2024 Legislative Priorities

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Take a moment to recall your transition from medical student to resident physician. There was a feeling of immense accomplishment and independence, simultaneously tempered with apprehension and uncertainty. The enormity of the reality and responsibility settling on our shoulders justifiably gave us pause. On an even loftier scale, that experience repeated several years later when newly minted attending physician replaced our preceding resident physician status.

The evolutionary changes of our positions in the medical community ran largely in tandem with other equally hefty, life-shaping decisions. Financial, family, and other significant life-defining choices frequently arrived abruptly, and suddenly being an “adult” held new meaning. While those years in retrospect may be a bit hazy in memory from the daunting pace at which life seemed to move, still, somehow, it all worked out and often because we had help along the way.

Transitions are always challenging; challenges though present opportunities. From medical student to attending physician, the multi-step transitions from academic and theoretical learning to real-world practice with real-world consequences evolved as our medical community role evolved. I would contend that the ascent from resident physician to new attending physician is perhaps the most challenging. At this stage one must now appear to be certain of decisions as patients, staff and other physicians expect confident guidance.

From this point forward new attending physicians also more fully experience the growing complexity of related industry groups managing separate agendas, all impacting our ability to provide optimal patient care. Corporate-directed health care, practice administration, insurance company intrusions and significant government regulation transpire to divide our focus from patient care, the singular objective that led us into medicine and to which we devote so much of our lives. The “education” continues as these new attending physicians develop practices competencies, interacting with other physicians in interdisciplinary, complex patient care. Interprofessional collaboration and cooperation are crucial to enable mutual learning, enhance effective teamwork and strengthen access to resources.

From exam rooms to surgical suites, community clinics to corporate board rooms, caring for our patients necessitates our attention span an array of concerns on an ever-changing, ever-challenging medical landscape. Many of these focal areas are not taught in any substance through residency, and, whether we’ve been in practice one year or over 20, we should recognize that our education never truly ends. Physician mentoring benefits all physicians and should play a more integral part in building a stronger, more cohesive Tennessee medical community. Before balking, claiming the demands on your time are already excessive, please consider the investment a small amount of time can make.

Mentoring can take on many forms and the time requirement may be merely what it takes to consume an occasional cup of coffee. Conversations should not be limited to medical practice and patient care either. Consider personal finance, banking, investments and other life-influencing issues that can provide insights from practical experience, successes and hard lessons learned. Listening to our younger colleagues who are not as entrenched in our “norms” may help us rediscover the fervor we had for medicine in our early practice years and aid in discovering new approaches as to how the medical community can reengage to better serve our patients – our common goal at every age and stage of practice.

Keeping our head “on a swivel” is requisite for new attending and well-established physicians alike. It is rare that changes to our lives and profession occur only linearly, head on, at a measurable pace with advanced warning. Whether newly transitioned attending physicians or seasoned physicians relocating to Tennessee from elsewhere, it is imperative we introduce these colleagues to the Tennessee Medical Association and ensure they are aware of both TMA’s benefits and its committed role of protecting the practice of medicine here in the place we call home.

It is a reality of particular importance that we work more closely with our newer colleagues. The decisions we make and the foundations those decisions create will shape and impact their practices longer into the future than those of us 20 years into our practice. TMA’s future leaders, those protecting the state of medicine in our state for future physicians and their patients, will also come from this physician group. The cycle repeats; we all have experienced it. In West Tennessee where I practice, our TMA component society held its annual meeting in late April. I was pleased to see one of my early physician mentors attending and I was exultant when he observed and pointedly remarked that the average attendee age at this gathering had decreased by well over a decade. The dedicated work of many area physicians and the concerted efforts of our component society staff are the catalyst for that change and the result is a healthier, stronger West Tennessee medical community.
I very much want every area of Tennessee to experience a similar shift in participant age, reaching a more balanced representation. Why? More active and robust medical communities across Tennessee serve to strengthen and positively enhance TMA and result in a healthier Tennessee with physicians practicing in improved, empowered environments optimally serving our patients.

All physicians can become valuable mentors. So, take a minute and look around you to identify a younger physician, medical student, or recently relocated colleague who would benefit by having you as a sounding board and resource, then start a conversation. When the time is right, include TMA in your discussions. If you are a younger physician, for example, get vocal and ask for some input on whatever is dynamic in your life from a more senior physician who resonates with you.

All physicians and patients will benefit from the insights that are mutually gained in a stronger, healthier Tennessee.

Andrew Watson, MD | 2023-2024 TMA President

John Ingram Institute for Physician Leadership Honors 2023 Graduating Class

The 2023 John Ingram Institute for Physician Leadership (JII) programs concluded in July with 18 new graduates. The JII features two offerings: the Leadership Immersion program and Leadership Lab program.

Physicians from across the state enrolled in the 2023 Leadership Immersion class, which included Barbara Dentz, MD, Lauren Havrilla, DO, Jonathan Hughes, MD, Dontal Johnson, MD, Trey Lee, MD, Ana Nobis, MD, Dominic Papa, MD, Michael Riker, MD, Leslie Treece, MD and Nathaniel Whaley, MD (bottom photo). This year’s Leadership Lab included Chetan Aher, MD, Kanika Bagai, MD, Sarah Essary, MD, Lara Harvey, MD, Harish Manyam, MD, Pamela Sanders, MD, Daniel Sherwood, MD and Allison Umfress, MD (top photo).

“TMA placed a priority on identifying and cultivating new physician leaders over 12 years ago,” said TMA Chief Executive Officer Russ Miller. “This program continues to pay huge dividends for TMA, the physicians and society as a whole. The John Ingram Institute fortifies physicians with the skills they need to drive change within their individual careers and practices.”

These programs are made possible thanks to a generous grant provided by The Physicians Foundation, which covers approximately 80-90% of the cost of these offerings. TMA is now accepting applications for the 2024 programs at tnmed.org/leadership.

Recap of the 2023 Board of Trustees Retreat and Quarterly Meeting

TMA’s Board of Trustees met for its annual retreat July 14-16 in Knoxville. The board invested time in team-building activities and approved the TMA legislative agenda. Priorities will include Scope of Practice, Physician Wellness, Insurer Clawbacks and Assault on Healthcare Professionals (more on Page 4).

Visit tnmed.org/news for the full recap.
TMA Introduces 2024 Legislative Priorities

TMA’s legislative committee has identified the top four issues on which it will focus during the second session of the 113th General Assembly, which begins Jan. 9. Tennessee physicians are encouraged to help advance these policy priorities by engaging in legislative advocacy.

2024 TMA Legislative Priorities

Scope of Practice: TMA has worked to preserve the formal relationship between physicians and advance practice providers to ensure patients receive the highest quality of care possible. Unfortunately, these same professionals have actively lobbied to practice without physician oversight, potentially placing patients at risk. TMA, along with its multi-specialty partners in the Coalition for Collaborative Care (CCC), will continue to promote the team-based care model as the most effective solution for Tennessee patients.

Physician Wellness: Career fatigue among physicians has risen dramatically since the Covid-19 pandemic, with nearly 63% reporting at least one symptom of burnout in 2021. These feelings have been linked to lower productivity and patient satisfaction, increased risk for medical errors, and even suicidal ideation. TMA is working to prioritize physician well-being by removing stigmatizing questions on licensure, renewal, and credentialing applications which may serve as barriers to seeking routine mental health treatment.

Insurer Clawbacks: Health insurers often attempt to recover payments made to physician practices well after a service is rendered. Recoupments for these inaccurate payments can occur up to 18 months after the claim was duly adjudicated by the health plan and initial payment was received. These recovery efforts require physicians and their staffs to revisit claims that unfortunately were not paid correctly the first time, greatly increasing administrative costs while unjustly enriching health plans.

TMA will work to reform audit and overpayment protocols to prohibit health plans from recouping inappropriate amounts of adjudicated claims and place specific requirements on overpayment recovery processes, including advance overpayment notification, payment transparency, due process rights, and clawback time limits.

Assault on Healthcare Professionals: Since the onset of the Covid-19 pandemic, medical professionals have experienced an increase in workplace violence which has resulted in assault and even death. This not only causes physical and psychological injury for healthcare workers, but it creates an unsafe environment that makes it more difficult for doctors and other clinical staff to provide quality patient care. While Tennessee currently has legal protections for assaults committed against first responders and nurses, TMA believes these protections should be extended to physicians as well. Ensuring offenders are appropriately punished for violent behavior will help deter aggression in the medical setting.

These priorities, recommended by the TMA legislative committee, and approved by the TMA Board of Trustees, will guide TMA’s advocacy team. Now more than ever, active involvement from physicians across the state is needed on Capitol Hill. Tennessee State Senator and TMA member Dr. Richard Briggs recently weighed in on the importance of physician involvement.

“Awareness and participation in the debate of issues affecting physicians’ practice of medicine is vital to our profession’s future,” said Dr. Briggs. “Never has the adage been truer, ‘if you’re not at the table, you may be on the menu.’”

Your engagement and contribution to TMA’s advocacy efforts can have a huge impact on Tennessee’s practice environment. The simplest, yet most effective way of getting involved is by joining TMA’s political action committee. TMA PAC works to elect candidates to public office who are supportive of physician issues and healthcare reform.

“We need all hands on deck,” said Dr. Turney Williams, a Johnson City anesthesiologist and chair of the TMA legislative committee. “Tell your fellow physicians to join TMA, support TMA PAC and get to know your local legislators. We need all the friends and influence we can generate to support organized medicine in Tennessee.”

For a full view of the value of TMA PAC, check out the 2022-2023 TMA PAC Donor Report at tnmed.org/tmapac.

TMA’s Doctor of the Day and Day on the Hill programs are also excellent opportunities for Tennessee physicians to interact with legislators. Doctor of the Day allows for a physician to join TMA’s lobbyists on Capitol Hill each week during session to advocate on a topic of his or her choice. TMA’s Day on the Hill brings physicians from across the state together to amplify the voice of organized medicine. Opportunities like these are vital in forging relationships with lawmakers that result in meaningful change. The future of medicine in Tennessee relies upon all physicians working together. Strength in numbers will not only improve the chances of a successful 2024 session, but will promote effective legislative efforts for years to come.

Learn more about and donate to TMA PAC at tnmed.org/tmapac. Learn more about TMA’s Day on the Hill or register to serve as Doctor of the Day at tnmed.org/grassroots.
American Medical Association Study to Document Changes in Physician Practice Expense

The American Medical Association (AMA) has undertaken a new national study, supported by 173 healthcare organizations, to collect representative data on physician practice expenses. The aim of the Physician Practice Information (PPI) survey is to better understand the costs faced by today’s physician practices to support physician payment advocacy. It provides an opportunity to communicate accurate financial information to policymakers, including members of Congress and the Centers for Medicare & Medicaid Services (CMS). The AMA has contracted with Mathematica, an independent research company with extensive experience in survey methods as well as health care delivery and finance reform, to conduct the study.

IN MEMORIAM

We offer our prayers and deep gratitude for all passing members. Their positive impact on their patients and profession will last forever.

- Philip Bagnell, MD, age 81, of the Washington-Unicoi-Johnson County Medical Society on July 15, 2023.
- Alva Bethurum, MD, age 79, of the Williamson County Medical Society on June 4, 2023.
- Steve Coulter, MD, age 72, of the Chattanooga-Hamilton County Medical Society on June 24, 2023.
- John Emmett, MD, age 80, of The Memphis Medical Society on June 2, 2023.
- Ted Flickinger, MD, age 95, of the Blount County Medical Society on March 12, 2023.
- Ronald Hubbard, MD, age 83, of The Memphis Medical Society on July 7, 2023.
- Benjamin Mauck, MD, age 43, of The Memphis Medical Society on July 11, 2023.
- Jose Rivero, Jr., MD, age 57, of the Upper Cumberland Medical Society on May 13, 2023.
- Bobby Smith, MD, age 89, on June 5, 2023.
- James Snell, Jr., MD, age 89, of the Nashville Academy of Medicine on July 3, 2023.
Convenience and Peace of Mind Offered Through TMA’s MATE Act Education Course

Congress passed the Medical Access and Training Expansion (MATE) Act in 2022 to provide structure and training for the treatment of patients with an opioid use disorder. In response, the Drug Enforcement Administration (DEA) began requiring prescribers renewing their DEA license to attest to the completion of eight hours of education on treating and managing patients with substance use disorders. Prescribers already work under increasing amounts of requirements. However, with the DEA, a division of the U.S. Department of Justice, involved, this is not a requirement prescribers should take lightly.

TMA provides a solution for prescribers who do not meet an exception and seek a course that will cover the requirement without any question as to whether or not they will find themselves in good standing. TMA’s MATE Act Education course is the only course TMA is aware of that meets both the DEA’s renewal and the Tennessee Board of Medical Examiners’ (BME) continuing medical education (CME) requirements. Content developers consulted with the DEA to ensure prescribers who take this course mitigate any risk of non-compliance. TMA worked with Clinical Care Options (CCO), an accredited CME provider, to bring this education to Tennessee prescribers, and the course is endorsed by 13 partner healthcare societies and organizations.

“This course is designed to be convenient and as beneficial as possible to practitioners,” said Thomas Sullivan, CCO’s Senior Vice President of Educational Strategy, Multi Specialty. “Not to mention, if a prescriber practices in multiple states, this course covers them in most states as well.”

Without completion, practitioners will not be able to lawfully renew their DEA licenses. While certain other CME hours can be accepted for compliance, not all may be acceptable, and prescribers will have to endure the tedious task of organizing and confirming CME records. Both TMA and CCO want to remind prescribers that falsifying completion or records of CME hours on a DEA license application can result in severe penalties, including up to four years in prison and a fine of up to $250,000.

The course is designed to give prescribers peace of mind and assurance that they are covered when it comes to the requirements enacted by the MATE Act. Practitioners are already raving about the course.

“The information was well laid out and easy to follow. Thanks for including AAFP hours, well done.”
-Bristol family physician

“Great course! I am not the most tech savvy, and I completed the online course and it was easy.”
-Murfreesboro internist

TMA’s MATE Act education course is not only convenient and user friendly, but it also ensures prescribers are covered under this new requirement. Ease of use and peace of mind is available through this offering. Visit tnmed.org/mateacteducation to take the course.

TMA Advocates for Physician Wellness in Advance of Suicide Awareness Month

With the physician suicide rate among the highest of any professional group nationwide, TMA continues to prioritize physician wellness by raising awareness of the issue and advocating for the removal of barriers to practitioners seeking needed help.

In recognition of September as Suicide Awareness Month and September 17 as Physician Suicide Awareness Day, TMA has taken the following actions:

- Made the Physician Wellness Resource Center available at tnmed.org/wellness.
- Introduced legislation for 2024 to remove stigmatizing questions on licensure, renewal and credentialing applications. Learn more at tnmed.org/legislative.

Anyone experiencing a mental health crisis may seek help by calling the Suicide and Crisis Lifeline at 988. Visit tnmed.org to read more and hear from Drs. Mukta Panda and Ed Capparelli on their individual experiences addressing this pressing issue.
Legal Briefs

**Mature Minor Doctrine Clarification Act**
Passed by the 2023 Tennessee General Assembly, the Mature Minor Doctrine Clarification Act states that a healthcare provider may not provide a vaccination to a minor without the informed consent of a parent or legal guardian. There are many potential pitfalls for physicians, and TMA’s Law Guide topic, *Minors and Vaccine Consent*, will help members avoid them. Members may access this topic at [tnmed.org/lawguide](http://tnmed.org/lawguide). Member login required.

**Prescribing for Self and Family: BME Policy**
The licensing board for medical doctors has a policy that prohibits a medical doctor from prescribing or treating himself or herself. It also addresses treatment of immediate family and treatment by supervisees. The policy is available on the board’s website at [https://tinyurl.com/mwe869jk](https://tinyurl.com/mwe869jk).

**Signing Death Certificates**
A physician must sign a death certificate within 48 hours of a patient’s death. There has been a spike in complaints and the licensing boards have responded with stricter penalties. TMA’s article discussing the actions the boards have taken and the impact on a physician’s participation in insurance networks, hospital privileges, and malpractice insurance may be found at [tnmed.org](http://tnmed.org).

**Noncompete Agreements**
Federal regulators have begun targeting noncompete agreements, and the National Labor Relations Board (NLRB) recently released an opinion letter on this topic. If you are subject to a noncompete agreement or use them in your practice, please review TMA’s updated Law Guide topic, *Noncompete Agreements* at [tnmed.org/lawguide](http://tnmed.org/lawguide). Member login required.

**FTC Report on Text Message Scams**
The Federal Trade Commission (FTC) recently reported that text message scams accounted for $330 million in consumer losses in 2022. Bogus bank fraud warnings were the most common scam. Be aware, these scammers may use the name of a real law enforcement agent and can make the phone number on the caller ID match the law enforcement agency’s phone number. View the FTC report at [https://tinyurl.com/3a5kt56m](https://tinyurl.com/3a5kt56m) and review additional details on these scams.

**Medicine Assistance Tool**
Patients in Tennessee have issues paying for their medications, including insulin. In order to provide transparency about medicine costs to patients, PhRMA member companies created the Medicine Assistance Tool (MAT). It is a search tool that helps patients and healthcare providers learn about resources available to assist in accessing medicine.

The platform includes more than 900 public and private assistance programs, some of which offer free or nearly free options for patients seeking financial assistance for their medications.

TMA has information available to place Tennesseans in contact with prescription assistance programs through MAT. Visit [tnmed.org/pharmacy](http://tnmed.org/pharmacy) for more information.

**Retiring Physician Manual**
TMA and SVMIC offer a manual to help physicians successfully navigate retirement or the closing of a practice. Any physician planning to retire or close a practice should begin making plans at least 12-15 months before the last day of patient care. The manual was endorsed by the Tennessee Board of Medical Examiners (BME), the licensing board for medical doctors in Tennessee. Download a copy of this resource at [tnmed.org/lawguide](http://tnmed.org/lawguide) (member login required).

**Scope Chart for Clinical Staff in a Medical Practice (formerly Scope Procedures Chart)**
Developed by the legal department, the Scope Chart for Clinical Staff in a Medical Practice will assist a physician in determining which procedures (e.g., injection, microdermabrasion) may be delegated to the clinical staff (e.g., LPN, medical assistant) in his or her office. Review this chart at [tnmed.org/scopechart](http://tnmed.org/scopechart). Please note member login is required to access. Direct any questions to legal@tnmed.org or 615-460-1645.
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