



FEATURES:

- President's Letter
- Visit the New Website
- Mobile Aps for Medical Professionals
- Ind. Senator Mark Stoops – Medicaid Expansion
- Medical Student Program in Bloomington
- Medical Liability Climate
- New AMA Studies Highlights Medical Liability Climate and Trends
- New Hampshire Ruling Upholds Role of Medical Liability Screening Panels
- Save the Date

EXECUTIVE COMMITTEE:

Dan Lodge-Rigal, MD
President

Carrie Davis, MD
President-Elect

Todd Rowland, MD
Secretary Treasurer

Karen Reid-Renner, MD
Immediate Past President

Diana S. Ebling, MD

James V. Faris, MD

Caitilin Kelly, MD

Robert C. Stone, MD

Barbara Dene, MD

Thomas Sharp, MD

Drew Watters, MD

Clark Brittain, MD

Dean Lenz, MD

Leigh Richey
Executive Director

Kim Sharp
Associate Director

MOCMS

P.O. Box 5092
Bloomington, IN 47407
t: 812.332.4033
e: mocms@kiva.net

www.mocms.org

VOL. 12, ISSUE 1 • MAR 2013



From the President: Spring greetings!

I began this week with a morning drive through a spring-like rain down to Paoli, where I serve as the laboratory medical director. Having a smaller outlying hospital to cover is a change for our group pathology practice, as we have for years provided services at one hospital laboratory here in Bloomington. I have welcomed the opportunity to spend time in a new and different community and medical environment, and have enjoyed meeting the staff and physicians who provide care there. Having been in Bloomington for 18 years, it is also a different experience being the new kid on the block!

For a growing number of physicians in our community, I imagine coming together with colleagues from different locations and specialties within our community can also feel like being the new kid on the block—even after years of practice. This is the nature of how our practices can get isolated, and this separation becomes even more pronounced as competing healthcare systems evolve, physician employment grows, and personal lives are given the attention they deserve. Last fall, the Medical Society began hosting a breakfast forum for physicians to promote collegiality, talk about issues they face in their practices, and to identify larger issues affecting healthcare in our community. The two forums held so far have generated a lively discussion of a wide variety of issues.

In February, the forum discussion focused on mental health care in our community. Specifically, concerns were voiced about the adequacy (supply) of mental health providers in the area, challenges to primary care providers in caring for severe psychiatric illness, and problems with referrals and continuity of care. Following up on this discussion, the Society is in the process of putting together a panel of various mental health care providers from the community for the next forum, which will be held later this spring.

This year already promises to be an interesting one for medicine, and a busy one for the society. In addition to action evolving from the forum discussion, we have been busy making our website more useful for providers and patients, providing grants to improve the health of young people in our community, and continuing to work with the ISMA on ways to maintain and increase our membership. Planning is currently underway for our spring general meeting, to be held in late May/early June. I hope you will join us for this event, details of which will be forthcoming.

My best wishes to you for the coming season.

Sincerely,

Dan Lodge-Rigal, MD

President

Monroe Owen County Medical Society

Welcome Our New Members:

MOCMS would like to welcome the following new and returning members:

Marin Garcia III, MD

Family Medicine, but transfer from St. Joseph Medical Society – IU Health

Paula J. Bunde, MD

Urology – IU Health

Brian L. Miles, MD

Family Medicine – Premier Health Care

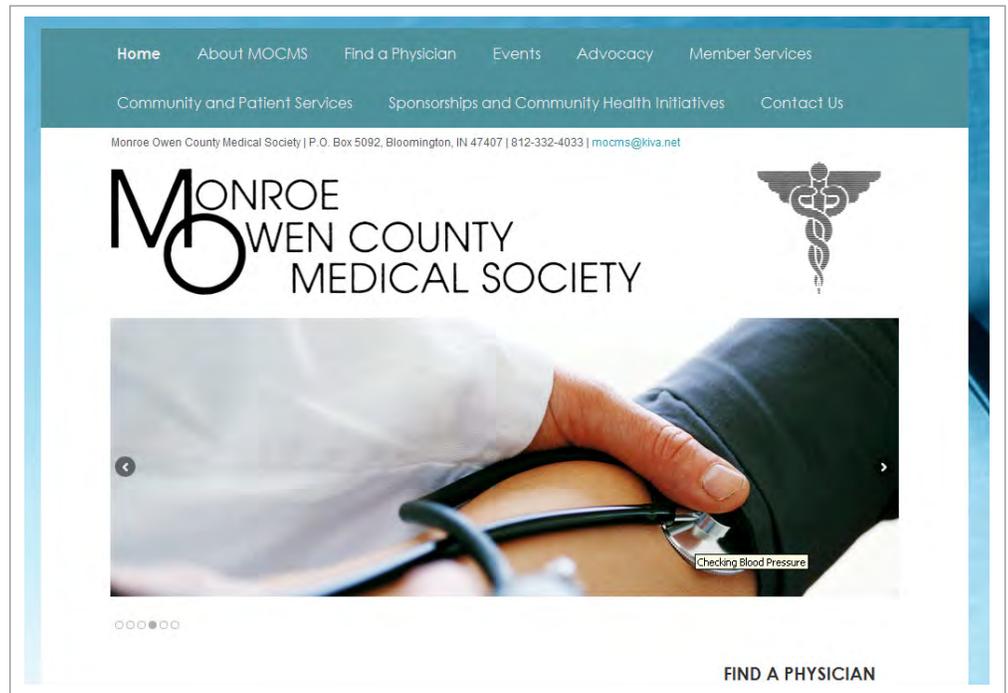
Laurence Behney

Family Medicine – Cook Health Clinic

Kevin T. Moore, MD

Emergency Medicine – IU Health

The New MOCMS Website is Complete! Check out the new look!



MOCMS has long needed a new and more useful website to serve membership needs as well as to assist patients and community members seeking a physician or healthcare resources.

We hope you will visit the new and improved site at:

www.mocms.org

The "Find a Physician" function is now fully operational. You and prospective patients can find a physician member alphabetically by name, specialty or practice. You may click on a specific physician by specialty or practice and go directly to his/her contact information. Each physician's listing will indicate if the practitioner is accepting **"new patients, Medicare, and Medicaid"**. **PLEASE CHECK YOUR LISTING FOR ACCURACY.** Eventually, we hope to have a "password secure" section which could replace the Physician Directory we currently print in hard copy. Stay tuned.

Please visit the site and browse. If you have corrections, please send them to mocms@kiva.net or you may use the "Contact Us" section on the site itself. Your suggestions for additional areas that might prove useful are most welcome. This is YOUR site. Please let us know how we can make it even better.



Indiana University Health

The Monroe Owen County Medical Society newsletter is designed and printed courtesy of Indiana University Health Bloomington.

Accessing, Storing, & Sharing Medical Literature

Elizabeth C. Whipple, Research Informationist

Ruth Lilly Medical Library, Indiana University School of Medicine

Mobile device use is ubiquitous these days, and while we all strive to be lifelong learners, sorting through the deluge of information available can be time-consuming. This article aims to point out some tools available for mobile devices for accessing, storing, and sharing the medical literature. The majority of these I use on my personal and work mobile devices and are free. This is in no way an exhaustive list, but highlighting the apps below and showing some of the ways in which apps can be useful in information currency and retrieval can be used in own practice and day-to-day information management.



Apps for Specific Journals

Some journals have applications, or apps, that are specifically designed for that particular journal. These include: **New England Journal of Medicine**, **Lancet**, **PLoS Medicine**, **Nature**, and **Science**. These specific journal applications are free, although they may not provide access to the journal article content. News, table of contents, and abstracts are usually available, but the full-text will require a paid (personal or institutional) subscription.



Apps for Searching the Literature

Several apps are available for searching PubMed. **PubMed for Handhelds** (PubMed 4Hh) allows for PICO (Patient/Population, Intervention, Comparison, Outcome) formulation of clinical queries. **PubMed on Tap** searches both PubMed and PMC (NIH's digital repository), including the full text of the articles from PMC. **Orkov** is also a PubMed application, which allows for PubMed basic and advanced searching, save searches, and a built-in browser for viewing documents.



Apps for Viewing and Organizing Articles

Sometimes it makes sense to download an article and read it offline, especially if you might not have internet access. A few good tools for viewing and organizing articles include **Quick Office Pro**, **Office Suite Pro 7**, or my favorite, **GoodReader for iPad**. Please note that these all have a cost associated with them. For meetings I often download articles (or Word documents) and organize them into folders in GoodReader, which allows for easy access, less paper waste, and no internet needed. One shortcoming may be the inability to edit or create documents, but most of these apps allow you to edit, such as highlight and make other annotations and save those comments.



Apps for File Storing and Sharing

If you are using your mobile device for file sharing, two of the most common options are **DropBox** and **Box**. Both products have a web-based component, a desktop component, and mobile component for file storing and sharing. For instance, if I am working on my personal computer and want to save 10 articles on a topic, I can create a folder in either of these programs and store those articles. The articles will then be synced to my account on the web and my mobile device, making them available for me regardless where I am. Both have options to share or email files (or links to files) to others, which can be an effective and easy way to share articles, especially if they are too big to share as email attachments.



Other Apps of Interest

A few other apps worth mentioning are **MedScape** and the **CDC** (Centers for Disease Control and Prevention). **MedScape** is a good source of news on clinical information, critical alerts, drug information, medical calculators, and CME activities. You do have to create an account (for free) with MedScape. The CDC site includes health articles, the Morbidity and Mortality Weekly Report, recent articles from CDC Vital Signs, podcasts, and images.

Thoughts on Medicaid Expansion

Disclaimer:

The following article was presented by Mark Stoops, State Senate Dist. 40, Member of the Health and Provider Services Committee. The content of this article does not necessarily reflect the position of MOCMS.

The **Affordable Care Act (ACA)** is a very important federal law that improves Hoosiers' access to health care, including the optional expansion of Medicaid. In fact, the Affordable Care Act has already helped hundreds of thousands of Hoosiers since it was implemented in 2010. Medicaid expansion is not automatic, however, and must be approved by the Indiana General Assembly and Governor Pence.

The single most important decision before the Indiana General Assembly this year, along with creating a two year budget for the state, is whether to accept a provision of the ACA that would expand health care coverage to low income individuals and families as early as January 1st, 2014.

If Indiana expands Medicaid, it could cover an estimated 427,000 additional Hoosiers, with incomes up to \$33,000 for a family of four (138% of poverty level). However, if Indiana does not expand Medicaid, 290,000 Hoosiers will continue to not have access to healthcare. These are Hoosiers who make between 25% and 99% of the federal poverty level, or a family of four making between \$4,158 and \$23,050. People who make between 100% and 138% of poverty level would be eligible for subsidized health insurance through health insurance exchanges.

It is important to note that currently Indiana only provides Medicaid to seniors and families with disabled children who make less than \$11 a day. These individuals are currently not eligible for Medicaid in Indiana.

Whether Indiana expands Medicaid or not, Hoosier citizens and businesses will pay the federal taxes that support it. This means Hoosier dollars will support health care coverage for other states while our residents go without.

Governor Mike Pence has stated he wants to use a health savings account-based plan that Indiana launched in 2008 (HIP) to provide expanded access to government-funded insurance. Federal officials have declined this option in the past because it requires people below poverty level to still dedicate 5% of their income to a health savings account. Also, the federal government does not support Indiana's provision that if a low-income participant in HIP misses a monthly payment they are cancelled and banned from HIP for one year.

Senate Bill 540, on which I am a co-author, proposed expanding Medicaid, but did not receive a hearing this session.

Republican Senator Pat Miller has filed SB 551, which would ask federal officials to give the state Medicaid dollars in the form of a block grant (again under HIP), an option also turned down previously by the federal government. This bill passed the Indiana Senate and is now in the House of Representatives. Although SB 551 doesn't provide a direct approval to fully expand Medicaid, it opens up the possibility to negotiate an agreement with the federal government. It also creates a legislative study committee to look at the possibility of creating an Indiana based Health Insurance Exchange. At this time SB 551 is the only bill moving forward that addresses the ACA.

It would be prudent to expand Medicaid as detailed under the Affordable Care Act. A report released by the Indiana Hospital Association found that an expanded Medicaid program would pump \$10 billion into the state's economy and create 30,000 jobs – while also generating new tax revenue that would more than cover the cost to the state.

As states across the nation debate Medicaid expansion, several of those previously resistant to it have decided to expand the program under the ACA. I believe Indiana should expand Medicaid as outlined by the ACA. Not only is this the fiscally responsible thing to do, I believe it is our moral responsibility to take advantage of this opportunity to provide healthcare to Hoosiers that can't otherwise afford it.

1505 W Bloomfield Rd
Bloomington, IN
(812) 336-7867

**OLSON
& COMPANY
& P.C.**

CERTIFIED PUBLIC ACCOUNTANTS

Solution Providers

www.olsoncpafirm.com

339-9114
info@commsrv.com

Commercial Service

Heating Cooling Commercial Residential
Since 1946

**available 24/7
for you !**

TRANE
COMFORT
SPECIALIST

Its Hard to Stop a Trane

The Medical Student Experience in Bloomington

By Sarah Tieman, MD

IUSM has maintained a long standing commitment to meeting the healthcare needs of Indiana (sixty percent of Indiana licensed physicians have trained within the IUSM system) and in anticipation of significant physician shortages in coming decades initiated expansion plans in 2009. With the goal of increasing physician graduates 30% by 2016, IUSM now offers 3rd and 4th year training at regional campuses throughout the state.

In June of 2012, six students selected the Bloomington campus for their 3rd year of medical school. Bloomington offers an innovative program based on the Cambridge model at Harvard of longitudinal integrated clerkships (LIC) in which the core clerkships are continuity based and extend over the entire academic year. The educational experiences in Bloomington are more heavily based on outpatient and generalist care than traditional inpatient subspecialty clerkships that make up the core of the 3rd year in Indianapolis. Although the schedule may look very different, the course objectives and exams are standard across the state and the academic expectations are the same for Bloomington as for any other IUSM student.

The LIC educational model offers outstanding opportunities for meaningful patient care as the student becomes a valued member of the healthcare team through continuity with both the preceptor and the patient. The structure allows students to see more patients with undifferentiated conditions over entire illness episodes as well as to participate in a patient's care across disciplines. By spending an entire academic year with the same preceptors, students are able to more effectively build their communication skills, clinical reasoning and exam techniques as the teacher-learner relationship also grows.

Student feedback thus far has been extremely positive; they have described their learning environment as supportive with opportunities for growth and genuine involvement in patient care. The enthusiasm and willingness to teach that our community preceptors have offered to this pioneering group of IUSM students has been exceptional; the compassion, professionalism and expertise demonstrated by our volunteers will be an inspiration to these future physicians for years to come.

"I have been impressed with the response students and patients have when they see each other a 2nd or third time. It really changes the dynamic and begins to instill that feeling that they are connected and that each visit builds on something. I also have learned to adapt my teaching style to fit the student better, as I come to know them better."

~ Lee McKinley, MD - Internal Medicine

"Bloomington offers so much for a town its size thanks in part to the many amazing people in the community. For example, there was a man who moved back in with his ex-wife because she was dying of cancer and her current spouse left soon after she was diagnosed. This man honorably helped his wife and daughters through her last days but was diagnosed with advanced cancer himself a few months later. I was with hospice when they consulted with him and he laid out his goal to live long enough to attend his daughter's wedding in a few days. Indeed, he was able to do so and passed away shortly after. Many months later, I saw that family at the hospital again under much happier circumstances - one of the daughters had just given birth! This experience reminded me that there is a lot more to patients than their signs and symptoms: they are protagonists of their own movies and we have the privilege of a few speaking lines during their hospital scenes."

~ Tom Lam, MS3 - Bloomington Longitudinal Clerkship 2012-2013

Your bank. For community.



OLD NATIONAL BANK®
Your bank. For life.

oldnational.com/community
0112-065 **812-330-2600** Member FDIC



TOPOS 403

Introducing our bar specials

- Wednesdays: half-price wine
- Thursdays: \$5 cocktails

tues-sat 5pm - close
403 N. Walnut St.
(8th & Walnut)
812.676.8676
www.topos403.com

Dinner • Mezedes • Cocktails

New AMA Studies Highlights Medical Liability Climate and Trends

Two new studies from the AMA reveal recent improvement in the medical liability climate but underscore the uncertainty of whether positive trends will continue.

Analyzing medical liability insurance premiums from 2004 to 2012 gathered from the Annual Rate Survey Issues of the Medical Liability Monitor, the first report found that the medical liability climate for physicians is far more favorable than it was in 2004. While more than 80 percent of premiums increased in 2004, only about 15 percent increased in 2012. Premiums that did increase in 2012 did so by a smaller margin than at the beginning of the study period.

The study notes that it is unclear how long this positive trend might continue and that the medical liability market bears close monitoring to see what direction premiums will take in the near future.

A second study, which examines data from the Physician Insurers Association of America's Claim Trend Analysis, found that the average expense payments tied to professional medical liability claims increased by nearly 80 percent over the 2002–2011 period. More than 65 percent of claims in 2011 were dropped, dismissed or withdrawn. Of the 8 percent of claims decided by trial verdict, 89.7 percent were won by the defendant.

New Hampshire Ruling Upholds Role of Medical Liability Screening Panels

Physicians say they hope a ruling by the Supreme Court of New Hampshire that supports the use of screening panels during medical liability cases will curb future challenges of such tort reforms, according to a recent article in American Medical News.

At question was whether court authority was being superseded by a 2005 state law requiring judges to tell juries about panel findings. The state Supreme Court largely upheld the constitutionality of that law, but justices changed how much detail juries can receive about panel proceedings, American Medical News reports.

The New Hampshire Medical Society (NHMS), the Litigation Center of the AMA and the State Medical Societies, and several other state medical societies filed a friend-of-the-court brief in support of the screening law.

"The medical society is pleased with the court's ruling, because it supports the reasons we sought enactment in the first place—to encourage earlier resolution of cases outside of the expensive and burdensome jury process. NHMS Executive Vice President Scott Colby wrote to American Medical News in an email.



WonderLab's "Real Life Science: Examining Medical Careers".

SAVE THE DATE

MEDICAL SPOUSES' PITCH-IN LUNCHEON

When:

Tuesday, April 23

Where:

Heather Johnson's
1499 E. Rohrer Road

Time: 11:30 am

RSVP:

Jenny Floyd
jennyfloyd@sbcglobal.net

Leigh Richey
mocms@kiva.net
812.332.4033

MOCMS SPRING GENERAL MEETING

When:

Thursday, May 2

Where:

Inn of the Four Winds

Who:

Members, Spouse or Guest

Time:

6:00 – Social Time on the Lake View
Patio

6:45 – Complimentary Dinner in the
Commodore Room

7:00 – Brief Business Meeting and
Program

Program:

**Cybersecurity - Your Privacy,
Personally and Professionally**

Fred H. Cate, JD
Distinguished Professor of Law,
Maurer School of Law
Director of the IU Center for Applied
Cybersecurity Research

RSVP Needed:

mocms@kiva.net or 812.332.4033

ISMA DISTRICT 2 ANNUAL MEETING

When:

Tuesday, May 21

Where:

Red Skelton Performing Arts Center
Vincennes University
1002 North First St.
Vincennes, IN 47591

Time: 6:00-8:15

- Welcome Reception
- Dinner
- Business Meeting
- Program – Legislative Focus
- 5 local state and federal legislators will attend
- Each will share brief statement
- Q&A to follow

RSVP:

Tom Lux, ISMA Field Representative
tlux@ismanet.org



Sponsored by MOCMS. Pictures taken October 27, 2012.

PLEASE KEEP US UPDATED

In MOCMS increased effort to “go green”, we are hoping to communicate with you through email. If you would like to help MOCMS use less paper, please be sure we have your updated email address by sending an email to mocms@kiva.net and check that your spam blocker will allow communications from MOCMS.

MOVED LATELY?

Please help us keep your contact information current in our database, on our website and in the physician directory! If the address of your practice or your home has changed, please send your new information to the email address above, call us at 812.332.4033 or write to us at PO Box 5092, Bloomington, IN 47407-5092.

Thank you!!