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Night Out at the Movies

On July 6, the AMCNO held a fundraiser at Silverspot Cinema in Beachwood. The fundraiser, a “Throwback Thursday Night Out at the Movies,” benefitted the Academy of Medicine Education Foundation (AMEF).

The event featured the showing of an episode of “Prescription for Living,” the television show produced by the Academy of Medicine in the 1950s. The program ran on Sunday afternoons on WXEL Channel 8 in Cleveland and featured Academy physicians as well as actors from the Cleveland Playhouse. It was made in conjunction with the Cleveland Health Museum and sponsored by Standard Oil. The program was considered groundbreaking for its time, and it won several awards including the best local service program from the American Federation of Television and Radio Artists in 1954.

The program's popularity led many medical societies across the country to recreate it to help bring health education television programming to their communities.

Our Night at the Movies was a fitting event to bring the program to the big screen leading into our organization's bicentennial year—celebrating our past and its impact while raising funds to support our future.

The event and its silent auction raised over \$2,000 for AMEF's scholarship fund. Thank you to all AMCNO members who joined us. Those who are interested in supporting our medical student scholarship fund can donate online at www.amcno.org/amef.



Left to right: Fred Jorgensen, M.D., Kristin Englund, M.D., Lilian White, M.D. Mary LaPlante, M.D., Roopa Thakur, M.D., Gerard Isenberg, M.D., Jonathan Scharfstein, M.D., Eric Shapiro, M.D., Mary Frances Haerr, M.D., Tanveer Singh, M.D., Thomas Collins, M.D., Baljit Bal, M.D.



Left to right: Kristin Englund, M.D., Baljit Bal, M.D., Gregory Johnson, Nancy K. Johnson, M.D., Mary Frances Haerr, M.D.



Left to right: Jennifer Kidd, M.D., Mary LaPlante, M.D.



Left to right: Lillian White, M.D., Anna McLaughlin, M.D., Kathee Liang, M.D., Stephanie Dueley, M.D.

Bicentennial Update

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



In this issue of the *Northern Ohio Physician*, we will share significant moments from our history with you from the 1900s -1930s.

AMCNO History 1900 - 1930s

1906	1911	1917	1918	1924
Dr. George Crile, Academy Past President, performs first successful blood transfusion in humans, performed between 2 brothers in 1906 at St. Alexis Hospital in Cleveland.	Academy physicians link Typhoid Fever epidemics in the city to sewage found in Lake Erie and recommends the filtration and disinfection of the water.	After study of milk supply, Academy pushed for City Ordinance on Pasteurization of Milk, after 3,000 children under 2 died, and offer free milk inspections by Cleveland Division of Health.	Cleveland Medical Journal (now the <i>Northern Ohio Physician</i>) put on hold due to majority of physician members enrolled in military service in WWI.	After local outbreak of smallpox; Academy administers 70,000 vaccinations.



Cleveland Medical Journal on hold due to WWI. Pictured in the center is AMCNO Past President and WWI Physician, Dr. William E. Lower. Photo by Cleveland Clinic

Approximately 70% of adult smokers want to quit.*

Talk with your patients about quitting tobacco.



**Three minutes of your time
could add years to their lives.**

The Ohio Tobacco Quit Line is free to all Ohioans.
To refer your patients, please use the QR code or link below.



ohioquits.org

Ohio

Department
of Health

*Centers for Disease Control and Prevention (CDC)

SABIN ORAL SUNDAYS



As we approach our bicentennial year in 2024, we want to share with you significant moments from our organization's history. Below is the story of the AMCNO's hallmark accomplishment—our Sabin Oral Sundays campaign—recognized as the most successful polio vaccination campaign in the country.

"This was one of the finest hours of American medicine. It was the flowering of the finest in community responsibility," said Don Dunham, Medical Editor of *The Cleveland Press* about the opening phase of the Academy of Medicine of Cleveland and Northern Ohio (AMCNO)'s three-part Sabin Oral Sunday (SOS) campaign against polio.

The Sabin Oral Sundays program would become the hallmark accomplishment of the AMCNO. Over six Sundays in the summer of 1962, more than 1.5 million Clevelanders were vaccinated against polio, making the campaign the most successful in the country.

The Academy decided to launch the SOS program during a visit Dr. Albert Sabin made to Cleveland on April 3, 1962, to deliver the Hanna Lecture at the Allen Memorial Library. Academy officials agreed to undertake the daunting SOS program and announced their decision to the public on April 5. A few days later, the Academy signed a contract with the Pfizer Company, a pharmaceutical firm, to supply Sabin's vaccine. Signing the contract itself was a courageous act given that the Academy had only \$900 in its treasury and the SOS program was estimated to cost \$500,000. The Polio Vaccine Committee got working money for the program through local partners including The Cleveland Foundation which advanced \$20,000 and the Beaumont Foundation which loaned \$15,000.

Cleveland residents lined up to receive their polio vaccinations.

On the Polio Vaccine Committee were Dr. Hopwood, Dr. Leedham, Dr. Garry Bassett, Dr. Chester R. Jablonsky, Dr. J. Glen Smith, Dr. Frederick Suppes, and Dr. Howard Taylor along with AMCNO staff members Robert Lang and Donald Mortimer.[AR1] Two Academy members—Dr. Howard H. Hopwood and Dr. Charles L. Leedham—were named co-chairmen to run the program. Both were able, vigorous organizers and superbly selfless, and they spurred the program from beginning to end. Even an emergency appendectomy did not slow down Dr. Hopwood who continued working on the project from his hospital bed.

Incredibly, 730 Academy physicians volunteered at 92 clinics for six Sabin Sundays. They, and many of their wives, worked to the point of exhaustion. Said one veteran Academy member when it was all over—"I have never been prouder of my profession". Each clinic also with pharmacists and either a dentist or osteopath at each site assisting the leading physicians. Pharmacists had the important and fatiguing task of putting three drops of vaccine on each of the tens of thousands of sugar cubes. Other personnel for each clinic included registered nurses, PTA members, Red Cross volunteers, Boy and Girl Scouts, service groups, bankers, and policemen from each municipality who directed traffic given the immense number of attendants at each clinic.



Cleveland Police provide escorts for Pfizer trucks that contained the polio vaccine.



Mrs. Lester Farber receives her vaccine through the drive thru for handicapped patients.

Promoting the program within the community was a major task which would dictate if the Academy's efforts would end in success or failure. Bob Lang impressively formed a relationship with the firm McCann-Marschalk to organize and direct the program's advertising campaign. Bill Sansing, Stuart Buchanan, and their staff from McCann-Marschalk shared the Academy's vaccination efforts with greater Cleveland area residents through billboards, posters, brochures, radio, and TV. Their work was so successful that nearly everyone in the community knew about the SOS program. Another important factor in the Academy's social outreach was the work of Charles M. Nekvasil, public relations manager of the United Appeal, who worked with the Academy throughout the SOS program. Nekvasil and his staff of professional writers flooded the area with the written story of Sabin Sundays. The efforts of Sansing, Buchanan, and Nekvasil with each of their staff were a tremendous factor in the final success of the SOS campaign.

While the physician members of the AMCNO spearheaded the campaign, they needed a much larger team to be successful.

Among these were nurses, Red Cross workers, pharmacists, osteopaths, dentists, Junior Chamber of Commerce, Boy Scouts, PTA, switchboard girls, bankers, broadcasting executives, radio and TV engineers and talent, newspapers, printers, school janitors, teachers, public relations people and executives from both welfare groups and private industry, major advertising agency personnel, ham radio operators, the ball clubs, and sportswriters. Clergy members also played an important role in emphasizing the importance of the vaccination program. Even this listing, long as it is, is incomplete.

To prepare an SOS site, the Cleveland Wholesale Drug Company on the East side of Cleveland acted as a supply center for the Eastern half of the county while McKesson-Robbins Wholesale Drug Company served the west side of Cuyahoga County.

The drug companies were of particular importance in relation to two aspects of vaccine supply: 1) dilution and mixing of the concentrated vaccine and 2) distribution and control of vaccine supplies at the clinic sites on the day of each Sabin Oral Sunday event.

The clinics for Sabin Oral Sunday were open between the hours of 12 to 6 p.m., and they saw the highest clinic attendance between 12 and 2:30 p.m. when they saw approximately 40% of the population served by each clinic site.

Some of the suburban clinics handled as many as 25,000 people per Sunday requiring an abundance of supplies. In total, volunteers distributed a total of 5,000,000 sugar cubes in 5,000,000 tiny paper cups. 7,000 pencils were needed to complete 7,500,000 registration forms. 140 ice chests plus tally sheets, masking tape, clip boards, droppers, paper clips, rubber bands were used. Some 250,000 posters were placed throughout Cleveland, and 500,000 brochures were sent out. The SOS telephone line, CE 1-8000, known as the "polio" number, had such traffic that seven phone sets were installed with 9 lines on each. The SOS staff and teams from the women's auxiliary at the Academy worked the telephones.

Six hospitals—Lakewood, Parma, Fairview Park, Suburban Community, Huron Road, Euclid Glenville—and Maywood Office, Academy Call Service acted as satellite stations to shorten the time for delivering supplies.

Perhaps the general impression of the Cleveland SOS program by one observer from New Jersey might sum up the outside viewpoint: "Unquestionably, the high regard with which the Academy of Medicine is held by the lay population as well as the professional community in Cleveland was most influential in initiating the program and in carrying it through successful completion".

While some were surprised that Cleveland could vaccinated 1,500,000 people with such poise and organization given only seven weeks to prepare the campaign, but those working and partnering with the Academy trusted it would be successful given the tremendous heart of Cleveland and its people. It is unlikely that any other large metropolitan city has ever demonstrated such humanitarianism so consistently and in as many ways.

In the words of Dr. Albert B. Sabin, developer of the Sabin Oral Vaccine, "There has been no record like that anywhere in the world. This is the most extraordinary response I have ever heard anywhere. You people in Cleveland must have done a remarkable job. This is a unique achievement in all the world. I hope that somebody does a real job of analyzing the reasons for your great success so that they can be passed on to other cities to help them."

As AMCNO leadership noted at the time, Greater Cleveland is the unsung great city of America until a given program stuns people into its worth. Louis B. Seltzer, editor of The Cleveland Press and News said of the program: "I think that SOS was the greatest outpouring of community consciousness in the history of America's Great cities. It could succeed only in Cleveland among major metropolitan areas. It proves that the heart and soul of Cleveland are just what we always have believed them to be. It was a terrific job of organization and probably the greatest piece of promotion and public relations we have ever seen."

Mayor Anthony J. Celebrezze said: "The dramatic and unparalleled success of the initial Sabin Oral Sundays throughout Greater Cleveland is a tribute to the citizens who participate to the physicians and others who conducted the program. More than that, it sustains our great tradition as a community which always has placed the health and welfare of all its people foremost among its many civic programs."

Vic Werts, Detroit Tigers first baseman and former polio patient as a member of the Cleveland Indians asked: "Where else can anyone get a sugar cube insurance policy that will guarantee him protection from polio, and prevent him from spreading polio to his kids, grandkids and neighbor's kids?"

An unidentified policeman at one of the Eastside distribution centers stated: "This is the damndest, most fantastic traffic jam I've ever seen in 26 years on the force—but nobody is sore about it. And neither am I."

A leading surgeon said at the end of a long day at an SOS clinic: "Today I was damned proud to be a doctor and a member of the Academy of Medicine."



David Pugh and daughters Connie and Casey receive their vaccinations.



The Heffner twins both receive vaccinations from their parents.



The Regan family is escorted inside to receive their vaccinations.



Mayor Celebrezze (center) awards the Academy a proclamation for the SOS program.

Now, her spine only bends on game day.



At age 14, Kamryn had a 53-degree curve in her spine. Akron Children's corrected it with spinal fusion surgery, and now she enjoys cheerleading, tennis and roller coasters again.

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At Akron Children's Spine Center, our experts are able to correct even the most complex cases. Utilizing innovative, comprehensive procedures to restore health, our pediatric-trained spine specialists treat hundreds of children each year. From breakthrough technologies and techniques to advancements in research and innovation, we focus exclusively on the unique needs of kids, and get them back to childhood as quickly as possible.

Learn more at akronchildrens.org/Spine.

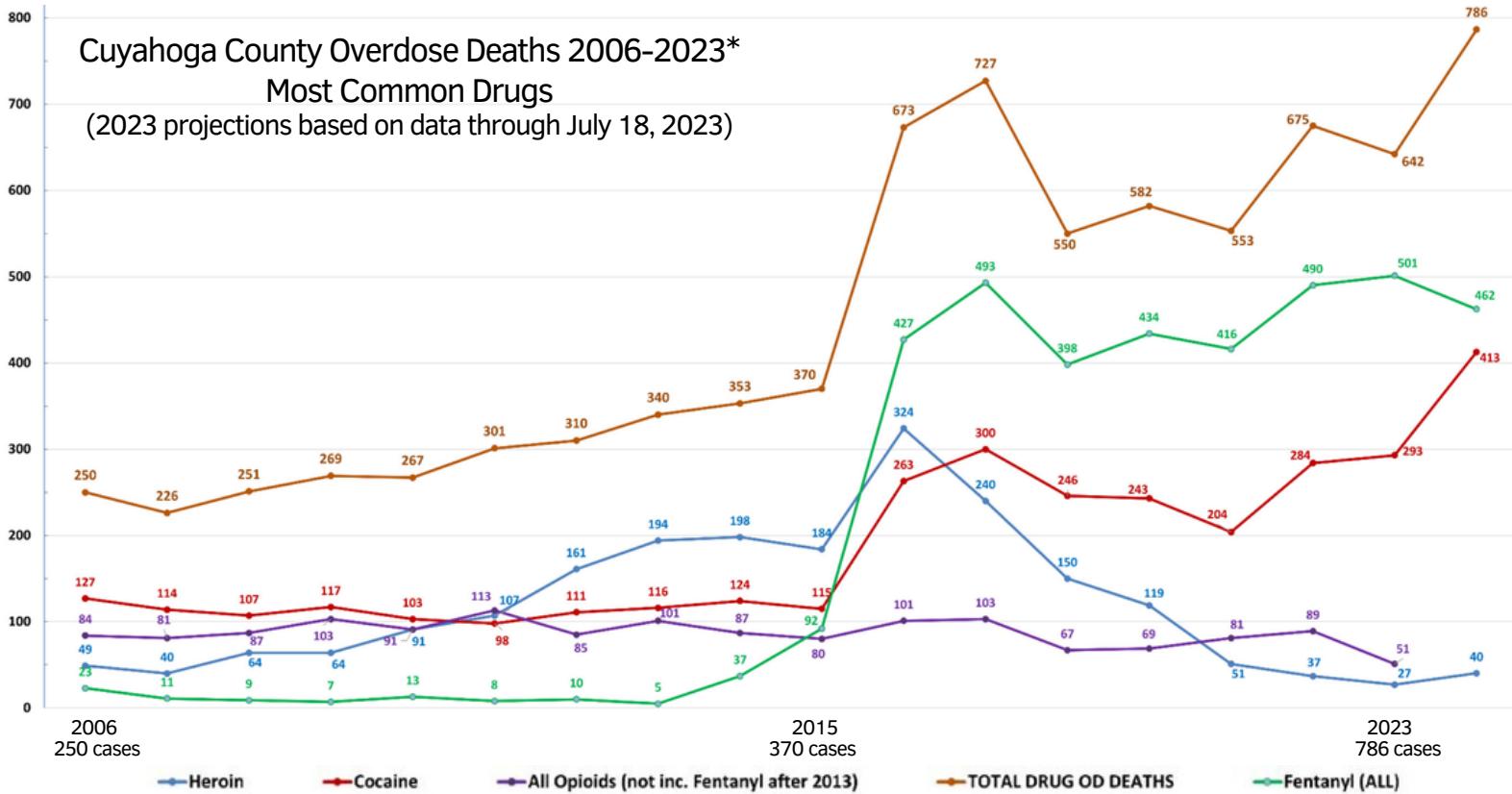
Spine Center



Akron
Children's
Hospital

Overdose Deaths Increasing in Cuyahoga County

Public health and medical officials in Cuyahoga County are concerned as overdose deaths are increasing and poised to set records in 2023.



According to a [report from the Center for Community Solutions](#) (CCS), Cuyahoga County is expected to suffer a record number of overdose deaths this year with a projected 770 lives lost by the end of December. The report's author, CCS's Alex Dorman, cites one explanation for this increase as the proliferation of the extremely potent synthetic opioid, fentanyl, which was involved in four out of five overdose deaths in Ohio in 2020.

Sadly, this is not the only record expected in our county in 2023; Cuyahoga County Medical Examiner, Dr. Thomas Gilson, issued a [public health alert](#) on July 18 reporting nine suspected overdose deaths in a 24-hour period, the highest number of suspected overdose deaths within this timeframe.

There are still steps that can be taken to avoid this projection becoming a reality, however. Dr. Gilson reiterated the importance of harm reduction strategies including use of naloxone and fentanyl test strips, not using drugs alone, and sitting upright to avoid an overdose. Additionally, he shared that calling 911 is always a resource to seek help without receiving an offense thanks to Ohio's Good Samaritan Law.

Many institutions are conducting research around opioid use and addiction to try to understand this problem and create better

solutions, including researchers here in Cleveland. The Begun Center for Violence Prevention Research and Education from the Jack, Joseph and Morton Mandel School of Applied Social Sciences at Case Western Reserve University published a study in April called "Treatment Perspectives of Those Who have Experienced an Opioid Overdose and their Professional and Lay Caregivers." Their study used interviews asking participants to share their own perspectives and experiences.

After these discussions, the study's authors offered eight recommendations to ameliorate the effects of the opioid epidemic including the following: creating community education efforts on the reality of opioid addiction as a disease; adding more culturally diverse prevention, intervention, and postvention efforts; and inclusion of Medication Assisted Treatment (MAT) to support recovery and prevent relapse.

For resources on opioid and substance abuse, [visit the Opioid Epidemic page on our website](#).

AMCNO Hosts Medication Assisted Treatment Training for Residents & Medical Students

On June 8, the AMCNO hosted a Medication Assisted Treatment training for medical students and residents. The event was a part of a grant that the AMCNO received from the Ohio Prevention Network (OPN) to reduce unintentional overdose deaths in Ohio.

By training more medical students and physicians on Medication Assisted Treatment (MAT) along with its uses and benefits, the AMCNO is helping to increase awareness of these treatment options and encourage more providers to treat patients with opioid use disorder.

The training was led by Dr. David Streem, MD, FASAM, the Chief of Psychiatry at Cleveland Clinic Lutheran Hospital and Medical Director of the Alcohol and Drug Recovery Center. He also serves as the Gregory B. Collins, MD Endowed Chair in Alcohol and Drug Rehabilitation.

Dr. Streem discussed the difference between opiates, which are natural compounds, and opioids, which are manufactured. He went through the four medications for opioid use disorder approved by the Food and Drug Administration (FDA) including buprenorphine, naltrexone, methadone, and naloxone.

The group also discussed the role of stigma in patient care and the importance of language in how we view patients. For example, he referenced a study from The Recovery Research Institute showing that participants viewed individuals described as “having a substance use disorder” more sympathetically than those described as “substance abusers.”



He clarified that medications for opioid use disorder can be started in emergency departments (EDs), primary care settings, and in the hospital. Buprenorphine and Naltrexone can be prescribed in any outpatient setting, he shared.

He shared peer support options including Project SOAR and Thrive Peer Support as well as follow-up options for emergency patients including Alcohol and Drug Recovery Center (ADRC) Lutheran and Fairlawn, MetroHealth's Walk-in MAT Clinic, and Brightview.

Toward the end of the presentation, Dr. Streem discussed how to turn the patient's information into a treatment plan and shared his own clinical insights on prescription of these medications.

The training ended with a brief regulatory update on the changes made in MAT prescribing at the federal level with the removal of the X Waiver as discussed in the Winter Issue of the Northern Ohio Physician and stated the the Ohio State Medical Board will likely adjust their requirements within the next year.

Attendees were very engaged throughout the training and asked Dr. Streem many questions about his presentation and experience with MAT prescribing. The AMCNO is very happy with the turnout and engagement of the training's attendees and will be offering another virtual MAT training on September 13 for all prescribers. Registration coming soon at www.amcno.org/events.



Innovation in Healthcare: Shared Medical Appointments

In a new series recognizing innovations in health care by Academy physicians, we highlight the work of Marianne Sumego, MD, an internal medicine pediatrician at the Cleveland Clinic, and her work with shared medical appointments (SMAs) and how the Cleveland Clinic became one of the first adopters of this form of care delivery.

Dr. Sumego was first introduced to SMAs in 1999 when her medical director attended a conference led by Edward Noffsinger, PhD, who discussed the idea of group visits. In her first SMA for patients with asthma, Dr. Sumego noticed deficits in patient knowledge of their own condition. She realized that although she had told them the information they needed to know in their individual appointments, they were sometimes unable to absorb it all in a such short visit. This led to her dedication to SMAs which allow her more time with patients and lets the patients learn from each other.



Dr. Sumego and five other Cleveland Clinic providers continued offering SMAs for the next decade until the model was further expanded in 2010. Former Cleveland Clinic CEO and President Toby Cosgrove, MD asked his staff for suggestions in handling the increasing volume of healthcare needs. Dr. Sumego took this opportunity to create an SMA program at the clinic of which she became the director and took on piloting this delivery model to see if it was sustainable for the Cleveland Clinic.

They tracked the program's progress by looking at the number of SMA visits to see if they were being utilized and if appointment numbers were increasing over time, asking providers about their experiences, and giving patients a survey after each SMA with specific questions to gauge if they got their medical needs addressed during the appointment. Dr. Sumego read all the patient surveys and found overwhelmingly positive responses. They also found the same if not higher quality of care and better patient satisfaction in SMAs when compared to one-on-one visits.

Dr. Sumego is most proud of her protection of the patient's value in SMAs. She realizes that providers could use this tool to increase their productivity and squeeze in more patients rather than taking the opportunity to teach patients in a new way and give them a better experience than they would have in a one-on-one visit.

She is also very grateful and humbled to see the response from other physicians eager to implement this innovative form of healthcare delivery to improve their patients' experience. She was pleased to discover the depth of the interactions patients have with each other during these appointments; while at first she had fears that patients would not be comfortable sharing about their health in front of strangers, she found that patients ended up interacting on their own without being prompted, giving each other advice, and making plans to connect outside of their appointments. SMAs provide a form of community building where patients can share their challenges and accomplishments with each other and learn from each other in a way that the physician-patient relationship cannot often provide.

Today, because of the work of Dr. Sumego and her peers, the Cleveland Clinic has held more than a quarter of a million shared visits. Dr. Sumego continues to work with her peers on ways to innovate in healthcare to improve the patient experience.

Read more at the [Cleveland Clinic website](#).

Center for Community Solutions Holds Webinar on Value-Based Care

On June 18, the Center for Community Solutions Medicaid Institute hosted a webinar discussing the merits of Collaboration and Value-Based Care in medical practice. Value-based care is a form of reimbursement where payment is tied to the quality of care provided.

Rather than paying providers just for seeing patients, providers are paid based on the efficiency and effectiveness of their care, often based on patient outcomes. The Centers for Medicare and Medicaid Services (CMS) has been testing this model and some studies suggest that this reimbursement model can reduce costs and improve quality of care. This method is very different from the predominant fee-for-service (FFS) model used in the US today, so it is still undecided whether value-based care would be a feasible replacement to help decrease the US's healthcare spending.

Former Chief Medical Officer of the Medicaid program, Andrey Ostrovsky, MD moderated a discussion between Adam Aponte, MD, Zachariah Hennessey, and Pantelis Karnoupakis who all had a different perspective on the use of value-based care in their state of New York.

Dr. Ostrovsky opened the conversation with a background on the current federal policy around value-based care. He said that the Biden-Harris administration has been releasing more guidance on this form of health care reimbursement and started to address social need more than it has been discussed previously. He shared his insights on a rule proposed in May to address managed Medicaid with quality measurement and quality improvement, advanced value-based payment for pharmaceutical drugs, increased flexibility in Medicaid coverage for people involved in the justice system, and quality courses that have become mandatory.

Dr. Aponte is the Chief Medical Officer at East Harlem Council for Human Services, Inc., a Federally Qualified Health Center (FQHC). He discussed the importance of social determinants of health, or as he calls them, social indicators of health since he believes these factors are not necessarily determinant of your lifelong health. Dr. Aponte added that he and his colleagues want to be able to care for patients outside of the clinical setting by providing provisions for less obvious health needs like food, clothing, transportation, and housing. He said that this type of holistic care cannot be provided in a fee for service healthcare reimbursement model where providers are paid for getting patients in the door rather than by keeping them healthy overall. "We have to make money, but not at the cost of compromising care," said Dr. Aponte.



Zachariah Hennessey, Executive Vice President and Chief Strategy Officer for Public Health Solutions discussed the importance of partnership to create a sustainable method of value-based care so that providers can offer community resources that are accessible to their patients. Pantelis Karnoupakis, Vice President of Value-Based Payment Initiatives & Risk Adjustment at Fidelis Care, a health insurance company in New York agreed that to meet the needs of a diverse community, healthcare professionals must partner with each other. He mentioned that value-based care models decrease overutilization of care and financially incentivize everyone to help their patients, and he appreciates how it rewards providers for being responsible and giving appropriate referrals to community organizations.

Dr. Ostrovsky shared his excitements for the development of the Next Generation of Medicaid Managed Care in Ohio that gives providers the opportunity to transition to value-based payment models and requires 5% of plans' profits to go back into the community. You can read more about value-based care from [The Commonwealth Fund](#) and watch can watch the whole webinar on the [Center for Community Solutions website](#).

Welcome to the New Class of the Future Leaders Council

On May 18, AMCNO welcomed the second cohort of seventeen new members into the Future Leaders Council at an orientation at the AMCNO office.

The AMCNO Future Leaders Council (FLC) is a group of twenty-eight medical student and resident members seeking educational, leadership, volunteering, and networking opportunities with the Academy. These students and physicians are the future of medicine, and participation in this council allows them to learn about topics that are not covered in depth through their formal training like how to advocate for their patients to politicians and different social determinants of health that are affecting individuals in their communities. The council's objectives are to influence policy at the local, state, and national levels, be actively involved in their local communities, and organize impactful and timely public health initiatives. They coordinate and lead social and educational events to broaden their scopes of practice as they determine their medical specialties.

In addition to representing the future of medicine in Northern Ohio and around the United States, these members represent the future of our leadership at the AMCNO. Two leaders from the program's first cohort have already joined the AMCNO and AMEF boards after they completed their residency and fellowship programs. FLC members can become a part of the change that they hope to see in medicine and develop a rewarding career as they create their own identities as professional leaders in medicine. To read members full biographies, [visit our website](#).



Amanda Alejo
Second-year medical student
at Northeast Ohio
Medical University
(NEOMED)



Willington Amutuhaire, MD
Second-year internal medicine
resident at Case Western
University School of Medicine's
University Hospitals and
Cleveland Veterans Medical
Center



Oluwatoyin Busari, MD
Second-year adult
psychiatry resident at
University Hospitals



David Ceraolo
Second-year medical student
at Northeast Ohio
Medical University
(NEOMED)



Rahoul Gonsalves, MD
Second-year psychiatry
resident at MetroHealth
Medical Center



Eija Kent
Third-year medical student
at Case Western
Reserve University
School of Medicine



Poojajeet Khaira, MD
Second-year psychiatry
resident at MetroHealth
Medical Center



Su Kim
Third-year medical student
at Northeast Ohio
Medical University
(NEOMED)



The new class of the Future Leaders Council at their orientation in May



Rachel Krevh
Fourth-year medical student
at Northeast Ohio
Medical University
(NEOMED)



Marwa Maki, MD
Second-year internal medicine
resident at University Hospitals
Cleveland Medical Center



Olivia Safady
Third-year medical student
at Northeast Ohio
Medical University
(NEOMED)



Matthew Schulgit
Third-year medical student
at the Cleveland Clinic Lerner
College of Medicine



Anu Sharma
Third-year medical student
at Case Western Reserve
University School of Medicine



Joshua Tidd
Fourth-year medical student
at Northeast Ohio
Medical University
(NEOMED)

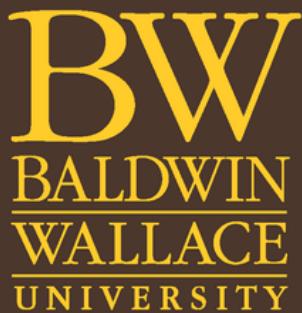


Theresa Whetstone
Fourth-year medical student
at Northeast Ohio
Medical University
(NEOMED)



Samantha Xu
Third year medical student
at Case Western Reserve
University School of Medicine

Master of Public Health



The MPH is the core professional degree recognized throughout the world for population health practice in both the public sector and in emerging private sectors.



The BW MPH program was the first interdisciplinary program in Ohio jointly developed by an academic institution (BW) and an essential health system (The MetroHealth System) with the aim of reducing health disparities and advancing population health.

Why an MPH at BW?

The Baldwin Wallace Master of Public Health degree prepares students for professional challenges and opportunities in population health promotion and leadership throughout Northeast Ohio and beyond.

The MPH focuses on population health, emphasizing social justice, service to vulnerable populations and strategies to maintain excellence in population health practice.

Classes are held in the evenings every other week.



FOR MORE INFORMATION:

Liana Wiemels, MAEd | BW Partnership Manager
216-337-0617 | lwiemels@bw.edu



AMCNO Attends Annual Immunization Advocacy Day in Columbus

On May 17, Future Leaders Council Member Negin Khosravi, MD and AMCNO William E. Lower Health Policy Fellow Anna Ruzicka, MPH visited the Ohio Statehouse on behalf of the AMCNO with the Immunization Advocacy Network of Ohio.

The morning started with a panel discussion moderated by Melissa Wervey Arnold, CEO of the Ohio Chapter of the Academy of Pediatrics, featuring Melissa Howell, Greene County Health Commissioner, Representative Beth Liston, MD (D – Dublin), and Edward Johnson, External Affairs Assistant Health Commissioner for the Columbus Department of Public Health. Panelists spoke about the history of vaccinations and the proof that they are effective given that most children now survive childhood. Despite the overwhelming success of vaccines in preventing disease, it is easy for stories of rare adverse reactions to spread to take over the public discourse, the panelists acknowledged. Additionally, the panel discussed how vaccines are one way to improve Ohio's health and make us more competitive with other states given our low ranking in many measurements from the Health Policy Institute of Ohio (HPIO), as mentioned in the last Northern Ohio Physician.



Another major talking point from the panel was Ohio's vaccine registry, the Ohio Impact Statewide Immunization Information System, or ImpactSIIS. This program was implemented by the Ohio Department of Health in February 2002 as an optional web-based registry for vaccine providers. Ohio currently does not require vaccine providers or health insurers to submit any information on the vaccines they provide. Mr. Johnson shared that ImpactSIIS is in serious need of updates as it has not been modernized since its implementation 21 years ago. For example, the system does not link to any online medical records which would make data entry much simpler for providers.

Ms. Wervey Arnold shared that the Ohio AAP's board voted to support mandatory usage of ImpactSIIS for the first time ever. She said that they believe better data and a better vaccination registry are needed in Ohio to better prepare for emergencies. Ms. Howell added that vaccination registries are important for public health workers and medical providers to gauge the risk levels of their communities, especially in times of infectious disease outbreaks such as the measles outbreak in Columbus this past November.

Overall, the panelists emphasized that these outbreaks are avoidable with proper vaccination and urged for continued advocacy for parents following their children's recommended vaccination schedule.

After the panel, Dr. Khosravi and Ms. Ruzicka met with the following members of the legislature from Northeast Ohio: Representative Darnell Brewer (D – Cleveland), Representative Elliot Forhan (D – Euclid), Representative Sean Brennan (D – Parma), and a staff member from the office of Minority Leader Senator Nickie Antonio (D – Lakewood). We are grateful for the connections with each of these offices and for their attention to the issues supported by our vaccine coalition.

AMCNO Files Amicus Brief in Pre-Term v Yost Case

The AMCNO has filed an amicus brief in the Ohio Supreme Court in support of the plaintiffs in the Pre-Term v. Yost abortion case on the basis of interference in the physician-patient relationship and cause of undue harm to physicians. Other physician groups joining as amicus in the case include the American College of Obstetricians and Gynecologists, the American Medical Association, and the Society for Maternal-Fetal Medicine.

The case comes from the six-week “Heartbeat Bill” which became law after the U.S. Supreme Court overturned Roe v. Wade with their decision in Dobbs v. Jackson Women’s Health Organization. The Ohio law is currently paused due to the actions of Hamilton County judge allowing abortions in Ohio to remain legal until 21 weeks and 6 days of pregnancy.

In our brief, we argue the punitive sections held within the abortion ban language would subject physicians to “criminal, civil, and disciplinary penalties for specific acts the General Assembly has deemed proscribed conduct, but is, in actuality, the practice of medicine.”

We also disagree with the state’s argument that abortion providers could not have proper standing in this case in accordance with the physician-provider relationship given that providers could not know who their future patients would be.

“What is clear is that the physician is entrusted with deciding life and death issues facing a pregnant patient,” we wrote. “There can be no closer relationship than being entrusted with the life of another.”

We will continue to keep our members updated on this case.

Governor DeWine Signs State Budget

On July 3, Governor Mike DeWine signed H.B. 33, the state’s \$191 million 2-year budget, into law.

Before signing the bill, he announced 44 line-item vetoes, including two requested by the AMCNO. The first was the tobacco preemption language that the Senate included in their omnibus amendment, which would have preempted legislation at the local level targeting tobacco retail licenses which is an evidence-based way to reduce sales to underage youth tobacco use by tracking businesses who sell tobacco and removing bad actors from the market if necessary. The second was proposed language which would have eliminated the ability for college campuses to mandate vaccinations. Allowing this language to remain in the budget, we argued, could have weakened public health protections for college students, faculty, and staff by limiting the ability of the institutions to manage campus safety. We thank the Governor for his continued leadership in protecting the public’s health.

Other AMCNO priorities included in the final budget include \$7.5 million in each fiscal year to support school-based health centers, an increase in Medicaid physician payment rates, as well as funding for lead poisoning prevention efforts.

Protect Choice Ohio Coalition Submits Signatures for Ballot Initiative

On July 5th the Protect Choice Ohio Coalition submitted 710,131 signatures – far more than the 413,487 required to appear on the November ballot – to the Ohio Secretary of State Frank LaRose. LaRose verified 495,938 submitted signatures, and the proposed amendment will appear on the November 7th election ballot. The AMCNO is a part of the Protect Choice Ohio coalition, as noted in the last Northern Ohio Physician. Read our full press release!

Those interested in volunteering for the campaign can do so at <https://protectchoiceohio.com/>.

Bills Introduced Addressing Resident Physician Shortage

At the federal level, two bills have been introduced addressing medical education: House Bill 2389 and Senate Bill 1302, both titled the “Resident Physician Shortage Reduction Act of 2023.” These bills allow the Secretary to determine if there are additional residency slots available, and the Association of American Medical Colleges reports that this would increase the number of Medicare-supported medical residency positions by 14,000 over seven years. These additional residency slots are crucial as the country faces a shortage of up to 100,000 physicians by 2030 due to a growing aged population and the expected retirement of many practicing physicians.



The bill in the House has not moved since its referral to the Subcommittee on Health on April 7, and the version in the Senate has not moved since its introduction on April 22.

The AMCNO is excited to support these pieces of legislation and will update its members on the bills’ movement.

Physician Payment Reform Gains Momentum in Congress

The Medicare Access and CHIP Reauthorization Act (MACRA) has also been receiving attention at the federal level with two physician members of the U.S. House of Representatives circulating a “Dear Colleague” letter urging change to this legislation. Representatives Ami Bera, MD from California and Larry Buchson, MD from Maryland coauthored the letter to Speaker McCarthy and Leader Jefferies. Signed in 2015, MACRA shifted Medicare’s approach to physician payment by paying providers based on quality, value, and results of care delivered rather than the number of services provided. Annual adjustments to the Centers for Medicare and Medicaid (CMS) Physician Fee Schedule paired with rising costs of inflation have led to significant decreases in reimbursement of physicians using this value-based reimbursement model. Representatives are hopeful that members of U.S. Congress will prioritize this issue to help maintain the healthcare workforce and create fairer reimbursement for physicians using value-based care models.

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Daunting Dip in Medicaid Coverage Post-Public Health Emergency

Over one million Americans lost Medicaid coverage within a matter of weeks after the end of the COVID-19 Public Health Emergency (PHE) on May 11. Many health officials are concerned that these individuals will not find replacement coverage which could significantly increase healthcare costs and put many more Americans in financial stress.

In a Centers for Medicare and Medicaid Services (CMS) Unwinding National Stakeholder call on June 14, CMS executives shared their disappointments that many of these drops in coverage are due to procedural issues and red tape. These fears are backed up by evidence from a Kaiser Family Foundation (KFF) report showing that “about 4 in 5 people dropped [from Medicaid] so far either never returned their paperwork or omitted required documents.” The Ohio Department of Medicaid shared in a webinar with the Health Policy Institute of Ohio that 70% of individuals up for renewal each month retain their coverage, 15% lose coverage for procedural reasons like failure to respond to an income inquiry, and 5% are transferred to the federal marketplace.

Because of the rapidly falling rates, Secretary of the Department of Health and Human Services Xavier Becerra sent a [letter](#) to US Governors on June 12. His letter offered governors three new policy options to further expand flexibility with their states' Medicaid programs. These options include the following: spreading renewals for all populations out over 12 months, maximizing the use of data sources to renew individuals for other programs for which they are eligible, and partnering with managed care plans and using United States Postal Service data to update people's contact information to ensure they receive renewal forms from the state. He also provided a list of twelve other PHE unwinding waiver approvals that may be used. At that point, Ohio had used five approved waivers for their unwinding process.

Secretary Becerra also encouraged states to partner with local stakeholders who have closer contact with families using Medicaid and CHIP. He expressed particular concern for children who may lose health insurance coverage if their parents are unaware that they must re-enroll their children in CHIP to retain their coverage.

The AMCNO will continue to follow rates of Medicaid unenrollment and update its membership as the Ohio Department of Medicaid continues its unwinding plan through April 2024. ODM is using all of the offered 12 months of renewals as recommended by Secretary Becerra, and their unwinding timeline is available on their website.



NORTHERN OHIO PHYSICIAN

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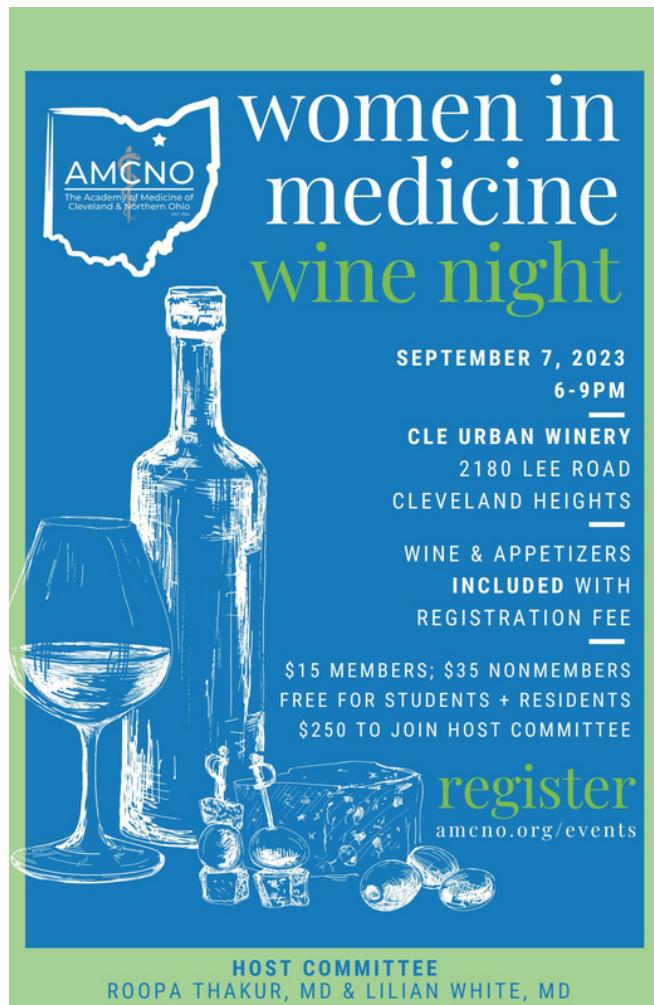
AMCNO Upcoming Events

SEPT
07

Women in Medicine
Wine Night

SEPT
22

Physician Appreciation
Night



Nominations are now being accepted for Physician Appreciation Awards

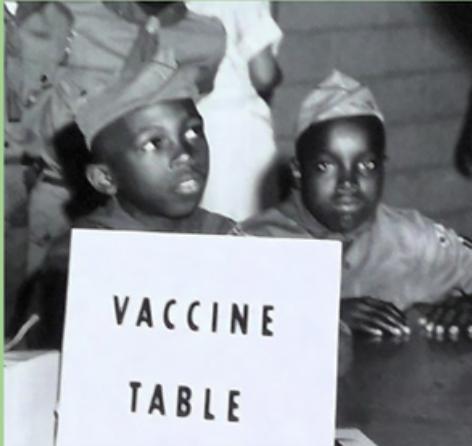
It is a long-standing tradition of the Academy of Medicine of Cleveland to present annual awards to recognize the incredible contributions of physicians and allied professionals in the field of medicine. This year, awards will be presented at our annual Physician Appreciation Night, Friday Sept. 22nd. If you know of an individual whom you would like to nominate for these awards, please use the following form. Self-nominations will also be considered. Deadline for nominations is Friday September 1, 2023.

- Who can nominate: Current active members of the AMCNO can nominate one person for each award.
- How to nominate: Nominations can be submitted at [online](#). Only nominations received by the due date will be considered. The strongest nominations include detailed responses that shed light on the nominee's qualities.
- How are recipients selected? Recipients are selected by the AMCNO Executive Committee.



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Attention Clevelanders!

We are looking for people who attended one of the AMCNO's Sabin Oral Sunday events in Cuyahoga County in 1962. 1.2 million people were vaccinated at these events, and we want to hear their stories!

Contact academyofmed@amcno.org if you recognize anyone in these photos or know someone who attended.

