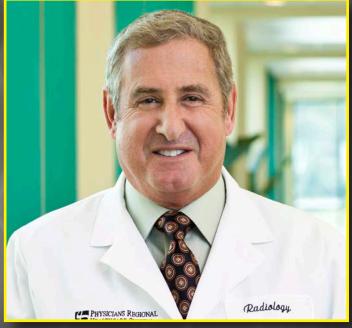


November/December 2013 • Volume 12, No. 6 • The Official Magazine of the Collier County Medical Society

# CCMS Member Spotlight Dr. Corey Howard and Dr. Daniel Singer

**Leaders in Organized Medicine** 





#### In this issue:

**Investing in Your Employees** 

Prescription for Taking Your Business to the Next Level

Foundation of CCMS Supports Medical Student

Member Event Photos

## **CALENDAR OF EVENTS**

Unless otherwise noted, go to www.ccmsonline.org to register or call (239) 435-7727

#### Friday, November 15, 6:30pm New Members Welcome Reception

Tiburon Golf Club at the Ritz Carlton Golf Resort
Sponsors: BMO Harris Bank, Synovus Bank,
Avow Hospice & United Nursing Services,
Get Out of Town Travel with Norwegian Cruise Line
& Performance Physical Therapy
Complimentary for CCMS members and one guest per member

#### **2014 SAVE THE DATES!**

Saturday, March 1, 8:30am - 12:30pm Women's Health Forum NCH Downtown, Telford Building

Saturday, May 3
Foundation of CCMS Golf Tournament
& 2014 CCMS Annual Meeting
Grey Oaks Country Club

July 29 - August 5
CME Cruise on the Mediterranean

#### Member Dues Reminder

Don't forget to submit payment for your 2014 CCMS membership dues by December 31, 2013. You (or your group) can pay at www.ccmsonline.org (see our Membership page, where Alliance members can also download their join/renew form). Printed dues invoices will also be mailed to members who pay individually or to practices for group payment. To pay your FMA dues, go to flmedical.org, and to pay your AMA dues go to ama-assn.org.

# CCMS Board of Directors 2013-2014

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# **New Members**



Robert G. Chami, M.D.
Riverchase Dermatology
950 N Collier Blvd, Marco Island, FL 34145
Phone: 239-642-3337 Fax: 239-642-3053
Board Certified: Plastic Surgery
Specialty: Plastic Surgery



Jessica E. Sullivan, D.O.
Florida Cancer Specialists
8350 Sierra Meadows Blvd, Naples, FL 34113
Phone: 239-732-3140 Fax: 855-787-8929
Board Certified: Internal Medicine
Specialty: Hematology-Oncology



Nilusha T. Fernando, D.O.

Jaffe Sports Medicine & Rehabilitation
1865 Veterans Park Dr, Ste. 101, Naples, FL 34109
Phone: 239-254-7778 Fax: 239-254-7718
Board Certified: Physical Medicine and
Rehabilitation, Pain Medicine
Specialty: Physical Medicine and Rehabilitation

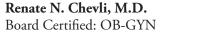


Andrew Yin, M.D.

Naples Heart Rhythm Specialists
700 2<sup>nd</sup> Avenue N., Ste 202, Naples, FL 34102
Phone: 239-263-0849 Fax: 239-263-2376
Board Certified: Internal Medicine and
Cardiovascular Diseases
Specialty: Electrophysiology



Julieta Gilson, M.D.
IPC The Hospitalist Company
9015 Strada Stell Court, Ste 201, Naples, FL 34109
Phone: 239-597-0196 Fax: 239-597-5628
Specialty: Internal Medicine



Retired Physician Member



Ricardo Martinez, M.D.

IPC The Hospitalist Company
9015 Strada Stell Court, Ste 201, Naples, FL 34109
Phone: 239-597-0196 Fax: 239-597-5628
Specialty: Internal Medicine

# Member News

#### **New Location:**

Chris Grevengood, M.D.
Total Women's Care
1890 SW Health Parkway, Ste 203, Naples, FL 34109
phone: 239-514-3131 fax: 239-597-5683

Janet Polito, D.O. Private house calls only, geriatric and homebound patients Phone: 239-494-4889

Robert Pascotto, M.D. and Dennis Stapleton, M.D. NCH Heart Institute 399 9th St N., Ste. 300, Naples, FL 34102 Phone: 239-624-4299 Fax: 239-939-5895

James M. Scanlon, M.D. Naples Vascular Specialists 130 9th Street N, Suite 120, Naples, FL 34102 Phone: 239-649-0550 Fax: 239-649-1785



Leslie E. Stapp, D.O.
Lipnik Dermatology and Laser Center
11181 Health Park Blvd, Ste. 2280, Naples, FL 34110
Phone: 239-594-9075 Fax: 239-594-9263
Specialty: Dermatology



# A Message from the President I'm Angry....

A reaction to UnitedHealthcare's De-Selection Process Richard Pagliara, D.O., President, Collier County Medical Society

In the last few weeks, several of our members received a letter from UnitedHealthCare dropping them from the UHC AARP Medicare Advantage program effective early 2014. This is not a local occurrence. In fact, this reduction of panel size is nationwide with Connecticut and Florida being hit the hardest with 19% to 45% decrease in participants in certain markets. Never mind the financial hit for these physicians, what about the patients – the customers of UnitedHealthCare?

Some of these patients will be forced to find another provider in their plan, travel a further distance for that care, wait longer for that care and reestablish a patient-physician relationship from scratch. Alternatively, many will scramble to find other coverage just to keep their current physician. They, too, should be angry.

Why is this happening? In UHC's de-selection letter, they suggest that, "significant changes and pressures in the healthcare environment" are a contributing factor. They also state through their spokesperson, Tracey Lempner, "Our focus is on offering access to physicians who in our view can provide quality, affordable care for more of the people enrolled in our plans. Collaborating with a more focused network of physicians and other healthcare providers will help us offer higher quality and more affordable healthcare coverage for our members."

According to the Fairfield County Medical Society, UHC's de-selection process criteria included the physician quality, local panel size, and cost of the physician provider to the insurer. The skeptics say, including the Connecticut Medical Society's own press release, "the company is focusing on profits rather than patient care," and "United's decision jeopardizes the health of seniors by disrupting continuity of care and access to care." I couldn't agree more.

What can we do? If you have received such a de-selection letter, you may submit a written appeal. However, this has not been very successful. Face-to-face appeal is recommended and more likely to overturn a decision. Also, you may contact the United Healthcare Senior Vice President of Network Management for Florida, Katherine V. Miller at (800) 509-3023. CCMS has provided its members a template letter to their patients to assist them in this transition (it can be found on our website). CCMS has also sent a letter to our local press voicing our concerns about the undesirable effects to our members and patients.

These are the times where physician and patients need to embrace solidarity to voice our displeasure with such decisions that will negatively impact access to care. I fear this will fall on deaf ears and who's to say more insures won't follow. And for that, I'm angry.

References:

Modern Physician

"From UnitedHealth: Strong earnings report, termination of docs from Medicare Advantage Networks" By Andis Robeznieks Posted: October 18, 2013

Fairfield County Medical Society website: www.fcma.org

D. CASTRO, MD
J. EDWARDS, ARNP
S. HALTZMAN, MD
T. JACOBS, MD
F. LEHNINGER, MD
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## CCMS Member Spotlight: Dr. Corey Howard and Dr. Daniel Singer Leaders in Organized Medicine

CCMS is proud to spotlight two of our members who are leaders in organized medicine at the state level. Dr. Corey Howard is Vice-Speaker and AMA Delegate at the Florida Medical Association, and Dr. Daniel Singer is President of the Florida Radiological Society. This is the first in a series of upcoming spotlights on our members who take their involvement in their professional associations to the next level. Many thanks to Dr. Howard and Dr. Singer, and to their families, for their service!

#### Q: What and/or who encouraged you to join and be involved with organized medicine at a local, state, and national level?

**CH:** A friend of mind approached me and said he was involved in the American Society of Internal Medicine and they were looking for emerging leaders to get involved. He brought me to a meeting and I was hooked. I was amazed at the people who were involved in the organization (many have been AMA presidents). The thought process, energy and information were unmatched as compared to anything I had previously been exposed to. After my first meeting I also got involved with the FMA through the American College of Physicians and the Florida Chapter of the ASIM. I saw a need to have the voice of doctors heard, I saw a need for someone to step up and allow themselves to be mentored and learn the process. Timing was everything and I was open to learn.

**DS:** When I began private practice radiology in Toledo, Ohio in 1982 my senior partners set a very high bar. At that time one was President of the Ohio State Radiology Society, another President of the County Medical Society, another President of the Northwest Ohio Radiology Society, and at both hospitals one of our radiologists was Chief of Staff. All of us were expected to participate in these societies and meeting attendance for these and hospital staff meetings were mandatory.

## Q: What was your perception of organized medicine when you entered the healthcare field, or before you became a member and leader in the federation of medicine?

**CH:** I really had no clue what organized medicine was all about. I thought it was just a few good ol' boys sitting around and talking. This is the farthest from the truth. I thought politics was for other people but the reality is that politics has everything to do with everyday life. How you think, act and do have everything to do with your character, integrity and your destiny. There is no one dominant player in organized medicine. It is a collaborative effort between many types of people, practices, and personal backgrounds. All political viewpoints are present and the group has to work together. That has been the biggest challenge. The diversity of individuals and the lack of true cohesiveness.

**DS:** Those early years were dominated by physician involvement at all levels. Hospital administrators would not dare to make major changes without physician support. Insurance Panels would always have a majority of physician members. Political candidates would always make certain that they would have community recognized physicians as named sponsors and advisers.

#### Q: What is your perception of and experience with organized medicine now?

**CH:** Organized medicine is a real melting pot. Doctors typically are not able to collaborate in meaningful ways as they are trained to think independently and not as a group. Most businesses learn that everyone must work together in order to achieve the goals of the business. I have been involved in organized medicine at the local, state and national levels for over 20 years. Doctors are getting better at teamwork and learning principles that would benefit the profession.

**DS:** Organized medicine is losing our previously recognized role as the major patient advocate. This has been detrimental to the patients we serve and our position in the community.

#### Q: What do you think are the toughest challenges in organized medicine?

**CH:** The toughest challenge is the overwhelming control the government is forcing on the profession and our patients. Medicine is a professional business. Most doctors have not been trained to be business minded and often times are left trading time for money as we educate ourselves out of real financial leverage. I say that because a doctor cannot cut his or her head off and put it on someone else and leave on vacation. Everything is dependent on the doctor. That model carries with it no leverage. I favor a team approach and innovative ways to bring income into a practice that would alleviate government controls allowing the physician to be in charge, spend more time with people so they can affect real change in their health.

**DS:** Our young physicians have been better trained than any of us in the past in the science of medicine. The difficulties of balancing career and family is much more of an issue now. This has had an effect on the ability of most of the younger physicians to be involved after the routine office and hospital work hours are over. However, to maintain our important position for our patients and ourselves we must continue to stay involved politically at all levels and this can only be accomplished by extending the workday.

#### Q: What do you think are organized medicine's best practices?

CH: The underlying care a physician provides is unparalleled. The model of fee for service is still viable in our ever changing system because



Dr. Corey Howard is re-elected Vice Speaker at the 2013 FMA Annual Meeting.

people are always going to want quality, communication and real care. They are not going to stand by with factory medicine as the government promotes. A system approach with a team of people will likely prevail as an efficient model as long as prevention is at the core. This will work with most but not all practices as some are based on acute illness or injury. There needs to be money saved from prevention to pay for other areas. Even a 10% reduction in diabetes due to obesity would make a huge impact financially as well as improving health.

**DS:** There is no question that medicine has shown great strides in knowledge and service delivery and more of society is cared for than any time in the past. Continuous medical education for all physicians is not just a phrase but mandated and is serving to improve the care that we deliver throughout our careers. There is now much more collaboration among physician specialties to improve patient care. Record keeping by physicians has improved over the years. Now with electronic medical records it will be easier to track treatment results for large populations. We are quickly moving into an era of Precision and Personal Medicine to allow patients to be sub-categorized into specific phenotypes to better access specific treatments and their results.

# Q: How did your experiences with organized medicine help you achieve your goals and/or contribute to the community, and what are you most proud of in your experiences?

**CH:** My involvement and experience put me in contact with key leaders and mentors who shaped how and what I do. My interest is primarily in the survival of the profession of medicine and helping physicians not only survive but thrive in this environment. I volunteer my time and efforts to achieve that endeavor through my involvement with the FMA. The FMA is one of the most influential medical societies in the country. We can do more as we gain more leverage through membership and through the continued growth of our PAC.

I am chair of the AMA delegation and that allows me to work with and lead some of our best physician leaders in the state get our voice heard nationally. The delegation is well respected and influential on major issues. However, implementation at a national level takes time, patience and persistence. We continue to work for the physicians of the state to make changes that allow physicians to practice medicine.

**DS:** I was proud to be part of a collaborative effort in northwest Ohio through Radiology and our County Medical Society to be the first part of the country to adapt the use of Non ionic Contrast for all patients. This was difficult due to the cost at the time. We were able to prove that overall the savings from preventing skin damage from ionic contrast extravasation alone more than offset the extra cost of non ionic contrast. Over the years since our adoption of universal use of non ionic contrast this is now accepted nationwide. The cost of non ionic contrast has dropped as an added benefit. During my tenure as President of the Ohio State Radiology Society we became the first state to mandate American College of Radiology Accreditation of Mammography. This led to an immediate upgrade of imaging services, as those sites who could not afford to maintain the strict criteria to image dropped out and let those that willing to continually improve their equipment and skills to move forward and expand high quality imaging to a larger population.



Dr. Daniel Singer enjoys a 2013 Florida Radiological Society meeting with Drs. Michael Theobald, Eric Vensel, and Theresa Vensel.

#### Q: Do you have any future goals for yourself and/or your medical societies?

CH: My goal is to continue to be a force for good in our community, state and around the country. I will likely become Speaker of the FMA house and in the future possibly president of the organization. Becoming president would allow me to continue to influence key leaders around the state and give them a reality check from the real world of medicine. This can only be done when we all work together toward a common goal. It is the goal that needs to be clearly defined and aligned. Then a plan created to achieve success.

**DS:** My goal as President of the Florida Radiology Society is to reintroduce our involvement in organized political fundraisers throughout the state. We always had isolated hotbeds of involvement but many areas had no activity. Most of these we are trying to do together with the FMA as more often than not our interests our intertwined with all our medicine colleagues. The first one was at my home September 6 for State Representative Matt Hudson. In addition to many local radiologists we were honored to have Rob Entel from Clearwater, FL to represent the FMA and our own CCMS President Rich Pagliara to represent CCMS. Our next event will be in Miami, quickly to be followed by Orlando, Lakeland, Tampa, and Jacksonville. At the same time we are trying to improve involvement and attendance for these events from our young physicians. Most of our state representatives and senators are also young and these relationships are indeed our future.

## **Investing In Your Employees**

Joseph Hohmann, Owner, Express Employment Professionals



"Innovation" is a hot concept right now, particularly in light of the enactment of the Patient Protection and Affordable Care Act. As well-known author and speaker Guy Kawasaki sums it up, "Innovate or die is how the world works." Usually when people discuss innovation in the context of a business setting such as a medical practice, it's associated with a new product introduction or a revolutionary treatment or procedure. But those are actually just the outcomes.

The true engine of day-to-day innovation stems from a practice's own workforce. So when you see a practice with the inability to innovate, the heart of the problem actually lies in the leaders' inability to hire and retain quality practitioners and support staff who will drive innovation.

Finding and keeping top talent is what will make or break a practice in the "new economy," so it is vital that as leader you do what it takes to ensure your practice's success. In order for your employees to become innovative in their responsibilities and

keep your practice at the forefront of efficient operation, you have to do three things. Building trust, cultivating passion, and inspiring loyalty must be at the top of your to-do list if you want to protect your workplace from one of today's top business challenges – the inability to innovate.

#### **Build Trust**

Trust is a two-way street. First, your employees must trust you in order to have the freedom to be innovative or motivation to work hard. This only comes through honest communication and consistent follow-through from your leadership. On the flip side, you also have to trust your employees. Kawasaki points out that you have to, "Trust your employee(s) enough to make the right decision for customers. When you show this level of trust and empower employees, they do the best work that they can."

#### **Cultivate Passion**

Today's successful practices have the most engaged and enthusiastic employees. But that passion has to originate at the top. "The leadership team must be passionate in order for the rest of the organization to be passionate," said OtterBox founder and CEO Curt Richardson in a recent Inc.com article. "Who wants to come to work for someone who is just going through the motions and working for the next professional advancement?" So make sure you're excited about your practice's goals and mission, then work to spread that excitement to your team who will in turn cultivate that excitement into a superior patient experience.

#### **Inspire Loyalty**

Maintaining an innovative workplace means that you must also foster a loyal workforce. Hiring top talent is the first step, but keeping your talented workers engaged and invested in your practice as a business is the only way to achieve long-term success. There are many ideas out there on how to build employee loyalty, but it really boils down to leadership. As the leader, you have to be willing to do whatever it takes to get the job done, says Kawasaki. "Employees need to know that you'll do the dirty, hard, and frustrating jobs too."

If you want your practice to be successful and stay ahead of the competition, then you must realize that hiring and retaining top talent is the only way. A passionate, engaged workforce is the key to becoming an innovative market leader in medicine. But, it's up to you to provide an environment that allows your employees to innovate. Give them what they need, and they'll return the investment, ten-fold.

Express Employment Professionals, Medical Staffing Division, a member of the Circle of Friends, is a locally owned full service staffing and professional recruiting organization dedicated to helping its clients succeed through recruiting and retaining top medical talent.



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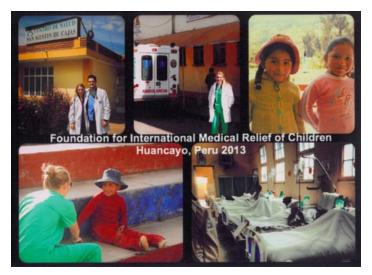
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## **Medical Mission Report**

Jennifer Reppucci, Naples – Foundation of CCMS donation recipient and medical student at the Philadelphia College of Osteopathic Medicine, Georgia campus, Class of 2016



I would like to thank the Foundation of Collier County Medical Society for your generous donation to my medical mission in Huancayo, Peru with the Foundation for International Medical Relief of Children. The time that I spent volunteering in Peru is something that I will cherish throughout my life and my medical career.

As soon as I arrived, it was evident that the majority of Peruvians are poor and lack the quality of healthcare and resources that we are fortunate to have in the United States. Things that seem so accessible and commonplace to us, such as clean water, public health standards and education, and the abundance of highly skilled physicians on every street corner, are luxuries that are foreign to many

Peruvians. Some of my first sights in Huancayo were of children, with a film of dirt over their skin and under their nails, chasing mangy stray dogs, as they rummaged through bags of garbage lining the streets. I knew I was definitely not in Naples, let alone most places in the U.S.

During the week I spent in Huancayo, twelve other students and I volunteered in an orphanage, a public hospital, and a family medicine clinic. At the orphanage we built and stocked first aid kits for each of their classrooms. We also gave lectures on nutrition, exercise, and hand hygiene. During a dental hygiene day we administered fluoride treatments to each of the orphans.

In the hospital and family medicine clinic I was able to work along-side physicians during their office visits. I was exposed to many illnesses I had just learned about during my first year of medical school, such as parasitic infections like Giardia and Ascariasis. We were able to discuss with the physicians how many Peruvians have an uneducated perception of medicine. They believe that if they go to the doctor they may die. Many patients we saw had waited over a week to be treated for appendicitis, worsening their infection and ultimately risking their own lives. Despite the many differences, such as their meager sanitation standards and archaic instruments and equipment, many things were the same. As one doctor said to me, "Medicine is medicine," meaning that no matter what, the human body is the same and they do the best they can with their limited resources to provide care and treatment to their patients.

I am so thankful to have had your support for this medical mission. I believe every medical student should travel outside of the United States to experience how physicians treat their patients and the struggles they face working to do so. The experience not only helped me appreciate my education and the healthcare we are fortunate to have, but it also gave me an opportunity to interact with a new subset of patients which will help me be a more well-rounded physician. Thank you again!

Ms. Reppucci is a life-long resident of Collier County who was a Laureate Scholar at Naples High School. She attended Wake Forest University where she majored in Health and Exercise Science and minored in Dance and Chemistry, and graduated with honors. She has volunteered with the Neighborhood Health Clinic and the Children's Advocacy Center. Ms. Reppucci is the first recipient of a donation from the Foundation of CCMS, whose mission is to "provide support and leadership to programs that address access to healthcare, promote health education and serve the community's public health needs."



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Catherine C. Haworth, Special Projects Consultant, Small Business Development Center/FGCU and President, Haworth Administrative Services, Inc.



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With partners ranging from institutions of higher learning to federal, state and local governments to private organizations, and funding from the U.S. Small Business Administration, Florida SBDCs offer this business management and technical assistance at little or no cost. **The Small Business Development Center (SBDC) at Florida Gulf Coast University (FGCU)** is part of this network and is a dynamic community-based resource, which helps small business owners take advantage of new opportunities to grow their business through a diverse collection of programs and services.

The SBDC is located in FGCU's Center for Leadership & Innovation, the external administrative unit of the Lutgert College of Business, providing a unique collaboration between the College of Business faculty, students and small business owners. The Center serves a five-county area and provides business assistance through various partner locations in Southwest Florida. The SBDC at FGCU employs **Certified Business Analysts** to provide the one-on-one consulting, information, and guidance to small business owners. Certified Business Analysts from the SBDC are available to meet with potential and existing small business owners at multiple locations in Southwest Florida. Certification is maintained by each analyst by continuing their education on an annual basis.

Working with the SBDC's Growth Acceleration program is confidential and the process is simple. It is structured to respect the time constraints of the business owners, yet provide a thorough review of all variables impacting the performance of the business. An initial interview takes place to retrieve profile information for the targeted business. The final report, referred to as a "health assessment" is presented to the business owner with recommendations to strengthen and enhance effectiveness within their organization. The owner now has a working document to assist in future planning for the continued success of the company. Reports include, but are not limited to: Industry trend comments and comparisons, demographic profiles, and a local market scan. Full financial analysis will include balance sheet and income statement, ratio, cash flow, working capital, and break even analysis. "What if" testing is performed to identify the impact to the company if working capital cycles or margins change.

Who can benefit from this type of report? Any stakeholder in your business; investors, vendors, partners and outside service providers such as financial or other professional partners would be interested in this report. This is an opportunity, provided **at no charge** (the Small Business Administration, Florida Gulf Coast University and other local partners provide program funding), that every business owner should consider.

The Small Business Development Center at Florida Gulf Coast University has recently added some new skills to the small business services. Social media, information technology, international business, and QuickBooks are now available to clients by our certified consultants. Program Technical Assistance, Disadvantaged and Minority Certification, and other services offered can be found at <a href="https://www.sbdc.fgcu.edu">www.sbdc.fgcu.edu</a>. This website also lists the training and seminars structured to meet the needs of the business community. In 2012 the Small Business Development Center at Florida Gulf Coast University spent over 7,000 hours helping 1300 clients create and retain over 600 jobs to support the growth and development of our region. If there is an issue that you have wanted to address with your business but haven't had time to do it, let the SBDC explore this for you. Would you like to know what the impact to your working capital would be if you collected your insurance claims or receivables 5 days quicker?

Collier County reports are prepared by Cathy Haworth, MBA, CBA. With an extensive background in the finance industry and economic development, Cathy is able to logically write your report in a clear, concise fashion to simply detail issues impacting your business. Contact information for Cathy is: <a href="https://haworth48@msn.com">haworth48@msn.com</a>, 239-565-0880.

# After 5 Social - August 29, 2013 CCMS & CCMSA Women's Networking Event - September 26, 2013 After 5 Social - October 3, 2013



Dr. & Mrs. Dan Stingl



Dr. & Mrs. Stephen Schwartz



Dr. Cesar DeLeon, Dr. Joanna Chon and Dr. Manual Pena



Dr. Joe Gauta, Dr. Rafael Haciski and Dr. Marilyn Varcoe



Dr. Lisa Aenlle-Matusz and Dr. Shona Velamakanni



Krysia Bruce, Kristina Jay, Dr. Prathima Moorthy, Dr. Nadia Kazim, and Dr. Harmindar Gill



Sherry Irvin, Marla Weiss and Dr. Catherine Kowal



Stella Kurteva, Dr. Tami Kuhlman and Dr. Dina Badra

# CCMS Meaningful Use Seminar - August 22, 2013 Foundation of CCMS Founder's Reception - September 14, 2013 CCMS General Membership Meeting - September 19, 2013



Dr. & Mrs. Bruno Dipasquale and Dr. James Talano



Dr. & Mrs. James Worden and Dr. & Mrs. Stephen Preston



Dr. & Mrs. Ronald Levine



Dr. Carolyn Monaco and husband Glen



Dr. Joseph Sullivan and Dr. Richard Pagliara



Dr. Karen Henrichsen and Dr. Alfonse Cinotti



Dr. Ray Montecalvo and Dr. & Mrs. Peter Boyd



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