LEE COUNTY **MEDICAL** 





THE VOICE OF LEE COUNTY MEDICINE

VOLUME 15, NO. 6

Fort Myers, Florida

October, 1992

John D. Donaldson, M.D., Editor

### OCTOBER MEETING

JOINT MEETING WITH

SPOUSES INVITED
The LCMS AUXILIARY will make a presentation of the 1992 Charity Ball Funds to IMPACT, this years organization designated to receive the funds. All members and spouses are invited to at-tend. All Reservations should be made through the Medical Society office. Please return your reservation card. Remember we must pay for all reservations made, so call and cancel if you find you cannot attend.

cannot attend.

Also, if you do attend the Society Meetings, please make plans to stay for the total meeting. It gives our guests and speakers an unfavorable impression of our profession when you leave your professional meeting before the business and program have been completed.

### MEDICAL SOCIETY MEETING

**Royal Palm Yacht Club** 

Cocktails 6:30 Dinner 7:00 p.m.

Monday October 19, 1992

TOPIC:

"Talking to Teenagers about

### SPEAKER:

Larry Goldman, MD, OB/GYN

A Lee County physician who works with the County Schools and the LAMP Programs.

# DINNER BY RESERVATIONS ONLY

PLEASE L.C.M.S. Members: All reservations must be made by Friday noon before the Meet-ing on Monday. Cancellations should be no later than noon on Monday. The Society must pay for all reservations made. ■

### LCMS'S POLICY ON ADVERTISING

The following policy has been approved by the Lee County Medical Society on advertising. If you wish a copy of any of the endorsed policies, contact the society office.

"Lee County Medical Society accepts and endorses the policy on advertising of the American Medical Association, the Florida Medical Association and the Florida Medicine. We accept Florida Board of Medicine. We accept the specialty designation recognized by the American Board of Medical Specialties."

Bulletin deadline is the 15th of each month.

Send your comments to the Medical Society.

### PRESIDENT'S MESSAGE



VALERIE C. MOORE

Lee County will be in a different situation when the next storm comes be-cause of planning that will continue ev-en after the hurricane season is gone. The physicians and agencies that participated in the Hurricane Andrew, relief work are anxious to put their new know-ledge to work for us in Lee County. Joe Lemmons, M.D., (ER Physician) has volunteered to be the chairman of

the Disaster Committee for the next year. He has first-hand experience as he

year. He has first-hand experience as he was in Homestead working with Lee County EMS during those first few days. One of the ideas that has come out of this recent experience is a new way to staff the hospitals. Previously, physicians would stay at the hospitals with their families. A new approach has been suggested; necessary staff will stay at the hospitals and the other physicians evacuate with their families. The physicians would return after the storm passes to join in the disaster work.

join in the disaster work.

The perfect plan may not be possible, but the Disaster Committee will be working on finding the best plan for Lee County. Individuals like Steve West and Joe Lemmons can make a difference for all of us in the community.

(continued on page 2)

### "DR. JOHN"

My Van

Well, I bought the thing. I got rid of my Buick wagon and bought a van made by those wonderful folks who brought you Pearl Harbor. And, since Alice re-fuses to drive it, it is mine alone. I don't tuses to drive it, it is mine alone. I don't need to adjust the seat or mirrors, and never look in the ashtray except when in need of a quarter. The only exotic odor is from the castor oil in model plane fuel. A personal car, in other words. It costs a person a lot of money to buy a car like this. Which is not to say I have a

lot of money, just that I spent a lot. In order to get the color I wanted I had to pay for a radio with seven speakers, one of which I still haven't found.

Chris, R.N., who works days in the ER at Lee Memorial, calls it my Pimpmobile. I take that as a compliment. She never said anything about the Buick.

The odometer read 390 miles when, while heading for Ocala on a rainy Friday, I was hit from behind by a lady driving to her shift at the jail. My editor will not let me tell you how mad I was, but it was anger of Biblical proportions.

After an hour of answering questions and signing forms, I continued on to (continued on page 2)

### ADOPTING THE WORST OF THE CANADIAN SYSTEM

by John Donaldson, M.D.

We are witnessing the systematic adoption of the worst aspects of the Canadian medical system in the USA without providing any tangible benefit for the public. Two recent intrusions into the practice of medicine by government have been designed to restrict access to care for all Americans without conferring any of the positive aspects of universal care to the individual.

The first restriction to care comes from the good folks at HHS under the title of the

Clinical Laboratories Improvement Amendments of 1988 (CLIA). Would all those who think that this act is in any way related to "quality care" or "laboratory improvement" please take a position in the tiny space remaining to the left of Slick Willie and Buba Gore.

This act is about cost and about restricting access to care. For example, the act defines In sact is about cost and about restricting access to care. For example, the act defines an ordinary Streptococcus Group A enzyme plate test as being moderately complex and therefore in need of supervision by Big Brother. We are not talking about having the test done by civil servants or health bureaucrats. These are the only groups who could possibly conceive of this test being "moderately complex". The rest of us generally can count to five (the required number of drops of reagent) and set the timer to five minutes before reading the plate. The obvious (and desired reaction to going through the hoops for these clowns (and paying a fee to do so) is to write a prescription for antibiotics without a positive test. The result is a lower "laboratory cost" to third parties (the government is the largest carrier), higher cost to the patient (unnecessary antibiotics), and the decline of responsible medical care.

Lam sure you can pick the losers and the winners in this scenario. Lam equally sure

I am sure you can pick the losers and the winners in this scenario. I am equally sure you can provide a similar example in most other specialties. You can bet your first born that we will see a big jump in prices from commercial laboratories in response to added volume and declining competition. My study of elementary economics tells me that this is not capitalism in its finest hour.

(continued on page 2)

### SEPTEMBER WOMEN IN MEDICINE MONTH



The "Women In Medicine" in Lee County were honored at a dinner on September 2, 1992 at the University Club. Felicitas H. Ritrosky, M. D., Pediatrician at the Lee County Public Health Unit was our guest speaker. Dr. Ritrosky shared with us information on the number of children in Lee County with AlDS, problems associated with this disease and the outcome of treatment in children. At the present time there are 15 known cases of children with HIV/AIDS in Lee County. 12 of those cases are being handled by the Lee Public Health Unit Pediatric Department.

### REQUESTED PARTNERSHIP FOR HEALTH AND SCIENCE LABS

AND SCIENCE LABS

As you know, Edison is the Post-secondary Institution serving both the students in the Local Health Programs and the Pre-professional students who will complete their degree programs at the University. Many of these individuals will return to the community and practice in their chosen discipline. The division has just completed a needs audit for all the Science and Health Labs. The cost associated with providing critical and necessary items in these labs is over \$350,000. Much of this equipment could be second generation items that are available after equipment upgrades in Medical offices.

I would like to take this opportunity to enlist the good members of the Lee County Medical Society as the patron for the Health and Science Labs.

A short list of needed equipment includes: Nursing - IVAC Thermometers, IV Pumps; Respiratory Care - Oximeters, O² Analyzers; Radiography - CXR View Boxes; Human Skeletons; Cardiovascular Technology, 35 mm Cine Viewer; Anatomy Labs, Any Human Body Models; Microbiology Labs, Microscopes, Dissecting Scopes; Chemistry, Spectrophotometers.

Jeff Elsbery, Associate Dean for Health and Science would be happy to discuss any ideas that you would have to help the students in the Health and Science area. You may contact him at 489-9261.

contact him at 489-9261. ■

### LEE COUNTY MEDICAL SOCIETY BULLETIN

3805 Fowler Street Fort Myers, Florida 33901

Phone (813)936-1645
The Lee County Medical Society Bulletin is published monthly with the June and August editions

#### **CO-EDITORS**

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The Editor welcomes contributions from the members. Opinions expressed in the Bulletin are those of the individual authors and do not necessarily reflect policies of the Society.

#### DR. JOHN (cont. from pg. 1)

Ocala, figuring I would call Alice when I arrived. My son and I drove into the motel parking lot simultaneously, and Michael promptly said, "Tell me about the accident."

"Did your mother hear about it on the scanner?" Alice is a serious scanner

freak.
"Worse than that-I'll let her tell you." I figured I was on the six o'clock news with my fly open, so I quickly called

Shortly after the accident Alice, who was blissfully unaware, answered the phone and a young woman said, "May I speak to John?" This is not a common

speak to John' This is not a common occurrence in my house, of course.
"Who's calling, please?" (Once a secretary, always a secretary.)
"This is Tina." Now, "Tina" is a little better than "Boopsie" in this situation, but not by much but not by much.

"May I ask what this is in reference to?" This is in Alice's very correct, icicle-laden voice. If the answer isn't a good

laden voice. If the answer isn't a good one, hard times are a-coming. "It's about our accident." You can't call 911 while talking on the phone, and she didn't hear a baby crying in the background, so Alice shifted out of overdrive and asked for details. She quickly assumed I wasn't injured much, and her express for the tangent was tone. and her concern for the van was tem-pered by the fact I had told her it was a loaner. Some information you don't deliver all at once.

liver all at once.

Well, I did make it home again, and the insurance paid for everything but the aggravation, even after my assailant changed her story, and despite the officer describing the van as a Buick wagon, like it said on my old insurance card. After the dust settled, the story was entered into the family folklore and I became less Biblical, I found I could derive a little enjoyment out of coming

rive a little enjoyment out of coming home and blandly asking, "Any calls?" John R. Agnew, M.D. ■

### **NEW MEMBERS**

The following New Members were approved at the September Meeting: Rachid Aouchiche, M.D./Opthamology; Paul Wozney, M.D./Diagnostic Radiology; Bijan J. Bakhtian, M.D./Neurosurgery; Howard N. Barrow, M.D./Otosurgery; Howard N. Barrow, M.D./Oto-laryngology; David J. Batluck, D.O./Int. Medicine; Eric C. Borock, M.D./Gen. Vascular Surg.; Joseph M. Bryan, M.D./Anesthesiology; Brian D. Feiock, M.S./Gastroenterology; Jay S. Herbst, M.D./Dermatology; John L. Howard, M.D./Radiology; Ronald I. Weiner, D.O./Cardiology; Mary C. Yankaskas, M.D./Ob-Gyn.

### SEPTEMBER—INTERNSHIP



FRONT ROW R—L: Michael P. Metke, M.D.; Marietta Mudgett, Exec. Dir., Greater Fort Myers Chamber; Jim Potter, Manager, DPR in Lee County; Devin Zakrzewski, Marketing Manager, Financial Operations, Lee Memorial Hospital; Kristin Embery, Reporter, WEVU TV. BACK ROW: Phillip E. Andrews, M.D., Program Coordinator and Faculty; Mary W. Shulthess, District 8 Health Council; Felix R. Mestas, M.D.; H. P. Dansby, M.D.; Charles H. Curtis, M.D.; Alexander J. Lozano, M.D.; Cynthia Jordan, Reporter, Sun Press/News Press.

Cape Coral Hospital was our host for this Mini-Internship experience. The Interns were enthusiastic and many of their perceptions were changed. All were surprised by the long hours and no time for lunch. Several comments were made about the amount

of paper work that is required to take care of patients. If you have not been a faculty member in this program and want to have this unique experience, call the Society office. ■

### CONTINUING MEDICAL EDUCATION

Lee Memorial Hosptial - October 1992 C.M.E. Programs. Every Thursday 12:30 p.m.-1:30 p.m. in the Hospital Auditorium, Call 334-5959 to register: Oct. 1, Tuberculosis, Alan D. Siegel, M.D.; Oct. 8, Transesophageal Echo Cardiography, James A. Conrad, M.D.; Oct. 15, AlDS Update, Stephen R. Zellner, M.D.; Oct. 22, Use of Newer Anti-Depressants, Neil Pauker, M.D.;; Oct. 29, Emergency Medicine Conference, Joseph Lemmonds, D.O. ■

Royal Palm Yacht Club - Fifth Annual Cancer Conference, Nov. 20, 8:30-4 PM. Contact: Lee Memorial Hosptial, Education Service: 334-5959. Target Audience: Physicians, PA's, Nurses, radiologic and medical technologists.

Fort Myers VA, CME Category I - 8 a.m.-9 a.m., Phone: 939-3939: Oct. 20, Low Back Pain, Lou Kuritzky, M.D.; Oct. 27, Update in Endocrinology, Sigmund R. Greenberg, M.D.; Nov. 10, Silicone Breast Implants, Robert Brueck, M.D.; Nov. 17, Management of Chronic Pain, Charles Crosby, D.O.; Nov. 24, Early Detection Colorectal Disease, James A. Ferguson, M.D.; Dec. 8, Management of Cardioembolic Stroke, Mark Silverman, M.D.; Dec. 15, Cardiac Arrhythmia, Stephen Mester, M.D. ■

ALL PHYSICIANS ARE INVITED TO ATTEND!

CME Requirements for License Renewal 1992-93: 40 CATEGORY I HOURS; 5 HOURS RISK MANAGEMENT - (Included in 40 Hours); 1 HOUR HIV/AIDS. 1994-JANUARY 1996: 40 CATEGORY I HOURS; 5 HOURS RISK MANAGEMENT - (Included in 40 Hours); 2 HOURS HIV/AIDS - (1 hour in the FL Statutes).

Please NOTE change in the number of HIV/AIDS hours. The extra hour is added to include knowledge of the Florida statutes on this subject.

### Physicians In The News

Peter H. Biltzer, M.D. recently made a presentation to the American Society of Clinical Oncology (ASCO). On the values of PSAs." He was also quoted on his presentation in the Oncology Alert. ■

Adopting the Canadian System (cont. from pg. 1)

Just before the recent CLIA thing, we were told about joint ventures and how they add to the cost of care. The data supporting this contention is so flawed that eighth graders could have improved on the methodology. Everyone knows this, but no one cares. The study did what it was designed to do, that is, stimulate legislation politicians need to divert their own heat to another group.

Why are all bureaucrat and politicians so excited about being able to restrict investment in our nation's medical technology? This should be obvious. Up to this point, American medicine has been supported by the can-do attitude of physician-entrepreneurs who, rather than whining to have government or hospitals purchase (invest) in new technology, have installed it themselves. That part is okay as capital was created; the mistake was to use and charge for it.

In Canada, most provinces insist that all diagnostic imaging be conducted in government facilities with a minimum of interference from physicians and patients. In the spirit of frontier medicine, however, Nova Scotians have creatively begun to diagnose aortic aneurisms by abdominal pain, distention, diaphoresis and severe hybotension in response to the standard three and one half month wait for an ultra-sound.

There were abusers of our system, owners who over utilized their facility and those who ordered inappropriate tests. There are mechanisms by which to deal with those folks, bolstered by lots of other regulations. Again, quality and honesty were not the

folks, bolstered by lots of other regulations. Again, quality and honesty were not the real targets of this issue. By removing joint ventures, government has in one stroke removed the greatest single source of new capital in medicine. "Imagine the nerve of those doctors, setting up their own lab and ordering tests too. We'll put an end to

Canada has more than adequately demonstrated that by restricting investment in capital, government can subtly lower expectations of the public, and gradually, in response to waiting lists, stop doctors from ordering all tests. Most people will die or heal

on waiting lists.

The end result, both of these issues will be restricted access for patients to new technology. The most disturbing part is that this has always been the plan, sold to the public under feigned concern for more noble purposes. ■



### **OPINIONS - EDITORIALS** LETTERS TO THE EDITOR

John W. Snead, M.D.

"How should we handle scientists who engage in scientific misconduct, such as falsifying experiments?"



"I feel they should be prosecuted in the same manner as for perjury.

V.I. Ratnesar, M.D. Internal Medicine/Cardiology



"Certainly this is not acceptable and would seem to promote similar behavior by his/her peers. I understand the system and schemes that promote this behavior and feel there needs to be changes."

Jay Tomeo, M.D. Family Practice



"These individuals should lose their status as principal investigators. Any future re-search should be done under the supervision of nother individual."

Stanley Schwartz, M.D. Dermatology



"Academic tenure would be lost and funding, the cornerstone of modern re-search, would be discontin-

Michael Carron, M.D.

# **NEXT MONTH'S QUESTION** "WHAT TRENDS DO YOU SEE IN THE PRACTICE OF MEDICINE IN THE NEXT FIVE YEARS?"

President's Message (cont. from pg. 1) Hurricane Andrew brought devasta-tion to so many, but it has given Lee County a second chance. The question "What if?" has been posed by the press on every occasion, to remind us of the potential for devastation here. In some ways it is sensationalism to sell their pa-pers, but in another way it is important

pers, but in another way it is important for people to contemplate the possibility of a hurricane hitting here.

The good news is that Steve West and his Disaster Committee have been working for the past year to coordinate emergency services in the event of a disaster. The other good news is that we have a second chance to work towards an even better plan. an even better plan.

an even better plan.
Steve West was the first person in our medical society to begin coordination of all the activities of the different agencies involved in a disaster. He recognized a problem before anyone had thought of Hurricane Andrew. He established a committee that has grown in numbers and function. He has brought agencies together that have not all talked before, to discuss the problems of disaster olanning. Everyone blems of disaster planning. Everyone had a plan, but no one knew the details had a plan, but no one knew the details of each individual plan or how all the plans would work together. The point is that while many people talk about problems, Steve West is a good example of an individual who sees a problem and then sets out to do something about it. He was talking about coordination of disaster efforts before we had seen the difficulties in Homestead.

### **NEW MEMBER APPLICANTS**

**Application For Membership**Active members are requested to express to the Board of Censors or Board of Governors any information or opinions they may have concerning the eligibility of the appli-

JOSEPH D. LEMMONS, D.O.

Dr. Joseph Lemmons was born in St. Louis Missouri. He received his medical degree at West Virginia School of Osteopathic Medicine in Lewisburg, West Virginia. He completed his internship at Normandy Osteopathic Hospital in St. Louis, Missouri and his residency at Garden City, Missians City, Michigan.

Dr. Lemmons is practicing Emergency Medicine at Lee Memorial





JOSE' MUNIZ, M.D. Dr. Jose' Muniz was born in San Juan, Puerto Rico. He received his medical degree at the University of Puerto Rico in San Juan, as well as, his internship and residency. Dr. Muniz completed his fellowship at the Children's Hospital Oklahoma/University of Oklahoma.

Dr. Muniz will be practicing Pediatric Gastroenterology at the Nemours Children's Clinic at the Lee Memorial Hospital. HealthPark

campus.

MAGDY KHALIL, M.D.

Dr. Magdy Khalil was born in Cairo, Egypt. He received his medical degree at the Cairo University. He completed his internship and residency at the Thomas Jefferson University Program in Latrobe,

Pennsylvania.

Dr. Khalil will be practicing Family Practice medicine at the Family Health Centers at 1620 Medical Lane, Suite 211. ■



Children with Attention Deficit Disorder - is a non-profit support organization. The Lee County Chapter is comprised of parents, educators, and others who come in contact with these special children. Our chapter is affiliated with the national CHADD

organization.

We have monthly meetings, September to May, in three different locations in Lee

We have monthly meetings, September to May, in three different locations in Lee County. At each meeting we have a guest speaker, video tape or slides, and time for "sharing". Our meetings provide a way for people to receive current information and have a place to come to share problems, concerns, and results!

Our objectives are: 1) Maintain a support group for parents. 2) Provide a forum for continuing education of parents and professionals. 3) To be a community resource for information about Attention Deficit Disorder. 4) To foster the objective that the best educational experiences should be available to children with ADDs or hat their specific difficulties will be recognized and appropriately managed within the educations. difficulties will be recognized and appropriately managed within the educational

setting.

In an effort to increase our service to parents (and patients) we routinely send information about meetings and special events to physicians and other members of the medical community. If you would like to receive regular information about CHADD, please send your name, speciality, address, telephone number, and the type of patients you routinely serve (children, adolescents, adults)to: Linda Nee, parent Coordinator, Lee County Chapter of CHADD, 2214 S.E. 8th Street, Cape Coral, FL 33990.

Submitted by: Linda A. Brooks, Parent Coordinator, Lee County Chapter of CHADD.

### LOCAL REPORTERS RECEIVE HONORABLE MENTION IN FMA JOURNALISM CONTEST

Videographer David Beaty and former reporter Todd Shearer with WINK-TV in Ft. Myers, have earned Honorable Mention in the Television Category of the Florida Medical Association's 1992 Excellence in Medical Journalism Contest.

For the past 14 years, the FMA has recognized print, radio and television journalists for outstanding work in educating the public by reporting interesting and timely medi-

cal information.

Their entry, "Soup Kitchen Medicine," features a local medical clinic opened by a southwest Florida Soup kitchen to meet the medical needs of the poor.

### MISSION STATEMENT

Our purpose is to work in Partnership with the Medical Association to promote health education, identify and address health care needs and issues, to encourage involvement in legislative education, and to support health-related charitable

volvement in legislative education, and to support nearth-related charitable endeavors.

Health Education: Child Abuse Puppet Show; Health Career Days; Video Health Fair; Volunteen Program; AMA-ERF; Youth Support Cards. Health Care Issues: Medibags for the Homeless; Medifiles; AIDS Project; Foster Care Appreciation; Family Violence; Physician's Resource Network. Legislation: Legs Alert; FLAMPAC; Legislative Training; Legislative Breakfast; Voter Registration; Fall Conference Legislative Dinner. Charitable Endeavors: The 10th Annual Charity Ball is being planned to benefit the I-maginarium and other health related charities. A mini-grant program is being established to extend our reach into the community.

### IF HRS DID A BIOHAZARDOUS WASTE INSPECTION TODAY, WOULD YOU BE IN COMPLIANCE?

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### LEE COUNTY MEDICAL SOCIETY AUXILIARY NEWS

Respectfully submitted by Elsie G. Kokal, Corresponding Secretary.

Welcome Brunch - A brunch hosted by the Auxiliary and Foundation Boards was held on September 2nd to welcome new physicians spouses to the Lee County area. Mrs. Kevin Campbell's home was decorated in a "Florida" theme and both newcomers and members enjoyed a wide selection of delicious food. Each new guest was introduced to the general membership and was given a "welcome packet" with information on auxiliary and community events. on auxiliary and community events.

Potluck in Paradise - Over 150 physicians and their spouses attended the second annual "Potluck in Paradise" casual get-together, held at the home of Dr. and Mrs. Gary Price on the evening of Sept. 5th. Voters registration and newcomers addresses were made available to all. Tables were overflowing with a cornucopia of food and beverages which were enjoyed by all. It was a fun-filled evening of making new friends and sharing great food.

FMAA Fall Conference - Lee County was host to the FMAA Fall Conference held at the Sanibel Harbor Resort and Spa from Sept. 17 thru the 19th. Fall conference committee members in association with FMAA president Liz Kagan, welcomed auxilians from throughout the state.

Conference highlights included noted speakers that presented a variety of relevant and interesting topics, ranging from communication to leadership to conflict resolution and environmental issues.

tion and environmental issues.

Many attended Friday's luncheon which featured a fashion show presented by Jacobsons, and other members enjoyed the tours and spa treatments that were offered on Thursday afternoon. Legislative issues and term limitation were the order of business for physicians and their spouses during Friday night's dinner and program.

Many local auxilians attended this years educational and motivating Fall conference which successfully concluded on Saturday.

which successfully concluded on Saturday.

Tenth Annual Charity Ball - 1993 will mark the tenth anniversary of Lee County Medi-Tenth Annual Charity Ball. 1993 will mark the tenth anniversary of Lee County Medical Auxiliary Foundation Charity Ball. This year the auxiliary voted to make the IMAG-INARIUM the primary recipient of the charity ball proceeds. Currently, the IMAGIN-ARIUM board is selecting medical and health professionals to steer the development of the health education aspect of the museum. The Foundation is also establishing a minigrant program to support health-related charitable endeavors with a percentage of charity ball funds. Plans are underway for a successful gala event in May, 1993.

We continue our tradition of serving Lee County by contributing a check for \$66,000 to IMPACT for educational development at the October Medical Society meeting. ■

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### AMA BENEFITS ALL PHYSICIANS

AMA Successfully Obtains 90 Day CLIA Grace Period

The American Medical Association successfully persuaded HCFA to grant a 90-day grace period for the Clinical Laboratory Improvement Act of 1988 during which Medicare claims will NOT be denied if your CLIA registration number is omitted. Health and Human Services Secretary Louis Sullivan, MD, also upheld the AMA's objections to un-announced surveys of physicians' office labs saying that those investigations will take place only if a problem is suspected or a complaint is filed. Routine surveys during the first 2 year cycle will be educational.

AMA Is Your Advocate in Washington
Physician Advertising: The AMA General Counsel's Office is negotiating with the Federal Trade Commission to develop guidelines for physician advertising. The FTC's Bureau of Competition has approved all the AMA's proposed guidelines and is discussing the last one which deals with claims about the physician's board certification credentials.

Safety Regulations: The AMA urged the Senate Labor Committee to exempt physicians from proposed federal legislation, S. 1622, requiring employers to develop safety and health programs for employees. The AMA pointed out that these regulations duplicate those existing Occupational Safety and Health Administration requirements that apply to physicians

APPLY to physicians.

HIV Disease: In a letter to the Social Security Subcommittee of the House Ways and Means Committee, the AMA supported legislation that would make it easier for people with HIV disease to receive Social Security disability benefits.

Practice Parameters: The AMA addressed the Agency for Health Care Policy and Research outlining the AMA's views on translating clinical practice guidelines into mediate the process of the AMA's views on translating clinical practice guidelines into mediate the process of the AMA's views on translating clinical practice guidelines into mediate the process of the AMA's views on translating clinical practice guidelines into mediate the process of the AMA's views on translating clinical practice guidelines into mediate the process of the AMA's views on translating clinical practice guidelines into mediate the process of the AMA's views on translating clinical practice guidelines into mediate the process of the AMA's views on translating clinical practice guidelines into mediate the process of the AMA's views on translating clinical practice guidelines into mediate the process of the AMA's views on translating clinical practice guidelines into mediate the process of the AMA's views on translating clinical practice guidelines into mediate the process of the AMA's views on translating clinical practice guidelines into mediate the process of the AMA's views on translating clinical practice guidelines into mediate the process of the AMA's views on translating clinical practice guidelines into mediate the process of the AMA's views on translating clinical practice guidelines into mediate the process of the AMA's views on the AMA's view cal review criteria, standards of quality and performance measures.

#### AMA Backs Regulatory Relief, Anti-Hassle Legislation

The American Medical Association continues to lobby for Medicare physician regulatory relief amendments introduced in the House as HR2695 and in the Senate as S1332, to cutback on Medicare hassles. In short, legislation addresses: Medicare Secondary Payor, prohibits payment denials for necessary covered services if the patient fails to complete questionnaires; Extrapolation, gives physicians the option of requiring carriers to produce evidence of a pattern of payment error. Carrier User Fees, prohibits charging for paper claims, filing errors, unsuccessful appeals, applications for unique, provider, numbers and medical review, requirements: Any Applications for unique provider numbers and medical review requirements; Annual Carrier Evaluations, requires state medical society input on evaluation standards and requires this to be included in annual carrier performance evaluations; Medicare Carrier Accountability, allows administrative appeals when the carrier improperly implemented Medicare policy. Physician Peer Review, requires all Medicare medical necessity denials be reviewed by identified, appropriately licensed physicians of the same

All provisions were included in a separate package of Medicare amendments approved by the House Energy and Commerce Committee. The AMA will continue to work to advance this legislation prior to adjournment. ■

Gora M<sup>c</sup>Gahey Associates in Architecture

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**AMA Recommends Medicare RBRVS Updates** 

The 26-member American Medical Association Specialty Society Update Committee, or RUC, presented its first recommendations to HCA. These address relative values for 253 new or revised CPT codes and are intended to help HCFA as it develops the 1993 Medicare fee schedule. The AMA views RUC's update activities as central to implementation and maintenance of the RBRVS.



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MEDICAL SOCIETY MEETING Royal Palm

Yacht Club Cocktails 6:30 Dinner 7:00 p.m.

Monday October 19, 1992

TOPIC: "Talking to Teenagers about Sex"

Larry Goldman, MD, OB/GYN SPEAKER: A Lee County physician who works with the County Programs.

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