

— NORTHERN OHIO—— PHYSICIAN

The Voice of Physicians in Northern Ohio

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Left to right: Daniela Zapata, Michelle Helou, Joseph Rose, Samuel Accordino, AMCNO member Sherif Mossad, M.D., Nicholas B. LaFountain, M.D.

AMCNO Hosts First-Ever Speed-Networking Events at Northeast Ohio Medical University (NEOMED)

On Tuesday March 23rd and Thursday March 25th, we were excited to partner with Northeast Ohio Medical University (NEOMED) to offer speed-networking to NEOMED medical students with AMCNO physicians.

The events allowed students to meet with physicians across more than a dozen specialties to learn what it's like to practice in those areas.

This event was a version of an event we have hosted previously with Case Western Reserve University's School of Medicine, and it is one that we hope to expand to other area medical schools.

Before the event, students shared their hopes for the experience: "I'm hoping to gain experience or insight into the

specialties," said Nathan Abdelnour (M1). He stated that he doesn't have a specific specialty in mind for the future, though he is particularly interested in internal medicine.

"I really want to get a better idea of what specialties are out there," said Caleigh Hitchcock (M1). "It's easy to get disconnected from the clinic aspect when you are in the classroom all the time. I want to learn anything I can from the physicians who gave their time."

AMCNO physicians enjoyed the opportunity to connect with area medical students and share their experiences in their chosen specialties. As one student mentioned she was intimidated by the idea of going into cardiology, AMCNO President Jonathan Scharfstein, M.D., enthusiastically replied, "Do not be intimidated by any specialty. If this is what you want to do, you can absolutely do it."

We look forward to continuing to host this event with NEOMED for many years to come.

Bicentennial Update

The AMCNO will celebrate its bicentennial year in April 2024. First known as the 19th Medical District, the AMCNO is one of the oldest medical societies in the United States and the oldest professional association in Ohio. We will mark this incredible milestone year with several events in the community including a gala supporting the Academy of Medicine's Education Foundation (AMEF) on Saturday May 4, 2024, at the Western Reserve Historical Society.

Academy agrees to

allow a boat of

We will share significant moments from our history with you as we approach this milestone starting with the 1820-1880s.



AMCNO History 1820 - 1880s

1832

soldiers from the Black Hawk War infected with Cholera who were being First epidemic tackled refused at the dock in Detroit to dock in Cleveland at Whiskey Island and established a quarantined

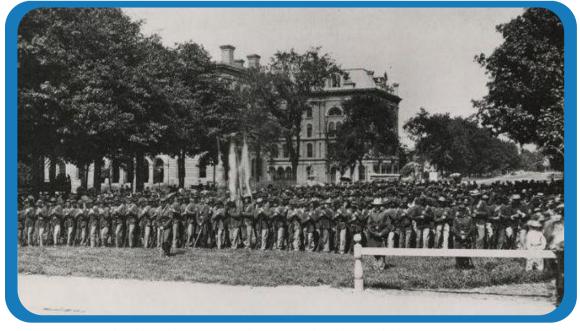
hospital.

Academy physicians work as surgeons in the 50th Ohio Volunteer Infantry in the Civil War.

1888

Academy sounds alarm on the sewage problem in the Cuyahoga River and begins study of its health impact on residents.

by the Academy typhoid fever. Over 2 months, 17 people died (out of population of 1,500).



Cleveland veterans photographed on Public Square.

We are officially launching our fundraising for this historic event. We hope to raise \$200,000 to give out 20 \$10,000 medical student scholarships in 2024 to celebrate this momentous achievement.

Please consider supporting the event at the following levels:



Digital Ad Only \$1,000

You can sponsor on our <u>website</u>, or mail your contribution to AMCNO, 6111 Oak Tree Blvd. S, Ste. 150, Independence, OH 44131.



Meet Jonathan Scharfstein, M.D. 2023 - 2024 AMCNO President

WHAT GOT YOU INTERESTED IN MEDICINE?

I became interested in the sciences, especially biology, in high school and then majored in biology in college. I became attracted to the idea of helping others through a career in medicine while in college. Research in academic medical labs during my summers and volunteering in emergency rooms cemented my desire to become a physician. I was enthralled by the opportunity to provide urgent/emergent care to patients in need and the translation of physiology to disease.



Dr. Isenberg handed the gavel over to newly elected President. Dr. Jonathan Scharfstein.

TELL US ABOUT YOURSELF AND YOUR PRACTICE

I am originally from Brooklyn, New York where I grew up rooting for all New York sports teams and playing basketball as much as possible. After attending Midwood High School, I spent the next fourteen years moving up and down the east coast for my education. I attended undergrad at Princeton University, medical school at the University of Pennsylvania, internal medicine residency at the Johns Hopkins Hospital, and cardiology and interventional cardiology fellowships at Brigham and Women's Hospital in Boston. I met my wife, Suzanne, along the way in medical school (who became a pediatrician), and we had our three daughters- each born in a different city along our travels. Through serendipity, we moved to not-so-sunny Cleveland in 1994, much to the chagrin of my Los-Angeles-born wife. I have been an interventional cardiologist in the Cleveland area since that time – first at Mount Sinai, then at University Hospital of Cleveland, and eventually at Hillcrest Hospital in 2000. After 11 years in private practice at Hillcrest, I joined the Cleveland Clinic. I am a member of the acute interventional STEMI (ST-Elevation Myocardial Infarction) team and have spent many years travelling from my home in Shaker Heights to Hillcrest Hospital in Mayfield Heights at all hours of the day and night attending to patients with acute myocardial infarction. In addition to the interventional work, I have a large outpatient cardiology practice. I have also been involved in cardiology leadership at Hillcrest for over 15 years as co-chief of cardiology and Medical Director of the Coronary Care Unit and the Chest Pain Center. In these roles, I have helped review and improve all pathways and processes in the evaluation of chest pain at Hillcrest as well as review quality issues to ensure the delivery of excellent cardiac care.

WHAT ARE YOU MOST PROUD OF?

First, I am most proud of my family. I have an incredible wife who decided to work part time after our children were born. She balanced pediatrics at MetroHealth with being a mom in a way that worked best for our family. We have three amazing daughters who are so intelligent, thoughtful, and accomplished each in their own way and profession. I am also proud of the work I have helped lead at Hillcrest in cardiology. I have spent the last 23 years as part of a large team that has managed to provide such outstanding care that we have achieved recognition at the national, state, and local levels.

WHAT ARE YOUR HOBBIES & INTERESTS?

My wife and I love to travel, and we have made frequent international trips now that our nest has been empty for the past eight years. We have travelled extensively in Europe and South America and are saving the longer trips to Asia and Africa for retirement. I am an avid golfer which occupies a lot of my time during all seasons except winter. When winter comes and (outdoor) golf takes a back seat, I am a member of Mayfield Curling Club and curl at least once a week. I also like to read nonfiction books, attend the theatre, and put together photo books of our travels. One of the few benefits of the pandemic was time to develop some new hobbies and interests – one of which is brewing beer at home. My specialty is brewing IPAs. If my college professors were astute enough to explain that brewing is all about chemistry and biochemistry, I think I would have enjoyed chem lab a lot more! Another chemistry-based hobby that I picked during the pandemic is pickling – I make a great dill pickle and assorted other pickled vegetables.

PRESIDENT'S CORNER

WHAT ARE YOUR CONCERNS ABOUT THE FUTURE OF HEALTH CARE?

My concerns about the future of health care include physician burnout, physician status dilution, scope of practice, integration of Artificial Intelligence (AI), and government interference with the physician-patient relationship.

Physician burnout was exacerbated by the pandemic and continues to be a major problem. Many physicians are retiring earlier than they planned, and many cite burnout as one reason why. The many causes are varied and include managing the EMR inbox tasks that exploded during the pandemic with the dramatic increase in EMR usage by patients and the increasingly burdensome work for physicians negotiating with pharmacy benefit managers and insurance company prior authorization departments – to name just a few. The attempts to alleviate these problems have been insufficient. The solutions are not simple, but if we do not address this issue, the predicted shortage of physicians to care for our aging population will be amplified. I am concerned about scope of practice issues and the leveling of physicians and other health care professionals as equivalent providers. While physicians are extremely thankful for the excellent support from advanced practice providers (APPs), our duty at the AMCNO is to remind hospital administrators and insurers that the many years of advanced training to attain an M.D, or D.O. degree brings with it an expertise that is unique to medicine and should be valued for its advanced merits. With the recent Dobbs Supreme Court decision and the many state laws restricting a woman's access to reproductive health care, I am concerned about any policy that impinges on the sanctity of the physician-patient relationship. I am deeply troubled by any policy that would impose criminal penalties upon physicians for acting in the best interest of their patients and force a physician to choose between their oath to do no harm and their civil, criminal, and financial livelihoods. I am also very concerned about the ability for Ohio to properly educate future medical professionals. In fact, a recent study has already shown a significant decrease in the number of graduating medical residents in OB-GYN choosing to practice in states (like Ohio) that have legislation in place or pending that place restrictions on abor

I am both excited and concerned about the implementation of advances in Artificial Intelligence (AI) and how it will impact medicine. Physicians will embrace the many exciting advances in AI that will improve patient care and safety. My concern relates to any use of AI in a way that negatively impacts the physician-patient relationship and the implementation of AI methodology without very careful and rigorous study of its impacts.

WHAT ARE YOUR GOALS AND PRIORITIES FOR THE AMONO THIS YEAR?

My goals for AMCNO this year are to build upon major successes and initiatives that were launched in 2022. I want to see the Academy build upon its great achievement with the Future Leaders Council. It is inspiring to engage the future leaders in medicine and expose them to the importance of advocacy for physicians and the medical profession. We also expanded our community service events last year and held more social events for the physician community than ever before. My goal is to expand these events even more this year.

Another important goal for this year is to prepare for the Academy's bicentennial in 2024. The Academy is the oldest professional organization in Ohio and one of the oldest physician organizations in the country. The breadth and depth of the Academy's engagement with and service to Northern Ohio's medical and patient communities for the past 200 years is astounding. From service in the Civil War and World War II to playing a critical role in every infectious outbreak in the region (Cholera, Smallpox, Polio, Covid-19, and more) to programming on local radio and TV stations for dissemination of medical advice, the Academy has been at the forefront of all health care related issues in Northern Ohio throughout its history. Along with the AMCNO staff, my goal is to use our bicentennial achievement to reengage with our physician membership, attract new philanthropic funding to support our mission, and celebrate with the entire Northern Ohio medical community at our Bicentennial Gala on May 4, 2024.



WHAT WOULD YOU SAY TO PHYSICIANS ABOUT SUPPORTING THE AMONO?

I would say – C'mon join us! We are here for you. We advocate for you in Columbus and in Washington, D.C. We have many resources to support your practice. We can connect you with other physicians with similar interests.

Meet the New AMCNO Board Members



Erinn Coe, M.D. is a rheumatology fellow at University Hospitals. She graduated from Northeast Ohio Medical University (NEOMED) and completed her residency at Summa Health in Akron. Dr. Coe is originally from the Youngstown area, and she has a passion for working with underserved patient populations. Her professional interests include reproductive healthcare in patients with rheumatic diseases and resident education. Outside of work, Dr. Coe enjoys spending time with her family, playing with her cats, baking, and distance running. Dr. Coe served as a member of the AMCNO's inaugural class of the Future Leaders Council and is excited to step into her new position on the Board of Directors.



Ricardo Correa, M.D. specializes in endocrinology, diabetes, and metabolism at the Cleveland Clinic. Dr. Correa has advocated for issues like burnout, physician wellness, and the needs of International Medical Graduate Physicians. He believes that medicine must embrace its intersection with other fields like law, business, and technology to best address social determinants of health and mitigate health disparities for marginalized and vulnerable populations. Dr. Correa is also passionate about improving racial and ethnic diversity in the physician workforce and addressing the rising cost of medical education. He aims to continue the meaningful work of prior AMCNO board members in his term.



Roopa Thakur, M.D. is a pediatrician at the Cleveland Clinic. Dr. Thakur first became involved with the Academy through a presentation for the Future Leaders Council on regional lead poisoning prevention efforts, and she is excited to increase her involvement in her term as a board member. She believes that physicians need to build partnerships with community members to develop sustainable programs that reliably meet our community's needs. Dr. Thakur identifies her own values in the AMCNO's mission to support physicians in being strong advocates for all patients and to promote the highest quality of medicine, and she is committed to enhancing the overall health and wellbeing of our Northern Ohio community.



Lilian White, M.D. is a resident in family medicine at the Cleveland Clinic. She is passionate about integrative & functional medicine, writing, and teaching. She will be founding an innovative direct primary care practice after graduating from residency in June 2023 and is excited to advocate for patient and physician well-being with the AMCNO by representing independent physicians. In her free time, Dr. White is active within her local faith community and enjoys yoga and paddleboarding.

Future Leader Spotlight Kelly Kimball, M.D.

Dr. Kimball is a recent graduate of Northeastern Ohio Medical University (NEOMED). She matched in Dermatology at OhioHealth Riverside Methodist Hospital in Columbus and is excited to continue learning about medicine through more hands-on dermatologic training. Originally from Ohio, Dr. Kimball attended Linfield College in Oregon for her undergraduate degree before returning to her home state for medical school. As a first-generation college student, Dr. Kimball wanted to leave a legacy as the first woman in her family to pursue higher education and become the first doctor in her family. She decided to pursue medicine because of her passion for patient care and advocacy.

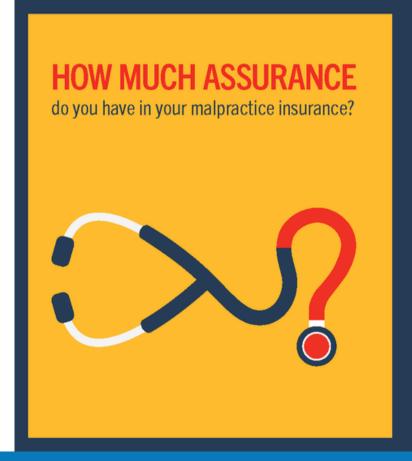
Dr. Kimball is passionate about physician advocacy, and she believes that the most prominent issue facing physicians today is legislative interference in the physician-patient relationship.

In her recent visit to Columbus with the Academy in March for the Ohio Lead Free Kids Coalition Budget Advocacy Day, Dr. Kimball saw firsthand how important it is for medical students, residents, and physicians to share their voices and expertise with legislators to best advocate for their patients. She had previously participated in advocacy at the federal level and appreciated the opportunity to speak with legislators in the state where she will be practicing medicine.



Dr. Kimball joined the AMCNO's first cohort of the Future Leaders Council to strengthen her leadership skills and learn how to best advocate for her future patients in Northern Ohio.

As a future dermatologist, Dr. Kimball is most excited to treat and advocate for patients with complex cutaneous oncology. Her advice to current medical students is to not lose sight of why they joined the sacred profession of medicine. She encourages them to stay true to themselves and prioritize what fills their proverbial cup.



With yet another major medical liability insurer selling out to Wall Street, there's an important question to ask. Do you want an insurer with an A rating from AM Best and Fitch Ratings, over \$6.5 billion in assets, and a financial award program that's paid \$140 million in awards to retiring members? Or do you want an insurer that's focused on paying its investors?

Join us and discover why our 84,000 member physicians give us a 90+% satisfaction rating when it comes to exceptional service and unmatched efforts to reward them.



Cleveland Clinic and MetroHealth Receive NIH Grant to Study Neighborhoods

The National Institutes for Health (NIH) have awarded the Cleveland Clinic a \$3.14 million grant for a new public health research project in partnership with MetroHealth. Called "digital twin neighborhoods," the project will create data models from electronic health records to identify health trends and health disparities between neighboring communities. Jarrod Dalton, Ph.D. from the Cleveland Clinic and Adam Perzynski, Ph.D. from MetroHealth will lead the research project.

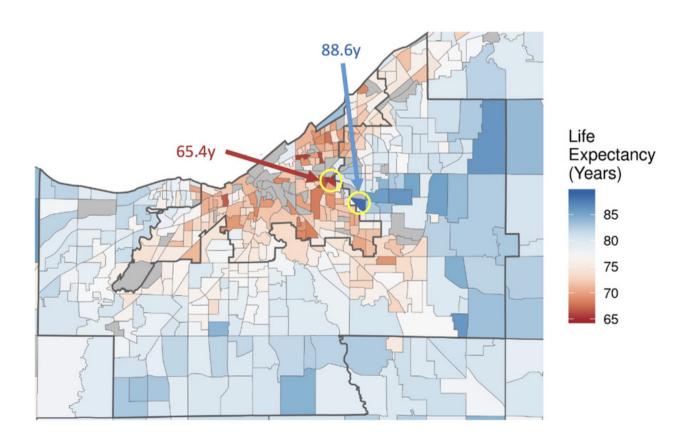
Zip code is one of the most significant indicators of one's health and life expectancy. In Cleveland specifically, health disparities are prevalent between different neighborhoods. For example, the Centers for Disease Control and Prevention (CDC) reports that life expectancy in Woodhill is 65.4 years while in Shaker Heights it is 88.6 years.

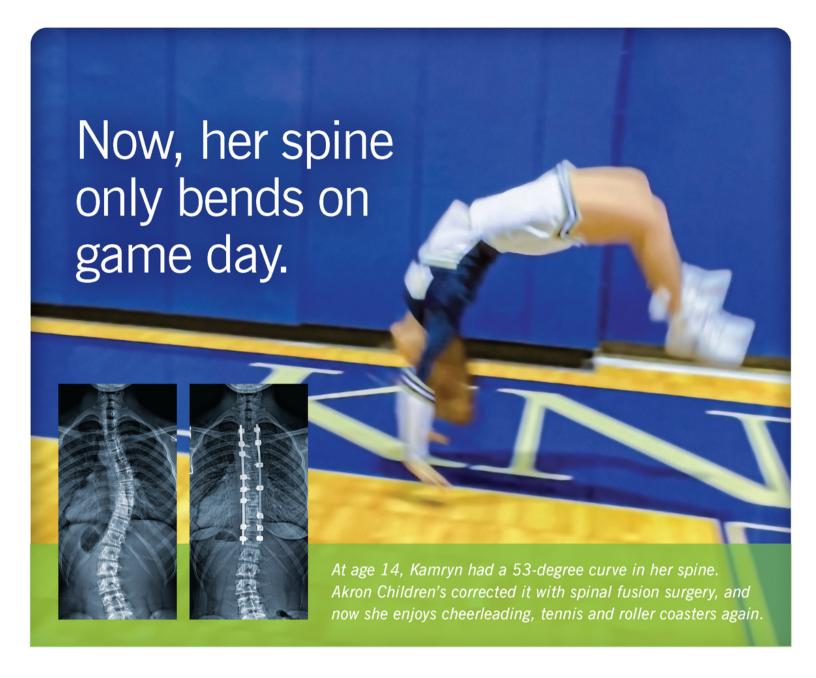


By creating these digital twin neighborhoods, researchers Dalton, Perzynski, and their colleagues will be able to identify what specific social, economic, and environmental factors contribute to these discrepancies.

In addition to identifying problems, Cleveland Clinic and MetroHealth researchers can also start creating solutions as the grant also accommodates for public health initiatives including education programs, clinics, and food distribution. Researchers are hopeful that this work can be translated to other parts of the U.S. as well since health inequalities are present across the nation. They are hopeful that their project will lead to community and policy-level changes to create health equity throughout Cleveland neighborhoods.

The AMCNO is proud to have two of its group members collaborating on this important public health research, and we will keep members updated on their findings.





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AMCNO and CMBA Host Annual Medical Legal Summit

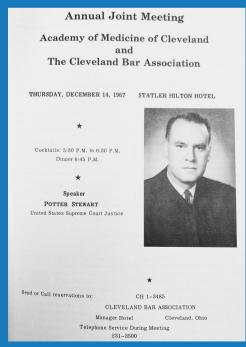


Left to right: Tanveer Singh, M.D., Jessica R. Baaklini, Esq, Negin Khosravi Ceraolo, M.D., David Ceraolo, Mary LaPlante, M.D.

On Saturday April 29, the AMCNO and the Cleveland Metropolitan Bar Association held its annual joint medical legal summit at Sandridge Country Club in South Euclid. The event was the first in-person summit held since the COVID-19 pandemic. The joint summit is a longstanding partnership between the two organizations, with the first summit being held in 1931.

Introductory remarks were made by the Summit Co-Chairs Michelle Block, J.D., Associate General Counsel & Director of Clinical Risk at the MetroHealth System and Jonathan Scharfstein, M.D., AMCNO President.

The lead panel discussed navigating health care Post-Dobbs Decision by the US Supreme Court. The moderator was Jessie Hill, J.D., from the Case Western Reserve University (CWRU) School of Law, and the panelists were David Hackney, M.D., OB/GYN-Maternal and Fetal Medicine OB/GYN-General, University Hospitals, Madelyn Grant, Esq., Friedman, Nemecek & Long LLC, Marsha Michie, Ph.D., Associate Professor of Bioethics, CWRU School of Medicine.



AMCNO/CMBA flyer from 1967.



Left to right: Madelyn Grant, Esq., Marsha Michie, Ph.D., David Hackney, M.D., Jessie Hill, J.D.



Left to right: Jennifer Kinsley Smith, Esq., Dave Margolius, M.D., Jessica R. Baaklini, Esq., Edward Kilbane, M.D., Katie Feldman, Esq.



Left to right: John Bodie, Jeremy A. Tor, Esq., Dale Cowan, M.D., J.D., Michelle Block, J.D.



Left to right: Keenan M. Jones, Sara West, M.D., Michelle Block, J.D.

In the discussion on the "Heartbeat Bill," abortion law in Ohio, Dr. Hackney commented, "As you go through your medical career there are lots of things that are stressful, but you sort of get used to that. You get used to having to break bad news or be in a scenario with bleeding and complications, but you also get used to it to some extent, you know the medical and legal risk and civil risk. You have to adjust yourself to the continuous cloud of civil risk in medicine, but criminal risk is something that even from a mental or psychological standpoint that's something very different."

The second panel was on twenty years of medical-legal partnership in Cleveland through the Legal Aid Society. The moderator was Katie Feldman, Esq., The Legal Aid Society of Cleveland and the panelists were Dave Margolius, M.D., City of Cleveland Health Director, Edward Kilbane, M.D., St. Vincent Charity Community Health Center, Jessica R. Baaklini, Esq., and Jennifer Kinsley Smith, Esq., of The Legal Aid Society of Cleveland. The panel celebrated the inclusion of Legal Aid attorneys now being positioned at all the major health systems in Cleveland. Physicians interested in learning more about how these services can benefit their patients can visit https://lasclev.org for more information.

The final panel was on medical liability and centered on two topics—medical marijuana and the recent vicarious liability decision by the Ohio Supreme Court. The Moderator was Michelle Block, J.D., and the panelists were John Bodie, Jeremy A. Tor, Esq., Sara West, M.D., University Hospitals; Keenan M. Jones, Frantz Ward LLP and Dale Cowan, M.D., J.D., Cleveland Clinic, and past president of the AMCNO. Dr. Cowan discussed the Clawson v. Hts. Chiropractic Physicians, Ohio Supreme Court Decision. The AMCNO submitted an amicus brief in the Clawson case which decided that an employer could not be held liable for the malpractice of an employee past the statute of limitations.



Unpacking HPIO's 2023 Health Value Dashboard

On April 28, 2023, the Health Policy Institute of Ohio (HPIO) released the fifth edition of their Health Value Dashboard, a tool that tracks health in Ohio by looking at health policies, outcomes, and spending. This year's dashboard shows that compared to other states in the U.S., Ohio ranks 44th on health value, a unit measuring population health outcomes and healthcare spending in the state. They state, "it is clear that Ohioans continue to live less healthy lives and spend more on health care than people in most other states."

HPIO also offered recommendations for potential changes to improve Ohio's health value: strengthening Ohio's workforce, fostering mental well-being, and improving healthcare effectiveness. To aid with these changes, they suggest policy changes including an expanded childcare subsidy, statewide implementation of Certified Community Behavioral Health Clinics, and primary care workforce training. Authors also commented that more efforts must be introduced to reduce tobacco use in Ohio since the rate of decline in Ohio has been slower than that in the U.S. overall. The AMCNO is working with partners at the local and state level to decrease tobacco use in Ohio, especially in youth populations.

Additionally, there were some noteworthy improvements to Ohio health care in breastfeeding and infant care supports in hospitals, female breast cancer early-stage diagnosis, outdoor air quality, and reduction in those who were unable to see a doctor due to cost. However, they also saw significant deteriorations in unmet needs for adults' mental health treatment, colon and rectal cancer early-stage diagnosis, and preventive dental care for children.

In terms of equity, HPIO researchers found "mixed progress" with some demographic groups improving in certain metrics but worsening in others.

For example, there has been a 28% decrease in heart disease mortality for Black Ohioans and a 17% decrease in child poverty for Hispanic Ohioans. However, we are still seeing very tangible impacts of health disparities in Ohio. HPIO highlighted specific health disparities for the groups below including the following statistics:

- Black Ohioans Reported being treated worse in health care setting due to race 10.3 times more than white Ohioans
- Hispanic Ohioans Reported experiencing physical or emotional symptoms due to race 4.3 times more than white Ohioans
- Ohioans with disabilities Reported they were unable to see a doctor due to cost 2.9 times more than Ohioans without disabilities
- Ohioans with lower incomes Have 55.3 times the rate of food insecure children compared to Ohioans with higher incomes
- Ohioans with less than a high school education Have 6.3 times the rate of uninsured adults compared to Ohioans with a college degree or higher
- Lesbian, gay, bisexual, transgender, and queer (LGBTQ+) Ohio youth -Have 4.8 times the rate of suicide contemplation compared to heterosexual Ohioans

Overall, the HPIO's 2023 Dashboard provides helpful insight on where Ohio still has room for improvement in terms of its health outcomes and equity. It also gives optimism that positive changes can be made to Ohio's health care outcomes and health care spending given the improvements that have been made so far. The AMCNO is committed to advocating for policies that will benefit Ohioans' public health and physicians' ability to care for their patients and is proud to be a sponsor of the Health Policy Institute of Ohio.



Source: Health Policy Institute of Ohio 2023 Health Value Dashboard

Bottom quartile healthcare spending AK WA MT ND MN W MI NY MA RI D WY SD IA LL IN OH PA NJ CT OR NY CO NE MO KY WY MD DE CA AZ UT KS AR TN VA NC NM OK LA MS AL SC







KAISER FAMILY FOUNDATION RELEASES ESTIMATES OF MEDICAID DISENROLLMENT

Associated with End of Public Health Emergency (PHE)

The Medicaid continuous enrollment provision ended nationally on March 31 in accordance with the Consolidated Appropriations Act. This means that members must renew their Medicaid coverage, and those who are no longer eligible for Medicaid can now be disenrolled from the program. The Kaiser Family Foundation (KFF) completed estimates of Medicaid enrollment growth to observe groups who are at high risk of losing health insurance coverage as continuous enrollment is over.

KFF found that groups who had the largest enrollment growth during the PHE will likely have the highest rates of disenrollment as well. In non-Medicaid expansion states, low-income parents and new mothers are at the highest risk of losing coverage. However, many children should remain eligible even if their parents are not. Their study found that adults who are eligible for Medicaid through the Affordable Care Act (ACA) made up most of the enrollment growth from February 2020 to March 2023 making up 38% of new enrollees. Ohio added an estimated 837,600 individuals with around 42% of those being adults eligible through the ACA.

The Department of Health and Human Services (HHS) has estimated that as many as 15 million people will lose health care coverage due to the end of Medicaid continuous enrollment, and up to 6.8 million may still be eligible for Medicaid coverage.

KFF authors also added the important role that state policies have in the enrollment outcomes now that the PHE has ended. Ohio Department of Medicaid (ODM) laid out a detailed plan to contact individuals who were being disenrolled from Medicaid and send renewal packages to those who were still eligible. ODM has been encouraging Medicaid enrollees throughout the PHE to keep their information up to date so that they can reach them regarding changes in their coverage. Those who are disenrolled are provided with information where they can get free, unbiased health insurance assistance to find a new plan. Disenrollment from Medicaid also allows individuals to enroll in an Ohio Marketplace health insurance plan outside of the Open Enrollment Period.

It will still take more time to determine how many people will stay on Medicaid, become disenrolled, transition health insurance coverage, and become uninsured. KFF researchers expect the declines in Medicaid coverage to impact the number of uninsured individuals in the US based on their past findings. An <u>analysis</u> from January on what happens after people lose Medicaid coverage showed that nearly two-thirds of people experienced a period of uninsurance after disenrolling from Medicaid or Children's Health Insurance Plan (CHIP).

Follow this link to read the full KFF article.

AMCNO Testifies Before Cleveland City Council

On March 20, AMCNO Past President Kristin Englund, M.D. testified before Cleveland City Council on behalf of the AMCNO in support of Ordinance 184.



Ordinance 184 would end the sale of all flavored tobacco products, including menthol and flavored vapes, and create a tobacco retail license so that the city can better enforce existing tobacco laws.

The AMCNO is part of a coalition of 40+ organizations led by the American Heart Association working in support of Ordinance 184.

In her testimony, Dr. Englund brought up the predatory tactics used in the advertising of these products which target youth and minority populations. Tobacco companies are now using similar predatory marketing schemes to attract children to their products including offering flavors like gummy bear, grape crush, and cotton candy. Ecigarette use among our children has become an epidemic, reversing decades of decline in tobacco use by kids. Flavors have enticed almost half of high school students to try vaping, and 30% of high schoolers vape regularly.

Dr. Englund also spoke to the dangers of nicotine in these products, "As a physician, let me be extremely clear. Nicotine is extremely harmful to children, whether it is used through smoking, vaping, or any other means. Nicotine dramatically increases the risk of drug use and mental illness for kids and harms the developing brain by negatively impacting attention, learning, mood, impulse control, and memory. Tobacco companies know this and yet shamelessly package their products in bright colors and flavor them to taste like fruit and candy."

AMCNO will continue to update members on the progress of Ordinance 184.



Anna Ruzicka, MPH is a recent graduate from the University of Pittsburgh School of Public Health's department of Health Policy and Management.

Originally from Dallas, Texas, Anna earned her Bachelor of Arts from the University of Pittsburgh in Media and Professional Communications with a Spanish minor. Anna will be joining the team at AMCNO full time with the title of William E. Lower Health Policy Fellow. In her free time, Anna enjoys counted cross stitching, baking, and FaceTiming her nieces and nephew.

Supreme Court Ruling on Mifepristone

On Friday April 21, the United States Supreme Court ruled to maintain access to the medication Mifepristone, one of two drugs commonly used in medication abortions. The ruling stayed a lower court decision striking the drug's Food and Drug Administration (FDA)'s approval, meaning that for now, access to the medication will remain.

Had they overturned the case, it would have set significant precedent for courts overturning FDA drug approvals. This precedent would allow anyone with a concern about a drug to challenge its legal standing in court. The case now heads to the New Orleans-based 5th Circuit Court of Appeals.

The AMCNO will keep its members up to date on this case and its potential legal implications.



On March 13, the AMCNO submitted <u>comments</u> to Centers for Medicare and Medicaid Services (CMS) Administrator Ms. Chiquita Brooks-LaSure on proposed prior authorization reform for Medicare and Medicaid.

In our letter, we pointed out that beyond the obvious issues of administrative burden and burnout, prior authorization also causes increased costs to the health care system and serious consequences to patients' health. For example, we know that colon cancer rates are increasing in the United States, particularly among younger people, and cases are being diagnosed at more advanced stages of the disease. While this is occurring, United Healthcare recently announced it will be establishing prior authorization requirements for all diagnostic colonoscopies effective June 1, 2023.

Specifically, we recommended that CMS implemented the following changes:

- As proposed, beginning January 1, 2026, require impacted payers to include information about prior authorization requests and decisions via the Patient Access Application Programming Interface (API), no later than one business day after the payer receives a prior authorization request or there is a status change to a prior authorization.
- Create a uniform standard for prior authorization across plans.
- Require all payers to deliver prior authorization decision notifications within 72 hours for standard requests and 24 hours for expedited, urgent requests.







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AMCNO Participates in Ohio Lead Free Kids Coalition Advocacy Day

On March 30, AMCNO Executive Director Jen Johns and Future Leaders Council Member Kelly Kimball, M.D. attended the Ohio Lead Free Kids Coalition Advocacy Day in Columbus.

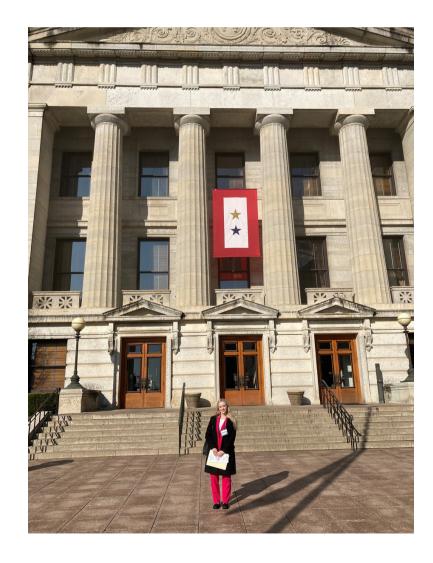
During the day, they met with key legislative offices including Rep. Tom Patton (R-Strongsville), Rep. Bride Rose Sweeney (D-Westlake), Rep. Mark Romanchuk (R- Mansfield), and Senate President Matt Huffman (R-Lima).

In these meetings, Ms. Johns and Dr. Kimball pushed for support for lead poisoning initiatives that Governor Mike DeWine included in his introduced version of the state budget including the following:

- Preserving the Ohio Department of Health lead abatement funding to support state lead safe home fund, lead safe work practices in older home renovation, repair, and painting.
- Protecting the Ohio Department of Development Early Intervention, a portion of which supports children with Elevated Blood Lead Levels (EBLL) with access to early intervention supports and services.
- Preserving the Lead-Safe Home Fund Pilot Program for grants and loans to landlords and homeowners as part of the city of Cleveland's lead poisoning prevention.
- Increasing Ohio Department of Medicaid's spending authority for the SCHIP Lead Program from \$5M to \$10M to remediate lead hazards in homes where children have already been lead-poisoned, and the homes have been found to be the source. So far, about 400 homes have been remediated with this program but with nearly 1,200 homes currently under a lead hazard control order, showing the need for increased funds.

Unfortunately, the Ohio House of Representatives in their version of the budget cut \$9 million of funding from the Governor's proposed budget from the primary ODH line item used to support key lead investments. We will be working with the Ohio Senate to reinstate this funding in their version of the budget.





AMCNO Working on Prior Authorization Bill in Columbus

The AMCNO is working alongside a coalition organized by the Ohio State Medical Association (OSMA) to pass "Gold Card" Prior Authorization legislation in Columbus.

HB 130, sponsored by Kevin Miller (R-Newark) had its first hearing in the Ohio House Insurance Committee on April 19. In his sponsor testimony, Rep. Miller said, "House Bill 130 streamlines the prior authorization process in limited cases to eliminate unnecessary red tape that has burdened the health care provider community and their patients for far too long. At the end of the day, the goal is to ensure our health care providers can deliver the best care possible for their patients."



— NORTHERN OHIO— PHYSICIAN

THE ACADEMY OF MEDICINE OF CLEVELAND & NORTHERN OHIO

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A summary of the bill's provisions includes the following:

- Health care providers who see prior authorizations for a given service approved at an 80% rate or higher would earn their gold card status for that select service. Once a health care provider has been granted gold card status, they would not need to request prior authorization for a twelve-month period for select services for which they have been granted gold card status.
- Gold card status would be eligible for Ohio commercial regulated health plans, Ohio public employee plans, and Ohio Medicaid plans.
- Gold card status would apply to a specific provider and a specific select service. Services applicable would be any healthcare service in Ohio's commercial plans, Ohio public employee plans or Medicaid that require prior authorization such as medical services, drugs, lab services, durable medical equipment, etc.
- Gold card exemptions would only apply to medically necessary services. Health plans can still apply administrative denials.
- Each year, insurers would be able to reevaluate gold card-holding health care providers over the previous year with a retrospective review of certain claims.
- Appropriate data sharing from the health plans would ensure plans are not arbitrarily denying prior authorizations to keep a provider from hitting the 80% approval rate.

AMCNO Endorses Proposed Constitutional Amendment

On April 11, the AMCNO joined a growing list of physicians led by the Ohio Physicians for Reproductive Rights working to protect reproductive freedom in the Ohio Constitution.

"We're proud to join with Ohio Physicians for Reproductive Rights in an effort to secure access to reproductive health care for all Ohioans," said Jonathan Scharfstein, M.D., AMCNO President. "As medical practitioners, we care deeply about the health and well-being of our patients, all of whom have different and unique circumstances and needs."

"We have grave concerns with any policy that erodes the sanctity of the physician-patient relationship," Scharfstein said. "Abortion bans violate long-established and widely accepted principles of medical ethics by substituting legislators' opinions for a physician's individualized patient-centered counseling."

In our press statement, we also expressed concern with any policy that would impose criminal penalties upon physicians for acting in the best interest of their patients, saying that these laws force a physician to choose between their oath to do no harm and protecting their civil, criminal, and financial livelihoods. Dr. Scharfstein noted that the American Medical Association (AMA) Code of Medical Ethics gives physicians the "ethical responsibility to place patients" welfare above the physician's own self-interest or obligations to others."

Ohio Physicians for Reproductive Rights, as part of the larger Protect Choice Coalition, is in the process of collecting the required 413,446 valid signatures from registered Ohio voters. The groups say they plan to collect at least 700,000 signatures by the July 5 deadline.

Those interested can find a location to sign the petition, volunteer to collect signatures or read the full amendment language.

AMCNO Testifies in Support of Biomarker Testing in Columbus

On March 29, Future Leaders Council Member Negin Khosravi, M.D. testified on behalf of the AMCNO in support of H.B. 24, Biomarker Testing, before the Ohio House Insurance Committee in Columbus.

The bill would require health benefit plans and Medicaid to cover biomarker testing. The AMCNO is part of a coalition, organized by the American Cancer Society Cancer Action Network, with over 40 patient and provider organizations across Ohio supporting this critical legislation.

In her testimony, Dr. Khosravi indicated the importance of biomarker testing to cancer patients across Ohio saying, "55% of cancer clinical trials currently use biomarker testing. When doctors can connect their patients to the most appropriate targeted therapies using biomarker testing, patients can avoid other treatments that may be ineffective or have additional side effects."

Over 74,000 Ohioans are diagnosed with cancer each year, and this legislation could help many of them get more precise treatment for their individual case. We will continue to keep members posted on the progress of this legislation.



We Celebrate Our Members Especially on Doctors' Day!

Each year, we look forward to March 30—National Doctors' Day—when we say a special "thank you" to our physician members for the work they do every day for their patients and our communities.

We were grateful to visit our members' offices to celebrate this event another year. Staff filled gift bags with all kinds of goodies, including beautiful homemade cards from local schoolchildren, cookies, and gift cards.

The group began their full day at MetroHealth to see AMCNO Past President Thomas Collins, M.D. and a team of Emergency Medicine physicians; we supplied them with a healthy dose of coffee and doughnuts which they appreciated! The next stop was to AMCNO Immediate Past President Gerard Isenberg, M.D. and his team at University Hospitals. We also visited Past President Kristin Englund, M.D. and the infectious disease physicians at Cleveland Clinic's main campus and President-Elect Marie Schaefer, M.D.'s office at the Cleveland Clinic Sports Medicine Center in Garfield Heights. We also stopped by Cleveland Clinic's Hillcrest Hospital to visit current AMCNO President Jonathan Scharfstein, M.D. Following that was a trip to see AMCNO Board Member Eric Shapiro, M.D. in South Euclid and Jessica Tomazic, M.D. at Summa Health in Akron.

The smiles from everyone made our day, and we look forward to continuing this tradition of office visits next March 30.





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