

Philadelphia Medicine



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Resolutions reflect the changing influences on our profession

By Lynn M. Lucas-Fehm, MD, JD



When the AMA was formed in 1847, the founders could not have imagined how health care delivery would change in the ensuing 150 years. The goals of the 19th century medical profession were ambitious but clear—to assure that the highest standards of excellence became the foundation for the practice of medicine.

At the first meeting of the AMA, the delegates developed policies by introducing, debating, amending and ultimately passing resolutions. One example was the policy establishing the requirement for “gentlemen” entering the profession: *Resolved, that this convention earnestly recommends to the members of the medical profession throughout the United States to satisfy themselves, either by personal inquiry or written certificate of competent persons, before receiving young men into their offices as students, that they are of good moral character, and that they have acquired a good English education, a knowledge of natural philosophy, and the elementary natural sciences, including geometry and algebra, and such an acquaintance, at least, with the Latin and Greek languages as will enable them to appreciate the technical language of medicine and read and write prescriptions.*

Today, resolutions affecting how we practice medicine are still introduced, debated, and voted upon in the same basic format as a century ago. Parliamentary procedure is aptly enforced by the speaker of the House of Delegates. When resolutions are passed, they are sent to the Board of Trustees for implementation while others are delegated to govern-

mental liaisons who lobby politicians in hopes of favorable legislation.

From October 14 through 16, I attended the annual meeting of the Pennsylvania Medical Society as a delegate. Over the many years that I have attended this meeting I find myself constantly looking for the changes which have occurred in the process and content of the event. What I have discovered is that the protocol has not changed but the issues that we address have persistently expanded to include government, political, business and legal issues which have taken control of our profession.

Examples of this outside influence were quite apparent in the resolutions presented for consideration at the PAMED House of Delegates. A synopsis of the adopted resolutions taken from the PAMED website is as follows:

- Energy sources, risks to public health: Supporting energy sources that decrease environmental risks to public health and studying the state’s public health infrastructure
- State regulation of medical spas: Collaborating with state and national medical organizations to advocate for state regulation of medical spa facilities
- Professional liability coverage for physician volunteers: Seeking legislation requiring the state to provide free professional liability coverage in return for volunteering at free non-government clinics
- Medical Staff Code of Conduct: Adopting the American Medical Association’s (AMA) Model Medical Staff Code of Conduct
- Observation care codes; Medicare
Please see Resolutions reflect on page 2

PCMS NEWS

Special note to retired and retiring physicians concerning National Provider Identifiers (NPIs)

Retired physicians who have been writing prescription for their immediate family members and do not have an NPI number can apply online at <https://nppes.cms.hhs.gov/NPPES/Welcome.do>. (Pharmacies are requiring this information.)

For those physicians who have a NPI number and will be retiring and will no longer be furnishing healthcare, please remember to deactivate your NPI. Deactivating your NPI will help ensure that your NPI is not used fraudulently by others.

If you do not know how to deactivate your NPI or apply for the NPI online, you may contact the NPI Enumerator at 800-465-3203 for assistance.

Quit smoking now

The Philadelphia Department of Public Health is giving away free one-month supplies of nicotine patches along with counseling.

Patches are available while supplies last to smokers who live in Philadelphia. (Not available to pregnant women or anyone under the age of 18)

For more information: www.smoke-freephilly.org

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Resolutions reflect the changing influences, *from page 1*

reimbursement: Advocate for an increase in Medicare reimbursement for observation care codes

- Physical fitness guidelines: Work with other organizations to develop a checklist to identify risk factors in patients starting physical fitness programs
- Water fluoridation: Working in conjunction with the Pennsylvania Dental Association to urge the state to adopt federal fluoride standards and apply them through legislative or regulatory initiatives
- Collective bargaining: Supporting federal legislation authorizing collective bargaining

Several issues were referred to PAMED's Board of Trustees for further study, which included consideration of Medicare as a public option, reforms to address problems with health plan

pre-authorization programs that are outsourced to benefit managers, and controlling children's misuse of prescription drugs.

Resolutions affecting the practice of medicine have certainly evolved since 1847.

There is no question that we have little time to do anything except take good care of our patients while complying with the endless red tape that is necessary to run a practice. If we are lucky, we find a little time to enjoy our family and friends. However, as the rules and regulations continue to increase, the need for all of us to be involved will be essential. For more information about these resolutions please go to the Pennsylvania Medical Society website at www.pamedsoc.org.

Dr. Lucas-Fehm is the President of PCMS.

Commentary

Warren Buffet's suggested seven ways to reform Congress

Editorial Review Board members Stephen S. Schwartz, MD, and William B. Frankl, MD, encourage you to share this with your peers:

Warren Buffett, in a recent interview with CNBC, offers one of the best quotes about the debt ceiling: "I could end the deficit in 5 minutes," he told CNBC. "You just pass a law that says that anytime there is a deficit of more than 3% of GDP, all sitting members of Congress are ineligible for re-election.

The 26th amendment granting the right to vote for 18-year-olds took only 3 months and 8 days to be ratified! Why? Simple! The people demanded it. That was in 1971 before computers, e-mail, cell phones, etc. Of the 27 amendments to the Constitution, seven took one year or less to become the law of the land all because of public pressure.

Congressional Reform Act of 2011

1. A Congressman/woman collects a salary while in office and receives no pay when they're out of office.
2. Congress (past, present and future) participates in Social Security. All funds in the Congressional retirement fund move to the Social Security system immediately. All future funds flow into the Social Security system, and Congress participates with the American people. It may not be used for any other purpose.
3. Congress can purchase their own retirement plan, just as all Americans do.
4. Congress will no longer vote themselves a pay raise. Congressional pay will rise by the lower of CPI or 3%.
5. Congress loses their current healthcare system and participates in the same healthcare system as the American people.
6. Congress must equally abide by all laws they impose on the American people.
7. All contracts with past and present Congressmen/women are void effective 1/1/12. The American people did not make this contract with Congressmen/women. Congressmen/women made all these contracts for themselves. Serving in Congress is an honor, not a career. The Founding Fathers envisioned citizen legislators, so ours should serve their term(s), then go home and back to work.

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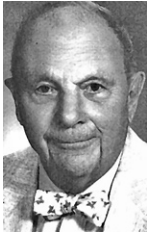


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In Memoriam



R. Robert Tyson, MD

Dr. Tyson died on November 6 at the age of 92. He served as president of PCMS in 1972 and as president of PAMED in 1986. Dr.

Tyson was the Chair of the Pennsylvania Blue Shield Board from 1988 to 1992.

He earned his medical degree from the University of Pennsylvania in 1944 and completed his residency at Temple University School of Medicine after completing two years of medical duty in the Navy. In 1962 he was named chief of the vascular surgery section at Temple Hospital as well as professor. He retired from the medical school in 1984.

Dr. Tyson is survived by his wife, Frances; a son, R. Michael; and daughters, Leslie Rudolph and Virginia Faus; and three grandchildren.



Edward J. Resnick, MD

Dr. Resnick died on October 25 at the age of 86. He served as president of PCMS in 1986.

He earned his medical degree from Temple University School of Medicine in 1951 after serving in the Army Medical Corps in Europe during World War II. An orthopaedic surgeon for 60 years, he was in active practice at the time of his death.

Dr. Resnick's wife, Irene, predeceased him in 2002. He is survived by a son, Bernard M. Resnick, Esquire, and daughter, Jane E. DeBlieux, RN.

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