

Philadelphia Medicine



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AMA produces wide-ranging document on healthcare trends

- As the US population continues to grow older, the incidence of chronic disease will increase. At the same time, an increasing percentage of morbidity and mortality is associated with personal behaviors (e.g., diet/inactivity, substance abuse), which mitigates the impact of the significant medical breakthroughs that have eradicated some diseases and improved treatment options for others.
- The risk of an imbalance in the physician workforce total supply and specialty distribution is growing and cannot be rectified quickly due to the length of training for graduate medical education. The growing shortage of nurses and other nonphysician providers further exacerbates the problem.
- In 2004, the number of medical school applicants continued to increase. Rising medical school debt, inability to attract a sufficient number of minorities—particularly Hispanic—and precarious financing of teaching hospitals continue to be major concerns.
- Healthcare costs continue to rise faster than GDP. Continuing technologic growth and demographic trends will keep upward pressure on health expenditures for the foreseeable future.
- The recent jump in the number of uninsured, the growing state fiscal crisis that may jeopardize Medicaid funding, and employer concerns about the rising cost at healthcare premiums will fuel new debates about the role of the government versus the private sector in offering health benefits.
- Americans have voted with their feet against tightly managed healthcare. Fewer Americans are choosing HMOs and many insurers are changing policies to lift referral restrictions and other gatekeeping policies. One impact of this is that premiums and utilization rates are rising. Reimbursement rates for physicians and hospitals, however, continue to go down while the large health plans' profit margins continue to rise. Out of frustration, physicians and hospitals are beginning to drop out of health plans instead of accepting low reimbursement rates that do not cover costs.
- An increasing number of physicians are employed and/or are providing their services through medical systems (e.g., integrated delivery systems, large group practices, HMOs, etc).
- Quality measurement is still in an early developmental stage, but is evolving rapidly. There will be confusion among patients as information begins to become more available about what the information means and how to use it. Physicians will face increasing demands for information to support quality

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PCMS NEWS

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Why young physicians should get involved in organized medicine

By Angelica Kloos, DO



By the time over-achieving premedical students become residents and young physicians, they may have become jaded, angry, and exhausted, cringing each time the pager goes off.

For many residents and physicians in their twenties and early thirties, different life aspirations take precedence. After achieving the objective of becoming a doctor, many residents now turn to new goals, like finding a mate, getting married, and having children.

We need to join forces with one

Becoming involved in organized medicine allows residents and young physicians the opportunity to become involved in the serious issues affecting our careers. When physicians unite, we have the potential to make a large scale impact on legislation that may affect our patients and our practices.

another and with more established members of our chosen profession in order to have a satisfying balance of our professional and personal lives.

The image of today's governing bodies of organized medicine is concerning. The halls are filled with established physicians, most of them representing the ideas and interests of their respective generations. All of which seem open to ideas of the upcoming generations.

But who is there to represent the new generation of physicians? Becoming involved in organized medicine allows residents and young physicians the opportunity to become involved in

the serious issues affecting our careers. When physicians unite, we have the potential to make a large scale impact on legislation that may affect our patients and our practices. Our patients need a voice, which we can provide as organized physicians.

However, we also need a voice, as the issues that are important to us today will continue to have an impact on future generations. Issues such as working conditions and safety, maintaining standards for accreditation and training, and financially adjusting for enormous educational debt on limited budgets are just some of the concerns that face us today.

In order to shape these and many other issues, we need a voice. Voices come in numbers and organized medicine needs support. As residents, fellows and young physicians we must find ways to stay involved, even if just in small ways — writing a letter to a senator, attending a local meeting, or speaking out on important issues — so that we continue to be proud of that investment we made and the sacrifices it took to get us where we are today.

The Philadelphia County Medical Society and the Pennsylvania State Medical Society are organizations interested in the challenges that physicians in our area face on a daily basis. These societies are focused on our future, both personally and professionally. As residents, we may take advantage of these organizations to make our first step towards involvement in organized medicine.

The Resident and Fellow Section is a group of residents and fellows dedicated to today's physicians in training in Pennsylvania. I encourage every resident and fellow to join this, or similar organizations, to unite with physicians with common goals, and take an active role in enhancing the lives of ourselves and our patients.

Dr. Kloos is a resident in psychiatry at Jefferson, and a member of Philadelphia Medicine's editorial board.

Medicare beneficiaries in private, managed care plans cost government more

Medicare beneficiaries enrolled in private, managed care plans cost the government 12.4% more than those in the traditional program last year, for a total cost of more than \$5.2 billion.

According to a study by the Commonwealth Fund, payments to Medicare Advantage plans amounted to \$922 per beneficiary over what a comparable enrollee would have spent in the traditional fee-for-service program.

The report concluded that the policies which create the extra payments should be re-examined because the money might be better used for other purposes, such as richer benefits to beneficiaries or for lowering their monthly premiums.

Physician-owned company installs prescription drug vending machines in doctors' offices

A Montgomery County firm is installing prescription drug vending machines in physician offices.

Dr. James Judd, chief medical officer of the company, QuiqMeds, and a primary care physician with Harboro Medical Associates, is one of a half-dozen co-founders who invested a total of about \$600,000 to launch QuiqMeds last year.

Six years ago, Harboro Medical decided to install a manual system for dispensing generic medications in its office after a local insurer cut prescription drug benefits, while the doctors figured out they could sell a variety of medicines at or below retail pharmacy prices, offer the convenience of patients getting a prescription filled before leaving the office and generate some extra revenue.

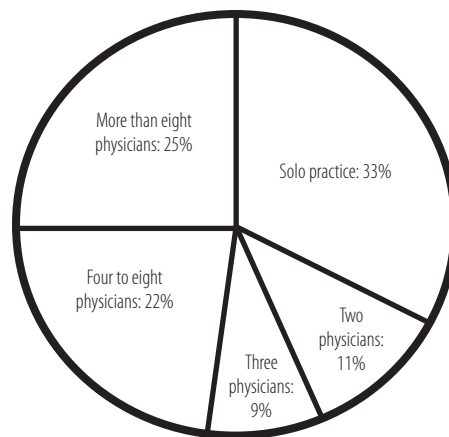
The company has six of its machines in area doctors' offices — each of which typically carries 30 to 40 generic medications, chosen from a product line of more than 100 the company can provide — and is looking to grow that number to possibly as many as 20 machines over the next two to three months.

Healthcare trends, *continued*

assessment and “rating” and will have to spend more time explaining quality measures to patients.

- The US leads the world in both demand for healthcare advances in medical technologies and in the research and development that generates those advances. Medical breakthroughs in imaging have led to earlier and more accurate diagnosis and the use of minimally invasive surgery has made procedures less painful and has improved recovery times. The impact of the Genome Project has yet to be fully realized, and many exciting applications are on the horizon, including gene therapy.
- Medicine has been slower than some other industries to utilize new information technology. Information and communication technology, however, is beginning to transform medicine in five critical ways. They are: (1) automating of back office procedures (e.g., billing, coordination

Distribution of physicians by size of practice (excluding physicians in institutional settings)



of benefits, processing pre-authorizations, etc), (2) developing electronic patient records, (3) creating platforms for online outcomes research, (4) improving the systems for telemedicine, and (5) increasing access to information via the Internet.

CDC recommends flu vaccine for ten categories

The CDC recommends influenza vaccine for people in the following categories:

- All children 6 to 59 months of age
- Adults 50 years of age and older
- Adults and children with chronic cardiovascular or pulmonary conditions, including asthma
- Adults and children who have required regular medical follow-up or hospitalization during the preceding year because of chronic metabolic diseases, renal dysfunction, hemoglobinopathies, or immunodeficiency
- Adults and children who have any condition that can compromise respiratory function or the handling of respiratory secretions or that can increase the risk for aspiration, including seizure disorders
- All women who will be pregnant

during the influenza season

- Residents and staff of nursing homes and long-term care facilities
- Children aged 6 months to 18 years on chronic aspirin therapy
- Healthcare workers involved in direct patient care
- Out-of-home caregivers and household contacts of children from 0-59 months of age

Additional information about influenza is available at www.cdc.gov/flu.

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The Philadelphia County Medical Society International Medical Graduate Section in cooperation with the Southeastern Pennsylvania Chapter of the Pennsylvania Association Medical Staff Services held an educational meeting at PCMS Headquarters on November 30, 2006.

From left: Fawzi Habboushe, MD, PCMS IMG Member; Shailendra Vaidya, MD, PCMS President-Elect; James A. Hallock, MD, President and Chief Executive Officer, Educational Commission for Foreign Medical Graduates (ECFMG), Guest Speaker; and Shivkumar S. Hatti, MD, Secretary, Delaware County Medical Society and IMG Delegate.

Drs. Josephine and John M. Templeton, Jr., received the Heroes of Liberty awards from the National Liberty Museum in recognition of their setting the highest standards of citizenship through their exemplary service to their community, reflecting the ideals and principles to which the National Liberty Museum is dedicated.



David Woods, PhD, publisher of *Philadelphia Medicine*, has been appointed editor-in-chief of the UK-based medical communications company, Rx Communications (www.rxcomms.com). The appointment is a part-time one and includes representing the company in the US. Dr. Woods, a former editor-in-chief of the *Canadian Medical Association Journal*, is the author of four books on health policy issues.

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