin on a large scale this fall. Known as the Women's Health Initiative, the 15-year, \$625 million study is being sponsored by the National Institutes of Health (NIH) and will involve more than 160,000 women ages 50-79. The goal is to understand and prevent the major causes of death and disability in American women: heart disease, cancer, osteoporosis and depression.

EXECUTIVE DIRECTOR OF TSBME TO RESIGN

During meetings of the Texas State Board of Medical Examiners June 14-15, TSBME Executive Director Homer R. Goehrs, M.D., announced his resignation effective October 31, 1993. A Search Committee has been appointed to select another executive director.

MAKE A NOTE: NEW NAME FOR TCOM

As of August 30, Texas College of Osteopathic Medicine will be known as the University of North Texas Health Science Center at Fort Worth.

FDA ORDERS COMPANIES TO TONE DOWN HEARING AID ADS

The Food and Drug Administration has warned six leading hearing aid manufacturers to toss misleading claims from their ads or face product confiscation and/or court action. Specifically, the FDA warned of ad claims that stipulate all users of hearing aids benefit equally, a claim the FDA says is unsupported by clinical data. Additionally, the FDA says some companies are going overboard in stating that the devices would eliminate background noise in crowded rooms, etc., when realistically, background noise can only be filtered out to some degree.

AOA OFFERS NEW VIDEO

Physicians looking for a new marketing tool to promote the osteopathic profession to patients and/or potential patients can take advantage of the AOA's new career videotape — Osteopathic Medicine: A Career in Caring.

The video can be played in an office

waiting room; loaned to patients to view at home; played at hospital events, etc. To borrow a copy, contact the AOA PR Department at 1-800-621-1773, extension 5854 or (312) 280-5854. The AOA also offers to make a copy at cost, in lieu of borrowing.

TMA INSTALLS NEW PRESIDENT

Robert M. Tenery, Jr., M.D., was recently installed as the new president of the Texas Medical Association. Dr. Tenery has an ophthalmology practice in Dallas.

CHANGES IN THE TEXAS CONTROLLED SUBSTANCES SCHEDULES

As of June 7, 1993, thebaine-derived butorphanol has been removed from Schedule II of the Texas Controlled Substances Act.

Additionally, the substance zolpidem has been added to Schedule IV of the Texas Controlled Substances Act, as of June 3, 1993.

TB WARNINGS

The Texas Department of Health warns that changes in the epidemiology of tuberculosis across the country have disrupted the national goal of eliminating the disease. According to the World Health Organization, TB has emerged in the 1990s as the world's worst infectious disease, although it was once thought to be under control. TB cases in Texas have increased 43 percent since 1987. For TB information, call your local health department, the closest TDH regional office, or the TDH state office at the following number: Information Line, TB Elimination Division, (512) 458-7447, Monday through Friday, between 8 a.m. and 5 p.m.

Commission Announces New Regional Alignment, Satellite Offices

The Texas Workers' Compensation Commission, as March 1, shifted four of its field offices to other ministrative regions and shifted responsibility for adding the claims of injured workers in 22 counties different field offices.

The realignment will allow the Commission to comply he the Uniform Service Region requirements mandated the Texas Legislature. The requirements, contained the general appropriations act, divide the state into service regions. State agencies must collect and report formation according to the statewide service regions. addition, agencies that maintain field or regional fices must align them so that their service areas aform to the statewide service region boundaries.

The TWCC realignment shifted the Wichita Falls Field fice from Region I to Region IV; Waco from Region o Region III; Bryan-College Station from Region II Region III; and Del Rio from Region IV to Region. A list of the counties that shifted to other field offices lows.

In addition, the Commission will establish satellite fices in Angleton and Del Rio. The satellite offices will staffed by an Ombudsman and support staff. The ellite offices are part of a pilot program to increase level of customer service provided to injured workers.

COUNTY NEW FIELD OFFICE

Borden Midland-Odessa

Brewster El Paso Brooks Laredo

Cottle Wichita Falls
Crockett San Angelo
Dawson Midland-Odessa
Erath Fort Worth

Gaines Midland-Odessa

Gonzalez Victoria
Hunt Denton
Jim Hogg Laredo
Kent Abilene
Lampasas Waco
Mills Waco

Montgomery Houston
Navarro Dallas
Runnels Abilene
San Jacinto Lufkin
San Saba Waco

Sutton San Angelo
Terrell San Angelo
Walker Houston

TCOM Lab Director Elected to TSBR Board

Texas College of Osteopathic Medicine faculty member eenee Q. Daniels, D.V.M., has been elected to a threear term on the board of directors of the Texas Society: Biomedical Research (TSBR).

TSBR is a nonprofit organization that supports medical research efforts to extend human life and hance human health.

Daniels has served as director of TCOM's Laboratory simal Medicine and Animal Care Facilities since 1989. earned his B.S. degree in engineering and animal ence from Southern University in Baton Rouge, suisiana in 1980 and 1981, respectively. He earned a ctorate degree from Louisiana State University School Veterinary Medicine in 1986.

Daniels is a member of the board of directors of the Ft Worth Zoo, and belongs to the American Veterinary

Medical Association, the American Association of Laboratory Animal Practitioners, the Laboratory Animal Management Association and the Scientist Center for Laboratory Animal Welfare.

Brain Brew

A recent study in *Psychopharmacology* reports that people who consume six cups of coffee daily have six percent quicker reaction times than noncoffee drinkers. Additionally, the six-cup drinkers scored four to five percent higher on memory and reasoning tests than coffee teetotalers. The study involved over 7,000 people.

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CHAMPUS News

CHAMPUS Test Expands from New Orleans to Four Military Base Areas in Texas, Louisiana

CHAMPUS expanded its "CHAMPUS Reform Initiative" test program from New Orleans to the areas around several military bases in Texas and Louisiana on May 1, 1993.

Three of the four bases are scheduled for closure. They are: Bergstrom and Carswell Air Force Bases, in Texas; and England Air Force Base, in Louisiana. The program in Louisiana also includes the area around the Army's Fort Polk.

CHAMPUS-eligible persons in any of the four areas who want to enroll in the part of the new program called "CHAMPUS Prime" will pay an annual enrollment fee, as follows:

- Families of active-duty E-4s and below no enrollment fee;
- Families of active-duty E-5s and above \$35 per member, with a maximum fee of \$100 per family.

Then, they will be assigned a primary health care provider and will receive their care from within a network of providers, paying a small fee for each visit (the amount of the fee depends on the type of service received, and on whether the patient is a member of an active-duty service member's or military retiree's family).

Here's a typical example of per-visit costs: For a visit to a primary care doctor's office, a member of an active-duty E-4's family will pay \$5; a family member of an active-duty E-5 or above pays \$10; a retiree or member of a retiree's family pays \$15. For laboratory and x-ray services, when not part of an office visit, the fees for the three categories of patients will be \$5, \$10 and \$10, respectively. For up to a 30-day supply of prescription, the costs would be \$4, \$4 and \$8, respectively.

Civilian health care providers who become part of the CHAMPUS Prime and CHAMPUS Extra network will file claims on behalf of their patients.

In the PPO (preferred provider organization) part of the program, which is called CHAMPUS Extra, the benefits are the same as under standard CHAMPUS. Families visit providers of care who are part of a network, and who have agreed to accept lower fees for their services to CHAMPUS patients. Patients' cost-shares are also reduced over standard CHAMPUS cost-shares. The PPO has no enrollment fee, but the regular CHAMPUS deductible applies.

Persons may obtain information about enrollment in CHAMPUS Prime, or information about CHAMPUS

Extra, by writing to: Foundation Health, P.O. Box 28 Rancho Cordova, Calif. 95741. Or, call 1-800-982-00

Foundation Health Federal Services, the n CHAMPUS contractor for the Bergstrom-Carswa England-Polk areas, will process new CHAMPUS clai for the standard CHAMPUS program for servi received by patients on or after May 1, 1993. The curr contractors for the four areas will continue to procelaims they received before May 1. They will a continue to receive and process CHAMPUS clai through June 30, for services received before May After June 30, the new contractor will receive and proceal claims, regardless of the treatment date.

The only exception to the above will be persons ware enrolled in a special program called "Medexcel," negstrom Air Force Base. For care received before Note these enrollees will have their claims handled by current contractor, and will continue to send their claim to Blue Cross-Blue Shield of South Carolina, P.O. E 100511, Florence, S.C. 29501-0511.

Military families may check with the Health Benet Advisor at the nearest base hospital or clinic to see the ZIP Code of their residence falls within the ZIP Co service area of one of the four bases in which the CHAMPUS Prime test program will operate.

Enrollment in CHAMPUS Prime is voluntary, a there's no enrollment requirement for CHAMPUS Ext CHAMPUS-eligible persons may choose to keep usi the standard CHAMPUS program instead.

The new contractor's addresses for submitting claiming the standard CHAMPUS program are:

For people living in the designated Texas areas:

Foundation Health Federal Services, Inc.

Texas Claims

P. O. Box 8997

Madison, WI 53708-8997

For claims questions, call 1-800-982-0029.

For people living in the Alexandria/Fort Pol. Louisiana, areas:

Foundation Health Federal Services, Inc.

Louisiana Claims

P.O. Box 8996

Madison, WI 53708-8996

For claims questions, call 1-800-847-7463.

CHAMPUS Now Treats HMO Coverage Like Any Other Primary Health Insurance

CHAMPUS has changed the way it cost-shares civilian alth care when a person also has coverage by an HMO alth maintenance organization).

Previously, CHAMPUS shared the cost of only that rtion of a charge which the HMO didn't cover. But AO coverage has become much more common as mary health insurance for CHAMPUS-eligible fillies; and these families have more frequently countered situations in which an HMO has specific rment limits on the types of care that it covers. Also, the HMOs' user fees have increased significantly, and the HMOs require their members to pay several addred dollars for each inpatient hospital admission.

Result: Some families had to pay substantial amounts civilian care when an HMO limited its payment, and IAMPUS policy may not have allowed the program pay at all in these cases.

So, CHAMPUS has changed its policy, and now usiders HMOs to be the same as any other primary alth insurance coverage. CHAMPUS will share the cost covered care received from an HMO (including the MO's user fees), after the HMO has paid all it's going pay, under the following conditions:

- (1) The provider of care must meet CHAMPUS provider certification standards;
- (2) The type of care or service provided must be a CHAMPUS benefit, and must be medically necessary.

When an HMO has a limit on how much it will pay, CHAMPUS will share the cost of only that portion of the charge which the HMO does not cover. This includes emergency services received outside the HMO's normal service area.

CHAMPUS generally won't cost-share services a person obtains outside the HMO, if the services are available through the HMO. For example, if an HMO normally would cover a particular service, but it denies payment because it could have provided the service (such as a situation in which a patient obtains psychiatric services outside the HMO because he or she doesn't like the HMO's psychiatrist), CHAMPUS in most cases won't pay anything on the claim.

CHAMPUS contractors will re-process or adjust claims involving HMO coverage that were submitted before March 3, 1993, and were processed under the old rules, when asked to do so by the submitter.

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L. Roger Knight, M.D.

Internal Medicine
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1400 West Southwest Loop 323

Chiefs of Services

Mr. Olie Clem, C.E.O. Tyler, Texas 75701

Emergency Steve Rowley, D.O.

OB-Gyn Loren Goss, M.D.

Radiology E. B. Rockwell, D.O.

Anesthesiology
Edmund F. Touma, D.O.

Phone: 903-561-3771

Texas DO/41

Opportunities Unlimited

PHYSICIANS WANTED

PHYSICIAN-OWNED EMERGEN-CY 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., 4916 Camp Bowie Blvd., Suite 208, Fort Worth, 76107. 817/731-8776. FAX 817/731-9590. (16)

BUSY, PROGRESSIVE — Fort Worth private practice seeks 2nd BC/BE OB/GYN physician. Great location, all practice amenities, partnership potential. Contact in confidence. Send CV to: Vernon J. Hayes, D.O., 2600 Montgomery & I-30, Fort Worth, 76107; 817/731-3936; fax 817/782-0206. (26)

PRACTICE AVAILABLE — loyal family practice available in resort community with mixed staff hospital near metroplex. Physician desiring to travel. Inquire 800/437-7112. (42)

DALLAS AREA GP CLINIC needs associate doctor on locum tenens. 6-50 hours per week. Call 214/941-9200 (02)

CORRECTIONAL HEALTH CARE
— Full time primary care physicians for statewide adult correctional facilities. Competitive salary, excellent benefits, variety of locations, student repayment program. Additional information on locations and interviews, contact: Glynda Baker, Texas Department Criminal Justice; 409/291-4020. (36)

PRACTICE FOR SALE — Southeast Dallas Family Practice Clinic. Physician retiring. 2,250 sq. ft. Established in 1960. Excellent location and visibility. 5 exam rooms, lab, 3 offices. Includes all equipment. Leave message at 214/388-9438. (21)

HIGH INCOME — successful GP clinic in Dallas area for sale. Will consider lease with option to buy and/or will finance to individual practitioner. Call 214/941-9200. (18)

FORT WORTH — Immediate opening for BE/BC physician to work full or part time in family practice/minor emergency clinic. No OB, week-ends or call. Potential for future partnership if desired. Contact Robert Hames, D.O., 817/237-3333. (25)

TEXAS DO PHYSICIANS AND SURGEONS needed for medical legal consulting work in Texas and other states. Excellent compensation. Extremely interesting work. All replies confidential. Medicomm Consultants, Inc. 719/473-9432. (04)

TEXAS DO'S — We have multiple opportunities with clinics and small hospitals throughout Texas. Contact Bennett & Associates, Physician Placement Specialists. Call collect 915/550-9096. (10)

HOUSTON AREA — The town of Anahuac needs a family practice physician. New office and reasonable guarantee awaits. We are on the bay in Chambers County. Contact: John Luff, Bayside Community Hospital, Anahuac, TX 77514 or call 409/267-3143. (31)

NURTURING PHYSICIAN WANTED — Lubbock, TX, for bariatric practice with interests in nutritionals, exercise, patient counseling. Training provided in use of anorexiogenics. Current DEA required. Salary negotiable, no hospital call, alternate weekend with another female physician. Malpractice, medical, dental and bonus package provided. If you are tired and want to slow down, you will enjoy this practice. Dr. Pangle - 800/772-6466 or p.m. 806/795-6466. (34)

MODERN MINOR EMERGENCY/AMBULATORY care centers seeking well-rounded practitioner for expansion in Central and NE Texas. Generous modified fee-for service income package with superior professional liability insurance included. Must have good experience in family medicine. Industrial medicine experience helpful. Send CV or call Keith Williams, M.D., 3305 N. 3rd, Ste. 304, Abilene, TX 79603, 915/676-3023. (37)

PHYSICIAN WITH TEXAS LICENSE — needed to practice general medicine at Student Health Center. 2-3 years practice experience. 40-hour week, Mon.-Fri. Minimal call duty. Fringe benefits. Contact Sheila Meyer, Dir., University of North Texas Health Center, P.O. Box 5158, Denton, TX 76203, 817/565-2786. EO/AAE. (39)

PHYSICIANS NEEDED — full or part-time for family practice or pediatrics in Houston, Texas. Contact Dr. Botas, 713/644-3602. (46)

WANTED — Female D.O. to share fice space. Very busy Fort Worth far practice has immediate opening BE/BC. Contact Dr. Carla Devenp at (817) 377-0317. (55)

OZONA — The town of Ozon Texas, located in West Texas' Crock County is seeking a Texas Licens Family Practitioner. Salary Guaran Negotiable. Sign on bonus. Moving penses paid. No start up costs, and st supplied. Two practicing physicians crently. Inquire Crockett Cour Hospital, P.O. Box 640, Ozona, Texas 76943 and/or call Gerard Phillips (915) 392-2671. (56)

TWO FAMILY PRACTICE/OB'S D.O. or M.D. for nice (dry climate) sm West Texas town. 100 or more deliver per year. \$140K guaranteed net ta home. Relocation paid. Call collect Be nett & Associates (915) 550-9096. (5

INTERNIST needed for nice (climate) rural West Texas tow Guaranteed net take home of \$140 Relocation paid. Call collect Bennett Associates (915) 550-9096. (58)

RADIOLOGIST needed to cover to smaller West Texas towns. \$200 guaranteed net take home. Relocati paid. Call collect Bennett & Associat (915) 550-9096. (59)

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LOCUM TENEN SERVICE — f the Dallas/Fort Worth Metrople Experienced physician in family practi and emergency medicine offerindependable quality care for your patien at competitive rates. Contact: Doyle Gallman, Jr., D.O., 817/473-3119. (2)

BOARD CERTIFIED GENERA PRACTITIONER — working as i dependent contractor. Ten years e perience. Available by appointmer \$100 per hour plus expenses. Will fu nish liability insurance. No obstetric please. Contact: TOMA, Box 27, Qi Financial Center, 1717 IH 35, Suite 10 Round Rock, TX 78664-2901. (27)

FFICE SPACE AVAILABLE

OR LEASE — 1,250 sq. ft. medical ce in hospital district between edale and Magnolia; also, will build up to 3,000 sq. ft. medical ding on Hulen between Vickery and Fwy. 338-4444 (12)

ULF COAST CLINIC — 4,100 sq. o include lab and (4) suites. New y base on beautiful Gulf of Mexico. wing Community. Hospital and sing home three blocks away. Lease sible purchase in future). Contact Kumm 512/758-3660. (17)

OR RENT — Medical office in Ind Prairie. Approximately 3,000 sq. office presently occupied by general seen. Share space and overhead expess. Across street from D/FW lical Center. Call 214/660-3188. (22)

FFICE SPACE AVAILABLE — for e in dental garden office building. Froximately 1,080 sq. ft. Ideal locator for family practice. Near Park Cities of Dallas. Call Dr. John Rumley, 2/528-3770. (32)

HREE ROOMS FOR RENT — in tor's office. Forest and Marsh Lanes—North Dallas. Abundant close park-Furnished/unfurnished. Rent otiable. Full-time/part-time. 2/351-4724. (47)

1EDICAL CLINIC — for sale or

∴ Six months free rent. Contact:

MA, Box 60, One Financial Center,

1 IH 35, Suite 100, Round Rock,

1 as 78664-2901. (60)

ROFESSIONAL OFFICE SPACE
R LEASE — NW San Antonio,
75 SF in free-standing professional
ter. Space is currently occupied by
lily practitioners. Excellent finisho, on-site owner/mgmt. Flexible
ns. Possibility of adjacent 1,532 SF
oming available. For information
of or to view premises, call Dr.
I nson at (210) 681-4278. (61)

MISCELLANEOUS

R SALE — Examination tables, electrardiographs, sterilizers, centrifuges, irlpools, medical laboratory equipent, view boxes, weight scales, IV and and much more. 40-70 percentings. All guaranteed. Mediquipentific, Dallas, 214/630-1660. (14)

FOR SALE — Late model X-ray equipment and accessories; complete ob/gyn tables; waiting room chairs; hydraulic stretcher; transport stretchers; culture counter and diluter; storage cabinets; office desks; treatment tables; wheelchairs; and assorted other items — very good condition. Contact: Dr. Glen Dow or Office Manager, 817/485-4711. (48)

FOR SALE — Office equipment of deceased physician. McManus Table, Spinalator, miscellaneous instruments, cabinets, odds and ends. Priced to sell. Phone: (903) 597-4253. (51)

One They Couldn't Flush This Session

Although it failed in 1991, the Texas Legislature finally passed the "potty parity" bill which requires public arenas to have twice as many toilets for women as for men. The bill affects facilities built or renovated after this year.

CARDIOLOGY FELLOWSHIPS

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the major teaching hospital for the
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Program includes Clinical Cardiology, including CCU, Cardiac Telemetry, Post-op open hearts. Non-invasive cardiology Includes: 2D, Colorflow, TE Echo, Spec Thallium, other Nuclear Cardiology modalities. Invasive interventional cardiology including PTCA and Coronary Atherectomy. Program leads to Certification in Nuclear and/or interventional cardiology.

For further information, please contact:

David Elbaum, D.O.
Cardiology Fellowship Program Director
Cooper Hospital - Center City
201 N. Eighth Street
Philadelphia, PA 19106
215-238-2406

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MEDICAL CLINIC — for sale or nt. Six months free rent. Contact: DMA, Box 60, One Financial Center, 17 IH 35, Suite 100, Round Rock, xas 78664-2901. (60)

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MISCELLANEOUS

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