MSMA President: Physicians Are More Than Just Providers

With the legendary skull gavel, newly installed President Joseph Corrado, MD, Mexico, (above right), stated, “I am filled with pride and honor that you have given me the opportunity to be your 160th president, representing all the physicians of this great state of Missouri. I promise to do the very best I can and ask your indulgence in doing so, hopefully I’ll make you proud.”

During his presidential inaugural address at the 160th Annual Convention, March 23-25, in St. Louis, he was passed the reins of MSMA by Warren C. Lovinger, Jr., MD, (left), and continued, “We are not merely just providers. That term bothers me. I would like to discuss with you the importance of the role of being a physician, and what that means. What a privilege, a calling, unlike any other. With extraordinary demands and personal sacrifice to you and family. The importance you have to your community and patients.”

Dr. Corrado, a Diplomate of the American Board of Surgery, is currently the Chief of Surgery at SSM-St. Mary’s Audrain Hospital in Mexico. He has served as Chief of Staff, Cancer Liaison and Chairman, and has been on every committee of the Audrain Medical Center in the last 36 years.

He outlined the goals for his term, which includes the patient-first concept; the importance of rural medicine; and the benefits of MSMA and organized medicine. The three-day Convention attracted more than 500 attendees to St. Louis. Look inside for more Convention awardees, photos, resolutions, and new officers. Complete coverage in the May/June issue of Missouri Medicine.

Extended Substance Abuse Treatment for Postpartum Women

A bill that would expand MO HealthNet benefits for pregnant women to provide substance abuse treatment for up to one year after giving birth is continuing to make its way through the legislative process in the final weeks of session.

House Bill 2280 has been approved by the House and awaits passage in the Senate. Implementing this policy would require a federal waiver, so the Department of Mental Health and Department of Social Services would have to report to the House Budget Committee and Senate Appropriations Committee on compliance with federal cost neutrality requirements within 15 months.

Extending this treatment for postpartum women would decrease the likelihood of substance abuse relapse. The bill sponsor expressed her hope during committee testimony that improved postpartum coverage would allow more children to safely stay at home with their parents, decreasing the number of children that must be taken into foster care due to parental substance abuse. MSMA supports this legislation and testified in favor of the bill.

SHINE Rolls Out Patient Portal

For Missouri patients, there is now a new patient portal option, one which allows patients to access and control their personal health records in one place – myMOHealthRecor ds. SHINE, the Show Me Health Information Network of Missouri, and the Missouri State Medical Association provide myMOHealthRecords as a one-stop site for personal health care information.

SHINE, Missouri’s physician-led health information exchange (HIE), encourages the use of the myMOHealthRecords patient portal to manage health records. Other valuable components include online medical record access, secure messaging, tracking of critical health information, secure maintenance of important documents, up-to-date health information and education, and new health information alerts. myMOHealthRecords is certified by the Office of the National Coordinator (ONC) and meets all of the Meaningful Use and Merit-Based Incentive Payment System (MIPS) requirements, including interoperability.

For more information about myMOHealthRecords, visit: www.mymohealtherecords.com.
160th House of Delegates Resolution Actions & Decisions

Resolution #1 – Sale of Tobacco Products in Pharmacies
**Action: Amended Resolution #1 Adopted**
Resolved, that the Missouri State Medical Association declare the practice of selling tobacco and vapor products in pharmacies as imprudent from a public health perspective; and be it further

Resolved, that the Missouri State Medical Association encourages its members and all physicians to encourage their patients, when possible, to support pharmacies that do not sell tobacco and vapor products.

Resolution #2 – Creating Sustainable Strategies to Enhance Primary Care in Missouri
**Action: Substitute Resolution #2 Adopted**
Resolved, that the Missouri State Medical Association develop a working group to study and address long-term sustainable strategies that enhance the number of practicing primary care physicians in underserved areas of Missouri.

Resolution #3 – Support for Legislation Creating Needle Exchange Programs in Missouri
**Action: Substitute Resolution #3 Adopted**
Resolved, that the Missouri State Medical Association support legislation authorizing needle exchange programs in the state of Missouri.

Resolution #4 – Statewide Adoption of the St. Louis County Prescription Drug Monitoring Program
**Action: Resolution #4 Adopted**
Resolved, that the Missouri State Medical Association support legislation to adopt the St. Louis County Prescription Drug Monitoring Program (PDMP) as the State of Missouri’s PDMP.

Resolution #5 – Create Standardized Priority Menu for Physicians Calling in Prescriptions
**Action: Resolution #5 Referred to MSMA Council**
Resolved, that the Missouri State Medical Association, in partnership with the Missouri Pharmacy Association, work to create a standardized priority menu option for physicians when calling in a prescription to a pharmacy; and be it further

Resolved, that this standardized priority menu concept be taken to the American Medical Association for implementation at a national level.

Resolution #6 – Medical Records Custodial Storage
**Action: Resolution #6 Referred to MSMA Council**
Resolved, that the Missouri State Medical Association work with the Missouri Board of Registration for the Healing Arts to address the issues of custodial records storage upon retirement or relocation.

Resolution #7 – Maternal Mortality Review Board
**Action: Substitute Resolution #7 Adopted**
Resolved, that the Missouri State Medical Association support the creation and funding of a Missouri Maternal Mortality Review Board; and be it further

Resolved, that the Missouri State Medical Association encourage the State of Missouri to use the CDC WISDOM Database Program for analysis and storage of data.

Resolution #8 – Opioid Continuing Medical Education Programming
**Action: Amended Resolution #8 Adopted**
Resolved, that the Missouri State Medical Association promote or develop a voluntary web-based opioid education program and make it available at no cost to MSMA members with continuing medical education credit.

Reference Committee A: from left, Lauren Umstattd, MD, Columbia; Ted Groshong, MD, Columbia; Michael O’Dell, MD, Kansas City, Chair; Jeff Copeland, MD, St. Charles; and Kirsten Dunn, MD, St. Louis.

Reference Committee B: from left, Brian Biggers, MD, Springfield; Jon Dehner, MD, St. Louis; I.J. Singh, MD, St. Louis, Chair; Charles Van Way, III, MD, Kansas City; and Ms. Lauren Drake, Kirksville.

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Resolution #9 – Membership Applications Included with Licensing Information Packets
Action: Resolution #9 Adopted
Resolved, that the Missouri State Medical Association approach the Missouri Board of Registration for the Healing Arts and request that MSMA and local component society member applications be included in the initial mailing to new physicians licensed to practice in the State of Missouri.

Resolution #10 – Collection of Breastfeeding Data at Well-Baby Visits in First Year of Life
Action: Substitute Resolution #10 Adopted
Resolved, that our MSMA explore the feasibility of a study on the collection of breastfeeding data with state Practice Based Research Networks and relevant specialty medical associations.

Resolution #11 – Allow the Missouri DEA Professional Staff Curriculum Time at Missouri Medical Schools to Present Information on Scheduled Drug Prescribing Practices in Missouri
Action: Resolution #11 Not Adopted
Resolved, that the Missouri State Medical Association encourage the Medical Schools to negotiate with the DEA on a suitable number of hours devoted within the curriculum for Missouri DEA Professional Staff to educate the students on scheduled drug prescribing practices within Missouri.

Resolution #12 – Ensuring Safe and Collaborative APN Scope of Practice
Action: Resolution #12 Not Adopted
Resolved, that our MSMA study methods for advancing the scope of advanced practice nurses which include specific safety mechanisms for practice within the state of Missouri; and be it further

Resolution #13 – Improved Nomination Process
Action: Resolution #13 Referred to MSMA Council
Resolved, that the Missouri State Medical Association appoint an Ad Hoc Committee or Task Force to bring the Council a recommendation for a Nominations process that includes the following: 1) announcement of the candidates to the membership at least 90 days prior to the House of Delegates meetings, 2) open call or self-nominations from the membership, and 3) a reasonable vetting process for all candidates by the Nominations Committee; and be it further

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Resolved, that the MSMA Council receive this recommendation by their July meeting, so that a more improved process can be voted on at the 2019 House of Delegates meeting.

**Resolution #14 – Return to Prudent Layperson Standard for Emergency Services**
*Action: Substitute Resolution #14 Adopted*

Resolved, that the Missouri State Medical Association oppose the arbitrary denial of payment for emergency services based on diagnostic coding alone, and support the use of the prudent layperson standard; and be it further

Resolved, that this resolution be forwarded to the AMA.

**Resolution #15 – Healthcare Finance in the Medical School Curriculum**
*Action: Substitute Resolution #15 Adopted*

Resolved, that our AMA study the extent to which medical schools and residency programs are teaching topics of healthcare finance and medical economics; and be it further

Resolved, that our AMA make a formal suggestion to the LCME encouraging the addition of a new Element, 7.10, under Standard 7, “Curricular Content,” that would specifically address the role of healthcare finance and medical economics in undergraduate medical education; and be it further

Resolved, that our MSMA will create a list of resources available on healthcare finance topics and make the list available to undergraduate and graduate medical programs in Missouri. This list will include AMA resources.

**Resolution #16 – Content of Advertisement for Pharmaceuticals, which Appear in Medical Journals**
*Action: Resolution #16 Not Adopted*

Resolved, that representatives of your Missouri State Medical Association shall propose Federal regulatory change, to be implemented by the FDA, to enact new regulatory language which mandates that all advertisements for medications must describe that medication’s pharmacologic mechanism of action; and be it further

Resolved, that representatives of your Missouri State Medical Association (MSMA) shall carry forward a resolution designed to advocate for this regulatory change, to be considered by the American Medical Association (AMA) at the next meeting of its House of Delegates, in Chicago, in June of 2018; and be it further

Resolved, that the explicit purpose of such a resolution will be to promote regulatory change within the FDA, via governmental outreach by agents such as lobbyists employed by your AMA, to cause there to be a new regulation that requires that a medication’s pharmacologic mechanism of action be stated clearly within the product advertising; and be it further

Resolved, that delegates from your MSMA to the next meeting of the House of Delegates of your AMA shall make a reporting of the action, or lack thereof, taken by the AMA House of Delegates, toward this resolution, in a timely fashion.

**Resolution #17 – Cerebral Palsy**
*Action: Resolution #17 Not Adopted*

Resolved, that your Missouri State Medical Association (MSMA) will collect scientific documentation of the lack of any relationship between events recorded during perinatal monitoring and the outcome of Cerebral Palsy; and be it further

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Resolved, that the purpose of this documentation shall be to support the development and passage of a new law, which would bar any alleged tort that purports any alleged relationship between events recorded on a fetal monitoring record and the presence of Cerebral Palsy in a child born in Missouri; and be it further

Resolved, that your MSMA will reach out to the Missouri Hospital Association (MHA), to coordinate a campaign of public information, designed to educate the public and elected officials that perinatal monitoring, although able to provide real-time data about fetal heart rates, lacks any documented efficacy to impact the incidence of Cerebral Palsy; and be it further

Resolved, that your MSMA will initiate a lobbying campaign, alone or with the MHA, to publicize these facts to the elected state legislators within the State of Missouri regarding the lack of efficacy of perinatal monitoring to impact the incidence of Cerebral Palsy; and be it further

Resolved, that your MSMA will lead a scientifically-based initiative, designed to enable outreach to Missouri legislators, to result in the passage of legislation which will eliminate “birth injury” as a possible alleged tort, because perinatal monitoring has no efficacy toward reducing the incidence of Cerebral Palsy; and be it further

Resolved, that representatives of your MSMA shall carry forward a resolution designed for the same purpose, to be considered by the American Medical Association (AMA) at the next meeting of its House of Delegates in Chicago, in June of 2018; and be it further

Resolved, that the explicit purpose of such a resolution will be to promote legislative change by the Congress of the United States, via outreach by agents such as lobbyists employed by your AMA, to procure legislation to outlaw alleged torts purporting a causal relationship between data from perinatal monitoring and the diagnosis of Cerebral Palsy; and be it further

Resolved, that delegates from your MSMA to the next meeting of the House of Delegates of your AMA shall make a reporting of the action, or lack thereof, taken by the AMA House of Delegates, toward this resolution, in a timely fashion.

Resolution #18 – Medicaid
Action: Resolution #18 Not Adopted
Resolved, that in the public discourse regarding the payment for health care goods and services, your Missouri State Medical Association (MSMA) shall forever refrain from making reference to Medicaid coverage as “Health Insurance,” because the Medicaid program fails the test of being a type of insurance; and be it further

Resolved, that during the public discourse regarding the payment for health care goods and services, when representatives of the print or electronic media make reference to Medicaid coverage as a form of Health Insurance, representatives of your MSMA shall attempt to contact the reporter who makes such a report, in order to educate them, with this education conveying to the reporter the fundamental differences between the Medicaid program and Health Insurance; and be it further

Resolved, that your MSMA shall provide data to educate the public that the purchase of health care goods and services by the Medicaid-covered patients occurs at a sizably discounted sum, compared to the sums that would accrue if units of government paid for these goods and service at “market rates”; and be it further

Resolved, that your MSMA shall advocate to its membership, and to members of the print and electronic media, that the Medicaid program should be viewed by leaders of the various units of state or Federal governments as a tremendous benefit provided at a large discount, and not as a tremendous financial burden; and be it further
Winners of MSMA Exhibit Hall Drawings
Congratulations to Bill Turner, MD, Nevada; Tom Greco, MD, St. Louis; Myrna Gover-Havener, MD, Union; and Christopher Swingle, DO, Glendale. They each won $200 for visiting vendors in the Exhibit Hall.

Resolution #19 – Continuing Medical Education
Action: Resolution #19 Not Adopted
Resolved, that your Missouri State Medical Association will advocate for a parallel policy at the national level, by introducing an appropriately-worded Resolution at the next meeting of the House of Delegates of the American Medical Association, advocating that no specialty shall directly or indirectly prescribe a minimum number of specialty-targeted CME/CPD requirements for members of another medical specialty that has its own certifying board; and be it further

Resolved, that your Missouri State Medical Association shall specifically acknowledge that it is currently advocating for such limitations, at the state and national level, upon certifying bodies for “Trauma Centers,” “Stroke Centers,” and “CP Centers.”

Resolution #20 – The Opioid Death Epidemic
Action: Resolution #20 Not Adopted
Resolved, that your Missouri State Medical Association (MSMA) shall attempt to persuade Missouri Attorney General Josh Hawley (or his successor) to pursue a civil tort against corporations such as Purdue Pharma, seeking a damage award that would be crippling to the function of companies such as Purdue Pharma, due to their culpability in the current opiate use and death epidemic, for the good of the citizens of Missouri; and be it further

Resolved, that your MSMA shall attempt to persuade Attorney General Hawley to join the four cities in West Virginia, and also pursue an alleged tort against JCAHO, due to their demonstrable negligence in contributing greatly to the current opiate crisis; and be it further

Resolved, that your MSMA shall attempt to obtain a damage award from the JCAHO that will represent a meaningful portion of their assets, such that they will become more motivated to heed rather than to ignore the voices of caution from physicians, which were expressed but ignored by JCAHO leadership frequently after 2001, regarding their misguided policies; and be it further

Resolved, that your MSMA shall carry forward a resolution advocating for pursuit of a civil tort against Purdue Pharma and the JCAHO by the Attorney General of every other state, for consideration at the Annual Meeting of the American Medical Association in Chicago, in June of 2018; and be it further

Resolved, that your MSMA shall develop a press release, suitable to be released to representatives of the print and electronic media, outlining this planned course of action and the rationale by which we shall justify it.
MSMA Elects Leadership

**MSMA Officers**

**President**  
Joseph Corrado, MD, Mexico

**President Elect**  
James DiRenna, Jr., DO, Gladstone

**Secretary**  
Brian Biggers, MD, Springfield

**Treasurer**  
David Pohl, MD, St. Louis

**1st Vice President**  
Michael Bukstein, MD, Hannibal

**Honorary Vice President**  
William Huffaker, MD, St. Louis

**Honorary Vice President**  
Robert Gibbons, Jr., MD, Prairie Village, KS

**Immediate Past President**  
Warren Lovinger, MD, Nevada

**Speaker**  
Lancer Gates, DO, Kansas City

**Vice Speaker**  
Sam Page, MD, St. Louis

**Councilors**

**Chair, MSMA Council**  
George Hruza, MD, Chesterfield  
(3rd District)

**Vice Chair, MSMA Council**  
Alexander Hover, MD, Springfield  
(8th District)

**1st District**  
Robert Corder, MD, St. Joseph

**2nd District**  
John Memken, MD, Hannibal

**3rd District**  
Elie Azrak MD, Chesterfield  
Robert Brennan, MD, St. Louis  
Inderjit Singh, MD, St. Louis

**4th District**  
Kevin Weikart, MD, Lake Saint Louis

**5th District**  
George Hubbell, MD, Osage Beach  
Lisa Thomas, MD, Columbia

**6th District**  
David Kuhlmann, MD, Sedalia

**7th District**  
Betty Drees, MD, Kansas City  
Lancer Gates, DO, Kansas City

**8th District**  
Mathew Stinson, MD, Springfield

**9th District**  
Lirong Zhu, MD, Rolla

**10th District**  
Sharon Wallace, MD, Cape Girardeau

**Organized Medical Staff Section**  
Peggy Barjenbruch, MD, Mexico

**International Medical Graduate**  
Sri Devi Kolli, MD, St. Louis

**Young Physician Section**  
Ramona Behshad, MD, Chesterfield

**Resident & Fellow Section**  
Nathanial Barfe, MD, Jefferson City

**Medical Student Section**  
Craig Yugawa, St. Louis

**Vice Councilors**

**1st District**  
Robert Weigand, MD, St. Joseph

**2nd District**  
Sandra Ahlum, MD, Hannibal

**3rd District**  
J. Collins Corder, MD, St. Louis

**4th District**  
Keith Ratcliff, MD, Washington

**5th District**  
Clark Andelin, MD, Mexico

**6th District**  
Benjamin Wilson, MD, Nevada

**7th District**  
Michael O’Dell, MD, Kansas City

**8th District**  
Brian Curtis, MD, Joplin

**9th District**  
Omofoalarin (Fola) Fasuyi, MD, Rolla

**10th District**  
Douglas Wallace, MD, Cape Girardeau

**Organized Medical Staff Section**  
James Conant, MD, St. Joseph

**International Medical Graduate**  
Louis DelCampo, MD, Springfield

**Young Physician Section**  
Sarah Florio, MD, Lee’s Summit

**Resident & Fellow Section**  
Daniel Young, MD, St. Louis

**Medical Student Section**  
Scott Berndt, Kansas City

**AMA Delegates & *Alternate Delgates**

Elie Azrak, MD, Chesterfield
Edmond Cabbabe, MD, St. Louis
James Conant, MD, St. Joseph
Rebecca Hierholzer, MD, Leawood, KS
Warren Lovinger, MD, Nevada

*Joseph Corrado, MD, Mexico
*Ravi Johar, MD, Chesterfield
*Michael O’Dell, MD, Kansas City
*Shannon Tai, Lisle, IL, Student
*Charles Van Way, MD, Kansas City

**AMA President**  
David Barbe, MD, Mountain Grove

**Alliance**

**President**  
Gill Waltman, St. Louis

**President Elect**  
Diana Corzine, St. Joseph
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Thank you!

Physician of the Day
May Volunteers

- Christopher Swingle, DO, Glendale
- Ed Cabbabe, MD, St. Louis
- Matt Satterly, MD, Ballwin
- William Reynolds, MD, Springfield
- Donald Potts, MD, Kansas City
- Sharon Wallace, MD, Cape Girardeau
- Dayna Early, MD, St. Louis
- Sri Kolli, MD, St. Louis
- Jerry Kennett, MD from Columbia