

Philadelphia Medicine



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HHS awards more than one million dollars to Philadelphia for community prevention effort

The US Department of Health and Human Services has announced a \$1,152,874 grant to Philadelphia to implement community-based initiatives to promote better health and prevent disease. The grantees were approved for a five-year project period, with the initial year's funding amount. Continuation award amounts will be determined toward the end of the first budget period.

The project is one of 12 nationally receiving a total of \$13.7 million to promote community initiatives to promote better health and prevent disease under HHS' new Steps to a Healthier US program. The Steps program aims to help Americans live longer, better, and healthier lives by reducing the burden of diabetes, overweight, obesity and asthma and addressing three related risk factors—physical inactivity, poor nutrition and tobacco use. More information about this initiative and the grants program is available at www.healthierus.gov.

Diabetes, asthma, overweight and obesity were chosen as targets because of their rapidly increasing prevalence in the United States and the potential for individuals to control and even prevent these diseases through exercise, diet and other strategies. The number of people with diabetes in the United States has nearly doubled in the past decade to 17 million. An estimated 10 million adults and five million children suffer from asthma, and the number of cases of obesity in the United States has increased more than 50% over the past two decades.

The winning Philadelphia proposal

is led by the City Department of Public Health and its Consortium partners. Their plan targets 15 neighborhoods, which collectively have a population of slightly less than 500,000, with a high percentage of people of color, low-income people, and other groups facing a disproportionate burden of disease.

Philadelphia has a wide range of resources devoted to this burden, but they are largely fragmented and do not sufficiently engage grassroots resources. Philadelphia Steps proposal will have a coordinated, community-based health promotion and disease prevention plan based on three principles:

1. Chronic Disease Management: healthcare providers will collaboratively develop a standardized curriculum, assess current activities, fill gaps in service, and conduct coordinated outreach through partnerships with faith- and neighborhood-based groups.
2. Healthy Behaviors: Neighborhood and faith-based groups will participate in the program to promote healthy lifestyles, including physical activity, proper nutrition, and the avoidance of cigarette smoke.
3. Healthy Environments build upon a burgeoning environmental health collaborative by coordinating interventions to encourage people to take advantage of opportunities for healthy lifestyles.

—Dalton G. Paxman, PhD, Regional Health Administrator, US Public Health Service, Region III

This HHS submission was invited by Sheila Moriber Katz, MD, MBA, PCMS President

PCMS News

2004 PCMS Awards Program

The Philadelphia County Medical Society requests your nominations for the following Awards:

- *Strittmatter Award*—Since 1923, the Strittmatter Award is regarded as being the most prestigious of PCMS. Presented to a physician who has demonstrated to the Society the most valuable contributions to the healing art, surgical or medical. *Requirement:* Your letter of nomination should include the candidate's current cv.
- *Cristol Award*—Presented to a PCMS member who has made valuable contributions to the Society. *Requirement:* The letter of nomination should also include the candidate's activities in the Society.
- *Practitioner of the Year Award*—Presented to a PCMS member for excellence in patient care and community service. *Requirement:* Letter of nomination, a current cv and should include examples of community service.

Please submit your nominating letter(s) along with the candidate's appropriate background information by March 1, 2004, by mail: Award Chair, PCMS, 2100 Spring Garden Street, Philadelphia, PA 19130. Fax: 215-563-3627 or eryan@philamedsoc.org. For information, 215-563-5343, Ext. 113.

AMA supports Aetna settlement

The American Medical Association supports the Aetna settlement as approved by Judge Federico Moreno of the US District Court in Miami. "By agreeing to the settlement, Aetna has acknowledged that to mend the breach in its working relationship with physicians, it must implement a fundamental shift in how the company conducts business," said Donald J. Palmisano, MD, JD, AMA president.

Dr. Palmisano added, "The settlement initiates meaningful and necessary improvements that represent a positive change in how an industry-leading health insurer does business with physicians."

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Editorial

Licking our wounds and moving on



I had drafted an editorial on Election Day, applauding those of you who had contributed so much of your time, energy and money to the campaign of Judge Orié Melvin. I was

cocky and confident. The draft congratulated you on her resounding victory and on sending a message that the physician community was indeed a

“All physicians in Philadelphia should belong to the Philadelphia County Medical Society; contribute to PAMPAC and other physician political action committees; write, talk and contribute to legislators on a regular basis; distribute educational materials to patients, family and friends; write to and call the media.”

potent force in the election process. I sat down in front of the television set that evening awaiting the great news, eager to learn the details to include in the editorial.

A few minutes later I threw that draft away. The facts are that we suffered a resounding defeat and we were not a potent force in the election. Those facts hurt then and continue to pain the physician community.

But we have allowed sufficient time for grieving and healing, sulking, finger pointing and Monday morning quarterbacking. It is now time to reassess our strengths and weaknesses and to move ahead. We need to approach this failure as clinicians, critically evaluating each fact. We need to set our egos aside, accepting blame when it is properly directed at us, but not fearing

to articulate the blame that should be directed at others.

First, we need to accept that we must be involved in the political process. Giving up will only allow our opponents to have everything their way without even a struggle. No one will feel sorry for us and yield any concessions. We need to fight for and earn every victory.

Second, we need to accept that we have elected leaders who will make decisions for us based on the best information they have. We can and should participate in the decision process. Never hesitate to express your opinions. Eventually, however, we need to implement the same strategy. If we divide ourselves, we will never win.

Third, all must aggressively and effectively participate in implementing our plans. I thank those physicians who worked so hard on our behalf. But I criticize, in a constructive way, the majority who sat on the sidelines hoping for the best. The best did not happen, nor will it happen while we sit and hope.

Fourth, understand what is involved in participating in an aggressive and effective way. All physicians in Philadelphia should belong to the Philadelphia County Medical Society; contribute to PAMPAC and other physician political action committees; write, talk and contribute to legislators on a regular basis; distribute educational materials to patients, family and friends; write to and call the media; and work the polls on Election Day on behalf of our candidates. Anything short of all this is not aggressive and effective participation.

I view this election as an urgent challenge to you and to all physicians, not to surrender in frustration, but to act to save our medical profession and our patients right to medical care. There will be another day. There will be another battle. Let us commit ourselves, wholeheartedly and unequivocally, to victory on that day.

*Sheila Moriber Katz, MD, MBA
President*

Highlights from Emergency Medical Treatment and Labor Act (EMTALA) Final Rule

The Centers for Medicare and Medicaid Services (CMS) has issued its Final Rule regarding policy clarifications of the Emergency Medical Treatment and Labor Act (EMTALA). The Final Rule largely addresses the concerns of the AMA, which worked in partnership with several national medical specialty societies to ensure that key EMTALA burdens would be lifted. Highlights of the Final Rule include:

- A hospital must maintain an on-call list of physicians on its medical staff.
- A hospital must maintain the above-mentioned list and physicians on the list must respond when called. However, there are now excusable reasons why a physician may not respond to the Emergency Department when called. Hospitals can now permit physicians: (1) to schedule elective surgery during the time they are on-call; and (2) to have simultaneous on-call duties among different hospitals in the community.
- Under EMTALA, physicians are not required to take call or to be on-call at all times.
- Hospitals must have written policies and procedures in place.
- EMTALA is triggered when a person who is not a patient presents to the “dedicated emergency department” requesting an examination or treatment for a medical condition. EMTALA is also triggered when a person who is not a patient presents on “hospital property” requesting an examination or treatment for an emergency medical condition.
- The Final Rule created the definition of a “dedicated emergency department” (DED). A DED is any department or facility (whether or not it is located on the hospital’s main campus) that: (1) is licensed by the State as a DED; (2) holds itself out to the public as providing emergency care on an urgent basis without requiring prior appointments (such as a labor and delivery department or a psychiatric unit); or (3) during the past calendar year, provided at

least one-third of its outpatient services for emergency care on an urgent basis without requiring prior appointments.

- The Final Rule also clarified the definition of “hospital property” to mean the entire main hospital campus. This includes parking lots, sidewalks and driveways. This does not include other areas or structures of the hospital’s main building that are not part of the hospital (such as non-medical facilities, the offices of physicians, and others who separately participate under Medicare.)
- The Final Rule changed when a patient is considered to have presented to the hospital when he is in a ground or air ambulance that is owned and operated by the hospital.
- The Final Rule clarified that a hospital cannot delay treatment to inquire into a patient’s ability to pay or to seek “prior authorization” for the provision of services from an insurer.
- EMTALA obligations end once an individual is stabilized, appropriately transferred to another hospital/facility or admitted to the hospital as an inpatient. No material changes were made to the “transfer” rule under EMTALA.

Find-A-Physician Directory

Patients now have a new tool to help them find a physician and also to learn more about the physician they might see.

The Pennsylvania Medical Society has gone live with its Find-A-Physician tool, available at www.pamedsoc.org. From the Society’s home page, visitors click on “For Patients” to be directed to the new tool.

Patients will be able to access information made available by members of the PMS. Information includes physician name and contact information, specialty, languages spoken, insurance accepted and awards and achievements. The service is free to patients.

PMS vice president Dr. Lila Stein Kroser’s speech to delegates at annual meeting (excerpts)

“My background in private practice and academia helps me see the many sides of every issue and gives me the unique ability to find consensus. Likewise, my mentorship of students and residents has given me greater insight into the medical education challenges today and the work force changes to come.

While I am here to ask for your vote, I have a more important question for you, “Why are you here?”

Being a physician is an awesome responsibility. You are all different and yet the same. First and foremost, you are healers.

You are compassionate, courageous physicians who want to deliver quality healthcare at an affordable price in a safe manner yielding a reasonable reimbursement.

You are here because you are the core, the very essence of committed and dedicated physicians who make the decisions for our society.

You are guardians of our heritage.

“I am ready to deliver that message. I am a pioneer of purpose and a champion of change. I have the courage to speak out and speak now on issues that affect us all.”

You are here because you want to change our imperiled health system and lack of access to care for your patients.

You are here to force changes in the egregious judicial system and the unfair medical liability system under which we all function as Pennsylvania physicians.

You are here because of the erosion of the doctor-patient relationship and as patient advocates and physician activists. You want to speak as one voice, supported by your Pennsylvania Medical Society.

We are family. We are the family of medicine and as we fight our battles in the halls of Congress and the State Legislature, we must have a clear mission, remain focused, and have a powerful message.

I am ready to deliver that message. I am a pioneer of purpose and a champion of change. I have the courage to speak out and speak now on issues that affect us all.”

The full document can be found on our website www.philamedsoc.org.

pcms people



The American Heart Association has honored **Donald B. Parks, MD**, at the Annual Edward S. Cooper, MD, Award Ceremony, as a Frontier Warrior in the fight

against heart disease and stroke. Dr. Parks was recognized by then President Jimmy Carter for outstanding contributions to education and community improvement. He has also been recognized for his outstanding commitments to the Afro-American Historical and Cultural Museum. Dr. Parks received the Practitioner of the Year Award given by the Philadelphia County Medical Society.

PCMS hosts AMA International Medical Graduate Governing Council

The Philadelphia County Medical Society and the Pennsylvania Medical Society hosted a reception in October at PCMS headquarters for the AMA International Medical Graduate Section Governing Council.



*Standing from left: Venkat Rao, MD; Bush Ahmad, MD; Bernard A. Wollschlaeger, MD; Shailendra Vaidya, MD; John Tooker, MD; Rajendra Seth, MD; Jitendra Desai, MD; Subramanyan Jayasankar, MD
Seated from left: Rajam S. Ramamurthy, MD and Lila Stein Kroser, MD*



*(At left) PCMS member **James Plumb, MD**, Department of Family Practice and Director of Community Service for Thomas Jefferson University Hospital, oversees his medical students conducting blood pressure screenings during the Block Captains' meeting.*

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