



Bulletin

Sept/Oct 2017

MEMBER MAGAZINE FOR THE POLK COUNTY MEDICAL SOCIETY

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Investing in Health
Governor's Opioid Forum



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Des Moines, Iowa
September/October 2017

2017
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Bulletin

Sept/Oct 2017
MEMBER MAGAZINE FOR THE POLK COUNTY MEDICAL SOCIETY

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GOVERNOR'S OPIOID FORUM

at Drake University

Iowa Gov. Kim Reynolds hosted "Identify, Prevent, Recover: Combating Opioids in Iowa" at Drake University's Sussman Theater, on October 26th, 2017. In addition to the governor and lieutenant governor, Polk County Medical Society physician members, Craig Mahoney, M.D., Christina

Taylor, M.D. and Thomas Benzoni, D.O. were invited to participate. They gave a provider's perspective on the issue and discussed how this epidemic and proposed legislation may impact the care of patients and practice of medicine



Dale Woolery with Governor's Office of Drug Control Policy, moderates a panel of health care professionals from Drake Pharmacy, University of Iowa Nursing and Polk County Medical Society Physician members.



Polk County Medical Society physician member panelists explaining their perspectives on patient and practice impact. R-L: Thomas Benzoni, D.O., Christina Taylor, M.D. and Craig Mahoney, M.D.

THE TIME IS NOW . . .



To Be Proactive, Involved and Engaged

By: Matthew Rau, M.D.

Eventually, each of us as individuals or as a group must decide what really has meaning for us in our personal and professional lives. PCMS is not just a social organization or a political outlet. We are your local collegial organization of physicians who strive to maintain excellence in the practice of medicine, preserving the rights of our patients here in Central Iowa and advocating on behalf of our patients at home and nationally.

Now more than ever, it is critical that doctors remain engaged in their local medical society. \$375 DUES IS SUCH A BARGAIN, and you receive benefits that barely cover the cost of membership. PCMS members receive top level Advocacy, your tickets to our Annual meeting, entrance fees to events, i.e. Zoo Brew, and other venues, food and drinks at special events with your colleagues, a Pictorial Membership Directory, Bi-Monthly Bulletin that keeps

you updated on what is going on with your colleagues and in Central Iowa, a diligent and outstanding board and a competent and efficient medical society staff.

PCMS has been representing physicians since 1851 and continues to be the voice of medicine for Central Iowa doctors.

- **PCMS is recognized throughout the community, state, and nation as outstanding advocates for doctors and their patients.**
- **PCMS MEMBERSHIP HELPS PROTECT THE PRACTICE OF MEDICINE AND REPRESENTS YOU IN OUR LOCAL COMMUNITY.**
- **PCMS REPRESENTS YOU and provides visibility as partners with the Des Moines Hospitals, Health Department, Iowa Board of Medicine,**

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insurance industry, community businesses, local media, medical societies, groups, and individual members.

- PCMS is YOUR ADVOCATE with our cities, Iowa Legislature, and our U.S. Congressional Delegation.

YOUR PCMS represents YOU OUR MEMBERS, large groups, hospital based groups, small groups, individuals, all with timely advocacy in the face of government intrusion at the local, state national level, on your behalf.

- **PCMS keeps you updated weekly on advocacy issues that matter to members.**
- **PCMS board, members and staff have years of respected relationships with each of our Iowa Congressional Delegation.**
- **PCMS meets personally with our Congressmen year in and year out to ensures that meaningful legislation is passed** for our doctors and their patients.
- **YOUR PCMS is THE ONLY NEUTRAL FORUM FOR CENTRAL IOWA PHYSICIANS TO MEET WITH THEIR COLLEAGUES! PCMS has** social activities at various venues, i.e., Civic Center, Travel, Golf, Zoo Brew, Wine Fest, and many fun activities for

colleagues, family, staff, and friends to get together.

- **YOUR PCMS receives consumer concerns** and arbitrates on behalf of **PCMS members ONLY.**
- **PCMS PROVIDES REFERRALS DAILY FOR PATIENTS**, and provides education and background information. One new patient referral more than pays for your dues.
- **PCMS PUBLISHES THE ONLY ALPHABETICAL PICTORIAL MEMBERSHIP DIRECTORY** in the state with **ONLY MEMBERS LISTED.** This PCMS Directory is distributed to doctors, hospitals, insurers, pharmacies, and consumers in Central Iowa. This is a widely used Directory for consumers to see their doctors.
- **PCMS PUBLISHES A BI-MONTHLY publication, the Bulletin** which keeps you updated on what is going on in medicine in your local community, and nationally, with colleague articles, Doctors in the News, Birthdays, Events, and Special Guest articles.
- **PCMS HOSTS AN ANNUAL MEETING EACH YEAR WITH ELECTION OF OFFICERS.** Your **PCMS dues covers the cost of your Annual meeting dinner** each year with outstanding speakers at wonderful venues. The 2018 PCMS Annual Meeting will be held on **Thursday, April 5, 2018 at**

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Congratulations to Christopher Blodi, M.D., who was recently inducted to the American Society of Retina Specialists "Retina Hall of Fame" as a charter member class of 2017. The Retina Hall of Fame is established to honor many talented and dedicated individuals who have devoted their professional lives to innovation, research and clinical care in the field of retina.



Join DMU in training tomorrow's osteopathic physicians and leaders

Des Moines University seeks a faculty member in its Osteopathic Manual Medicine (OMM) Department to participate in clinical patient care and academic, scholarly and service activities.

Qualifications for this position include a doctor of osteopathy or osteopathic medicine degree from an AOA-accredited college of osteopathic medicine; board-eligible status or board certification in OMM/NMM (alternative board certification or board-eligible status may be considered); and an unblemished record of clinical skills/practice and ethical conduct. Three years of experience in the practice of clinical medicine are preferred.

Qualified candidates are invited to apply by submitting a CV, cover letter and statement of teaching interest to www.dmu.edu/employment. Application submission deadline is December 31, 2017. For a more complete job description, fulltime benefit summary or more information on Des Moines University and/or its programs, visit www.dmu.edu/employment.

Founded in 1898, Des Moines University offers eight graduate medical/health sciences degrees in its three colleges. An equal opportunity employer, DMU evaluates qualified applicants without regard to race, color, national origin, ethnicity, creed, religion, age, disability, sex, gender identity, sexual orientation, pregnancy, veteran status, genetic information and other characteristics protected by law ("protected class"). Candidates from underrepresented groups are encouraged to apply.

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the Downtown Des Moines Embassy Club. Doctor J.D. Polk, Chief Medical Officer of NASA, formerly a PCMS Board Member, will be our guest speaker. He is the Chief Medical Director responsible for the medical care and protocol for the **space stations, Space Centers, Astronauts, and NASA staff.**

- **PCMS has a perpetual foundation to provide Des Moines University and the University of Iowa with scholarships for students that are from Iowa and will practice in Iowa.**

PCMS should be proud of their Volunteer Physician Network (VPN) program which was one of the first medical societies in the country, and the **only one in the state of Iowa** to provide free specialty care on a rotating basis to Iowans in need. Last year the 484 PCMS physician specialists volunteered along with their partners, Des Moines Hospitals, and surgery centers, to provide almost \$9 million in free specialty care to those in need with dignity in their own offices. The VPN receives referrals from 53 free clinics in Iowa each year and the program continues to grow. This program

allows doctors to participate in giving back to the community and caring for those in need, "the reason you went into medicine". This is one of the most important programs in Iowa supported by the Iowa Legislature and the Iowa Department of Public Health. This program is respected throughout the country.

These are just some of the benefits of joining your colleagues here in Polk, Warren, Dallas, and Madison counties to represent the practice of medicine for you and your patients. We need to continue to be here for our children and grandchildren representing the practice of medicine, and it takes all of us.

We need all of you to be members! Continue to keep your thriving and proud local Polk County Medical society the excellent association that it is! **WE NEED YOU as Members! Please consider sending your dues today to the Polk County Medical Society and remain an integral member of your medical community.**

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TIME TO MOVE UPSTREAM



By Yogesh Shah, MD, MPH,
Broadlawns Medical Center

and . . . 'Invest' in our Health

Healthcare costs continue to outpace general inflation, typically by two-fold. The major source of this problem is our unhealthy population. “Upstream” environmental factors greatly impact our “downstream” health. Upstream factors are many - primarily poor nutrition, inadequate housing and education, and low incomes – all considered to be social determinants of our health. Belief that the insurance component alone will somehow fix this cost problem is wishful thinking.

To meaningfully address healthcare costs in Iowa and beyond, we must consider new approaches. To reign in ever-increasing healthcare costs and enhance better population health, we need to explore new solutions ‘upstream’ and invest in our collective health and well-being.

This is not about implementing ‘socialized medicine.’ It’s about using our limited resources more wisely on key determinants of overall health that can ultimately impact improved health and control healthcare costs.


In 2016, we spent 18.6 percent of our economy on healthcare, reaching \$3.2 trillion annually. Is this money well-spent? By comparison, in 1960, we spent only five percent on healthcare. On a per capita basis, the U.S. performs poorly on many key health indicators. For example, our country has lower birth weight, higher maternal and infant mortality, as well as higher incidents of obesity, diabetes, heart disease, chronic lung disease, disability rates, mental illness and, surprisingly, a shorter life expectancy. We also have more drug-related deaths than other industrialized countries.

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STRATEGIES

to increase childhood immunizations



By: Carlos Alarcon, M.D., M.P.H.

This summer, clinics, pharmacies and local health departments were bustling with activity as students were receiving their meningitis vaccine before the first day of school approached. As health care providers, we are aware that our patients do not always schedule their appointments for physicals and immunizations in a timely manner. There are many strategies that we can implement to make sure children are receiving their immunizations on time. Here are few strategies to think about including at your practice:

- Make sure to review the child's immunization records at every appointment. So if they are coming in for pink eye or a well-

child examination, the child will have all the required and recommended vaccines no matter if they are sick or healthy.

- Send reminder cards, emails, text messages, etc. to encourage parents and guardians to make immunization appointments. This will help encourage parents and guardians to make immunization appointments and not to wait until they are sick or injured.
- If their children accompany siblings to a doctor's appointment, take the time to review all children's immunization records who are present and provide an opportunity to offer

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PCMS ZOO BREW *for the* KATHIE J. LYMAN SCHOLARSHIP FUND

The Polk County Medical Society members, Broadlawns, Mercy and UnityPoint Residents, family, friends and sponsors attended the PCMS night at the ZOO BREW on Thursday, September 21, 2017 at the Blank Park Zoo. This was an

event to help raise funds and awareness of the Kathie J. Lyman Scholarship for medical students. It was a “wild” night of animals, fun, camaraderie, food and live music for a great cause – promoting the future of medicine.



Julius Conner, M.D. joins the ZOO Brew festivities.



The PCMS ZOO Brew is held annually inside the main gates at the Main Pavilion so members may be right in the thick of the fun and music.



Continued from page 14



Zoo Brew Kidder Benefits sponsor and LION LEVEL Platinum Sponsors R & M Rehab prepare to enjoy the beautiful weather, lively music and fun with PCMS physicians.



L-R: Ellen Jones, Alex Polzin, Gregg Polzin and Susy Polzin look forward to their annual trek to enjoy food music and all of the wild happenings at the PCMS Zoo Brew.

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Continued from page 15

L-R Dr. Janie Hendricks, D.O. and Ethel Condon, M.D. find time to partake and enjoy the PCMS Zoo Brew camaraderie together.



PCMS Zoo Brew Sponsors meet and speak with PCMS members and guests: R-L top row: Ron Pins, and PCMS volunteer Ronda Bern. Bottom Row R-L: Lisa Northrop and PCMS member Christy Benson, M.D.

PCMS Zoo Brew Sponsors from the Foster Group get ready to go on safari!





Continued from page 16

Carlos Alarcon, M.D.
participated in the Zoo Brew
in support of the Kathie J.
Lyman Scholarship fund.



PCMS received celebrity
service from City Councilor
Joe Gatto who helped to
serve the food.

Animals were everywhere
at the PCMS Zoo Brew,
including the dining tables!
What a fun event!



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(Talking points will be sent to all Members)*

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One would think that most comparable countries outspend the U.S. on healthcare services. The facts are quite the opposite. In 2009, our country spent 16.3 percent of its gross domestic product (GDP) on healthcare, about six percentage points higher than the average spent by 10 other industrialized countries (see graph). Yet, our growing appetite for more healthcare spending results in poorer health outcomes. This is both puzzling and frustrating – for policymakers, taxpayers, employers and their employees.

Unlike healthcare, U.S. public spending on social services falls far below other developed nations. In 2009, the U.S. spent 9.1 percent of its GDP for aggregate social services versus the average of 15.8 percent spent by all 10 other wealthy countries. When combined, healthcare and social services spending in the U.S. ranks in the middle of the pack of peer countries, with a disproportionately higher amount spent on healthcare than on social services.

The U.S. is the only wealthy country where healthcare spending accounts for a greater share of GDP than social services spending - an “imbalance” our country has embraced. Over decades, we’ve allowed soaring healthcare costs to smother the necessary investments we must make to improve the health of our communities. In other words, our country inefficiently relies on medical care and insurance to address problems that we fail to address upstream, at their source.

High healthcare spending in the U.S. has far-reaching economic consequences, such as wage stagnation, personal bankruptcy and budget deficits. Extensive evidence

suggests that making the right investments in social well-being substantially improves population health outcomes. For example, housing vouchers, home energy assistance and the availability of supermarkets in low-income areas are known to reduce obesity, diabetes and nutritional risk in children. Additionally, availability of prenatal and infant nutritional assistance is associated with reduced infant mortality.

For meaningful change to occur, balancing healthcare with social determinant strategies must emerge both nationally and locally here in Iowa. The Iowa Healthiest State Initiative, a nonpartisan, nonprofit organization, is just one example of attempting to improve the physical, social and emotional well-being of our Iowa communities. This initiative is a good start but other bold private and public initiatives are also needed.

Investing in our health upstream makes a great deal of sense. Spending for the ‘right’ community measures that impact health will provide better health outcomes for Iowa and our nation.

Such expenditures will take time to translate into positive health outcomes but we need to start investing now. We need to stop inefficient healthcare spending and, instead, allocate funds for social determinants that matter most - nutrition, adequate housing and education. By doing so, we will make our communities and state both healthier and more productive. We cannot control one without the other.

David P. Lind, Benchmark & Heartland Health Research Institute referenced.

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Celebrate THE 2017 GREAT AMERICAN SMOKEOUT *this November!*

Initiated in 1970 by a Massachusetts man, the Great American Smokeout is celebrated every year on the third Thursday of November. Promoted by the American Cancer Society, this event serves as an effort to promote cancer prevention, reduce second hand smoke exposure and improve the health of all Americans.

Around 17 percent of Iowans aged 18 and older reported as being current smokers in 2016 (BRFSS, 2016). Tobacco use increases the risk for coronary heart disease, stroke and lung cancer.

As a healthcare provider, you have a special role in educating your patients about tobacco's impact on health and tobacco cessation services offered here in Iowa. This November celebrate the Great American Smokeout by encouraging your patients to call Quitline Iowa at 1-800-QUIT-NOW (784-8669) to access qualified tobacco cessation coaches and other necessary support for successful tobacco cessation. Quitline Iowa is a toll-free number available to all Iowa residents, 24 hours a day and seven days a week.

The Quitline Iowa website also offers providers a Quitline Iowa 101 training, as well as a CME and CE certified training

program on the Ask, Advise and Refer (AAR) tobacco-cessation intervention protocol. The AAR protocol training also includes a review of approved pharmacotherapy that may help tobacco use cessation.

To learn more about Quitline Iowa or to access the Quitline Iowa 101 and the AAR tobacco-cessation intervention protocol trainings, go to: <https://iowa.quitlogix.org>. If you have any questions, you may contact Megan Aucutt, Community Health Consultant, Tobacco Use Prevention and Control Division at the Iowa Department of Public Health, at (515) 281-6225.

References: Iowa Department of Public Health (IDPH), (2017). Health in Iowa BRFSS Annual Report from the Iowa 2016 Behavioral Risk Factor Survey. Des Moines: Iowa Dept. of Public Health, 2017. Retrieved October 2017, from <http://www.idph.iowa.gov/brfss>.

This article was prepared by the Iowa Comprehensive Cancer Control Program in collaboration with the Tobacco Use Prevention and Control Division, Iowa Department of Public Health. For more information, please call 515-281-7689 or visit www.idph.iowa.gov.

Continued from page 13

immunizations to all children who are not up-to-date on their immunizations.

- Even if you are not the child's primary health care provider, review their immunizations at the time of their appointment. Look up their immunization records in Iowa Immunization Registry Information System and offer the needed immunizations or offer referral appointments.
- Hold flexible or extended hours such as evenings, early mornings or even weekends to ensure that parents and guardians can get their children to appointments when working full time.
- Have a nurse or medical staff review child's immunization records while the child is in with the health care provider. The staff member can review and prepare the immunizations needed so when the health care provider is done with the child, the staff member can immediately administer the immunizations.

Another option your clinic or your health department can implement are standing orders. According to the Immunization Action Coalition, standing orders authorize nurses,

pharmacists and other appropriately trained healthcare personnel where allowed by state law, to assess a patient's immunization status and administer immunizations according to a protocol approved by an institution, physician or other authorized practitioner. Standing orders increase immunization rates and reduce missed immunization opportunities.

The Immunization Action Coalition provides resources on their website on how to implement standing orders for immunizations for your practice and information regarding administering immunizations under standing orders. Incorporate some of the suggestions above to your organization so the next time we have an H1N1 outbreak or a recommended immunization like meningitis becomes required, your organization will have strategies in place to improve childhood immunizations rates. For more information on standing orders, please visit <http://www.immunize.org/standing-orders/>.

Information provided from The American Academy of Pediatrics and The Immunization Action Coalition

DECEMBER BIRTHDAYS

1 Hancock, Shelley, M.D. Maanum, Scott, M.D.	11 Afroze, Aneesa, M.D. Shah, Yogesh, M.D.	20 Jumrussirikul, Pitayadet, M.D. Koele-Schmidt, Lindsey, M.D.
2 Frerichs, Darin L., D.O. Loeb, Edward F., M.D. Meek, Eric, M.D. Mintzer, Albert J., M.D. Olson, Leatrice A., D.O.	12 Sager, Fredric E., D.O. Yankey, Jon R., M.D.	21 Bowshier, Brian C., M.D.
3 Dewdney, Donner, M.D. Kawamura, Myles K., D.O.	13 Grundberg, Julie, D.P.M. Kallemeier, Patricia M., M.D. Rettenmaier, Lawrence, M.D.	22 Stratton, Valerie L., D.O.
4 Davick, Jeffrey P., M.D. Holland, Sarah, D.O. Poudyal, Shardul, M.D.	14 Baker, Laurence J., D.O. Jacoby, Michael R. K., M.D. Lyman, Kathie	23 Gilg, Joseph O., M.D.
5 Cook, Jennifer S., M.D. Lindell, Larry K., M.D.	15 Healey, Holly B., D.O. Lindaman, Lynn M., M.D.	24 Rehmann, Joshua J., D.O.
6 Gupta, Sudeep K., D.O.	16 Sarno, E. Michael, M.D. Van Zee, Martin, D.O.	25 Frier, Carole A., D.O.
7 Bardole, John, M.D.	17 Crenshaw, Meredith, M.D.	27 Mayfield, Tim, M.D. Wimer, Carey, D.O.
8 Jones, Kathleen, M.D.	18 Hiatt, Bradley K., D.O. Kline, Thomas, D.O.	28 Bush, Audrey, M.D. Deming, Richard L., M.D. Giddings, Jeanne M., D.O.
9 Sixta, Debra A., M.D.	19 Feilmeier, Mindi, D.P.M. Hilgersen, Alan, D.O. Leddin, N. Kim, D.O. Peacock, Thomas A., M.D. Vandivier, William J., D.O.	29 Olesen, Kaaren, D.O. Trible, John, M.D.
10 Wittmer, Jason B., M.D.		31 Paul, Robert K., M.D. Schroeder, Daniel J., M.D. Thieman, Kent C., M.D.



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HOLD Still

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I wish I had a dollar for every time I was told to “hold still” when I was a kid. I also wish I had a dollar for every time I’ve been asked if I was Dr. Rinderknecht’s son! I’d be retired if I got paid for either scenario! But you know, growing up is **HARD!** We had a lot to deal with...riding our bikes, climbing trees, playing basketball all day, playing tackle football in a friend’s front yard, and, of course, going to the pool. Atari 2600 was just coming to a house near you and there were no smart phones to occupy our time and thoughts.

But back to the words I heard over and over so many times... “Reed, **HOLD STILL!**”

I can’t help but smile when I think about running downstairs from my attic bedroom on a Saturday morning about 6 AM to crawl into my parent’s bed for a few minutes of cuddle time before turning on the cartoons and watching a little “Superfriends” or “Speed-Racer.” Being the parent of two amazing kids, I now understand how exhausted my own parents must have been from a long week of working and maintaining a busy household of three kids. I’m certain they were praying all of us would sleep in past 7 AM on Saturday morning. I loved getting that extra precious hour of sleep, but it didn’t happen very often!

For most investors, “holding still” is equally as difficult as it was for a six-year-old that jumped into his parent’s bed on a cold

Saturday morning. Investors tend to want to wiggle...a lot! In my 21 years of being in the financial planning and investment management business, this is one of the biggest mistakes I’ve seen people make. Usually, investors want to “wiggle” the most when things get a little uncertain and crazy. The market has a way to discipline most of these wigglers that also isn’t very fun to endure. Jumping in or out or up and down usually only proves that no one can predict the future and we worried a lot about normal volatility. Markets go up roughly 70% of the time and down about 30% of the time*... (Hint: that’s good, if you can resist wiggling too much!) The best way for all of us to have a higher probability of long-term success is to do these five things:

1. Make sure you understand what your money needs to do for you to achieve your goals
2. Have a written Investment Policy Statement and consistently execute that strategy
3. Have a plan on what/how you’ll respond when (not if) things get crazy
4. Review your financial planning and investment policy regularly with your financial advisor
5. Don’t sweat the day-to-day craziness, and get out there and enjoy life!

*Source: Dimensional Fund Advisors –
“Performance of the Premiums”

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