



WESTCHESTER PHYSICIAN

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PRESIDENT’S MESSAGE

PART II—THE NEXT STEP

BRUCE MOLINELLI, MD PRESIDENT

“Today I want to talk to you, and you don’t have time. Tomorrow you would desperately want to talk to me and I won’t be around.” Kunal Bhardwaj (author)

I know you really don’t have time to read this, so if I can’t say something to catch your interest now, you’re probably going to move on to something else more pressing.

So here is the promo grabber- as promised at the conclusion of last month’s article, I’m going to reveal how to improve your current predicament as a physician, which, if you are like many of us, includes experiencing waning autonomy, juggling overburdened schedules and fighting a sense of hopelessness.

No, the answer is not. ” *Just one word... plastics!*”

(Neither the medically pertinent surgical sub specialty nor the Mr McGuire occupational advice bestowed upon the young Ben Braddock, played by Dustin Hoffman in Mike Nichols classic movie, “The Graduate”, 1967).

On the other hand, the answer may still be just a one word answer. (*Wait for it.....*). Perhaps it is unfair of me to prolong this further, but if you are still reading, I may have your attention for just a few more thoughts before the big reveal.

Last month, I spoke about a day in the life of the average physician who faces a potentially overwhelming list of daily tasks that reset each morning- patient care responsibilities, charting , metric mandates, family needs, personal health. Each day we rise to face the Sisyphean feat of “finishing” our work , which never really is completed. I also suggested there is an out. Help from where and whom you may ask?

The one word answer? Advocacy. Yep! Advocacy !

(Disappointing and deflating sound emitted by the crowd.

”Really? That’s all you got?” , they exasperate in unison. “Ok you lost me now. I’m done reading this garbage. And here I thought you were going to give me something of substances to truly effect change in my life! “

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BRUCE MOLINELLI, MD
President, WCMS

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FROM THE EDITOR...**PETER ACKER, MD**

In last month's newsletter, Dr. Bruce Molinelli in a well written column accurately described the myriad frustrations that all of us medical practitioners endure on a daily basis such as endless multi-click charting in order to satisfy all the requirements for reimbursement, and institutional satisfaction metrics. I often feel the exhaustion of trying to get it all done.

Yet I still for the most part, love what I do. All it takes is to walk into a room to greet two exhausted parents and their beautiful newborn baby. I feel energized by the constant human contact, particularly during the long dark days of the pandemic.

Also mentioned in his column are the many up to date tasks that are required to maintain our standing such as infection control, and CME's. A lot of it seems excessive and can frankly be mind numbing, but thankfully not all. I had a particularly busy stressful time last week, trying to get everything done before a trip to California – no not vacation, but to help booster my hours of CME. I am in the best of times, a nervous traveler, anticipating in minutia all the things that could go wrong. I'm not talking about true catastrophes like plane crashed, but the more quotidian like will sleep through my alarm, miss the plane, lose my baggage, - I mentally go over all these possibilities during the days before my embarkation, all this while enduring the stress of my working days. In the end, I woke up well before my alarm set for 3:30 AM, and my wife drove me to JFK, arriving way way too early (having allowed extra time for a flat tire and rerouting because of collapsed bridge. The plane was on time and I landed in LAX without incident and then maneuvered my way to an offsite discount car rental and finally arrived at my hotel in Anaheim where this year's annual American Academy of Pediatrics Convention was being held. It was late morning and a bright sunny day as I strolled toward the convention center. Around me were groups of kids and families with mickey mouse ears and other Disney paraphilia heading in the opposite direction toward Disney land. My stressed and foul mood lifted like early morning fog on a sunny day, the work and travel stresses melting away. At the convention center, were huge crowds of pediatricians, 10,000 in total I later learned. I'm with my people, I thought with a chuckle.

It was early afternoon when I entered one of the convention rooms for a lecture entitle " Seizures and Seizure Mimics" fascinating from beginning to end. Then off to the next talk: " Birthmarks: Red White Brown and Blue." I continued thusly throughout the weekend, totally absorbing. It reaffirmed my decision to go into pediatrics. I did have a number of conversations with pediatricians grouching about the various burdens we endure, but usually with a smile and a laugh. Pediatricians are hopelessly upbeat!

I landed at JFK late Monday night. Next morning I was seeing patients, while fighting jet lag and fatigue. I opened my work email and there was notice; Mandatory Training tonight. The topic? How to be nice to your patients and improve your satisfaction scores! Nice to patients? Is that a thing? Who knew!



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PRESIDENT'S MESSAGE**PART II—THE NEXT STEP****BRUCE MOLINELLI, MD PRESIDENT***(Continued from page 1)*

“You are just like all the others, full of impractical, unsubstantial and irrelevant blabber that becomes meaningless. I need someone who can lessen my workload, transcribe my notes, feed my kids and allow me to see patients on my time in my own way, without the imposing burden of everything else extraneous. Is there truly no hope!”

But wait, wait one moment, hear me out, just a little bit more, please!

--Time for the subliminal and helpful website link to MSSNY and WCMS cleverly interposed throughout the remainder of this article. <https://www.mssny.org/> <http://www.wcms.org/>

Physician advocacy by physicians is incredibly helpful to achieve change. Say it with me, **“Physician advocacy by physicians is incredibly helpful to achieve change.”**

Unfortunately we, as a medical profession, don't have the time, will, or perhaps even the interest to develop a cohesive front advocating for physicians. Yes there is the AMA etc and what would things be like if we didn't have them? Probably even worse, but it does seem the masses of physicians only come together when we are more on the defensive. We lobby to reverse or avoid detrimental changes in medical laws which would have rippling effects throughout our industry. So advocacy is effective..... but unfortunately smothered and blunted by the overwhelming fallout of our daily tribulations such that the strength in numbers is diluted by the distracted, detached and disinterested physicians.*

***PERSPECTIVE: Physician Advocacy: What Is It and How do We Do It? Mark A Earnest et al Academic Medicine Vol 85, No. 1 January 2010 pgs 63-66.**

The authors write,

Although physicians seem to endorse the idea of civic engagement as a professional responsibility, there is less evidence that physicians engage in these activities,

so remember that this is adding to what most of us already do, identify injustices or inequalities of poor patient care, and speak up. Let's speak up for ourselves as well.

--Insert subliminal website again here here. <https://www.mssny.org/> <http://www.wcms.org/>

With more physician support and input in our advocacy groups, we can mobilize our profession to go on the offensive and effect positive changes in our governing laws rather than inefficiently deflecting harmful laws at the eleventh hour. The NYS Wrongful Death law is an example which has already been passed by the NY State legislature with meaningful negative impact on physician's ability to remain viable within the state, potentially inflating malpractice premiums by an astounding 40%. We are on the defensive with our only hope being a veto by New York's Governor Kathy Hochul.

So if you want change, and an answer to your extraneous time consuming obligations, and one that is meaningful, practical and within your control, without adding another task to your already overpacked day, then join and support your medical advocacy group whether it be the Westchester County Medical Society (WCMS), Medical Society of the State of New York (MSSNY), American Medical Association (AMA) or your specialty society. Perhaps it is the medical staff within your hospital that could use an infusion of your energy to reverse the trend of disinterest or uselessness. Medical staff meetings and physicians' interactions were the grass roots of community physician discourse and cohesiveness, which have now been deconstructed due to withdrawing support from institutions and time stressed physicians. These groups are still in place, with waning but resilient viability, exerting some clout at their various levels. Tap into their resources and ask questions of them. Provide them with your needs for change and perhaps even your suggestions how. These groups are our path to self control of our professions destiny, and our personal satisfaction within our practices.

But you ask, *“When do I have the time? You are adding another heavy stone to be maneuvered uphill adding to my infinite burden.”* Actually, I am not asking for your time or your energy and most importantly not even your money (well maybe your dues). What I am asking for is your knowledge, discretion and intelligence. Perhaps we physicians have too many opinions to achieve a cohesive front, but it is more likely we have brilliant ideas buried underneath our cluttered lifestyle that would aid in our

(Continued on page 10)

STOP THE TRAIN Elliot Barsh, MD

“Love yourself. Then forget it. Then, love the world.” -Mary Oliver

What can we expect from ourselves?...from each other?
...from our patients?

They say we should not expect much from a drowning man, since he is too busy not drowning!

Can we trust ourselves, and each other, enough to know that we are not actually drowning?

We can, and we start with generosity!

Generosity with our *time*, our *effort*, our *hearts*, and our *minds*.

This requires us to *forget* about our own problems long enough to *see* someone else's.

Giving when we want to take, and finding *meaning* so *healing* can begin.

Let's stock up on *compassion* so we can feel what *Laura Ryan* hopes to in her story *Trajectory*.

“The love of a father for his son, our love for ourselves even as we struggle and fail. Love that can open hearts and minds, love that blossoms like a peony, gently dropping its petals like memories.”

Thanks for reading. Be safe.

“But I believe she's creating a new path for her that's not all about patient care.”

A Rural Doctor Gave Her All. Then Her Heart Broke.

Physicians suffer one of the highest burnout rates among professionals. Dr. Kimberly Becher, one of two family practitioners in Clay County, West Virginia, learned the hard way.

“If we can name it, perhaps we can manage it.”

That Discomfort You're Feeling is Grief

“I searched for years to find the mnemonic for loss, for error, for regret. Only after relinquishing the narrative of control —

and choosing forgiveness, curiosity, and love — did I find peace.”

Trajectory

“By writing stories, we as doctors aim to teach others about our patients while learning about ourselves.”


Why Storytelling Is Part of Being a Good Doctor

To Begin With, the Sweet Grass


by Mary Oliver

I. Will the hungry ox stand in the field and not eat of the sweet grass? Will the owl bite off its own wings? Will the lark forget to lift its body in the air or forget to sing? Will the rivers run upstream? Behold, I say— behold the reliability and the finery and the teachings of this gritty earth gift. *II.* Eat bread and understand comfort. Drink water, and understand delight. Visit the garden where the scarlet trumpets are opening their bodies for the hummingbirds who are drinking the sweetness, who are thrillingly gluttonous. For one thing leads to another. Soon you will notice how stones shine underfoot. Eventually tides will be the only calendar you believe in. And someone's face, whom you love, will be as a star **both intimate and ultimate**, and you will be both heart-shaken and respectful. And you will hear the air itself, like a beloved, whisper: oh, let me, for a while longer, enter the two beautiful bodies of your lungs. *III.* The witchery of living is my whole conversation with you, my darlings. All I can tell you is what I know. Look, and look again. This world is not just a little thrill for the eyes. It's more than bones. It's more than the delicate wrist with its personal pulse. It's more than the beating of the single heart. It's praising. It's giving until the giving feels like receiving. You have a life—just imagine that! You have this day, and maybe another, and maybe still another. *IV.* Someday I am going to ask my friend Paulus, the dancer, the potter, to make me a begging bowl which I believe my soul needs. And if I come to you, to the door of your comfortable house with unwashed clothes and unclean fingernails, will you put something into it? I would like to take this chance. I would like to give you this chance. *V.* We do one thing or another; we stay the same, or we change. Congratulations, if you have changed. *VI.* Let me ask you this. Do you also think that beauty exists for some fabulous reason? And, if you have not been enchanted by this adventure— your life— what would do for you? *VII.* What I loved in the beginning, I think, was mostly myself. Never mind that I had to, since somebody had to. That was many years ago. Since then I have gone out from my confinements, though with difficulty. I mean the ones that thought to rule my heart. I cast them out, I put them on the mush pile. They will be nourishment somehow (everything is nourishment somehow or another). And I have become the child of the clouds, and of hope. I have become the friend of the enemy, whoever that is. I have become older and, cherishing what I have learned, I have become younger. And what do I risk to tell you this, which is all I know? Love yourself. Then forget it. Then, love the world.





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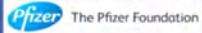
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MEMORANDUM IN OPPOSITION

ON ASSEMBLY FLOOR

A.6770 (WEINSTEIN)

**IN SENATE FINANCE
COMMITTEE**

S.74-A (HOYLMAN)

AN ACT to amend to amend the estates, powers and trusts law, in relation to payment and distribution of damages in wrongful death actions

This measure would amend the estates, powers and trusts law, to authorize an award in a wrongful death action to include compensation for grief or anguish, the loss of love and companionship, loss of services and support and the loss of nurture and guidance. This bill will vastly increase the amount of recoverable damages in these cases far beyond the level and intent of the law when it was first enacted and as it has been applied for generations. *In light of the already outrageously high medical liability insurance costs facing physicians and hospitals, not to mention the enormous reduction in patient revenue as a result of the Covid-19 pandemic that delayed elective surgeries and prevented patients from leaving their homes, **MSSNY strongly opposes this measure and urges that it be defeated.***

The law currently allows the decedent's estate and family members to bring separate actions - which inevitably become linked - to hold tortfeasors accountable for both economic damages and the pain and suffering caused to the decedent. The decedent's estate sues for both the decedent's economic losses and damages for the pain and suffering of the decedent. These pain and suffering damages are awarded to the decedent's estate when the jury determines that the decedent experienced pain prior to death. In virtually all cases, it is the decedent's family members who are the beneficiaries of these awards through their participation in the decedent's estate. On top of this, family members can bring their own suit for economic loss - which includes the loss of consortium and damages for custodial care.

Given this huge increase in the types of damages that would be awardable, **one recent actuarial study has estimated that legislation of this type could increase New York's already outrageously high medical liability premiums by OVER 40%.** This extraordinary increase would be on top of the already exorbitant premium costs New York's physicians and hospitals continue to incur, with many specialties across the New York City and Long Island region of the state already paying hundreds of thousands of dollars per year for their liability coverage. New York has by far the

highest liability awards and costs in the country, far surpassing more populous states such as California and Texas. A recent report from Diederich Healthcare showed that in 2019, New York once again had the highest cumulative medical liability payouts of any state in the country, 68% more than the state with the second highest amount (Pennsylvania). It also had the highest per capita liability payment, 10% more than the 2nd highest state (Massachusetts).

While some advocates have claimed that New York's existing wrongful death law is an outlier compared to other states' laws, what they do not mention is that most of these other states also have comprehensive provisions to contain excessive medical liability insurance costs, including limits on damages. New York has no such law, which is why our medical liability insurance and payout costs far exceed every other state in the country, which is one of the major reasons why New York regularly receives the dubious distinction of being one of the worst states in the country to be a doctor [Best & Worst States for Doctors \(wallethub.com\)](#).

Even under ordinary circumstances, this bill would have an absolutely devastating impact on our health care system, and jeopardize patient access to care as physicians simply retire or move to other states. But the myriad of challenges thrust upon physicians and other providers of health care arising from the pandemic makes this legislation absolutely unconscionable. Many physicians continue to face significant financial challenges in recovering from the huge drop in patient visits that arose from the need for social distancing. An AMA survey reported that during the height of the pandemic the average number of in-person visits to physician offices fell from 97 per week to 57. As a result, physicians averaged a 32% drop in revenue for most of 2020, with about one in five doctors seeing revenue drop by 50% or more, while nearly 1/3 saw a 25%-49% decrease. Even as we emerge from the pandemic, physicians face greatly increased overhead costs to increase safety for themselves, their staff and their patients, including excessive personal protective equipment (PPE) costs. *Advancing this legislation threatens access to care to countless numbers of New Yorkers who depend on their physicians for their care.*

This bill would do nothing to address the problems facing our health care system, and would instead make these problems worse by adding substantial new costs. It would make it even more difficult for our health care system to recover from the pandemic. New York's needs comprehensive medical liability reform to bring down these excessive costs, rather than additional laws that will make it even more one-sided.

For all of the reasons stated above, we urge that this measure be defeated.

Respectfully submitted,

5/23/22

MMA - oppose

MSSNY DIVISION OF GOVERNMENTAL AFFAIRS

PRESIDENT'S MESSAGE**PART II—THE NEXT STEP****BRUCE MOLINELLI, MD PRESIDENT***(Continued from page 5)*

advocacy. What better way for a physician to engage in an important goal than to be given the forum to “tell” others with a sense of experience and expertise what needs to be done to “fix” our professional environment. So tell your advocacy society. Tell us! “

(You mean someone will actually listen? All I have to do is speak my mind out or even exploit the forum to wax philosophically and there will be an audience?” , you ask.) Yes! Exactly that!

These advocacy entities, like the WCMS, will listen, create , manage and enact effective change for the better. They already have. You are probably just ill informed, if you are like the average member.

Did you know the The WCMS will help you with insurance claims disputes, provide CME and assist you with finding medical office specific professionals such as accountants and lawyers?

WCMS should be one of your constant contact points to call in concerns, injustices, and new thoughts whether it be with insurance companies, big business, government or legal. This is your outlet, your friend, your voice!

Do you know of the following initiatives and success currently being confronted and achieved by MSSNY with the support of WCMS?

1. Wrongful Death-passed by the State Legislature awaiting signature by the governor that could potentially raise malpractice premiums by 40%.
2. Continued review and prevention of over-expansion of scope of practice of other health care entities such as optometry, nurse anesthetists and pharmacy.
3. Litigation against United healthcare who denied payment of facility fees to out of network based surgery
4. Defense of the liability protection laws for physicians and hospitals for care of Covid patients (or limitations of providing care due to Covid) during the pandemic.
5. Prevention of State entities from publicizing all complaints against a physician whether or not they had been substantiated. This would have included any complaint for anything without any filter even those complaints prior to any investigation.

..... to name a few.

--Not so subliminal message by now <https://www.mssny.org/> <http://www.wcms.org/>

So get involved at the granular level, without adding an additional task to your over subscribed lives. The WCMS and other physician advocacy groups are already in place, with a core of interested and dedicated physicians who are successfully fighting for the physician to allow us to care for our patients. Ultimately, this is about creating an environment in which patient care is not compromised or short changed. The various society's could use your support in the form of your acknowledgment of their function, achievements and your input.

--Come on! Check out the websites , <https://www.mssny.org/> <http://www.wcms.org/>

Next month, I'll let you in on some of the specifics of how to be more involved without the sense of burden on your already over challenged lives. I get it . Some days we cannot even find

time to _____. (Fill in the blank with some essential body function of your choice).

So, for now, just be aware of the society and its function. Understand the good it does to educate and enhance your daily experience and protect the profession as an honorable and rewarding calling ultimately to provide quality care to our patients. Advocacy is the help we need to improve our daily practice and should not be a secret.

“I went to the bookstore and asked the saleswoman, ‘Where is the self-help section?’ She said if she told me, it would defeat the purpose.” George Carlin



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DOH Extends Deadline for Completing Cultural Competence CME Required for Medicaid Managed Care Network Participation Until November 1

The New York State Department of Health (NYSDOH) has extended the deadline for physicians and other network providers of Medicaid Managed Care plans to complete cultural competency CME required in the state's Medicaid Managed Care contract until November 1, 2022.

Specifically, the Model contract section 15.10(c,) states that a plan must “ensure the cultural competence of its provider network by requiring Participating Providers to certify, on an annual basis, completion of State-approved cultural competence training curriculum, including training on the use of interpreters, for all Participating Providers’ staff who have regular and substantial contact with Enrollees.”

NYSDOH has indicated that this requirement can be met through coursework offered by the US Department of Health and Human Services (HHS), Office of Minority Health, Think Cultural Health. The training is online, free and offers several provider specific programs: [Education – Think Cultural Health \(hhs.gov\)](https://www.hhs.gov/omh/education/think-cultural-health), including courses specifically for physicians. According to NYS DOH, only 1 of the 3 courses needs to be completed to meet the requirement.

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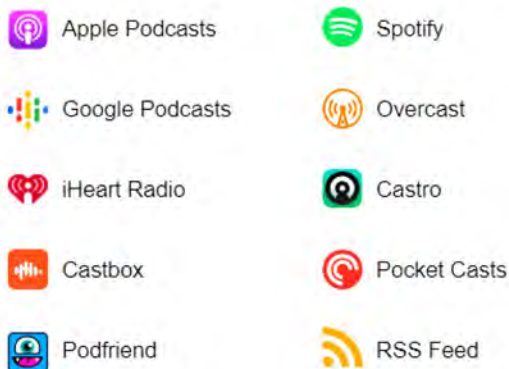
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MSSNY Podcasts

MSSNY

The Medical Society of the State of New York has created a number of podcasts on topics that are timely and relevant. In addition to weekly MSSNY Updates from the Division of Governmental Affairs, there are myriad timely and relevant podcasts on COVID-19 (both for physicians and patients) as well as a number of others on veterans, adult immunizations and emergency preparedness.



Click on the podcast titles to listen

MSSNY Announces two NEW Podcasts on COVID-19

★ A Discussion on COVID Vaccine for Patients ★

MSSNY President, Dr. Bonnie Litvack, President-elect, Dr. Joseph Sellers and Dr. William Valenti, Chair of MSSNY's Committee on Infectious Diseases discuss vaccines currently available for COVID-19 and answer many questions patients may have about the vaccines.

★ How to Talk to Patients About Vaccine Hesitancy ★

Dr. William Valenti, Chair of MSSNY's Committee on Infectious Diseases discusses the history of vaccine hesitancy and offers sage advice to listeners on talking to vaccine hesitant patients.

★★The additions of these podcasts marks 100 podcasts published on the MSSNY Podcast website!★★

Westchester Academy of Medicine 12th Annual Golf Outing & Fundraiser Wednesday, October 19, 2022—Westchester Country Club—Rye, NY



On Wednesday, October 19th the Westchester Academy of Medicine held its 12th Annual Westchester Academy of Medicine Golf Outing & Fundraiser. The Outing was held at Westchester Country Club in Rye. Following the golf, an additional group of members and guests joined the golfers for dinner, fellowship, and prizes.

Joseph Tartaglia, MD, Past President of the Academy & Chair of the Golf Outing Committee, welcomed everyone, thanked the Golf Committee, recognized and thanked all sponsors, and presented Mary Ellen Pilkington with a Declaration officially announcing that the name of the annual outing has been changed to honor her late father Dr. Charles A. Bertrand and herself for all of their dedication to the Society and Academy. The outing will now be named “The Westchester Academy of Medicine Bertrand-Pilkington Annual Golf Outing” in honor of them.

Raffles and a live auction were held at the event and all proceeds directly benefit the Academy’s very busy CME activities and its scholarship fund, which annually contributes to the Westchester Science and Engineering Fair held each year in the county.

We would like to thank all of our sponsors and players for once again making it a great event. We hope to see more of our members next year in attendance.

