AMA Chooses Missouri Physician as its Next President Elect!

by the Missouri Delegation to the AMA; summarized by Charles W. Van Way, III, MD

Physicians elected Missouri doctor David O. Barbe, MD, as its next President elect during the AMA’s Annual Meeting in Chicago. Dr. Barbe is the fourth Missouri President to hold this honor.

The biggest news for Missouri physicians this year: during the American Medical Association Annual Meeting, June 10-15, physicians from around the nation elected Missouri doctor David O. Barbe, MD, Mountain Grove, as its next President elect.

Dr. Barbe has served on the AMA Board of Trustees, and is its past Chair, and also on the Council on Medical Service. He will serve as AMA President in 2017-18. He will represent us, and all physicians, very well indeed. If you are reading this and are not an AMA member, join now.

Missouri’s influence will never be greater than over the next two years. And we owe a big thanks to Liz Fleenor, Managing Editor of Missouri Medicine, who very capably ran the election campaign.

The AMA has, after an eight-year revision, approved a comprehensive update of the Code of Medical Ethics. It will shortly be available to all on the AMA web site. This has been a major and somewhat contentious effort, but appears to have been resolved to the approval of all. In a related issue, telemedicine received guidelines which will hopefully ensure that quality care is provided through these electronic interactions. Telemedicine is growing rapidly. Who knows, your next doctor’s appointment may be over your iPad or at a kiosk at the mall!

Our Heart of America Caucus, which includes Missouri, Kansas, Oklahoma, and Arkansas, was torn this year, as both Oklahoma and
Missouri fielded candidates for President elect. Like most other states, we join forces with other state delegations in our region to ensure that our voice is heard in all of the reference committees and deliberations. Leaders of all four state delegations handled the potentially-disruptive conflicts of interest in a thoroughly professional manner, preserving our alliance. Congratulations for his part in this effort to Edmond Cabbabe, MD, of St. Louis, Chair of the Missouri Delegation.

Last year, Congress finally repealed the Sustainable Growth Rate formula. Its substitute was called the Medicare Access and CHIP Reauthorization Act of 2015 – i.e., MACRA. There will be much more on this subject in Missouri Medicine in the future. At this AMA meeting, the acting administrator for CMS, Andy Slavitt, spoke extensively. He told delegates that physicians will have significant input to the new regulations and to how they will be implemented. To get involved, go to https://breaktheredtape.org, and sign up. The AMA has a great deal of information on its website at http://www.ama-assn.org/ama/pub/advocacy/topics/medicare-physician-payment-reform.page.

The opioid epidemic continues to kill. In 2014, there were 47,000 deaths from drug overdose, and the number continues to increase. More of these deaths were from misused prescription drugs than from street drugs. Drug overdoses now kill more people than motor vehicle crashes or gun violence, both of which continue to decline. There was a great deal of concern about this, and a number of resolutions. The AMA strongly supports the increased availability of naloxone. A resolution calls for an end to the notion of “pain as the fifth vital sign.” Another condemned the use of patient satisfaction surveys which reward physicians and hospitals for overprescribing opioids. The AMA continues to strongly supported prescription drug registries, an issue of particular relevance in Missouri. We retain the distinction of being the only state without such a registry, a distinction we would be very happy to lose. The AMA supports new guidelines on opioid use from the CDC. These advocate the usefulness of non-opioid drugs for pain relief. Visit http://www.cdc.gov/drugoverdose/prescribing/guideline.html to review the guidelines.

Dysfunctional electronic health record systems were a significant focus. We know that poorly performing EHRs are a major source of physician stress and dissatisfaction. James Madera, MD, AMA Executive Vice-President, spoke of the “digital dystopia.” The AMA works strongly for better transparency, interoperability, better functionality, and improved ease of use. The AMA is working along several lines to improve the present system.

The AMA has long been concerned about gun violence. Partly in response to the outrage in Orlando, the HOD passed resolutions calling for universal background checks for all firearms, and to Congress to authorize federally-supported research on gun violence.

A number of issues around testing and certification were discussed. A resolution passed to do away with the United States Medical Licensing Examination (USMLE) Step 2 Clinical Skills (CS), and its osteopathic equivalent, the Comprehensive Osteopathic Licensing Examination (COMLEX) Level 2-Performance Examination (PE). Medical students and residents have long held these examinations to be expensive, burdensome, and of little value.

Maintenance of Certification (MOC) continues to be a major issue for physicians. Several resolutions dealing with the modification or even elimination of MOC passed the HOD. Perhaps the most important was a resolution opposing examination-based MOC and Maintenance of Licensure (MOL). This would completely change current practices, and marks another step in the ongoing AMA effort to reform MOC and MOL.

There is continuing concern about the mismatch between MD and DO graduates and residency places. A resolution called on Congress to fund more residency positions, and to investigate alternative ways of funding graduate medical education. As I noted last year in a similar report, “This year, as many as 1,500 MD and DO graduates
AMA REPORT

from U.S. schools, plus about 3,000 American graduates of international schools, were unable to find residency positions after graduation. There simply aren’t enough jobs to go around.” Unfortunately, the statement is as true this year as it was last year.

Related to this was concern over the cost of medical education. The AMA Foundation continues to fund medical student scholarships, but the need is far greater than a single foundation can meet. The AMA urged the AAMC to conduct a study of student indebtedness, which will be useful, but will probably just re-state the problem.

As always, the HOD passed many resolutions about small, yet important, issues. Of particular interest was a Missouri resolution supporting inclusion of direct primary care as a qualified medical expense by the IRS. Among other things, this would allow funds in medical savings accounts to fund direct primary care.

Several other resolutions were:

• banning powdered alcohol
• advocating disposal programs for unused medications
• testing rental properties for radon
• addressing sexual assault on college campuses
• preventing violence to health care workers, and delaying school start times for teenagers
• researching violence (verbal, physical) between law enforcement and citizens
• increased funding for the CDC
• advocating control by the FDA over nicotine delivery systems (this latter may have been overtaken by the FDA itself).

Several resolutions dealt with water supply, focusing on eliminating lead in pipes, shortening the “grace period” for municipalities to correct lead levels in water, and making the water supply safer for the public.

Such resolutions are routine at the AMA meeting. But they are important. Improving personal and public health in many small ways is something we should all support. The AMA is constantly working towards improvement of our health system. Do you see something that needs to be recognized, or improved? We’ll be looking for new resolutions for the Interim Meeting in November, and the Annual Meeting next June. Speak up!

There is a new president of the AMA. Andrew W. Gurman, MD, an orthopedic hand surgeon from Altoona, Pennsylvania, has been in the AMA leadership for eight years, as Speaker of the House of Delegates, and as a member of the Board of Trustees. His inaugural address was a call to get involved. We are in the midst of accelerating change, and we must advocate on our own behalf, and in the interests of our patients. Because if we do not, who will?

AMA Presidents from Missouri

<table>
<thead>
<tr>
<th>Year</th>
<th>Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>1854-55</td>
<td>Charles A. Pope</td>
</tr>
<tr>
<td>1881-82</td>
<td>John T. Hodgen</td>
</tr>
<tr>
<td>1887-88</td>
<td>E. H. Gregory</td>
</tr>
<tr>
<td>1927-28</td>
<td>Jabez N. Jackson</td>
</tr>
<tr>
<td>2017-18</td>
<td>David O. Barbe</td>
</tr>
</tbody>
</table>

Missouri representatives, from left: Ravi Johar, MSMA President; J. Regan Thomas, former Missouri Medicine Editor and plastic surgery delegate; and Jerry Kennett, AMA Council on Legislation.

Missouri Delegation, from left: Barbara Hover, Alex Hover, MD, Rebecca Hierholzer, MD, Charles Van Way, MD, Debbie Barbe, David Barbe, MD, Marsha Conant, James Conant, MD, Rima Cabbabe, Edmond Cabbabe, MD, Kay Johar, Ravi Johar, MD, Sandra Murdock, and Nathaniel Murdock, MD.