As we begin our 42nd year of operation, the MICA Board of Trustees has declared a member dividend of $25 million, representing approximately 26% of an annual premium. Over the last thirteen years, as beneficial owners, MICA members will have received, upon their receipt of the most recently declared dividend, their proportionate share of over $400 million in dividends. Since our founding in 1976, MICA has distributed over half a billion dollars in dividends to our members.

To learn more about potential dividends from MICA and how you can become a member, visit our website, www.mica-insurance.com, or contact us at 800.352.0402.

The dividend declared for the 2017 policy year reflects the Company's financial performance. Past performance does not guarantee future dividends. This policy has exclusions, limitations, and terms under which the policy may be continued in force or discontinued. For costs and complete detail of coverage, contact your insurance agent or MICA.
The Official Publication of the Arizona Osteopathic Medical Association

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President’s Message

Get Up and Dance

When I began my term as your President, I chose as my theme three E words: Empower, Engage, and Enact. This is my third missive to AOMA membership so we now are on the third word, Enact. Most people are familiar with the first definition found in any dictionary: to make (a bill or other proposal) law. However, my message focuses on the second definition: to act out (a role or play) on stage, to participate or promote. In my experience, this meaning is perhaps less used but just as important.

Especially in our role as physicians for we are frequently called upon - and more commonly assumed by the public and our patients - to take on a role, whether it be as healer, role model, adviser, advocate, all of the above, or any combination of the above.

I recently returned from a month-long trip to Myanmar. This was my fifth trip to the country. Every trip is different: I travel to a new area of that country and see things I’ve never seen before. This time, I spent a week in what is known historically as the Golden Triangle, the area where Myanmar, Thailand, and Laos come together. The name reflects this area’s history as one of the most extensive opium-producing areas of Asia.

When I first started traveling to Myanmar in 2009, I was forbidden, as a foreigner, to go to this area of the country, as the government of Myanmar could not guarantee my safety. Now, all foreigners are permitted but are only allowed to stay overnight in the city of Kyaing Tong. Travel to the countryside villages requires a special visa and can only occur during the day.

My goal was to see some of the Akha tribal villages. The Akha are one of the largest hill tribes in the region. They have little or no contact with the outside world, although occasional visitors are welcome, as I found. The women wear a traditional costume composed of a tunic, short skirt, and leggings. They have black teeth and jet black hair—dyed from applying betel nut and lime. But the most amazing adornment is the dragon-like headdress, fashioned with old silver coins (Indian rupees circa 1908), silver balls, and strings of colored beads. These headdresses weigh up to 30 pounds.

Laurel Mueller, DO, MBA
2017 – 2018 AOMA President
I hired a local Akha guide for the day-trip to four different Akha villages. We drove for about 90 minutes by car then were dropped off to trek on foot through the muddy pathways up the hills. After almost two hours, we reached our first village and were greeted by about 15 people - mostly children and teens and a few women. They were headed to a festival and carrying drums and gongs. We chatted for a few minutes and continued on our way through two more villages.

At the third village, we found a festival in full swing. The villagers had just completed an extensive meal. Many youngsters were dancing to drum and gong music. I was invited to sit with my guide among the table of men. Behind me on the porch was a group of female elders, talking around an identical table. I was offered food and the omnipresent Coca Cola. After about 20 minutes of visiting, the Shaman stood up and summoned the women to make a circle for a special dance. My guide translated that the tribe had offered to perform a blessing dance for me and explained that I was to stand in their circle as they danced around me! I was moved by their kindness and was caught a bit off guard by their kind proposal. No one had ever performed a blessing dance for me! I quickly moved to inside the wide circle they had formed.

As the Akha offered a blessing dance for me that day, I was ready to play my part in their circle ceremony. We physicians, on this life’s stage, have an opportunity to enact our role: as healers to our patients, as advocates to our profession, as mentors to physicians-in-training, and as teachers to our medical students.

AOMA is the perfect stage to participate in and promote your profession. Your membership ensures that the Association continues its role as advocate, educator, promoter, and protector.

Invite your colleagues – DOs and MDs - to come into the AOMA circle. As a premier provider of continuing medical education, your Association now offers both AOA and AMA credits for all physicians. Join us at the AOMA 96th Annual Convention to be held in Scottsdale April 11 – 15, 2018. Full agenda and information are available at www.az-osteo.org/Conv2018.

My hope is that none of us demurs from the opportunity to enact one's role. If they want to give you a blessing dance, get up and dance!!

All the world’s a stage, and all the men and women merely players: they have their exits and their entrances; and one man in his time plays many parts, his acts being seven ages.

William Shakespeare
When Interference Becomes Reform – Administrative Simplification in 2018

It was 2004 and for nearly six months physicians in rural Arizona experienced lengthy payment delays from one of the largest AHCCCS Medicaid plans. The health plan was transitioning to a new claims system and it was fraught with problems. Physicians throughout Arizona, but especially in rural areas, were threatening to leave AHCCCS.

At the time, I was the health policy advisor for Republican leadership in the House of Representatives and became responsible for resolving these complaints. Understandably, physicians were furious they were being penalized for the missteps of this health plan. This incident also exposed significant weaknesses in the insurance regulations regarding timely payment and penalties for late payments. After speaking to my colleagues in other states about solutions, it was clear Arizona was lagging behind in this area. Arizona has historically had one of the highest rates of managed care penetration and the presence is strongly felt at the Capitol.

Being relatively new to this process, I naively rolled up my sleeves and began working with stakeholders to draft timely-pay legislation. It did not take long before the rumblings of my work began circulating among the health plans and an intervention was underway that could have been perilous to my career. It was clear after speaking with stakeholders off the record that many were unwilling to sign up for that kind of gunfight at the Capitol. When it became obvious the effort would be futile and end badly, the bill I had been working on was watered down before being passed.

It was a different time at the Arizona Legislature in those days. By today’s standards, the conservative Republicans in the majority control then were significantly more moderate than today. One notable exception today is that conservative Republicans appear far less concerned about a limited role of government when it comes to healthcare. There has been an increasing number of elected officials from both political parties seemingly much more comfortable passing legislation that alters the practice of medicine. In 2017 we saw legislation passed that regulates physician surprise billing, imposes opioid prescribing limits, mandates continuing medical education, and dictates requirements to check the Controlled Substance Prescription Monitoring Program before prescribing.

The question of whether policies were better or worse 15 years ago depends on how effective we are in today’s environment. With practically nothing off the table anymore, there is enormous potential to improve the practice of medicine for physicians and patients. The threats to medicine are also much more significant and we are expending considerably more resources in defensive positions.
Recognizing these new opportunities, in April 2017 AOMA passed a resolution with guiding principles for administrative simplification. This initiative was in response to the rapidly declining career satisfaction of physicians. Currently more than half of physicians (54.4%) report high levels of professional burnout due to less time with patients and increased administrative workload and they are significantly less likely to be satisfied with work-life balance. This resolution made administrative simplification a priority for AOMA with the goal to improve access to care for patients and address a root cause of physician burnout and career satisfaction. We will be persistent and bold in our efforts to reduce delays in care, excessive paperwork, duplication, and inefficient processes.

The Opioid Epidemic Act, Senate Bill 1001, legislation which passed during the special session in January 2018, provided AOMA and the Arizona Medical Association (ArMA) the first real opportunity to advance administrative simplification reforms. We maintained opioids should not be a first option or bridge to control pain as patients wait for lengthy health plan prior authorization approvals (PAs) for access to non-opioid treatments. Most of the Opioid Epidemic Act provisions and public’s attention were focused on opioid prescribing restrictions and interventions. However, the significance of including PA reforms in the bill cannot be overstated. Health plans will be required to streamline online PA services and be held to strict standards for transparency and notification of new PA requirements. There are also new requirements for timely communication and approvals by health plans of urgent and non-urgent PAs. In addition, there will be minimum duration times for PAs and prohibitions on reversing PA decisions with exceptions for extraordinary circumstances.

With these PA reforms affixed into state law, we have a strong foundation for tracking the progress of administrative simplification, and as necessary we can work to strengthen and improve the scope of these reforms in future legislative sessions. A detailed slide show explaining all of the provisions of the Opioid Epidemic Act is available on the AOMA website at www.az-osteo.org.

What’s Next?
We have heard from physicians that health plan credentialing delays are another administrative burden on physicians in need of reform. AOMA and ArMA are working with the Health System Alliance of Arizona and the Arizona Hospital and Healthcare Association to get legislation, sponsored by Representative Heather Carter, passed to make physician health plan credentialing easier and more efficient. Arizona is sorely lacking in physicians and it is unacceptable that patient access to care is being impeded by onerous credentialing processes, poor communication of application deficiencies, and excessive loading timeframes. We have heard numerous stories of physicians waiting, sometimes in excess of six months, to be credentialed and become loaded into the health plan payment systems. New physicians starting up practices are especially vulnerable as they enter the workforce with debt and wait for months to become credentialed and be reimbursed.

Administrative Simplification continued on page 6
AOMA is steadfastly committed to reducing physician burnout. Through administrative simplification, every minute rescued from paperwork and administrative headaches equates to more time with your patients and families.

Thankfully, advocacy for administrative simplification is more feasible than it was 15 years ago. However, it is still exceptionally difficult and requires considerable time and effort. Your continuing support of AOMA through your membership, engagement in advocacy, and donations to the AOMA Political Action Committee are vital for these efforts to continue and succeed. We also need committed volunteers and subject matter experts to serve on the AOMA Legislative Affairs Committee and the House of Delegates. Please contact me at pwertheim@az-osteo.org or 602-266-6699 if you are interested in getting more involved in advocacy with the AOMA.

We hope you are planning to attend the AOMA 96th Annual Convention on April 11 to 15, 2018 at the Hilton Scottsdale Resort. This year’s agenda includes a lecture on physician burnout – the risk factors, how to recognize the symptoms, and strategies to prevent it. Additionally, the AOMA Town Hall will focus on healthcare policy and politics. Complete information and the full agenda are on pages 16 and 17 of this issue of the AOMA Digest. Register at www.az-osteo.org/2018Conv.

References

Speak Out! Make a Difference. Contribute to AOMA PAC.
The AOMA PAC is a voluntary political action committee that allows AOMA members to pool their financial resources to support state candidates who understand and appreciate the value of our profession and its importance to providing affordable, quality healthcare to Arizonans.

The AOMA PAC is non-partisan. Its goal is to help elect candidates who, as lawmakers, will best represent the values of AOMA and the thousands of patients we serve. Among the criteria considered by the AOMA PAC in making donations:
• The candidate’s support of positions that advance the osteopathic medical profession in healthcare delivery
• The candidate’s leadership position or membership on key legislative committees
• The candidate’s potential for leadership
• The candidate’s financial need and likelihood of being elected
• The presence of AOMA members in the candidate’s district or state

With your support we can work effectively together for the good of our profession. Your donation will help send a clear message to legislators about the issues that are important to DOs and their patients.

A strong AOMA PAC means a strong profession. Donate today! www.az-osteo.org/PAC
Prior Authorization Reforms Contained in Opioid Epidemic Act

- Requires health plans to make available on their web-site or provider portal a listing of all prior authorization (PA) requirements; listing must clearly identify the specific services, drugs or devices to which a PA requirement exists, including specific information or documentation that a provider must submit in order for the PA request to be considered complete
- Requires the health plans to allow providers to access the prior authorization request through the applicable software system
- Specifies that the health plan or its utilization review agent must provide at least two forms of access to request a PA and must have emergency after-hours procedures
- Beginning January 1, 2020, the health plans must accept and respond to prior authorization requests for prescription benefits through a secure electronic transmission; provides exceptions for providers due to financial hardship or connectivity issues
- Establishes maximum timeframes for decisions on PAs:
  - For urgent health care services, the authorization or adverse determination must be no later than 5 days
  - For non-urgent health care services, the authorization or adverse determination must be no later than 14 days
- Requires the health plan or its utilization review agent to acknowledge receipt of the PA request and notification to the provider whether the PA request is granted, denied or incomplete
- If the request is denied the specific reason for the denial must be included.
- Requires health plans to allow at least one medically-assisted treatment be available with PA
- If a PA request is incomplete, the provider must have the option to submit additional information; after additional information is submitted the health plan has 5 days to review and respond for urgent requests and 14 days for non-urgent requests
- Specifies that PAs are deemed granted if there is failure to comply with the timeframes
- States that PAs are binding and may not be rescinded once a decision is made; exception in cases of fraud or misrepresentation
- Allows for an appeal process in cases of denial of a PA request
- Specifies that a health plan must honor a PA that is granted for an approved drug for the earliest of the following:
  - Six months after the date of the PA approval
  - The last day of the enrollee's coverage under the plan
- Allows health plans to request that the provider submit information indicating that the enrollee's chronic pain condition has not changed and that the continuation of the treatment is not negatively affecting the enrollee's health
- If the provider does not respond within 5 business days, the health plan or its utilization review agent may terminate the PA
- States the PA time limits for chronic pain do not apply to prescription medications if the FDA recommends that the drug be used only for periods less than 6 months and any opioid or benzodiazepine or other Schedule I or II controlled substances
- Allows for substitutions for a comparable brand product or a generic counterpart with therapeutic equivalence evaluations
- Permits PAs for longer than six months
AOMA in Action

AOMA is the voice of osteopathic medicine in Arizona, representing the profession as a healthcare stakeholder and community partner. This activity update covers the four-month period October 1, 2017 to January 31, 2018.

Advocacy/Legislative Affairs
• Prior to and during the Arizona Opioid Epidemic Act special session, advocated for various amendments to protect access to care for vulnerable patients
• Lobbied for critical reforms to reduce health plan prior authorization restrictions and improve access to non-opioid treatment therapies
• Represented AOMA physicians at Department of Health Service Rx Health Care Advisory Teams meetings to develop updated opioid prescribing guidelines
• Successfully opposed efforts by the Arizona Naturopathic Medical Association to expand scope of practice to write childhood immunization medical exemptions
• Developed and distributed an overview of the Arizona Opioid Epidemic Act to help physicians prepare for new requirements
• Participated in the Controlled Substance Prescription Monitoring Program Task Force and Arizona Opioid Targeted Response Initiative program meetings
• Conducted three Legislative Affairs Committee Meetings and four Student Legislative Affairs Committee meetings.

American Osteopathic Association (AOA)
• Represented AOMA interests at the AOA LEAD (Leadership, Education, Advocacy, & Development) meeting policy discussions in Austin, Texas

Continuing Medical Education
• Co-sponsored 13.50 hours of AOA Category 1-A CME credit and AMA PRA Category 1 credits™ for the AOMA 37th Annual Fall Seminar in November 2017
• Created and posted ten new online on-demand CME offerings on DOCME.org
• Added AMA PRA Category 1 credits™ to the DOCME.org on-demand platform

Member Services
• Facilitated the Association of Osteopathic State Executive Directors meeting in January to discuss and develop new initiatives to improve membership services for AOMA members

Osteopathic Charities
• Raised more than $2,721 in the 2018 Birdies for Charity campaign
• Announced Annual Scholarship Essay Contest to AZCOM and SOMA students

Political Action Committee
• Raised $5,372 in PAC contributions
• Distributed $9,600 to 18 state candidates
• Hosted and attended various fundraisers on behalf of AOMA

Public Relations
• Represented AOMA at the A.T. Still University’s Founder’s Day celebration and activities in Kirksville, Missouri

Public Health
• Represented AOMA at the Health Current Board meeting
• Represented AOMA at The Arizona Partnership for Immunization (TAPI) Steering Committee
• Distributed the End of Life Task Force Survey and participated in various meetings

The Future of the Osteopathic Profession
• Hosted the 2nd Annual Dinner with Doctors student mentoring and networking event
• Student doctors served as moderators at the AOMA 37th Annual Fall Seminar
• Participated in the Rotation and Residency Opportunity Day at Midwestern University

For more information about any of these updates, call 602-266-6699 or email communications@az-osteo.org.

Arizona Osteopathic Medical Association

Promoting and protecting the osteopathic medical profession for 97 years

The mission of the Arizona Osteopathic Medical Association is to promote the osteopathic medical profession, serve our members, provide osteopathic continuing medical education, and advocate for access to high quality, cost-effective healthcare.
Any thesaurus will tell us that enact also means DO and ACHIEVE. That says it all: DO ACHIEVE. What it doesn't mean is to fail. So how DO we assure the success of our future DO physicians? How DO we educate tomorrow’s DO physicians so that they ACHIEVE success? I believe the answer starts with how we select candidates for a medical school education, with a selection process that includes an evaluation of candidates’ readiness to serve those in need – those individuals living and working in the most medically underserved communities throughout America.

There remain today nearly 28 million uninsured Americans in need of healthcare services, and many of those individuals live and work in medically underserved areas. Greater access to healthcare services – primary care services in particular – is a necessity. Community Health Centers (CHCs), also known as Federally Qualified Health Centers (FQHCs) are currently serving more than 27 million people across the U.S. regardless of ability to pay; and have been America’s largest primary care network for more than 50 years. According to a 2014 report from the National Association of Community Health Centers, CHCs were responsible for an estimated $24 billion cost savings to the American healthcare system. Despite the cost savings, the added access to needed healthcare services for all comers, the fact that more than 1,400 CHCs are serving those in need in nearly 10,000 rural and urban communities across the U.S., there remains a tremendous need for a larger workforce dedicated to serving the underserved.

So how can a DO learn to DO to the best of their ability? I believe tomorrow’s physicians will be the best they can be if they are inculcated with the knowledge of the social determinants of health and the fact that those determinants permeate the general wellbeing of individuals who are living in medically underserved areas (MUAs). The Centers for Disease Control and Prevention (CDC) inform us that social determinants of health are conditions affecting a wide range of health risks and outcomes, and include such factors as the places where people live, learn, work, and play. Additionally, were medical educators to partner in some manner with CHCs, medical schools training tomorrow’s physicians would have an opportunity to provide students an education steeped in interprofessional experiences and team-based environments focused on population health. Because CHCs offer primary care, behavioral health, pharmacy, and dental services, the CHC environment addresses the osteopathic concept of whole person healthcare – a concept that serves our patients with a true mind–body–spirit approach. Were more medical schools to ENACT such a strategy in their respective curricula, we might all DO more to close the health disparity gap that exists in America, and DO more for those most in need.

References
Imagine Fully-Informed Health
by Melissa Kotrys, MPH, CEO, Health Current

History gives us many examples of major changes or paradigm shifts from technology. However, it’s not the technology itself but rather its adoption and use that spurs a shift. Nearly everyone has a great example of a paradigm shift in their pocket or purse. When the first cell phones were introduced by Motorola in 1983, they weighed two pounds and cost $4,000. The use of cell phones was very slow at first and were not used any differently than the landlines of the day. Today cell phones have changed the way we live. No longer are they just “phones”, they are cameras, navigation and banking devices, social media and entertainment tools and much more – an incredible paradigm shift from the invention of the telephone, a device that had not changed fundamentally since its invention a century ago.

Although health information exchange (HIE) technology has been around for a while, we are just beginning to see its adoption and use change how healthcare is managed and delivered. Electronic health records (EHRs) were introduced more than 20 years ago, and a 2003 Centers for Disease Control (CDC) survey found them in use in just 31 percent of hospitals and 17 percent of physician practices. Today, in Arizona, more than 85 percent of physician practices rely on an EHR to organize and operate patient workflow. The use of EHRs created the possibility of linking these systems through an HIE.

Health Current’s predecessor, Health Information Network of Arizona, launched an HIE platform in 2010, but it was not until the adoption of a more advanced technology platform in 2014 and the elimination of HIE participation fees for community providers in 2015 that Health Current began to see real growth. By the end of 2015 Health Current had 74 participants and 243 participants by the end of 2016. Last year the number of participants grew to 400, including most major behavioral health providers, hospitals, and health plans in the state, and we expect the current growth rate to continue.

As the number of participating organizations has grown, so has the amount of available data. For example, today Health Current receives information from 97 different data sources, including nearly 95 percent of all Arizona hospital emergency and inpatient admissions. This allows Health Current to be a valuable real-time resource for providers who need to closely track high-needs patients. Today 163 provider organizations and practices provide Health Current a list or a panel of patients they need to track closely, and Health Current sends real-time alerts to these subscribers on any hospital admissions, discharges and transfers (ADTs) of these patients. In the past year, Health Current has provided more than 600,000 alerts to these subscribers, and this service is changing and improving the care and management of patients.

At Mountain View Pediatrics in Flagstaff, the largest pediatric practice in northern Arizona, they have built these alerts into their practice workflow and receive alerts on any of their patients discharged from the hospital. Where they used to receive an occasional call about a patient being discharged, these alerts now serve as a “security blanket,” allowing them to schedule follow-up and request the discharge summary on every hospital discharge. El Rio Health, the largest federally qualified health center in southern Arizona, has taken these alerts a step further. El Rio has 28 care coordinators spread across multiple facilities, managing 16,000 patients who account for up to 60 hospital discharges and 100 emergency department visits daily. As a result of using Health Current alerts, El Rio not only has been able to reassign staff that used to call hospitals every day
to find its patients, they have also worked with Health Current to develop “enhanced alerts” that are sorted by facility and provide more detail that enables a seamless care coordination plan for discharged patients.

The delivery of these alerts is also now crossing state lines. Through the national collaborative of HIEs, the Strategic Health Information Exchange Collaborative (SHIEC), Health Current worked with HIEs from Utah and Colorado on a Patient Centered Data Home™ (PCDH) project beginning in 2016. Today, using current technology, eight western HIEs ranging from California to Nebraska exchange zip code data so that when a patient from one state presents at a facility connected to one of the other seven HIEs, the “home HIE” is alerted and available data is exchanged. Similar projects were also conducted in two other regions, and the success of these projects led to the development of a national PCDH initiative that was recently launched. This national PCDH initiative has great potential for expanding interoperability across systems of care. This will be especially useful in places like Arizona that care for winter visitors from other states, and it is also beneficial where patients reside near HIE boundaries and seek care across state or regional borders.

The growth of Health Current as Arizona’s integrated HIE has made it the statewide resource for information on the whole patient or individual. As we look ahead, Health Current is considering additional ways to bring important information together to serve participants and their patients. We are talking with healthcare and community services organizations that collect and/or provide information on housing, transportation, and other social determinants of health. As clinicians aim to improve patient outcomes, it will be important to have access to all information that affects a patient’s health. In addition, Health Current participants have told us that they would like to see us assist with collecting and providing access to advance directives that have been executed by Arizona patients. The Office of the Arizona Secretary of State keeps a registry of patient advance directives, and many Health Current participants such as hospitals and skilled nursing facilities capture and keep these executed patient documents. Health Current is investigating how it could serve as the statewide resource for providing access to advance directives that have been filed with these various entities.

A year ago, as part of our new strategic plan, we launched the new Health Current brand. At that time, we also introduced a new tag phrase for Arizona’s HIE: Imagine Fully Informed Health. The idea of “fully informed health” is the paradigm shift of health information exchange, and as we increase adoption and use of Arizona’s HIE, our aim is to be the one community resource that makes “fully informed health” possible for our participants and their patients.
Features

WICHE - An Important Support for Osteopathic Students Who Are Arizona Residents
by Lori Kemper, DO, MS, FACOFP, Dean, Midwestern University Arizona College of Osteopathic Medicine

On December 14, 2017, I testified before the Arizona House Education and Senate Education Committee of Reference as it considered the sunset review of the Western Interstate Commission for Higher Education (WICHE) and for which the committee did recommend continuation.

Joe Garcia, President of WICHE also testified, reporting that WICHE has membership from 16 states and territories, among these Arizona, California, New Mexico, Nevada, and Utah and that WICHE has assisted students for over 64 years through tuition reduction programs assistance with higher education state policy, and, near and dear to the hearts of ATSU and Midwestern University students, the Professional Student Exchange Program (PSEP). The PSEP “provides affordable access to professional health fields for students in 10 WICHE states.”

Tuition benefits, received from the students’ home states amounted to $14.7 million last year. Among the specialty training supported are those programs for which there is no public higher education. In Arizona, that includes osteopathic medicine. Arizona also supports dentistry, podiatry, and veterinary medicine among others.

Students applying for WICHE support must apply for PSEP certification by October 15 of the year prior to enrollment in their professional program. During the 2016-17 academic year, Arizona students enrolled in schools of dentistry, occupational therapy, optometry, osteopathic medicine, podiatry, and veterinary medicine received over $3.9 million in tuition reduction. Forty-two osteopathic students from Arizona received assistance to attend 6 colleges of osteopathic medicine. ATSU-SOMA had a total of 10 WICHE PSEP students (9 AZ, 1 WY) and Midwestern University AZCOM had a total of 23 (22 AZ, 1 MT) PSEP students.

Arizona contractually requires PSEP graduates to return to Arizona to pay back PSEP support upon conclusion of their residencies. To date, there has been a 60% return, the remainder of whom pay back the monies used during their education to the state of Arizona, along with a penalty.

The WICHE PSEP continues to be an important program for Arizona citizens desiring to enter our profession and stay in Arizona as our colleagues.

References
Responding to Complaints and Grievances: Stop, Listen, and Empathize
by Karen Wright, RN, BSN, ARM, CPHRM, Mutual Insurance Company of Arizona (MICA)

Patient complaints range from minor, easily resolved at the point-of-care, to major, also known by CMS as grievances, but one thing they all have in common is they take time to resolve. Working with patients and their families to address their concerns as quickly as possible is time well spent, because unresolved complaints and grievances are associated with an increased risk of malpractice claims and lawsuits. In addition, marketing studies generally indicate that only fifty percent of unhappy customers complain to the service provider, but ninety-six percent will tell at least nine or ten other people about their negative experience. Whether the issue seems legitimate or not, best practice dictates that patient complaints be taken seriously and the circumstances reviewed.

Vanguard Communications, a marketing and public relations firm for specialty medical practices, conducted a national survey of online reviews of physicians and found that poor customer service precipitates the majority of patient complaints. Only one in twenty-four complaints related to a misdiagnosis, unsatisfactory treatment, or poor outcome. Ron Harmon King, co-author of the study and CEO of Vanguard Communications stated, “The nearly unanimous consensus is that in terms of impact on patient satisfaction, the waiting room trumps the exam room.”

Many customer service issues are relatively simple and almost never result in a lawsuit, but small issues can escalate, especially when a patient feels their complaints have not been heard or resolved. From the Vanguard Communications study, we can conclude that by focusing on common customer service issues, offices or clinics can significantly reduce the number of patient complaints they receive. Proactive steps to avert patient complaints include:

- Implementing scheduling practices that make it easier to see patients on time. Double and triple booking patients often results in significant wait times for patients and leaves the physician, advanced healthcare professional, and staff feeling rushed.
- Educate staff regarding how to apologize for service lapses. Encourage them to resist becoming defensive when the patient complains, and instead try taking the patient’s side.
- Employee engagement with patients and families can set the tone for the entire visit. A friendly smile and making eye contact do not require additional time or money to incorporate into every encounter.

Responding to Complaints continued on page 14
• Every employee needs to know how to handle patient complaints or concerns. Empower staff to promptly respond to patients’ concerns as ignoring a seemingly minor complaint will likely require extra time and attention to resolve later.

• A complaint may be presented as a concern tangential to the medical care provided, so staff must be able to recognize when the nature of the complaint exceeds their expertise or authority to resolve. Provide staff with guidelines regarding when a complaint should be brought to the attention of the practice administrator, physician, or advanced healthcare professional.

What about the more significant formal complaints or grievances that involve a quality of care issue or adverse outcome? These types of grievances can come directly from the patient or a family member, health insurers, licensing boards, and in the form of a demand letter from an attorney. If left unaddressed, these grievances represent a significant risk for the physician or advanced healthcare professional. Physicians and advanced healthcare professionals should give serious consideration regarding how to best respond. In addition, staff should be instructed against withholding information about a serious grievance in an effort to protect the physician or advanced healthcare professional.

If presented with a quality of care concern or adverse outcome, the physician or advanced healthcare professional should contact their medical professional liability (MPL) carrier and, as a precaution, report receipt of a formal complaint or grievance. Your MPL carrier may offer additional resources to assist with your response.

Often, the physician’s or advanced healthcare professional’s first reaction to receiving a grievance is to become defensive or angry. It is important to resist the impulse to respond without taking ample time to objectively think through the best approach. The response should be professional, factual, and avoid questionable assumptions. Pointing fingers or shifting blame to others is ineffective and often precipitates additional controversy.

If the complaint or grievance was sent to you by the patient or family member, it is important to communicate with them in a timely manner to acknowledge the concern was received, will be given your serious consideration, and will be responded to within a specific timeframe. This is just to let the patient know you are listening. It does not require an immediate and final response, only an acknowledgment of receipt. Once the grievance and the related circumstances have been reviewed, an objective, factual response can be communicated to the patient or family member as appropriate. HIPAA requirements necessitate you confirm a family member’s authority to receive the patient’s protected health information before you release any medical information, even when responding to a complaint or grievance.

A frequent question is whether the response to a complaint or grievance should be communicated verbally or in writing. A verbal response is generally sufficient if a simple complaint is verbally communicated to the staff, physician, or advanced healthcare professional. When a minor or informal complaint is communicated in writing, the circumstances surrounding the complaint may need to be considered before deciding whether to respond verbally or in writing. A formal complaint or grievance from a licensing board, health insurer, or other official agency will require a written response in a specified time frame. Compliance with the time frame is important. If it is not possible to meet the deadline for a response, an extension should be requested.
**Take away points:**

- Complaints and grievances provide an opportunity to utilize patient feedback to identify system failures, performance problems and implement quality improvement.
- Establish a process to track and trend patient complaints and grievances.
- Develop a complaint response policy that addresses the range of complaints from informal to complex formal grievances.
- Educate physicians, advanced healthcare professionals, and staff regarding the importance of responding appropriately and in a timely manner to patient complaints and grievances.

**References**

Arizona Osteopathic Medical Association
96th Annual Convention
April 11 - 15, 2018
Hilton Scottsdale Resort & Villas
Scottsdale, Arizona

Arizona's largest annual medical meeting! Register by March 11, 2018 and save $100!

Full five-day and three-day weekend registrations available
Register online at www.az-osteo.org/2018Conv

MEDICAL SPECIALTY LECTURES SCHEDULED
(subject to change)
» Family Medicine
» Internal Medicine
» Cardiology
» Dermatology
» Emergency Medicine
» Gastroenterology
» Hospice & Palliative
» Neurology
» OB/GYN
» OMM and OMM/NMM
» Pediatrics
» Pulmonology
» Psychiatry
» Rheumatology

EARLY REGISTRATION RATES

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<tr>
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<th>FULL</th>
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<tr>
<td>AOMA Member</td>
<td>$ 665</td>
<td>$ 400</td>
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<tr>
<td>Physician (DO or MD)</td>
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<td>Physician (DO or MD)</td>
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This activity has been planned and implemented in accordance with the accreditation requirements and policies of the Accreditation Council for Continuing Medical Education (ACCME) through the joint sponsorship of Touro University Nevada College of Osteopathic Medicine (TUNCOM) and the Arizona Osteopathic Medical Association.

The Arizona Osteopathic Medical Association (AOMA) is accredited by the American Osteopathic Association (AOA) to provide osteopathic continuing medical education for physicians. The AOMA designates this program for a maximum of 38.25 hours of AOA Category 1-A credit and will report CME and specialty credits commensurate with the extent of the physician’s participation in this activity.

This activity has been approved for AMA PRA Category 1 Credits™.

Application has been filed for AAFP Prescribed Credits. Determination of credits is pending.

CME Credits: In order to receive CME credits for the AOMA 96th Annual Convention, you must present valid identification at registration, receive your packet, and submit the online CME attestation form to AOMA by the May 16, 2018 deadline.

Grievance Policy: The Arizona Osteopathic Medical Association strives to provide continuing medical education programs to fulfill the needs of the attendees and to meet the AOA Uniform Guidelines and AOA Accreditation Requirements. Comments, questions, or complaints should be submitted in writing to Janet Weigel, Director of Education, by mail to AOMA, 5150 N. 16th Street, Suite A-122, Phoenix, AZ 85016, or email janet@az-osteo.org.

Make the most out of your Convention experience. Stay with us at the Hilton Scottsdale Resort & Villas.
Reserve your suite at 480-948-7750
AOMA 96th Annual Convention - Agenda
All times, topics, and speakers subject to change.

Wednesday, April 11, 2018
Opening Session
7:30 am to 8:55 am
Opening General Session:
Mastering the Practice of Precision Medicine
Michael Berens, PhD

Concurrent Sessions - AM
Session I
9:10 am to 10:05 am
ABCs of Hepatitis
David Tessler, DO

Session II
9:10 am to 10:05 am
Psoriatic Arthritis
Joy Schechtman, DO

11:10 am to 12:05 pm
Functional Medicine
Susan Del Sordi-Staats, DO

11:50 am to 1:00 pm
Lunch in the Exhibit Hall

1:00 pm to 1:40 pm
Virtual Scribes and Assistants in Medical Practices
Mark Cornett, DO

1:45 pm to 2:40 pm
Biomedical Informatics
Adela Granda, PhD

3:10 pm to 3:50 pm
Telemedicine Liability: Do You Know the Risks?
Jeremy Hodder and Susan Jones

Friday, April 13, 2018
Concurrent Sessions - AM
Session I
7:30 am to 8:25 am
Hybrid Therapies
Zain Khalpey, MD

9:40 am to 10:35 am
Seizures: What's Shake'n
John DeLange, DO

5:00 pm to 6:30 pm
AOMA Town Hall: Healthcare Policy & Politics
Kim Ross and Steve Barclay, JD

AOMA Awards Luncheon
12:15 pm to 2:00 pm

Saturday, April 14, 2018
6:00 am to 7:00 am
Medical Benefits and Practice of Yoga
Michelle Mifflin, DO

Concurrent Sessions - AM
Session I
7:30 am to 8:25 am
Asthma in Pediatric Patients
Danthuy Dao, DO

8:30 am to 9:25 am
Public Health Outbreaks
Ha Tang, DO

9:40 am to 10:35 am
Lung Cancer Update
Ronald Servi, DO

10:40 am to 11:35 am
Evaluation & Management of Thyroid Nodule
Bryan Friedman, DO

Clinical Case Competition CME luncheon
11:45 am to 1:15 pm

Session II
7:30 am to 9:25 am
An Osteopathic Approach to the Thoracic Outlet Syndromes
Richard Dobrusin, DO

8:30 am to 9:25 am
OMM: Knee and Shoulder
Carlton Richie III, DO, FAAFP

3:30 pm to 4:55 pm
Cardiovascular Health
Andrea Keller, DO

1:20 pm to 2:15 pm
Session I
Concurrent Sessions - PM

2:20 pm to 3:15 pm
Resistance and Untreatable Bugs
Matthew Daab, MD

Heart Health and Pregnancy: Predicting Cardiovascular Health
Andrea Keller, DO

3:30 pm to 4:55 pm
Stump the Doc
Medical Knowledge Competition

Session II
1:20 pm to 2:15 pm
Concurrent Sessions - PM

9:40 am to 10:35 am
Public Health Outbreaks
Ha Tang, DO

9:40 am to 10:35 am
OMM: Knee and Shoulder
Carlton Richie III, DO, FAAFP

3:30 pm to 4:55 pm
Stump the Doc
Medical Knowledge Competition

Thursday, April 12, 2018
7:30 am to 8:30 am
Imagine Fully Informed Health: The Paradigm Shift of Health Information Exchange
Melissa Kotrys, MPH

8:30 am to 9:25 am
Medical School Education in the Technology Age
Jeffrey Morgan, DO

9:55 am to 10:50 am
Advances in Telemedicine and Telehealth: New Models of Healthcare Delivery
Ronald Weinstein, MD

10:55 am to 11:50 am
Live Telemedicine Demonstration
Donald Curran, DO and Brandon Abbott, DO, MPH

11:50 am to 1:00 pm
Lunch in the Exhibit Hall

1:00 pm to 1:40 pm
Virtual Scribes and Assistants in Medical Practices
Mark Cornett, DO

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John DeLange, DO

5:00 pm to 6:30 pm
AOMA Town Hall: Healthcare Policy & Politics
Kim Ross and Steve Barclay, JD

AOMA Awards Luncheon
12:15 pm to 2:00 pm
Welcome New AOMA Members

### 1st Year in Practice
- **Bianca S. Brunelli, DO**
  Palliative Medicine - Board Certified
  Phoenix, Arizona
  623-327-4705

- **John F. Clay II, DO**
  Family Medicine - Board Certified
  Sierra Vista, Arizona
  520-459-0000

- **Brian W. Goodman, DO, MBA**
  Family Medicine - Board Certified
  Show Low, Arizona
  928-537-4300

- **Todd M. James, DO**
  Cardiology - Board Certified
  Peoria, Arizona
  623-876-8816

- **Danny McClure, DO**
  Psychiatry - Board Certified
  Peoria, Arizona
  877-809-5092

- **Marie Oberst, DO**
  Hospitalist
  Phoenix, Arizona
  480-961-2303

### 2nd Year in Practice
- **Sabrina K. Rocke, DO**
  Family Medicine - Board Certified
  Phoenix, Arizona
  602-839-4567

- **Bianca Smith, DO**
  Obstetrics & Gynecology - Board Certified
  Casa Grande, Arizona
  520-381-0380

- **Tuan M. Vo, DO**
  Family Medicine - Board Certified
  Tucson, Arizona
  520-670-3909

### 3rd Year in Practice
- **Mariah Scott, DO**
  Pediatrics - Board Certified
  Gilbert, Arizona
  480-632-1544

### Out of State
- **Thomas Kunkle, DO**
  Family Medicine - Board Certified
  Danville, Pennsylvania

- **Edward Lee, DO**
  Family Medicine - Board Certified
  Lynnwood, Washington
  425-741-7750

- **Derald Seid, DO**
  Endocrinology
  San Francisco, California
  415-221-1901

- **Tracy West, DO**
  Family Medicine - Board Certified
  Hamlet, North Carolina
  910-582-3536

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**In Memoriam**

*We are all diminished when one of our members leaves us. We will miss them and continue on for the betterment of our profession in their memory.*

*John V. Battersby, DO*

*Robert M. Michaud, DO*

*Betty Toothman*
AOMA gratefully acknowledges all its members for their support of the medical profession and your association.

Thank you!
More than 220 osteopathic physicians, students, and other practitioners gathered in Tucson in November for the AOMA 37th Annual Fall Seminar.

The two-day event at the Hilton El Conquistador Resort offered 13.50 hours of AOA Category 1–A CME credits including specialty credits in Family Medicine/OMT, Addiction Medicine, Infectious Disease, Internal Medicine, Pediatrics, Psychiatry, and Sleep Medicine.

Lecture topics included Use of Naloxone for Opioid Overdose; Drug Tapering, Modification, or Discontinuation; Evaluation and Management of Co-Occurring Psychiatric and Substance Use Disorders; Addressing the Opioid Crisis with OMT; Osteopathic Approach to Fibromyalgia; Mental Health Integration in Primary Care; Sleep and Health; Tips for Antimicrobial Prescribing; and Integrative Medicine.

The AOMA Professional Education Committee, chaired by Lori Kemper, DO, FACOFP, values all the speakers who contributed to the success of the Seminar with their expertise and experience in the lectures. Thank you to Gretchen Alexander, MD; J. Aaron Allgood, DO; Mark Boesen, PharmD, JD; Steven Boles, DO; Christina Goldstein-Charbonneau, DO; Joseph Hayes, DO, MMM; Donald Morgan, DO; Eric Nelson, MS, RPh; Judith O’Connell, DO, MHA, FAAO; Robert Orenstein, DO, FACP, FIDSA, AAHIVS; Susan Steffens, DO, Petre Wertheim, MS; Anthony Will, DO; and Karen Wright, RN, BSN, AM, CPHRM.

AOMA is committed to providing high-quality CME programs. Through a partnership with Touro University Nevada College of Osteopathic Medicine, the Seminar was accredited for 13.50 hours of AMA PRA Category 1 credits™.

Thank you to the osteopathic medical students who moderated the lectures: Ian Coker, OMS II; Raghu Kanumalla, OMS IV; Nina Kokayeff, OMS II; Starr Matsushita, OMS IV; Gabe Skiba, OMS IV; and Allison Walen, OMS I.

Congratulations to the winners of the Fall Seminar Exhibit Hall Prize Drawing: Angela DeRosa, DO and Marc Kaplan, DO. Each won a $150 VISA gift card.

If you missed the Fall Seminar, many of the lectures were recorded and are now available online at www.docme.org. AOMA members receive a discount on all AOMA-produced content. Call the office at 602-266-6699 for the coupon code.

Plan to attend the AOMA 38th Annual Fall Seminar in Tucson November 10 & 11, 2018.
A legacy of caring

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Recruit a new member, receive a $100 credit!

Do you know someone who isn’t a member of the Arizona Osteopathic Medical Association... and should be?

Recruit a new member and you’ll both receive a $100 credit toward membership dues or continuing medical education fees!

Recruiting new members is simple:
✓ Review your network of colleagues. You may be surprised who is not a member.
✓ Check their membership status using the online member directory or by calling the AOMA office at 602-266-6699.
✓ Ask them to join! Express how membership has benefited you.

For details on how to recruit a new member* and receive your credit, visit the AOMA website at www.az-osteo.org under the Members tab or contact AOMA at 602-266-6699 or info@az-osteo.org.

*New member must be an active, dues paying member. Does not apply to recruitment of “out-of-state” or “retired” members.
1. The Fall Seminar is a great opportunity for old friends to meet up. Just ask Nicholas Pazzi, DO, David Buechel, DO, Don Carlson, DO, John Manfredonia, DO, and Dale Wheeland, DO.

2. Marc Kaplan, DO and Wallace Simons, RPh with Women’s International Pharmacy share a smile for the camera.


4. AOMA contract lobbyist Steve Barclay, JD and Jeffrey Morgan, DO engage in a lively conversation.

5. First-time Seminar attendees Jennifer Prosser, DO, Joshua Newby, DO, and Kathryn Newby, DO plan to attend again next year.

6. AstraZeneca representatives Jenny Bayse and Rick Kiburg chat with Michael Lokale, DO (center).
AOMA 37th Annual Fall Seminar

7. Richard Seckinger, DO, Brad Croft, DO, Kathleen Croft, Kim Seckinger, and Estelle Farrell, DO reconnect at the Fall Seminar.
9. Andrea Keller, DO, and her husband Steven Blazic loved the Tucson venue for the Fall Seminar.
10. Edee Sands and Larry Sands, DO are regulars at the Fall Seminar.
11. Nina Kokayeff, OMS II chatted with Diane Juillard, DO.
12. Second year osteopathic students (left to right) Simeon Nittala, Tiffany Ziegler, and Ian Coker pose with Shannon Scott, DO and Susan Del Sordi-Staats, DO.
Nominate a Colleague for an AOMA Award

Each year the Arizona Osteopathic Medical Association recognizes individuals for their service and contributions to the osteopathic profession as physicians, community leaders, and humanitarians. All active members are eligible to nominate a colleague and to be nominated.

Who among your peers deserves to receive an award for physician of the year, outstanding mentor, or volunteer of the year? Please take a few moments to submit a nomination form either online at www.az-osteo.org/Awards or download a nomination form from the AOMA website.

Choices in Continuing Medical Education

The Arizona Osteopathic Medical Association is a premier provider of continuing medical education (CME). Accredited as a sponsor of AOA Category 1 credit, AOMA offers more than 50 hours of CME each year. Additionally, the AOMA Annual Convention and Fall Seminar are submitted for American Academy of Family Physicians prescribed credits.

Now you have a third choice for your CME hours: **AMA PRA Category 1 credits**™. Through an agreement with Touro University Nevada College of Osteopathic Medicine, an ACCME-accredited provider of continuing medical education, you may earn either AOA or AMA credits when you attend an AOMA-sponsored CME event.

And don’t forget **DOCME** offers on demand CME online at www.docme.org. The choice is yours.

The Arizona Osteopathic Charities is a 501 (c) (3) non-profit charitable organization founded in 1997 by the leadership of the Arizona Osteopathic Medical Association.

Tax ID #86-6052826
www.azdocharities.org
For clinicians looking for help in understanding coding and documentation rubrics for evaluation and management services, the appropriate use of modifier -25, and the selection of osteopathic manipulative treatment codes the AOA and AOIA have created the AOA Guide to Coding and Documenting Osteopathic Manipulative Treatment and Evaluation and Management Services. This manual expands on the AOA Position Paper on OMT and E/M to include discussions on the E/M Documentation Guidelines and how to choose a level of service and proper documentation for OMT.

Go to www.az-osteo.org/Store  
Cost: $30
Business Partners

AOMA's Business Partners Program provides immediate access to national and local high-quality services and providers. These businesses offer special rates and discounts to Association members. For complete details on services, products, and discounts, visit the AOMA website at www.az-osteo.org/BusinessPartners

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Health IT Leadership Award Presented to Bradford Croft, DO

Bradford Croft, DO, MBA, Family Medicine physician in Flagstaff, Arizona, was recognized by Health Current (formerly Arizona Health-e Connection) with the Health IT Leadership Award. The award, presented by Platinum Sponsor Mercy Care Plan/Mercy Maricopa Integrated Care, is awarded to an individual who is providing leadership and innovation in health information technology. The award was presented to Dr. Croft at the 10th Annual Health Current Summit and Trade Show.

Frederic Schwartz, DO, FACOFP Receives Pioneer Award

Frederic Schwartz, DO, FACOFP, received the Pioneer of Osteopathic Medicine Award from the University of New England College of Osteopathic Medicine at its hooding ceremony on May 20, 2017. The award was created to honor individuals who exemplify the tireless dedication and bold pioneering spirit of the osteopathic profession’s founder. This award is the highest honor given by the college.

The Feminine Touch Documentary Wins Emmy Award

The PBS documentary highlighting women in osteopathic medicine was recently honored with a Suncoast Regional Emmy Award. Produced by WEDU in Tampa, Florida, the “The Feminine Touch: The Struggle for Equality in Medicine” featured commentary by Margaret Wilson, DO, Dean of A.T. Still University Kirksville College of Osteopathic Medicine, and Karen Nichols, DO, Dean of Midwestern University Chicago College of Osteopathic Medicine. Visit http://www.wedu.org/thefemininetouch/ to watch this inspirational film.

Author, Author

Anthony Merrill, DO, has co-written a new children’s book about the true meaning of Christmas. A Little Christmas Tree, is the story of a small scotch pine whose greatest wish is to be a family’s Christmas tree. Year after year, Little Tree is passed over. He wonders why no one will choose him. His wise mother encourages him to be patient and reminds him he will bring the true meaning of Christmas into a family’s home. Finally, the day comes. He is chosen and heads down into town. But the road is perilous. When Little Tree’s beautiful branch snaps in an accident, his path is forever altered. Will anyone choose a broken Christmas tree to bring into their home?

What Little Tree doesn’t realize is that there is a much grander plan for him. The book is available at www.alittlechristmastree.com.
On Friday, October 27, 2017 A.T. Still University (ATSU) celebrated Founder’s Day on its Arizona campus in Mesa, Arizona. Approximately 550 people attended the event, including ATSU students, faculty, and staff, as well as their families.

The festivities included bounce houses, music, and a Halloween costume contest for kids. ATSU Student Life provided dinner from Dickey’s Barbecue Pit. Senior Vice President of Strategic Planning Ted Wendel, PhD, introduced Mesa Councilmember Jeremy Whittaker and Vice Mayor David Luna. Vice Mayor Luna presented ATSU President Craig Phelps, DO, ’84, with a proclamation by the City of Mesa declaring October 27, 2017 to be A.T. Still University Day. Dr. Phelps then shared remarks and recognized the Founder’s Day planning committee.

Mykel Estes, MEd, ATSU Director of Student Life, served as chair of the planning committee. “It’s a great event because it allows our students, employees, and their families to come together outside the walls of our classrooms, clinics, or labs,” he says. “It really was a fun-filled, spirited event.”
ATSU-SOMA Alumnus Named Outstanding Resident of the Year by AOF, ACOFP

Matthew Nelson, DO, MPH, ’15, was recently named Outstanding Resident of the Year in Family Medicine by the American Osteopathic Foundation and the American College of Osteopathic Family Physicians (ACOFP).

Dr. Nelson is a third-year resident with an honors track in obstetrics at St. Mary’s Medical Center in Grand Junction, Colorado. According to the ACOFP, the award recognizes outstanding residents who show “a unique combination of clinical promise, leadership, dedication, and commitment to osteopathic patient-centered care that truly sets them apart from their peers.” The organization anticipates that many award recipients will go on to become national and international leaders in their fields.

Dr. Nelson is committed to serving underserved populations through community health programs. He volunteers regularly for initiatives that help the homeless population, and has worked to provide food boxes for those in need. He is also dedicated to research and has submitted several papers for publication.

Dr. Nelson is grateful for the support of his family. “This award means a great deal to me in that it validates a risky decision we made to leave my PhD program for the field of osteopathic medicine,” he says. “Further, as an endeavor that has demanded considerable time investment of my wife and five children, this award should really be considered a family effort.”

ATSU-SOMA Professor Develops App to Combat Overprescription of Antibiotics

A.T. Still University’s School of Osteopathic Medicine in Arizona (ATSU-SOMA) professor, Joy Lewis, DO, PhD, recently worked with the American Osteopathic Association (AOA) and the Centers for Disease Control and Prevention (CDC) to develop an app that combats overuse of antibiotics.

Antibiotic-resistant infections are increasingly common in the U.S. According to the CDC, overuse of antibiotics is a major factor leading to the increase in antibiotic-resistant bacteria.

“The app is a small step toward attacking a big problem,” says Dr. Lewis. “The cases it presents can teach some specific practices. I’m hoping the app can also help raise awareness and promote discussion of the importance of antibiotic stewardship.”
ATSU Students Build Accessibility Ramp at Home of Mesa Resident

A.T. Still University (ATSU) students recently built an accessibility ramp at the home of Mesa resident, Christine Vanek. Vanek suffers from chronic obstructive pulmonary disease, which limits her mobility. The ramp will allow her to enter and exit her home safely using a walker.

“This means the world to me,” says Vanek. “I can get in and out of my house without worrying about falling. I’ve always been a very active person, but I’ve been stuck inside for almost two years now. The ramp has allowed me to get out and socialize.”

ATSU completed the project in collaboration with Rebuilding Together Valley of the Sun (RTVOS). The University provided funding and manpower, while RVTOS offered design expertise and supervised construction. The project was one of several planned in recognition of ATSU’s 125th anniversary.

A former social worker, Vanek is impressed by ATSU’s commitment to the community. “I’m thrilled to see that young people are getting involved and trying to help others,” she says.

Alexander Yaldoo, a third-year dental student at ATSU’s Arizona School of Dentistry & Oral Health, enjoyed giving back to the community in a different way. “The opportunity to build a ramp and improve the quality of life for an individual in need is priceless,” he says. “This experience reminds me that I can help people in many ways, in and out of a healthcare setting.”

ATSU Professor Receives NIH Grant

Tara McIsaac, PhD, PT, associate professor of physical therapy at A.T. Still University’s Arizona School of Health Sciences (ATSU-ASHS), recently received a grant from the National Institutes of Health (NIH). The three-year, $384,000 award will support Dr. McIsaac’s research in neurosciences and neurological disorders.

Dr. McIsaac is interested in how the brain multitasks while driving. She hopes to identify how switching attention between tasks of the arm, such as steering, and those of the leg, such as braking or accelerating, are affected by Parkinson’s disease. She plans to develop rehabilitation strategies to reduce driving difficulties for patients, helping them retain their independence and quality of life.

“This grant will allow us to make a big step forward in finding ways to keep people with Parkinson’s disease driving more safely and for longer, particularly in the Phoenix metro area where non-drivers are often isolated,” says Dr. McIsaac.

The grant is a collaboration with Jyothi Gupta, PhD, professor and chair of occupational therapy at ATSU-ASHS; Curt Bay, PhD, professor of interdisciplinary health sciences and biostatistician at ATSU-ASHS; Rajal Cohen, PhD, assistant professor of psychology and communication studies at the University of Idaho; and Charles Adler, MD, PhD, international expert on Parkinson’s disease and professor of neurology at the Mayo Clinic College of Medicine and Science.
New Book by ATSU Physical Therapy Alumnus Uses the Alphabet to Teach Children about Anatomy

A few years ago, ATSU-ASHS alumnus, James Randolph, DPT, PT, ’17, was browsing a bookstore with his wife, Amy Randolph, PT. The health professionals were shopping for educational books about anatomy and physiology for their children, eight-year-old Jayden and five-year-old Hailey. After an exhaustive search of the children's section, they left the store empty-handed.

The experience inspired James and Amy. They couldn't find what they were looking for at the bookstore, so why not write the book themselves?

The result was “B Is for Biceps: Anatomy for Children,” a fun, interactive rhyming book that uses the alphabet to teach children anatomical terms. The main characters are named Hailey and Jayden, after the Randolphs’ children. Even the family’s golden retriever, Sadie, makes an appearance.

“We wrote the book we wanted our children to have,” says James.

For the novice authors, however, writing the book was just the first step in a complicated publishing process. Step two was finding a publisher. Unsure of where to begin, the resourceful pair checked the inside covers of books they had around the house. This led them to Faith Books and More, a publishing service for independent authors. The publisher then introduced them to Jhoselyn Figueras, a talented illustrator.

“She took the ideas that we had in our heads and drew them better than what we could have imagined,” says James. “When we received the final proof copy, it was incredible to see that our concept had actually become a book.”

According to the Randolphs, “B Is for Biceps” is geared for children between the ages of four and ten. Some of the terms, such as “lungs,” are simple, while others, like “xiphoid process,” are more advanced.

“We say ‘C is for cranium,’ rather than cat,” says James. “If we start teaching these terms early, they can be learned easily.”

The goal of the book is to introduce children to anatomy and physiology in a fun way, hopefully sparking an interest in healthcare. It turns out, they weren’t the only parents who felt this way.

“People tell us, ‘I haven’t seen a book like this before,’” says James. “We love to hear that because that’s one of the reasons we wrote it.”

The book has been well received by the community. Several local hospitals have promoted it to their staff. It’s also being used in elementary school classrooms to complement anatomy lessons. Most importantly, Hailey and Jayden are thrilled with it.

Determined to raise awareness about the health professions, the Randolphs plan to continue writing. They are currently working on a second book, and hope to eventually turn their ideas into a series.

“It’s been an experience,” says James. “We’re learning as we go along. There’s definitely a learning curve, but we’re excited. We want to get out there and build awareness, not just for kids, but for everyone.”
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AZCOM Students Become Teachers for Local High School Students

For eight days in July 2018, AZCOM student volunteers will volunteer their time and effort to help high school students learn about healthcare careers at Midwestern University’s Health Careers Institute for High School Students.

During this exciting hands-on program, AZCOM students will be among the faculty and student volunteers who will teach workshops in anatomy, physiology, and introductory skills for various health professions, with a special focus on how to prepare for college and what to expect from each profession. Guest lectures will include current medical topics such as Emergency Medicine, Sports Medicine, Drug Abuse, Healthcare Volunteer Opportunities, and more. In addition, participants will attend a medical field trip to Arrowhead Hospital and an interactive Emergency Medical Services mock rescue scenario presented by the Glendale Fire Department.

The program is offered at no cost to participants and is sponsored by Midwestern University and the BHHS Legacy Foundation. It is open to current high school juniors and seniors with a serious interest in science. Forty-eight participants will be selected based on their interest in the health professions, as demonstrated by school coursework, volunteer activities, high school transcript, a teacher recommendation letter, and an application essay.

Applications for the 2018 edition of the Health Careers Institute for High School Students, to be held from July 12 to 21, 2018 are due May 1, 2018. For more information, go to www.midwestern.edu/azhealthcareersinstitute or call 623-572-3353.
MWU Crowns Winner of Arizona Regional Brain Bee

On Monday, January 29, 2018, Midwestern University welcomed some of Arizona’s top high school students for the annual Arizona Regional Brain Bee, an educational competition similar to a spelling bee that focuses on neuroscience. The 2018 competition was presented in partnership with the BHHS Legacy Foundation.

This year, a record number of contestants – 131 students from 19 Arizona high schools from as far away as Bagdad and Tucson – converged on the University’s Glendale Campus to test their knowledge of the human brain, how it governs human behavior, and the science that helps medical professionals understand brain function.

The top three Brain Bee finishers, in order, were Grace Xu and Latavya Chintada, both from BASIS Chandler, and Mira Raju from Catalina Foothills High School in Tucson. Ms. Xu and Ms. Chintada took the top two spots after finishing second and third respectively in last year’s Brain Bee. BASIS Chandler won the team prize for the overall high score for the fourth straight year.

Ms. Xu won a $2,000 scholarship towards tuition in any Midwestern University program at either the University’s Glendale Campus or the campus in Downers Grove, Illinois, as well as travel expenses to help her as she competes at the upcoming USA Regional Brain Bee Championship in Baltimore, MD.

Midwestern University faculty and students served as judges, question readers, timers, and scorekeepers for the Brain Bee, using the book Brain Facts, published by the Society for Neuroscience, as the source text. Questions ran the gamut from identifying physical features of the brain itself to naming brain disorders and diseases to surgical and medical practices that modify neural behaviors.

AZCOM WELCOMES AOA CEO, PLANS MENTORSHIP PROGRAM

In November 2017, the Arizona College of Osteopathic Medicine at Midwestern University welcomed Adrienne White-Faines, MPA, FACHE, Chief Executive Officer of the American Osteopathic Association, as a guest speaker to first- and second-year students. Ms. White-Faines addressed several important topics for osteopathic students, including her perspectives about the future of osteopathic medicine, single-accreditation system updates, and changes in current health policy. She also encouraged AZCOM students to continue their efforts in promoting osteopathic medicine.

The AZCOM branch of the Student Osteopathic Medical Association is working with the AZCOM Dean’s Office to organize a mentorship program for middle-school children from lower socioeconomic backgrounds. The program will pair first- and second-year AZCOM students with eighth-graders to encourage them to consider careers in healthcare while promoting proper nutrition and health awareness.
AZCOM STUDENT RECEIVES SPIRIT OF SERVICE SCHOLARSHIP

Midwestern University President and CEO Kathleen H. Goeppinger, PhD (middle) presents Spirit of Service Scholarship awards to Amanda Gill (College of Dental Medicine-Arizona 2020, left) and Dhara Mehta (Arizona College of Osteopathic Medicine 2020, right)

Dhara Mehta, AZCOM Class of 2020, was recognized as a Spirit of Service scholarship winner at Midwestern University’s annual Bright Lights, Shining Stars gala, an event recognizing community service and leadership.

The Spirit of Service scholarship program recognizes outstanding Midwestern University students based on community service, leadership abilities, academic standing, and financial need.

Ms. Mehta has spent years offering service to those in need. Twice a year, she works as the lead coordinator for The Mehsana Mansion Medical Trust to help provide medical and eye care for people in need in rural villages in India. She spends her summers volunteering for Catholic Charities Free Health Care Center, the United Way, and S.V. Temple in Pittsburgh, Pennsylvania. An AZCOM Gold Award honoree, Ms. Mehta is involved in the Health Outreach through Medical Education (H.O.M.E.) program, volunteers at Feed My Starving Children, and participates in art therapy programs for patients with Alzheimer’s disease.

COMMUNITY LEADERS RECOGNIZED AT BRIGHT LIGHTS, SHINING STARS GALA

During Midwestern University’s annual Bright Lights, Shining Stars gala held in October 2017, University President and Chief Executive Officer Kathleen H. Goeppinger, PhD, presented the 2017 COMET (Community Outreach: Motivating Excellence for Tomorrow) Award to Royal Oaks Retirement Community, and the 2017 Shooting Star Award to former Dean of the Arizona College of Optometry Dr. Donald Jarnagin and his wife Sharon. Each award recognizes distinguished service and leadership in the community.

The black-tie-optional Bright Lights, Shining Stars event, which raises over $100,000 annually in scholarship funds for students in all of Midwestern University’s colleges, also featured a formal dinner, live entertainment, and a silent auction.

AZCOM APPOINTMENTS, AWARDS & GRANTS

• Richard Dobrusin, DO, FACOFP, joined the AZCOM faculty as a Clinical Associate Professor and OMM practitioner in the Midwestern University Multispecialty Clinic.
• Katherine Mitzel, DO, FACEP, was promoted to Associate Dean for Clinical Integration and Faculty Development.
• William Peppo, DO, FACOI, FCCP, Chair, Clinical Education, was named Teacher of the Year by the ACOI.
• Sean Reeder, DO, was promoted to Associate Dean of Clinical Education.
• Shannon Scott, DO, FACOFP, was promoted to Assistant Dean and Medical Director of the Midwestern University Multispecialty Clinic. Dr. Scott also received the Item Writer of the Year Award for the COMLEX-USA Level 2 CE by the NBOME.
2017-2018 Calendar of Events

February 20, 2018
DO Day at the Legislature
Arizona State Capitol
Phoenix, Arizona

April 11, 2018
AOMA Board of Trustees Meeting
6:30 pm
Hilton Scottsdale Resort & Villas

April 11-15, 2018
AOMA 96th Annual Convention
Hilton Scottsdale Resort & Villas
6333 N. Scottsdale Road
Scottsdale, Arizona

April 13, 2018
AOMA House of Delegates
4:00 pm
Hilton Scottsdale Resort & Villas

June 23, 2018
AOMA Board of Trustees Meeting
9:00 am
A.T. Still University
Mesa, Arizona

4th Annual Flagstaff Osteopathic Medical Conference
August 11, 2018
Flagstaff Medical Center
Flagstaff, Arizona

November 9, 2018
AOMA Board of Trustees Meeting
6:30 pm
El Conquistador Resort

November 10, 2018
AOMA House of Delegates
4:00 pm
El Conquistador Resort

November 10 & 11, 2018
AOMA 38th Annual Fall Seminar
Hilton Tucson
El Conquistador Resort
10000 N. Oracle Road
Tucson, AZ 85704

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Osteopathic Community News

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You could win a $100 VISA gift card. Please take the time to visit the AOMA website and login to update your professional profile information for the online AOMA Directory. Deadline to be entered into the gift card drawing is May 31, 2018.

See what’s new on the AOMA website. Register for the 96th Annual Convention; take an online CME course; or check out the resources for physicians. Visit often for future enhancements and features!

www.az-osteo.org
The Arizona Osteopathic Medical Association Career Center offers enhanced resources for job seekers, expanded options for employers, and services for property owners and tenants. With an upgraded user interface, the AOMA Career Center is mobile responsive and integrates with your social media accounts.

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• The AOMA Career Center has improved product packaging, job distribution, and resume bank.
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