

# Maryland Medicine

VOLUME 19 ISSUE 1



**Four Things You  
Need to Know NOW**

**Cover Story:  
MedChi Plays  
Offense and  
Defense This  
Session**

**The Importance  
of Physician  
Well-Being —  
Brooke Buckley, MD**

**Member Profile:  
Willarda Edwards,  
MD, MBA**



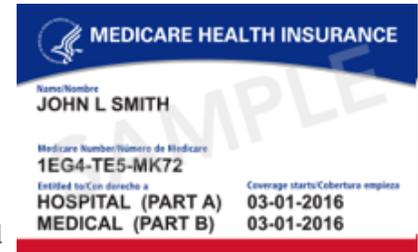
Medicaid ePREP portal.

## What You Need to Know Now

1. Beginning July 1, 2018, **Prescription Drug Monitoring Program (PDMP) Usage Requirements** go in to effect. For a summary of requirements and exemptions, visit <https://bha.health.maryland.gov/pdmp/Pages/pdmp-updates.aspx>.
2. **Medical Record Copy Fees** have changed: Preparation fee: \$22.88. Copying records of one or more pages in electronic format: 75 percent of the per-page fee not to exceed \$80.
3. **Medicaid** has a new on-line portal (ePREP) for providers to enroll and revalidate: <https://eprep.health.maryland.gov>.
4. **MedChi's 2018 Interim Meeting** (formerly known as the Spring House of Delegates Meeting) will be held on Sunday, April 29, 2018. Visit [www.medchi.org/HOD](http://www.medchi.org/HOD) for details and to register.

## New Medicare Cards Start Mailing in April 2018

The Center for Medicare and Medicaid Services (CMS) is removing Social Security Numbers from Medicare cards to prevent fraud, fight identity theft, and keep taxpayer dollars safe. CMS will mail the new Medicare cards from April 2018 through April 2019 by geographic location, with Maryland receiving cards April through June 2018. People will be able to check on the status of card mailings by visiting [www.medicare.gov](http://www.medicare.gov).



## AMA Podcast Series Helps Physicians Navigate Difficult Conversations

For many physicians, having difficult conversations with patients is a part of daily practice. That's why the **American Medical Association** recently launched a new podcast series, **AMA Doc Talk**, which features



physicians' eye-opening encounters with patients and their real-world solutions and insights. Inspired by research and feedback from physicians, topics range from talking with patients who don't heed your medical advice to helping patients manage the challenges of chronic disease. The interview-style series is hosted by Dr. Rajesh S. Mangrulkar, associate dean for medical student education, University of Michigan. The AMA invites you to listen to episodes of AMA Doc Talk, rate us and

subscribe at Apple Podcasts or Stitcher, or learn more here (<https://www.ama-assn.org/ama-doc-talk-podcast-series>).

## MedChi Teams Up with DrFirst and CRISP to Tackle the Opioid Crisis in Maryland

MedChi has joined forces with DrFirst to give Maryland prescribers a mobile tool to efficiently access Maryland's Prescription Drug Monitoring Program (PDMP) data from within the e-prescribing workflow. DrFirst, a Maryland-based leader in e-prescribing and medication management solutions, has developed iPrescribe<sup>SM</sup> as a mobile tool for prescribers to access the PDMP data displayed to health care providers by Maryland's state-designated health information exchange, CRISP, who operates the state's PDMP. iPrescribe is the first mobile medication management app that allows physicians to comply with the Maryland PDMP mandate. MedChi and DrFirst are making iPrescribe available to Maryland prescribers free for the first year. For more information, please visit <http://www.drfirst.com>.

## MedChi's Advocacy Team Plays Offense and Defense for Physicians and Patients

### From the President...

#### MedChi and Maryland General Assembly Focus on Opioid Epidemic

Gary Pushkin, MD, President, MedChi



In February 2017, MedChi's Opioid Task Force was created. As its chair, I invited physicians from various backgrounds, including pain management, addiction, family practice, and other specialties, to provide a balanced response to the opioid crisis. **The task force is working to establish a curriculum for Maryland physicians to teach safe opioid prescribing practices, how to recognize risk factors, and to recommend alternative, scientific-**

**ly based or evidence-based non-opioid treatments.**

The task force will work with Maryland's Governor and state legislature to advocate for policies that protect patients and physicians alike.

MedChi has collated materials including contact lists, operational materials (one-pagers), websites, and articles. To view these materials, visit <http://www.medchi.org/ending-opioid-crisis>.

As the death toll from opioid overdose has risen, addressing the issue has been a priority of government officials in Maryland. The General Assembly has considered literally hundreds of bills and measures, all of which MedChi has followed closely. On March 1, 2017, Governor Larry Hogan signed Executive Order 01.01.2017.02 declaring a State of Emergency in response to the heroin, opioid, and fentanyl crisis. That order is still in effect today. This declaration activates the Governor's emergency management authority and enables increased and more rapid coordination between the state and local jurisdictions. More details on the State of Maryland's actions to address overdose deaths can be found at [https://bha.health.maryland.gov/OVERDOSE\\_PREVENTION/Pages/Index.aspx](https://bha.health.maryland.gov/OVERDOSE_PREVENTION/Pages/Index.aspx).

If you have ideas on how MedChi can continue to work to address this public policy issue, please reach out to the opioid task force ([yshapiro@medchi.org](mailto:yshapiro@medchi.org)).

### Update of MedChi's 2018 Legislative Priorities

Sarah Merritt, MD, Co-Chair, MedChi Legislative Council

MedChi is fighting numerous bills on behalf of Maryland patients, physicians, and public health. Although the 2018 session is far from over, below is an update on the most pressing issues.

#### Medicaid Parity

Governor Hogan included \$17.6 million dollars in the budget to maintain Medicaid rates for the coming fiscal year. This amount is particularly notable as other provider reimbursement rates, such as developmental disability and community mental health providers and providers who contract with the Department of Human Services to care for children in out-of-home placements, were capped significantly below statutory mandates. MedChi is advocating that the proposed budget allocation for E&M code reimbursement for all physicians who care for Medicaid enrollees be retained. MedChi will continue to work towards the ultimate goal of restoration to 100 percent of Medicare rates in future years.

#### Tort Reform

The trial attorneys introduced three bills that would weaken Maryland's current medical malpractice laws (Senate Bill 5: Civil Actions — Punitive Damage Awards, Senate Bill 36: Civil Actions — Noneconomic Damages, Senate Bill 30: Health Care Malpractice Qualified Expert — Limitation on Testimony in Personal Injury Claims — Repeal), but Senate Bill 30 (House Bill 1581) is making headway. Current law precludes an expert who devotes annually more than 20 percent of their professional activities to testifying in personal injury cases. Senate Bill 30 (House Bill 1581) reverses the 20 percent rule, and threatens a return of the circumstances that caused the need for the 2004 Special Session and threatens access to care. The Senate recently voted to pass Senate Bill 30.



**AOG residents from Johns Hopkins meeting with Maryland State Delegate Kathy Szeliga.**

*Continued on page 13*



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## Marylanders Turn Out in Robust Numbers for Marketplace Health Coverage for 2018

A total of 153,571 Marylanders enrolled in private health coverage during the 2018 open enrollment for Maryland Health Connection (MHC), the state-based health insurance marketplace.

**In an open enrollment period that was about half as long as one year ago, average daily enrollment in qualified health plans was up 69 percent compared to the prior open enrollment.** An average of 2,953 people enrolled each day during the recent fifty-two-day period, compared to 1,752 average daily enrollments during a ninety-day enrollment period in 2017.

“We are thrilled by the robust turnout for 2018 coverage,” said Michele Eberle, Executive Director of the Maryland Health Benefit Exchange, which administers Maryland Health Connection. “Our hats are off to our call center, consumer assisters, and brokers who helped process roughly as many enrollments as last year during a much shorter open enrollment period. We believe the result will be better access and better health outcomes for Maryland families.”

A year ago, 157,637 enrolled in private Qualified Health Plans during a ninety-day open enrollment that ran from November 1, 2016, to January 31, 2017. The recent open enrollment for 2018 ran from November 1 to December 22, 2017. MHC marketing was amplified by community stakeholders who helped spread the message about open enrollment across social media and other channels.

Maryland’s percentage of residents without health insurance is at a historic low of 6.1 percent, according to the U.S. Census Bureau. Before the Affordable Care Act of 2010, an estimated 745,000 Maryland residents lacked insurance. Since then, more than 400,000 Marylanders have gained coverage through MarylandHealthConnection.gov.

## Federal Government Agrees to Extension of Maryland’s All-Payer Hospital Model

Governor Larry Hogan, together with the Maryland Department of Health and the federal Centers for Medicare & Medicaid Services (CMS), announced an extension of Maryland’s All-Payer Hospital Model Contract through December 2019. The extension will not affect existing contractual terms and will ensure continuity for Maryland patients and providers.

“This is a significant win for Maryland’s health care delivery system, and the direct result of the tireless advocacy on behalf of all Marylanders by Secretary Dennis Schrader and his team,” said Governor Hogan. “Our administration is committed to working with our federal partners to ensure we continue to lead the nation when it comes to innovation in health care access and affordability for our citizens.”



Executive Office of the Governor.

**The model limits cost shifting by various health care payers, including Medicare, and protects the individual consumer. It also addresses primary care and allows for greater coordination among the medical community. The model enables the state and provider communities to collaborate on critical health care issues, including opioid use, diabetes, hypertension, and other chronic conditions. This collaborative approach draws on a strong partnership with key players in Maryland’s health system — hospitals, payers, physicians, long-term care providers, and regulatory agencies, along with state and federal partners.**

“This extension reflects the Hogan administration’s continual commitment to improving health care quality while reducing costs. We look forward to working with CMS to finalize the new Maryland Model, which will extend our efforts beyond hospitals to serve even more Marylanders,” said Maryland Department of Health Secretary Dennis Schrader.

In an interview with *The Washington Post*, MedChi CEO Gene Ransom called the extension “a nice win” for Maryland.

### EDITORIAL STATEMENT

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## CONSULTATIVE INSURANCE REVIEW

*Med Chi Insurance Agency was established in 1975 “by physicians for physicians” to satisfy the needs of doctors and medical practices.*

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- Workers Compensation
- Medical Office Insurance
- Employment Practices Liability
- Directors & Officers Liability
- Privacy/Data Breach Coverage
- Bonds (Fiduciary/Fidelity/ERISA)

#### **Personal:**

- Life Insurance
- Disability (Individual/Pension/  
Business Overhead)
- Annuities
- Long Term Care
- Estate Planning/Retirement Planning
- Auto/Homeowners/ Umbrella Coverage

## Cecil County Medical Society: “Top 10 Things Physicians Need to Know”

Brian C. De Muth, MD, President of the Cecil County Medical Society, presided over a Continuing Medical Education (CME) Presentation —“The Top Ten Things Physicians Need to Know”—for the physicians and prescribers of Cecil County. Colleen George, Director of MedChi’s Center for the Private Practice of Medicine, delivered the presentation to a large group of physicians and prescribers, at the Union Hospital of Elkton, Maryland. Also present was MedChi’s newest team member, **Angela Paolantonio, Executive Director of the Cecil County Medical Society.** A lively discussion ensued after the presentation. Those in attendance receive one credit of CME and a lot of information to take back to their practices.

## Center for a Healthy Maryland’s Certificate Program in Physician Leadership Provides Practical Skills and Tools

The Center for a Healthy Maryland, an affiliate of MedChi, offers a certificate program in physician leadership that provides physicians with practical leadership skills and tools applicable to any practice environment.

This is a unique, hybrid program in which physicians participate in an online virtual classroom where they complete four online courses and attend one live session taught by Johns Hopkins professors, Paul Gurny, MBA, and David Joyce, MD, MBA. Students earn fifteen CME credits and receive a certificate upon completion of the program. Courses include: Quality Leadership for Physicians; Practical Tools for Positive Change; Leading for Improvement; and The Business of Leadership.

More than sixty physicians have already enrolled in the program to date. Registration for the Spring 2018 Certificate Program in Physician Leadership is now open. The next class begins on April 12, 2018. Registration fees for MedChi members are \$295.00 and \$595.00 for non-members. Registration can be completed online or by contacting the Center (410.539.0872, 1.800.492.1056; email center@medchi.org). For more information, please visit [www.healthymaryland.org](http://www.healthymaryland.org).

## Montgomery County Medical Society Initiates Foundation to Offer Counseling to Physicians Suffering From Stress and Burnout

In a 2014 study conducted by Mayo Clinic & the AMA, **54.4 percent of physician respondents indicated they were exhibiting at least one symptom of burnout.** In the Montgomery County Medical Society (MCMS) 2016 Physician Practice Survey, 53.7 percent of physician respondents indicated they are experiencing moderate to high levels of burnout. Seventy physicians indicated they would use an early intervention, confidential, no-cost physician counseling service if offered.

Survey responses led MCMS to initiate the formation of The National Capital Physicians Foundation (NCPF), which is a 501(c)3 educational and charitable tax-exempt foundation. **The organization’s first initiative is dedicated to physician health and well-being: Healthy physicians = healthy communities.**

Initial efforts of the National Capital Physicians Foundation are focused on development of PRN, the Physicians’ Resources Network, which has initiated a physician well-being program. The program includes confidential counseling provided by MSWs and PhD psychologists. Modeled after a successful physician counseling program in Eugene, Oregon, this service is now available to all physicians who are practicing in Montgomery County. NCPF President, Robert B. Karp, MD, said, “We anticipate broadening the availability of counseling services to additional physicians throughout the National Capital area as funding is received.” At present, PRN funds three visits with therapists who have residence-based practices.

Physician stress is increasing. In MCMS’s 2017 survey, the percentage of physician respondents indicating moderate to high levels of burnout went from 53.7 percent to 62.5 percent. Louis Ari Kopolow, MD, the Medical Director of PRN, indicated, “The Foundation’s program is focused on early intervention long before impairment or suicide, and it has worked cooperatively with The Center for a Healthy Maryland’s Physician Health Program in its development.”

The program could serve as a model for the rest of the state. While education and awareness is important, PRN is a direct way to help physicians learn resilience and personal and professional balance. To learn more about the program or to make a tax-deductible donation, contact PRN at 301.921.4300, ext. 300, or go to [www.dedicatedtohealth.org](http://www.dedicatedtohealth.org).



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ENS allows ambulatory providers, care coordinators, and others responsible for patient care to receive real-time alerts when patients visit a hospital, ambulatory practice, or post-acute care facility.

- Proactively coordinate your patients' care and schedule any necessary follow-up treatment or visits
- ENS receives feeds from all Maryland, DC, Delaware, and some Northern Virginia hospitals, as well as numerous long-term care facilities and ambulatory practices



## **Clinical Query Portal**

The CRISP clinical query portal is a web based tool to access your patient's clinical data through the HIE.

- Contains clinical data from all Maryland and DC acute care hospitals, and a number of ambulatory care practices
- Physicians, licensed health providers, care coordinators, and support staff can have access to query patients they are treating or have a care coordination relationship with and view clinical data
- Access patient demographics, lab results, radiology reports, discharge summaries, history and physicals, operative notes, and Continuity of Care Documents (CCD)



## **Prescription Drug Monitoring Program (PDMP)**

The Maryland Prescription Drug Monitoring Program gives you access to prescription information for all Schedule II-V drugs filled in Maryland and Virginia.

- Available inside the Clinical Query Portal
- Prescribers, Dispensers, & other Licensed Staff may have access
- View interstate PDMP data for neighboring states

For more information and to sign up for any of these

## **CRISP User Services**

contact MedChi at **888.507.6024** or

email [info@medchiservices.org](mailto:info@medchiservices.org).

## Personal Perspective: The Art of Balancing

*Brooke Buckley, MD*

A balanced life is simultaneously essential and unattainable. So many of us see balance as a destination, someplace static, like weights on a scale. Balancing life feels like anything but a consistent errand. The complex grind of modern adulthood offers only momentary lulls in a constantly fluxing daily routine. While it is unwise to expect daily consistency as a balance strategy, the frantic quest for calm often demands this absurd conclusion. How do we solve the balance riddle?

**Life's only constant is inconsistency.** Navigating dynamic days, staying afloat on stormy seas, is the path to a balanced life. Life, as with any journey, without planning and attention to detail, suffers frustration and unhappiness—the predictable disappointment of randomness and lost opportunity. As for balance, inner reflection and action consistent with values is a winning strategy.

Clarity around present state is best derived from inward reflection. Blinded to all but my current reactive state, I have little chance to forge a better outcome. If every time I arrive late for work, my staff and patients are unhappy, but I fail to recognize that I am late and possibly don't even know when clinic started, I should always expect this same stressful outcome. It takes humility to look critically at our personal situation. Accepting the discomfort of self-awareness and evaluating roots and causes is a reliable path to improving our circumstance by evolving behavior patterns.

After reflection as to what is going on, the next is why. An honest inventory of the thoughts and actions that bring us joy allows planned adjustment to bring about balance. If all my walls are yellow and I am not aware that I don't like yellow, I will never think to change the color to a more soothing hue. Awareness of values brings about the ability to rank order and evolve actions in alignment with balance goals.

Finally, the how: what steps must I take to align my life with my values? If I have unrealistic goals, minor daily nuisances become major stressors. If I want to be home by 3:00, but my last patient is scheduled for 2:45; I will

never meet my goal. Further, if a patient arrives ten minutes late, it may set off a chain of events, including yelling at the office staff, being abrupt with the patient, and worse, a lapse in judgement leading to medical error. Alternatively, a goal of being home one hour after the last scheduled patient may be more attainable. Small steps create space to take larger steps; the journey of balance can become not only realistic but enjoyable.

Clarity on passion, triggers, strengths and weaknesses, and reflection on our daily grind are essential. This presence-of-mind is mindfulness. Setting goals and boundaries create guardrails that allow for repeated success. As I jump from surgeon, to wife, to adult daughter, to administrator, to mother, to friend, all the while being an imperfect human, the hard work of understanding and being mindful has led to a place where riding life's waves is curiously enjoyable. The beauty of balance is in the art of the balancing.

*Brooke Buckley, MD, FACS, is Associate Chair of Surgery for professional development, Anne Arundel Medical Center, and Medical Director of Acute Care Surgery. Dr. Buckley can be reached at [bbuckley@aaahs.org](mailto:bbuckley@aaahs.org).*





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## MedChi's Newest Physician Members

*MedChi welcomes the following new members, who joined between October 2017 and January 31, 2018.*

Heidi Abdelhady, MD — St. Agnes Healthcare  
 Jeffrey T. Allgaier, MD — Ideal Option, LLC  
 Gina M. Ambrose, DO — Doctors Emergency Service, PA  
 Shivangi Amin, MD — Green Health Docs  
 Meenakshi Andrew, DO — Potomac Physician Associates, PC  
 William W. Ashley, MD — Sinai Hospital  
 Pamela M. Aung, MD — Levindale Geriatric Hospital  
 Babajide T. Ayanleye, MD — First Colonies Anesthesia Associates  
 Mirza A. Baig, MD  
 Sharon L. Baucom, MD — Department of Public Safety and Correctional Services  
 Christopher Bibbo, DO — Sinai Hospital Rubin Institute  
 Mark S. Blum, MD — Sinai Hospital  
 David Blumberg, MD — Sinai Hospital Leadership  
 Eric J. Buchner, MD — Sinai Hospital  
 Marc A. Callender, MD — Doctors Emergency Service, PA  
 Yvonne M. Carter, MD — Sinai Hospital  
 Herlene Chatha, MD — Doctors Emergency Service, PA  
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 Beth M. Comeau, MD — Beth Comeau, MD, LLC  
 James E. Conway, MD — Baltimore Neurosurgery and Spine Center  
 Brian J. Dawson, MD — Ideal Option, LLC  
 Jeanne H. DeFeo, MD — Doctors Emergency Service, PA  
 Andrew Donelson, MD — Frederick Internal Medicine & Endocrinology Services  
 Mark P. Downey, MD — Tidewater Anesthesia Assoc., PA  
 Katherine E. Duncan, MD — MD Eye Care  
 Jacquelyn Dunmore-Griffith, MD — Associates in Radiation Medicine  
 Daniel J. Durand, MD — Sinai Hospital  
 Kenneth J. Egli, MD — Ideal Option, LLC  
 Obinna M. Ego-Osuala, MD — Edge Medical Care PC  
 Elliott Exar, MD — Pulmonologists, PC  
 Patrick O. Fasusi, MD — Premier Surgery Center  
 Abbie L. Fields, MD — Sinai Hospital  
 Beverly A. Fischer, MD — Beverly A. Fisher, MD  
 Lauren M. Fitzpatrick, MD — Doctors Emergency Service, PA  
 William C. Forsythe, DO — Ideal Option, LLC  
 Betina L. Franceschini, MD — Doctors Emergency Service, PA  
 Carter B. Freiburg, MD — Vascular Surgery Associates, LLC

Seth M. Garber, MD — Potomac Physician Associates, PC  
 Raymond W. Gathiuni, MD — First Colonies Anesthesia Associates  
 Angela L. Gibbs, MD — Berlin Family Medicine  
 William E. Gunn, MD — Berlin Family Medicine  
 Annette L. Hanson, MD — Clifton T. Perkins Hospital Center  
 Tamara L. Hayes, MD — First Colonies Anesthesia Associates  
 Sarah Hsu, MD — Maryland Laser Skin and Vein Institute  
 Charles E. Illiff, MD — Doctors Emergency Service, PA  
 Tonasha A. Johnson, MD — Kim A. Kelly, MD, PC  
 Bruce E. Jones, MD — North Point Retina  
 Candice E. Jones-Cox, MD — Women's Health Specialists of Montgomery County  
 Andrea C. Karp, MD — Potomac Physician Associates, PC  
 Mark R. Katlic, MD, F.A.C.S. — Sinai Hospital  
 Elizabeth L. Kenez, MD — Doctors Emergency Service, PA  
 Allison L. Kirk, MD — Doctors Emergency Service, PA  
 Daniel Kirsch, MD — Carroll Hospital Center  
 John R. Klune, MD — University of Maryland Medical Center  
 Matthew B. Kuehn, MD — Doctors Emergency Service, PA  
 Jonathan Lowenthal, MD, C.MD — Calvert Internal Medicine Group  
 Joanna S. Macapinlac Delaney, DO — Potomac Physician Associates, PC  
 Kevin M. Macready, MD — Doctors Emergency Service, PA  
 Vrinda Mahajan, MD — Drs. Hecht, Bass, Schwartz and Hila, PA  
 Susan Mani, MD — Northwest Hospital  
 John O. Meadows, MD — Peninsula Gastroenterology Associates, PA  
 Tia R. Medley, MD — Franklin Square Pediatrics  
 Andrew S. Mener, MD — Maryland Oncology Hematology, PA  
 Nicole L. Merritt, DO — Chesapeake Pediatrics  
 Mark Mollenhauer, MD — Spring Grove Hospital Center  
 Joselito S. Navaleza, MD — MidShore Surgical Eye Center  
 Daniel B. Paluchowski, MD — Doctors Emergency Service, PA  
 Martin I. Passen, MD — Crossroads Weight Management, LLC  
 Kyle Petersen, DO — Occupational Health Consultants  
 Adrian L. Preston, MD — Cardiovascular Specialists of Central Maryland

*Continued on page 12*

## Member Profile: Willarda V. Edwards, MD, MBA

*In each issue, we will profile a notable MedChi physician member. In this issue, we recognize Willarda V. Edwards, MD, MBA, past president of MedChi and now serving on the AMA Board of Trustees.*



Willarda V. Edwards, MD, MBA, is an internist and has been in private practice in Baltimore for more than thirty years. She has been active in organized medicine her whole career. Dr. Edwards has served in the American Medical Association House of Delegates for nearly two decades and in June 2016 was elected to the AMA Board of Trustees. Upon her election, she donated her first year AMA honorarium to the Center for a Healthy Maryland to establish the Willarda V. Edwards, MD, Fund for AMA Scholarships to support a resident or student planning to attend an AMA meeting.

Dr. Edwards has more than thirty years of clinical practice and is a past president of the National Medical Association, the Maryland State Medical Society and the Baltimore City Medical Society. She has also served as president and chief operating officer of the Sickle Cell Disease Association of America Inc., and as the national health advocacy director for the National Association for the Advancement of Colored People.

A graduate of the University of Maryland School of Medicine, where she also held the position of assistant dean of student and faculty development, Dr. Edwards completed her internal medicine residency at the Greater Baltimore Medical Center. She is a fellow of the American College of Physicians and received her MBA from Loyola College of Baltimore. Dr. Edwards retired from the U.S. Navy Reserves at the rank of commander after twenty-four years of service, which included active duty at the U.S. Naval Academy and the Walter Reed National Military Medical Center.

Dr. Edwards has been recognized for her civic engagement with multiple awards, including being named one of Maryland's Top 100 Women. Today, in addition to maintaining her clinical practice, she also serves on the board of the Medical Mutual Liability Insurance Society of Maryland, the Food and Drug Administration's Blood Products Advisory Committee, and the Health Services Cost Review Commission's Advisory Committees.

## *New MedChi Physician Members continued...*

- James P. Prevas, MD — Doctors Emergency Service, PA  
Farheen Qurashi, MD — Sinai Hospital  
Maria Martha C. Raymundo, MD — Baltimore Medical and Surgical Associates  
Sudheer C. Reddy, MD — Shady Grove Orthopaedics Associates  
Celine A. Richardson, MD — Sinai Hospital  
Gerard D. Santos, MD — Somnus Sleep Center  
Prasad V. Savana, MD — Aditya Chopra, MD, PC  
Elizabeth C. Sequeira, MD — Discovery Wellness Center  
Sameer Shaik-Abdul, MD — Vel Natesan MD, PA  
Ehab M. Shalaby, MD — Maryland Pain & Spine Associates  
Showieb Shuja, MD — Chesapeake Women's Care, PA  
Gurtej Singh, MD — Orthopaedic Associates of Central Maryland  
Monique Soileau-Burke, MD — The Pediatric Center, LLC  
Justine Somoza, MD — Chesapeake Women's Care, PA  
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Tyler S. Thompson, MD — Potomac Physician Associates, PC  
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Petra Vaclavkova, MD — Doctors Emergency Service, PA  
Mariles Vilorio-Grageda, MD — Sinai Hospital  
Christopher A. Wagner, MD — Spring Grove Hospital-Center  
James Warson, MD — Medeval  
Lawrence D. White, MD — MedStar Medical Group  
Matthew S. Wolins, MD — SimplySlim Medical LLC  
Vincent P. Wroblewski, MD — Vincent P. Wroblewski, MD, PA.  
Lingxiang Ye, MD — Sinai Hospital  
Jennifer Y. Yoon, MD — Allergy and Asthma Center

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**A first-floor fully furnished, busy medical office** with reception area, lab, provider offices, and kitchenette. The office is available part-time and located in the Bowie/Glenn Dale area. The multi-specialty office complex is professionally owned and managed with ample parking and an onsite pharmacy. Convenient to Routes 50, 301, Metro, Bowie Health Center, Doctors Community Hospital, and AAMC. For more information, please contact Chase Nicols at [cnichols@priviamedicalgroup.com](mailto:cnichols@priviamedicalgroup.com), or call 301.860.1200.

Cover Story: MedChi's Advocacy Team continued...

### Scope of Practice

MedChi is opposing three scope of practice bills this Session. Senate Bill 698 (House Bill 863) greatly expands the scope of practice for nurse anesthetists, while House Bill 1296 proposes that therapeutically certified optometrists be allowed to perform additional responsibilities. Finally, the podiatrists are attempting to usurp the term "physician," through House Bill 1430, which requires podiatrists to be called "podiatric physicians."

For the most updated Legislative Newsletter, please visit <http://www.medchi.org/Law-and-Advocacy/Legislative-Council>.

### Rural Health Delivery Work Group Proposals Being Considered by General Assembly

The Maryland General Assembly is considering several issues proposed by the Rural Health Delivery Work Group Report (Transforming Maryland's Rural Health Care System: A Regional Approach to Rural Health Care Delivery). **The Work Group recommendations can be placed into three categories. The first category of recommendations addresses the establishment of a rural health collaborative and a rural community health demonstration program.** The second category recommends establishing rural primary care residency and rural specialty care residency rotation programs, expanding telehealth and mobile capacity, and streamlining M-LARP (Maryland Loan Assistance Repayment Program), among other strategies. The last category involves establishing a special rural community hospital as well as charging the Community Health Resources Commission with incubating pilot projects in rural communities.

The Work Group specifically recommended legislation for M-LARP streamlining, sustainable funding for rural mobile integrated health, and a rural health scholarship program. MedChi had several representatives on the state-appointed committee, including Richard Colgan, MD, and MedChi CEO Gene Ransom, III. The Work Group was created based on concerns about the future of Chester River Hospital in Chestertown.



*Have You Ever...*

- Noticed while at work that a physician colleague smelled of alcohol?
- Been concerned by a physician who was so upset and angry with colleagues that it interfered with patient care?
- Been plagued with worry or concern because a colleague "just doesn't seem right?"

*Do You Know Where To Turn If...*

- You think a physician friend might have a drinking problem?
- A colleague is self-prescribing pain-killers or other controlled medications?
- A colleague seems depressed, is experiencing mood instability, or is overly anxious to the point that their performance is being affected?

# MPHP

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For more information and/or a confidential consultation for you or a colleague who may benefit from our help, please call **800-992-7010** or **410-962-5580**.

**MedChi**  
The Maryland State Medical Society

Center for a  
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### Paul Walker

IPA Development  
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(678) 938-9006

## MedChi Moment in Time

Marcia Noyes, MedChi's librarian from 1896 to 1946, was ahead of her time. Women in the United States only received the right to vote in 1920, but she was driving her little "doctor's coupe" by that time. Here it is parked in front of MedChi's Baltimore headquarters building, superimposed over a picture of the building today.



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## Events

For a complete list of MedChi and component events, visit <http://www.medchi.org/Events>.

### **April 11 & 19**

Montgomery County Medical Society Physician Collegiality Dinners. Karissa Miller, 301.921.4300.

### **April 21**

Baltimore City Medical Society CME Program, 8:00 a.m. MedChi Office Osler Hall, 1211 Cathedral St, Baltimore. Lisa Williams, 410.625.0022.

### **April 29**

MedChi House of Delegates Meeting. Arundel Preserve Hotel, 7795 Arundel Mills Blvd, Hanover, MD. Cathy Johannesen, 410.539.0872, ext. 3308.

### **May 3**

Montgomery County Medical Society Women in Medicine Members Event. Karissa Miller, 301.921.4300.

### **May 5**

Baltimore City Medical Society CME Program, 8:00 a.m. MedChi Office, Malouf Board Room, 1211 Cathedral St, Baltimore. Lisa Williams, 410.625.0022.

### **May 5**

Baltimore City Medical Society President's Gala, 6:00 p.m. Lisa Williams, 410.625.0022.

### **May 9**

Joint CME Event with Baltimore City Medical Society & Montgomery County Medical Society, hosted by Baltimore County Medical Association. Sheppard Pratt, 6501 North Charles St, Baltimore. Patricia Keiser, 410.296.1232.

### **May 10**

Baltimore City Medical Society & Monumental City Medical Society CME Program (Legislative Wrap Up), 6:00 p.m. Lisa Williams, 410.625.0022.

### **June 3**

National Capital Physicians Foundation & Montgomery County Medical Society Corks & Forks for a Cause & Installation of MCMS Officers. Rocklands Farm & Winery, 6:30–9:00 p.m. Karissa Miller, 301.921.4300.