

American College of Osteopathic Emergency Physicians
MEMBERSHIP MEETING
Marriott Harbor Beach Resort
Fort Lauderdale, Florida
April 29, 2011

MINUTES

Brian Acunto, D.O.
F. Shan Ahmed, D.O.
Richard D. Anderson, D.O.
Robert Anderson, D.O.
Daniel Angeli, D.O.
Alwin Arendse, D.O.
Amy Arnold, D.O.
Marciela Ashman, D.O.
Jeremy Barnes, D.O.
Gregory J. Beirne, D.O.
Peter A. Bell, D.O.
Rudolph Bescherer, D.O.
Frank Biondillo, D.O.
David E. Blanchard, D.O.
Kevin Boehm, D.O.
David Bohorquez, D.O.
Gary Bonfante, D.O.
Charles M. Boothby, D.O.
Thomas A. Brabson, D.O.
Donald Brizendine, D.O.
Edward Byrnes, D.O.
Curt Cackovic, D.O.
Victoria Camba, D.O.
Michael B. Carney, D.O.
Terry L. Carr, D.O.
Jack Chambers, D.O.
Sybil Cheng, D.O.
Sanjay Chopra, D.O.
John Conlon, D.O.
Mario Cosenza, D.O.
Jeffrey Couturier, D.O.
Brittani Cummings, D.O.
John Cunha, D.O.
Hung Dang, D.O.
Jeffrey W. Davies, D.O.
Frederick Davis, D.O.
Paula W. DeJesus, D.O.
Philippe deKerrillis, D.O.
Richard DeLeon, D.O.
Paul DePonte, D.O.

John Dery, D.O.
Arthur Dortort, D.O.
Joseph Dougherty, D.O.
Martin Dunskey, D.O.
Nana Dwomoh, D.O.
Kelly Dyess, D.O.
Anita Eisenhart, D.O.
Robert M. Esposito, D.O.
Jeffrey Evans, D.O.
Jack B. Fields, D.O.
Donald Findlay, D.O.
Kevin T. Franks, D.O.
Steven Gable, D.O.
Calixto Garcia, D.O.
Raul Garcia-Rodriguez, D.O.
Christine Giesa, D.O.
David R. Gilchrist, D.O.
Eris Gloss, D.O.
Edward E. Goetten, D.O.
David Goff, D.O.
Christopher M. Gooch, D.O.
Sheryl Gottlieb, D.O.
Thomas E. Green, D.O.
Elana Grier, D.O.
Michael Guttenberg, D.O.
Karl Harnish, D.O.
John Havlick, D.O.
Robert Hillstom, D.O.
Michael Hoh, D.O.
Robert Holm, D.O.
Mark Horvath, D.O.
Lisa Hrutkay, D.O.
Raymond Hughes, D.O.
Julie Johns, D.O.
Wayne T. Jones, D.O.
Elizabeth Kassipidis, D.O.
Johnathan S. Kerns, D.O.
Jay Kernus, D.O.
Ronald Klebacher, D.O.
Patrick Klocek, D.O.

Judith M. Knoll, D.O.
Drew A. Koch, D.O.
Antonios Katsetos, D.O.
Randy Kellenberger, D.O.
William M. Kokx, D.O.
Daniel Kowalzyk, D.O.
Joseph J. Kuchinski, D.O.
Gary Lai, D.O.
Jittendrath Lashmipathy, D.O.
Nicole Lisa Lang, D.O.
Nicole Lang-Gems, D.O.
Paula Lange, D.O.
Matthew Letizia, D.O.
David L. Levy, D.O.
Kevin J. Loeb, D.O.
Beth A. Longenecker, D.O.
Annette M. Mann, D.O.
Adrian Marin, D.O.
Christopher Martella, D.O.
Susan M. Mastellone, D.O.
John McCarthy, D.O.
Maureen McCarville, D.O.
James W. McCorry, D.O.
Charles McIntosh, D.O.
Therese Mead, D.O.
Stephen Mifsud, D.O.
David E. Miller, D.O.
Sarah K. Minor, D.O.
Mark A. Mitchell, D.O.
Michael Morgenstern, D.O.
Joe A. Nelson, D.O.
Dean Nottingham, D.O.
Joseph Oliva, D.O.
Christopher O'Neal, D.O.
Michael Oster, D.O.
Hema Pandit, D.O.
Diane Paratore, D.O.
Steven J. Parrillo, D.O.
Nilesh Patel, D.O.
Donald G. Phillips, D.O.

David E. Pierce, D.O.
Christopher Posey, D.O.
John C. Prestosh, D.O.
Marco Propersi, D.O.
Carol Rahter, D.O.
P. Narasinga Rao, D.O.
David K. Rasmussen, D.O.
Karen Rickert, D.O.
Doni Marie Rivas, D.O.
Brian J. Robb, D.O.
Ellen B. Rodman, D.O.
Otto F. Sabando, D.O.
Arnold Schiller, D.O.
Michael W. Schmitz, D.O.
Cary N. Schneider, D.O.
Sandra L. Schwemmer, D.O.
Victoria Selley, D.O.
Jane M. Sennette, D.O.
Martha Shadel, D.O.
Neena M. Shah, D.O.

Merlin L. Shriner, D.O.
Duane Siberski, D.O.
Purabi Mehta Simon, D.O.
Bruce St. Amour, D.O.
Mark J. Stone, D.O.
Derek Stout, D.O.
Jeffrey J. Stuart, D.O.
Murry B. Sturkie, D.O.
Nichole Supple, D.O.
Matthew D. Swayze, D.O.
Ali Taqi, D.O.
Christopher Tana, D.O.
Addison R. Tarr, D.O.
Scott A. Thomas, D.O.
Charles W. Tolan, D.O.
Brian Tran, D.O.
James M. Turner, D.O.
Sherry D. Turner, D.O.
Timothy Vayder, D.O.
Franklin Veer, D.O.

Stephan Vetrano, D.O.
Matthew Wakeley, D.O.
David A. Wald, D.O.
Michael P. Ward, D.O.
Brian Wiley, D.O.
Thomas Woltanski, D.O.
Travis Yates, D.O.
Jennifer Yorke, D.O.

Students:

Jennifer Alonso
Glenn Burket
John Downing
Justin Joseph
Andrew Little
Shaun Notman
Holly Ringhauser
Jeremy Wachenschwanz

Thomas A. Brabson, D.O., MBA, FACOEP-D, President of the American College of Osteopathic Emergency Physicians called the meeting to order at 12:30 p.m. and entertained a motion for the approval of the Minutes of the Membership Meeting of October 25, 2010. A motion was made and seconded to approve these Minutes, at which time a query was made to the Members present if anyone had any changes to the Minutes. Hearing none, Dr. Brabson asked for a vote for approval of the October 25, 2011 Minutes as written. A voice vote was taken and the Minutes were approved as written.

At this time, Dr. Brabson turned the meeting over to the Board Secretary, Mark A. Mitchell, D.O., FACOEP, who as Parliamentarian of the Board introduced a **Special Order of Business**. Dr. Mitchell explained that in October the proposed amendments were defeated and sent back to the Board, Nominations, and Bylaws committees for revision. During the interim, these committees reviewed member comments and reworked parts of the document to clarify issues of concern. Additionally, there was an issue that the legal counsel found that was unaddressed in the Bylaws. The issue was physicians who became Fellows or Distinguished Fellows and then left the membership but kept the title. To address this she suggested that Fellow and Distinguished Fellow become a member category with full voting membership like other voting classes.

Dr. Mitchell stated that the Nominations Committee has asked that the word "ranked" be deleted on Line 7 and Line 12 of page 5, but that there were no further amendments. He then asked if anyone would like the resolution read aloud; hearing no comments, he presented the following resolution for consideration to the Membership:

RESOLVED, that the following changes be incorporated in the Bylaws of the American College of Osteopathic Emergency Physicians and APPROVED.

**Article I
Purpose**

Section 1 is unchanged.

Section 2 (a) through 2 (e) are unchanged

(f) ~~define, designate, and award fellowship.~~

(F g) Disseminate information that will increase understanding of all osteopathic physicians, and the public, of the nature of service provided by osteopathic emergency physicians as it relates to the provision of healthcare in our society.

(G H) Help maintain the osteopathic school of medicine as a separate and distinct institution of the healing arts profession.

**ARTICLE III
Members**

Section 1(a)-(j) are unchanged.

(k) **FELLOW MEMBER.** AN INDIVIDUAL WHO HAS BEEN AN ACTIVE MEMBER FOR AT LEAST THE FIVE CONSECUTIVE YEARS PRIOR TO APPLICATION, WHO MAINTAINS BOARD-CERTIFICATION IN EMERGENCY MEDICINE, AND WHO MEETS OTHER CRITERIA ESTABLISHED BY THE BOARD OF DIRECTORS MAY APPLY FOR MEMBERSHIP AS A FELLOW.

(l) **DISTINGUISHED FELLOW MEMBER.** AN INDIVIDUAL WHO HAS BEEN A FELLOW MEMBER FOR AT LEAST THE TEN CONSECUTIVE YEARS PRIOR TO APPLICATION AND CONTINUES TO MEET SUCH CRITERIA AS ARE REQUIRED FOR FELLOW MEMBERSHIP, AND WHO MEETS OTHER CRITERIA ESTABLISHED BY THE BOARD OF DIRECTORS MAY APPLY FOR MEMBERSHIP AS A DISTINGUISHED FELLOW.

**ARTICLE V
Membership Meetings**

Section 1. General Membership Meetings. There will be General Membership Meetings of the College for THE transaction of College business, INCLUDING THE OUTCOME OF THE ANNUAL ELECTION OF BOARD MEMBERS. General Membership Meetings of the College will be held in conjunction with the annual Spring Seminar of the College and the SCIENTIFIC ASSEMBLY. ~~Annual Convention of the American Osteopathic Association (at which time there will be an election of the Board of Directors and transaction of other College Business)~~

THE OUTCOME OF THE ANNUAL ELECTION OF BOARD OF DIRECTORS MEMBERS WILL BE ANNOUNCED AT THE MEMBERSHIP MEETING HELD IN CONJUNCTION WITH THE SCIENTIFIC ASSEMBLY. RESULTS OF ANY BUSINESS ITEMS REQUIRING OFFICIAL ACTION OF THE MEMBERSHIP OF THE COLLEGE SHALL BE ANNOUNCED AT EITHER GENERAL MEMBERSHIP MEETING.

Written notice of the time and place of the General Membership MeetingS of the College will be forwarded to each College Member at least thirty (30) days in advance of the time of such meetingS or notice of such meetings will be published in an issue of the official publication of the College AND ON ITS OFFICIAL WEBSITE.

Sections 2, 3, 4, and 5, are unchanged.

Section 6. ~~Mail Vote~~ **AND ELECTRONIC VOTING.** Voting by STANDARD MAIL, E-mail OR ELECTRONIC POLLING OF MEMBERS shall be permitted in lieu of a duly called meeting for any item of business, including the election of officers. A mail vote may be called by the Board of Directors or upon written request of the Secretary BY ~~of~~ at least two-thirds ($\frac{2}{3}$) vote of the voting members. For the election of officers, the act of a majority of ten percent (10%) or more voting members SUBMITTING OR returning ballots by a certain dates shall be an act of the members. For matters other than the election of officers and directors, the act of a SIMPLE majority or more voting members by a date certain shall be an act of the members, unless the action of a greater number is required by law, the Articles of Incorporation, or these Bylaws.

FOR A THREE-YEAR PERIOD AFTER THE ADOPTION OF THIS REVISED VOTING POLICY THE COLLEGE WILL UTILIZE A SIMPLE MAJORITY OF VOTERS IN DETERMINING THE RESULTS OF THE ELECTION OF BOARD MEMBERS. THIS WILL ALLOW SUFFICIENT TIME TO BUILD A CULTURE OF ELECTRONIC VOTING AND WILL BUILD TOWARD THE REQUIRED TEN PERCENT MAJORITY STATED ABOVE. THIS THREE YEAR PERIOD WILL END WITH THE ELECTION OF BOARD MEMBERS IN THE FALL OF 2014 OR THREE YEARS FROM THE ADOPTION DATE OF THESE AMENDMENTS BY THE BOARD OF TRUSTEES OF THE AMERICAN OSTEOPATHIC ASSOCIATION.

ARTICLE VII Board of Directors

Sections 1 through 13 are unchanged.

Section 14. Nominations

- (a) The Board of Directors shall review and approve the list of qualified candidates submitted by the College's Nominations ~~Election~~ Committee to succeed those Directors whose terms shall expire at the conclusion of the next annual MEMBERSHIP meeting HELD IN CONJUNCTION WITH THE SCIENTIFIC ASSEMBLY OF THE COLLEGE.
- (b) The Board of Directors shall, in accordance with the Constitution and Bylaws (or the equivalent thereof) of the American Osteopathic Emergency Board of Emergency Medicine ("AOBEM") and in compliance with AOA requirements, nominate College members to serve on the AOBEM. The College shall submit such nominations to the Bureau of Osteopathic Specialists. Members of the College Board of Directors are not eligible for nominations to the AOBEM. The Board shall take into consideration the slate of qualified candidates presented to the Board by the College's Nomination ~~Election~~ Committee in determining such nominations.

- (c) The Board of Directors shall, every three (3) years or as otherwise necessary, nominate members for appointment to the Council on Postdoctoral Training by delivering a list of such nominations to the AOA's President-elect. Such list shall include three (3) names, which shall be submitted in order of preference. All nominees must be members of the College's Committee on Graduate Medical Education (or such equivalent committee as may exist at such time). The Board shall take into consideration the slate of qualified candidates presented to the Board by the College's Nomination ~~/Election~~ Committee in determining such nominations.

ARTICLE VIII

Officers

Sections 1 through 6 are unchanged.

Section 7. Term. Officers shall serve a two-year term in office. The Secretary and Treasurer may not serve more than two (2) consecutive terms in office. IN THE EVENT THAT THE TERM OF THE IMMEDIATE PAST PRESIDENT DOES NOT END WITH HIS OR HER TERM ON THE BOARD ~~the Immediate Past President~~ HE OR SHE SHALL BE ~~is~~ ineligible to hold any officer position for THE REMAINDER OF HIS OR HER TERM ON THE BOARD. ~~a period of three (3) years.~~ PAST PRESIDENTS WHO COMPLETE THEIR TERM ON THE BOARD WILL BE PROHIBITED FROM RE-ENTERING THE ELECTION PROCESS FOR A BOARD POSITION. HE OR SHE MAY SERVE IN AN ADVISORY CAPACITY AT LARGE TO THE BOARD OR MAY FILL OPEN POSITIONS ON THE BOARD AT THE DESCRETION OF THE PRESIDENT UNTIL SUCH TIME AS A REGULAR ELECTION OF THE MEMBERSHIP IS CONDUCTED.

ARTICLE X

Committees

Section 1 (a) is unchanged.

- (b) Nominating ~~/Election~~ Committee.
A COMMITTEE OF MEMBERS WILL BE APPOINTED BY THE PRESIDENT, WHO WILL SERVE STAGGERED, THREE-YEAR TERMS, IN ACCORDANCE WITH THE EXISTING POLICIES OF THE COLLEGE. THE PURPOSE OF THIS COMMITTEE WILL BE TO DEVELOP A ~~RANKED~~ LIST OF QUALIFIED CANDIDATES FOR POSITIONS ON THE BOARD OF DIRECTORS AND TO PRESENT THIS LIST TO THE BOARD ANNUALLY FOR ITS APPROVAL AT ITS REGULARLY SCHEDULED SPRING MEETING.

THE ~~RANKED~~ LIST MUST CONTAIN A SUFFICIENT NUMBER OF QUALIFIED, VETTED CANDIDATES WHO MEET OR EXCEED THE REQUIREMENTS AS IDENTIFIED BY EXISTING POSITION DESCRIPTIONS, TO REFLECT AT LEAST 200% OF AVAILABLE POSITIONS ON THE BOARD FOR ANY YEAR. THE BOARD WILL PUBLISH A BALLOT CONTAINING SUFFICIENT CANDIDATES TO REFLECT AT LEAST 150% OF THE AVAILABLE POSITIONS TO THE MEMBERSHIP ANNUALLY IN JULY.

- ~~(1) Composition. The Nominating / Election Committee shall consist of Immediate Past President, who shall serve as the chair of the Nominating / Election~~

~~Committee; two (2) Board of Directors (whose terms are not expiring during the year of such appointment) who shall be appointed to the Nominating / Election Committee by the President; and two (2) members of the College in good standing who shall be appointed to the Nominating / Election Committee by the Chair from amongst the Active, Active/Exempt, Life and Retired Members of the College.~~

~~(2) Term. Each member of the Nominating / Election Committee shall serve a one-year term. Committee members may serve consecutive terms on the committee. provided, however, no members shall serve more than three (3) consecutive terms on the committee.~~

~~(3) Duties. The Nominating / Election Committee shall solicit nominations from the General Membership for positions on the Board of Directors and shall submit to the Board of Directors and, upon approval of the Board of Directors, to the voting members a list of qualified candidates to succeed those Directors whose terms shall expire at the conclusion of the next annual meeting. The Committee also shall nominate individuals to be nominated by the Board of Directors in accordance with Article VII, Section 15 (b) and (c) above. The number of Candidates provided for consideration shall be a minimum of 150% of the number of positions to be filled at the election~~

Explanatory Statement: The above revisions will meet the concerns of the College Membership to (1) allow electronic voting and outline adjusted majorities until the culture of electronic voting is ingrained in the membership, (2) clarify the roles of the past presidents on the Board of Directors, (3) clarify membership roles on the Nominations Committee, and (4) allows the College to remove the privilege of utilizing the title of Fellow and Distinguished Fellow of the ACOEP if a physician withdraws from the membership of the College, or has the privilege of membership rescinded by the College.

Dr. Mitchell provided Members with a few minutes to read through the resolution and then asked for a motion to approve the amendments to Bylaws, as presented. A motion was made and duly seconded to **approve the Amendments to the Bylaws**, as written. Discussion was asked for and none heard. A call for the question was made and a vote was taken. The vote yielded a positive response with no dissention.

Dr. Mitchell informed the Membership that this would now be presented to the Board of Trustees of the American Osteopathic Association at its summer meetings for final approval.

At this time, Dr. Brabson asked Dr. William Bograkovs to the front of the room at which time he was presented with a distinguished service award for his service on the Board. Dr. Bograkovs thanked the Board and members for their support.

President's Report. Dr. Brabson reported his activities during the past five months, which began with the ACOEP's participation in the AOA's Healthy and Viable Associations Program, which ensures that all affiliates are functioning in accordance with accepted business practices, in November. He attended this function with Ms. Wachtler and Dr. Christiansen. Then in January he, Dr. Christiansen and Dr. Mitchell represented the ACOEP at the Summit on the Future of Emergency Medicine in Dallas and then went on to the AOA's Board of Trustees Mid Year Meeting in Arizona.

One of the major topics of discussion at the Summit on the Future of Emergency Medicine was on how to best staff emergency departments in the changing environment of medicine; appropriate use of physician extenders, and telemedicine. One of the questions raised was how would emergency medicine fit into the accountable care organization (ACO) structures being discussed in the healthcare debate. In the current infrastructure, emergency medicine as practiced today will be a challenge to fit into the structure and reimbursement for care.

At the AOA Meeting, the main discussion topic was the report of the Educational Policies and Procedure Review Committee III (EPPRCIII) which was supposedly developed in part from our (ACOEP) request to remove the business of education from under the AOA's umbrella. The report was responded to by all the specialty colleges who felt that certain aspects of the report did not meet their needs. However, it was good to hear positive feedback about the College which continues to be looked at as an innovator and on the cutting edge with many of its educational policies.

Dr. Brabson announced to the Membership that the ACOEP has voted to join the Emergency Medicine Advocacy Fund and will join at the \$50,000 level for two years as a board member to assist in advocating for emergency medicine and ACOEP Members as the new healthcare rules roll out.

President-elect Report – Dr. Christiansen reviewed the activities of DO Day on the Hill at which event Dr. Joseph Heck, newly elected Representative to the U.S. House of Representative from the State of Nevada. Dr. Heck, an osteopathic emergency physician spoke to the DO Day participants and provided them with information and an outline of the Healthcare Law, explained its goals, and highlighted its shortcomings, especially in context to emergency medicine.

Dr. Christiansen then spoke about Accountable Care Organizations (ACO) which currently makes up about 5 pages of the Healthcare and Education Affordability Reconciliation Act Health Care Law and CMS in published in April for public comment to the approximately 400 pages of regulations. This 60-day comment period must be utilized by the physician community to see that additional changes are made after the commentary period is closed.

Dr. Christiansen also addressed the resolution being presented to the membership as a special item at the Membership Meeting. This resolution will amend the Bylaws in several ways, including the addition of electronic voting for Board Members. Other changes included making the various forms of fellowship, i.e., Fellow and Distinguished Fellow, as membership categories to allow these members who select to pay membership dues can no longer utilize FACOEP or FACOEP-D after their names. Also the changes will remove the option of nominations from the floor as an option, but will allow members interested in serving on the Board can be interviewed at ACOEP functions or by teleconference with applicants being vetted and listed on a nominations resolution to the Board. Hopefully, this will open the process to more members of the College.

Treasurer's Report – Dr. Longenecker stated that during the time since the last meeting, the College underwent its annual audit. The audit did not reveal anything out of order except the necessity of several housekeeping items with revision of policies and the formulation of new policies on anti-trust and conflict of interest. She also reported that the College has been involved in intense negotiations with WestJEM and has agreed to provide this journal to its membership for the period of three years as a new member benefit.

She reporting with the rising prices, additional services and member benefits added to the College membership, dues will be raising approximately 10% across the Board. She stated that Resident Dues will also be added. This is the first time in 7 years that dues have been raised and the first time since 1998 that residents will be asked to pay dues.

She stated that a finance report will be placed in the July issue of *The Pulse* which will show the results of the Audit.

Secretary's Report – Dr. Mitchell reported that the office has been involved in developing operational policies for the various committees over the past year and nearly all committee's now have policies in place by which nominations and appointments can be made in the fall. Attention has been paid to the Nominations process and the development of questions for nominees. This has been ironed out and will be tested in the fall.

Executive Director – Ms. Wachtler stated that in her role as Executive Director of the ACOEP she has been extremely glad to have the support of her staff, which she recognized. The College Office has increased in size and two people are currently in Chicago, "keeping the home fires burning." She then reported that the various reports of the committees will be placed on the Members Only Section of the Website and noted that the ability to vote will be a new function to members paying dues during a window of time during the pre-convention period.

Student Chapter – Student Dr. Andrew Little reported on the activities of the Student Chapter and stated that he was re-elected to an additional term as President to fill a gap that occurred in the Chapter. Like the other reports, his will be placed on the Website, however, the Chapter was pleased with the support of the Members and they were able to raise \$1790 in their 50/50 raffle. Student Dr. John Downing announced Terry Carr as winner of this raffle who was presented with \$895.

Resident Chapter - Dr. Sherry Turner reported that the Chapter has continued to grow and become more active with the growth of the residency training programs. They will again feature *Resident Jeopardy* as part of their program in the fall.

Foundation for Osteopathic Emergency Medicine – Ms. Wachtler announced that the Foundation has been extremely busy during the past few months and is currently revising and updating its profile on the web, Facebook and Twitter. The Case Poster Competition was extremely successful with more than 50 participants and they were extremely happy to receive a grant from NHS to supplement the costs of the competition, which many physicians participated in. At this time she announced the winners. **Third Place** was granted to Therese Mead, D.O., for her poster *Evaluation of Meningo-encephalitis in Post-Neurosurgical Patient with Back Pain*. **Second Place** was granted to Schakia Ese, D.O. for his poster, *Streptococcus Pneumonia Pericarditis with Purulent Pericardial Effusion in a Neonate (A Cause for Concern)*. **First Place** was granted to Alexis Davison, D.O. for her poster, *Spontaneous Subdural Hematoma in a Patient taking Fondaparinux*.

American Osteopathic Board of Emergency Medicine - Dr. Stone presented the Report of the AOBEM and emphasized the relationship of the College to the Board as "phenomenal" and thanked the College for all its support. He informed the members of the relocation of the Board to the headquarters of the National Board of Osteopathic Medical Examiners (NBOME) on June 1st and that the office will be closed from May 27 through June 1st as they relocate.

With the explosive growth in emergency medicine, the responsibilities of the Board have also increased and they are beginning to experience the growth we have experienced during the last 10 years.

There has been increasing public concern for assurance of continuing competency beyond the initial board certification. The AOA and Bureau of Osteopathic Specialists are now requiring each board to develop and implement an Osteopathic Continuous Certification (OCC) Process. The Federation of State Medical Licensing Boards (FSMB) recently approved language that would allow OCC participation to serve as a proxy for state-based Maintenance of Licensure (MOL). The Health Care Reform Bill recently signed into federal law allows OCC to qualify for increased reimbursement within the Centers for Medicaid and Medicare Services (CMS) Physician Quality Reporting Initiative (PQRI) beginning in 2011.

OCC Components will include: (1) Unrestricted licensure; (2) Lifelong learning; (3) Practice Performance; (4) Cognitive Assessment, and (5) Continuous AOA Membership.

Our current recertification process addresses all components except for the practice performance. Starting in the year 2013 all diplomats recertifying will have to complete the practice performance component as outlined below:

The Practice Performance component of FRCE consists of a process whereby you, the practicing clinician, assess the quality of care you provide by comparing it to that of your peers and to national benchmarks; and, through that process, improve your care through application of “best evidence” and consensus recommendations.

You must complete this process once every 10- year recertification cycle, and send in the completed Practice Performance Form along with your FRCE application form in order to be credentialed for the FRCE exams. The process consists of 4 steps as outlined below:

Step 1 - To initiate the process, identify a target area for clinical improvement. The target area may be a disease entity, a clinical care issue, or an access to care issue (for example, through-put, or “left before treatment”). The target area requires a population or clinical issue that is measurable for improvement and has recognized comparison data available. You will need to choose appropriate data points as measures of quality.

Step 2 - Collect and review data points from 10 patient charts from the targeted area of study. You may choose patient charts from your practice group, so long as a minimum of 3 of your own charts are included.

Step 3 - The data points from the 10 charts are then compared to evidence-based guidelines or expert consensus statements or comparable peer data. Interpretation and analysis of the data points can then be used to identify areas for improvement. Next, develop and implement a practice performance improvement program. This plan may include an educational piece, personal reminders, or a change in process- for example, adding the NEXUS criteria for cervical spine imaging to your EMR to try to avoid unnecessary radiation in trauma patients.

Step 4 - After implementation of the process improvement plan, review at least 10 new charts of the targeted area of improvement. Measure and analyze the data, and then evaluate for improvement.

Those physicians not involved in clinical practice must complete the “AOBEM FRCE Non-Clinical Form.” These physicians are not required to complete the Practice Performance Module, and their status will be reported to the AOA as “AOBEM Certified: Non-Clinical.” If, and when, these physicians return to active practice, they will be required to submit 20 patient charts for review (following the same format/guides as for Part III of primary certification) within 1 year of return to practice.

There will be a second component of the practice performance that will involve a formal method of assessing how you communicate with patients and other physicians and staff members in an effective and professional manner. The communication component is currently being developed. He stated that he would be available for questions after the meeting ended.

Dr. Brabson thanked all the Members for attending the conference and this meeting and wished them a good summer season and safe travel home. The next meeting of the Membership would be on Tuesday, October 11 at the Encore in Las Vegas.

He then entertained a motion for adjournment, hearing same he adjourned the meeting at 1:15 p.m.

Respectfully submitted,

Mark A. Mitchell, D.O., FACOEP
Secretary