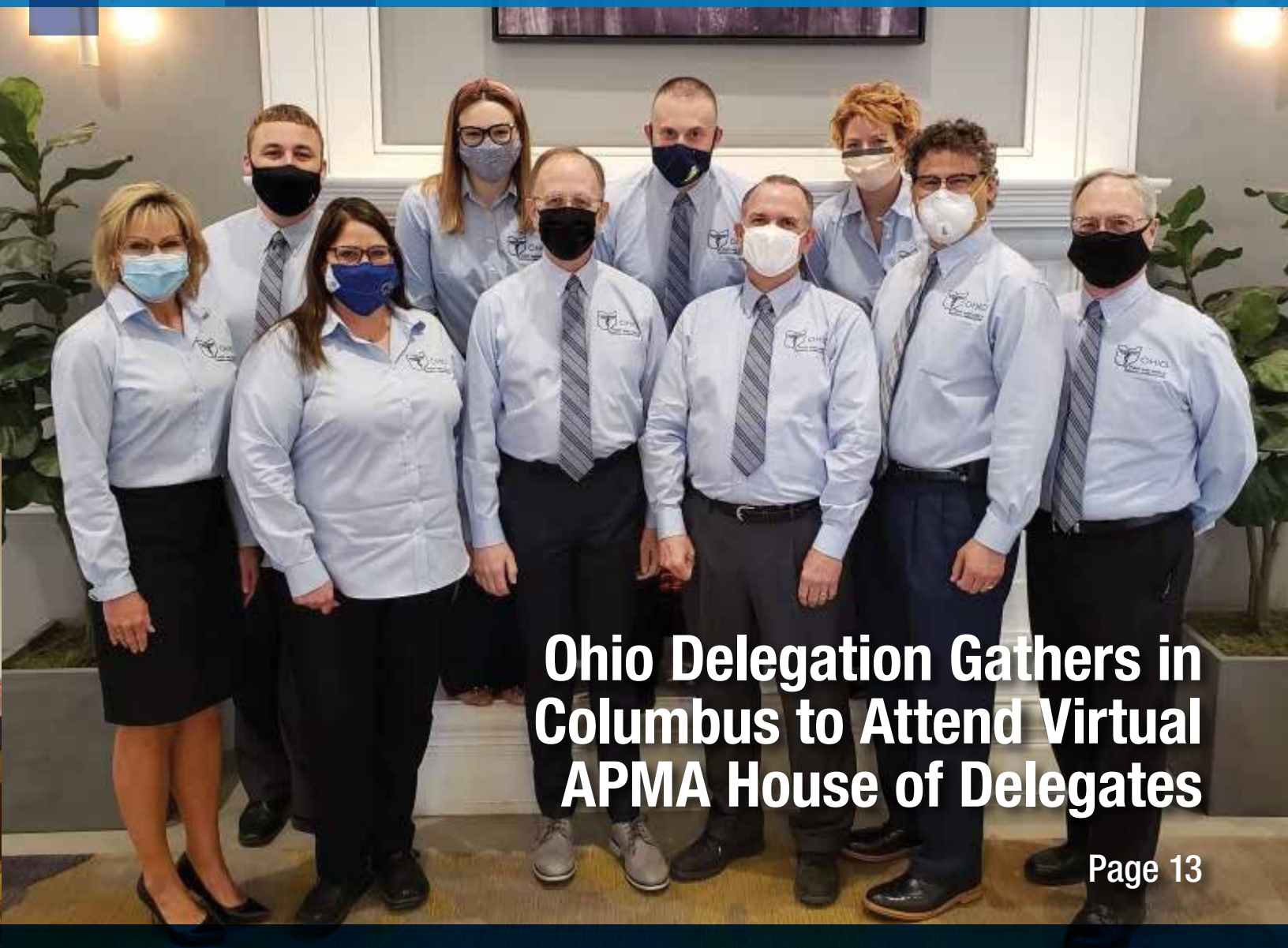


THE OHFAMA JOURNAL



THE OHIO FOOT AND ANKLE MEDICAL ASSOCIATION + WWW.OHFAMA.ORG

VOLUME 63 | NUMBER 2 | SPRING 2021



Ohio Delegation Gathers in Columbus to Attend Virtual APMA House of Delegates

Page 13

IN THIS ISSUE

President's Message2
Service Award Winners Announced3
From the Executive Director4
Calendar of Events.....5

COVID-19 Updates.....6
OHFAMA Updates8
Legislative and Regulatory Updates10
APMA Updates13

New 21st Century Cures Act in Effect . . .15
Advocacy Updates.....13
Kent State University Updates17
OHFAMA Classifieds.....19

A WORD FROM THE PRESIDENT

Kelly Whaley, DPM

Our Spring Resurgence



Kelly Whaley, DPM

Vaccinated! Like most of you and many of our older patients, I am relieved, proud, and grateful to have received my COVID-19 vaccine.

I must admit I was anxious, not about receiving a shot in my arm or potentially feeling awful for a while, but rather anxious about what the vaccine meant to me and my practice, how my body would react,

and whether this was really the answer. I had a lot of faith in that little syringe, offering a new freedom, a weight lifted, and a sense that I could breathe better despite still wearing a mask. I was ready to conquer the world that day and felt as though I had really accomplished something when all I really did was show up to my appointment. I hope all of you had as great an experience as I did!

I feel like being in Ohio is really a bonus for us as practitioners, and for our patients and families who were at risk. Our leaders in Ohio have done a remarkable job not only with COVID vaccinations, but also expanding the scope of practice to allow podiatric physicians and other providers to administer the COVID vaccine through the Medical Reserve Corps. This good news was followed up by President Biden's announcement in early March that podiatric physicians, retired podiatrists, and podiatric medical students throughout the country may administer COVID vaccinations upon completion of an online CDC training course.

It is quite impressive how quickly we were recognized as an option to deliver this important vaccine to those in need. In Ohio, OHFAMA and our lobbyists worked diligently last year to enact SB 178, which enables podiatric physicians to administer the flu vaccine. Our legislative outreach efforts over the past 18 months – and unanimous support of SB 178 in the General Assembly – made it an easy call for the Ohio Department of Health to empower podiatric physicians to administer the COVID vaccine. Many thanks to those members who actively support our legislative efforts and give to OPPAC.

In March, OHFAMA virtually attended the 100th Annual APMA House of Delegates and I was proud to serve as a delegate. The vaccinated Ohio delegation met in Columbus and participated

virtually with APMA in Washington. Of course, the meeting would have been more exhilarating had we been in Washington DC, making Capitol Hill visits and shaking hands with our lawmakers but, alas, COVID kept us in Ohio. Fortunately, the agenda was straightforward and included some necessary bylaw changes and updates to reflect the current membership culture. Be sure to get the full report from your academy delegate.

I'll say business at OHFAMA is running smooth and ordinary, but this is no ordinary year. It is only April but 2021 has proven to be just as challenging as last year. The OHFAMA BOT and staff are working to keep business as usual and there is plenty of work to be done.

I have both virtual and in-person Academy meetings on my calendar. For those Academies who have arranged an OHFAMA in-person visit, thank you, I look forward to the opportunity. It's a baby step back to ordinary presidential duties and I welcome the invitations. For those who still need to schedule, I will do my best to accommodate your Academy visit.

OHFAMA staff and BOT are furiously working on several upcoming events, some of which you'll be pleasantly surprised at the changes. This year's Annual Scientific Seminar in Columbus will be a hybrid meeting, so if you're vaccinated, this may be your first opportunity to hear lectures, meet exhibitors and network with colleagues in person. Many of us are eager to attend but a few still prefer the virtual option. Whatever option you decide, we are working hard to ensure your safety.

Another exciting change this fall is the transition from the annual House of Delegates to the Annual Business Meeting. Watch your emails and attend your academy meetings for more information about the meeting agenda and optional CME event offered.

Spring has brought not only the blooming of flowers and life but also the emergence of people leaving their homes and venturing out to daily activities and family gatherings. Continue to be vigilant as COVID still lurks in the background. In the meantime, be well, continue to stay safe, and Happy Spring!

Dr. Kelly Whaley, President

2021 OHFAMA Service Award Winners Announced

The Ohio Foot and Ankle Medical Association is pleased to announce Dr. Ed Cosentino and Dr. Corey Russell have been selected to receive the OHFAMA Service Award, which will be presented at the 105th Annual Scientific Seminar in June.

The Service Award is bestowed upon deserving recipients who have demonstrated a commitment to advancing the mission of OHFAMA by devotion to the association through dedicated leadership and volunteerism at the academy and state level. Although community and professionalism are quality attributes, this award is based exclusively on service to OHFAMA as a valued leader and/or volunteer.

Congratulations to Dr. Cosentino and Dr. Russell for this most-deserved honor!



Dr. Ed Cosentino

Dr. Ed Cosentino OHFAMA Eastern Academy

Dr. Ed Cosentino of Girard has been selected as one of two recipients of the 2021 OHFAMA Service Award.

Dr. Cosentino has given exemplary service to the Eastern Academy and to the podiatry profession. He initially served as president of the Eastern Academy in 1988-89, but when the Academy had a lack of leadership, he stepped forward to become president again from 2014-2018.

He further served as surgical instructor for Youngstown Podiatric Residency Program the past 38 years, where he earned Educator of the Year honors on six occasions. Dr. Cosentino has been a yearly contributor to OPPAC for the past 38 years and has served as a delegate to the OHFAMA House of Delegates for over 12 years.

Dr. Cosentino graduated Magna Cum Laude from Youngstown State University, earned his Doctor of Podiatric Medicine from the Ohio College of Podiatric Medicine in 1982, and completed his residency at Foot Clinic of Youngstown. He further earned board certification with the American College of Podiatric Surgery in 1986.

In 1983, he began practicing with his father and mentor, Dr. Sal Cosentino, in Girard. Together, the Cosentinos practiced together until the elder Cosentino passed away in 1991. The younger Cosentino has continued to serve patients in Girard and surrounding communities through his private practice, E.F Cosentino, DPM Podiatric Physician & Surgeon, Inc.

In addition to his service to OHFAMA and the Eastern Academy, Dr. Cosentino is a board member at Emmanuel Community Care Center in Girard, a member of the men's group and a Eucharistic Minister at St. Luke's Church, serves as a Team Member at Retrouvaille of Youngstown, and is a lecturer on podiatric issues for a fibromyalgia support group.

Dr. Cosentino and his wife, Mary Ann, met during his fourth year at the Ohio College of Podiatric Medicine and have been married since 1984. They have two children, Christopher (29) and Sarah (26).



Dr. Corey Russell

Dr. Corey Russell OHFAMA Northwest Academy

Toledo-native Corey Russell, DPM, FACFAS, is the second recipient of the 2021 OHFAMA Service Award.

Dr. Russell has a long and distinguished record of service to OHFAMA, including serving as 2015 president, executive committee member (2013-2016), Budget and Finance committee member, and OHFAMA House of Delegates Reference Committee chairman (2019-2020).

In addition, Dr. Russell has served as OHFAMA Annual Scientific Seminar Exhibit Hall chairman, Private Insurance Advisory Committee representative, and Silver Gavel Club secretary/treasurer. He has also been active at the academy level, serving as past president of the Northwest Academy and the academy's representative on the OHFAMA Board of Trustees from 2012-2020.

Dr. Russell is a 1991 graduate of University of Cincinnati and a 1995 graduate of the Ohio College of Podiatric Medicine. He completed his residency training in 1998 at Millcreek Community Hospital in Erie, Pennsylvania. He is a Diplomate of the American Board of Foot & Ankle Surgery, a Fellow of the American College of Foot and Ankle Surgeons, and a Fellow of the College of Certified Wound Specialists.

He established his private practice, Warren Country Podiatry, Inc. in 1998 before serving as a podiatrist at Wright State Orthopaedics and Sports Medicine from 2003-2006, during which time he served as assistant professor at the Wright State University School of Medicine from 2005-2006. Since 2006, he has co-owned Foot & Ankle Physicians and Surgeons in Toledo.

Dr. Russell also trains podiatric medical residents at Mercy-St. Vincent Medical Center and serves as president of Congregation B'nai Israel in Sylvania.

The Language of COVID-19 Vaccine Acceptance



Mike Mathy, CAE

Now that the end of the pandemic is in sight, it is natural to look back at the last year and examine how we, as a country, could have done a better job managing the pandemic.

Like most aspects of life, one thing immediately comes to mind: communication.

When it comes to public health, there are two universal truths: effective communication is critically important, and the words and actions of our leaders have a tremendous impact in shaping public opinion.

If you have been following public polling of the COVID-19 vaccine, you know there is a correlation between an individual's willingness to get the vaccine and his or her political affiliation, race, age, and geography.

A recent poll by the de Beaumont Foundation, a non-partisan public health foundation and pollster Frank Luntz, asked Americans who voted for former President Trump—the group that is most skeptical about the COVID-19 vaccine—about their perceptions and concerns about the vaccine.

Not surprisingly, this group cited safety, the speed at which the vaccines were developed, and the unknown long-term side effects of the COVID-19 vaccine as key reasons why they are reluctant to get the COVID-19 vaccine.

What I found most interesting about the polling data—and, yes, I read polls for fun in my free time—is that when deciding whether to get a COVID vaccine, those who are most resistant are far more influenced by their doctors and family members than politicians. This, of course, makes sense. People see vaccination as a personal issue, not a political issue, and they want unbiased facts from doctors and other trusted, non-political sources.

If there is one thing during my tenure as your executive director, it is that patients have a fundamental trust in podiatric physicians and surgeons because the work you do helps them stay mobile and active. That is why it is vital for you to do your part to encourage your patients, friends, and neighbors to get vaccinated.

But as we have learned over the past year, it is not just what you say, it's how you say it, especially when interacting with those who are reluctant to get vaccinated. Below are some tips to help you effectively communicate the importance of getting vaccinated to your patients:

1. Tailor Your Message for Your Audience
 - Americans' perceptions about vaccines and their safety differ by political party, race, age, and geography.
2. Explain the Benefits of Getting Vaccinated, not Just the Consequences
 - Say, "Getting the vaccine will keep you and your family safe," rather than calling it "the right thing to do."
 - Focus on the need to return to normal and reopen the economy
3. Talk About the People Behind the Vaccine.
 - Refer to the scientists, the health and medical experts, and the researchers – not the science, health, and pharmaceutical companies
4. Avoid Judgmental Language
 - Acknowledge concerns or skepticism and offer to answer questions
5. Use (and repeat) the Word "Every" to Explain the Vaccine Development Process
 - For example: "every study, every phase, and every trial was reviewed by the FDA and a safety board"

While there is no one-size-fits-all approach when it comes to vaccine communication, those who are hesitant to get vaccinated found the following information helpful and said it made them more likely to take a vaccine, according to the de Beaumont Foundation polling:

- Getting vaccinated will help keep you, your family, and your community healthy and safe
- By getting vaccinated, you can help end the damage to the economy, prevent more illnesses and deaths in America, and eliminate and eradicate COVID-19
- Vaccines will help bring this pandemic to an end
- At 95% efficacy, the vaccine is extraordinarily effective at protecting you from the virus

Remember, your patients and members of your community value your thoughts and opinions on the COVID-19 vaccine. The approach you take—and the words and phrases you use—could be the determining factor on whether some of your patients and neighbors get vaccinated.

It is not just what you say, it's how you say it.

Use These

Words MORE:

The benefits of taking it

Getting the vaccine will keep you safe

A return to normal

Your family

Medical experts

Research

Medical researchers

Damage from lockdowns

A transparent, rigorous process

Safety

Pharmaceutical companies

Advanced/groundbreaking

Vaccination

America's leading experts

Skeptical/concerned about the vaccine

Use These

Words LESS:

The consequences of not taking it

Getting the vaccine is the right thing to do

Predictability/certainty

Your community

Scientists/health experts

Discover/create/invent

Drug companies

Inability to travel easily and safely

The dollars spent; number of participants

Security

Drug companies

Historic

Injection/inoculation

The world's leading experts

Misled/confused about the vaccine



2021

April 26

Executive Committee Meeting
Teleconference

June 10-12

105th Ohio Annual Foot and Ankle
Scientific Seminar
Hybrid | Hilton at Easton

August 5

Budget and Finance Meeting
OHFAMA Executive Office | 9:00 am

August 5

Board of Trustees Meeting
OHFAMA Executive Office | 10:00 am

August 26-27

GXMO Didactic Course
Virtual

August 28

GXMO Clinical Course
Virtual

September 13

Executive Committee Meeting
Teleconference | 7:00 pm

September 25

Midwest Academy Virtual Quickie Seminar

October 1

Holy Toledo Seminar & Autumn Golf Outing

October 7

Budget and Finance Meeting
OHFAMA Executive Office | 9:00 am

October 7

Board of Trustees Meeting
OHFAMA Executive Office | 10:00 am

November 6

Annual Business Meeting
OHFAMA Executive Office | 10:00 am

For more calendar information
please visit the Events webpage at
www.ohfama.org

COVID-19 UPDATES

COVID-19 Vaccine Bill Clears House of Representatives, Heads to Senate

The Ohio House of Representatives passed a bill (HB 6) on March 3 that provides podiatrists with statutory authorization to administer the COVID-19 vaccine. The bill, which passed 96-2, now heads to the Ohio Senate.

The bill is necessary because the State Medical Board of Ohio provided OHFAMA with an informal opinion that it is not within the scope of practice for podiatric physicians and surgeons to administer the COVID-19 vaccine. This opinion came after Governor DeWine signed a bill into law in November authorizing podiatrists to administer the Flu vaccine.

Biden Administration Authorizes DPMs, Students to Administer COVID-19 Vaccine

The US Department of Health and Human Services (HHS) in March expanded the class of medical professionals and health-care students who may serve as COVID-19 vaccinators to include licensed doctors of podiatric medicine, recently retired podiatric physicians, and podiatric medical students.

HHS made an amendment to the Public Readiness and Emergency Preparedness (PREP) Act Declaration to allow more qualified professionals to prescribe, dispense, and administer COVID-19 vaccinations. The latest PREP Act amendment applies to doctors of podiatric medicine (DPM) licensed in any state, as well as any podiatrist who has held an active license or certification under the law of any state within the last five years that is inactive and was in good standing on the date it became inactive.

The amendment also includes podiatric medical students with appropriate training in administering vaccines, as determined by their school or training program and supervision by a currently practicing health-care professional experienced in administering intramuscular injections who administers COVID-19 vaccines.

Impact of the HHS Order

The order from the Biden administration is similar to a February order from the director of the Ohio Department of Health that enables DPMs in Ohio to volunteer to administer the COVID-19 vaccine through the Medical Reserve Corps.

However, HHS has determined that the PREP Act clearly preempts state law. Therefore, regardless of scope-of-practice restrictions, DPMs, retired DPMs, and students may serve as vaccinators so long as they meet certain conditions.

Training and Eligibility Requirements

Under the amendment to the PREP Act, DPMs, retired DPMs, and students who wish to administer the COVID-19 vaccine are required to complete a CDC training course and hold a current certification in basic cardiopulmonary resuscitation.

The State Medical Board of Ohio requires that physicians have an active license in good standing with the Medical Board and complete the e-training specified in the Order. Moreover, medical students must complete at least two years of medical school and/or have medical school clinical experience within the last year giving a vaccination of any kind to administer the COVID-19 vaccination.

Liability Protections

Subject to certain limitations, a covered person is immune from suit and liability under federal and state law with respect to all claims for loss resulting from the administration or use of a covered countermeasure (i.e., administration of the COVID-19 vaccine) if a declaration under the PREP Act has been issued.

Ohio Lawmakers Override Governor DeWine's Veto of Health Order Bill

Republican members of the Ohio General Assembly voted to override Governor Mike DeWine's veto of a bill that would provide legislative oversight over public health orders.

Senate Bill 22 enables lawmakers to reject or modify any state health order as soon as its given and provide authority for the legislature to extend or end states of emergency. Specifically, the new law limits the duration of a state of emergency issued by the governor to 90 days unless extended by the General Assembly and permits the General Assembly to terminate a state of emergency that has been in place for 30 days.

The legislation, which takes effect June 23, establishes the Ohio Health Oversight and Advisory Committee, a legislative panel consisting of three members of the Senate and three members of the House. The committee will oversee all public health actions taken by the governor, the Ohio Department of Health, or any agency in response to a state of emergency.

The new law will have the practical effect of terminating the current state of emergency 30 days after the act takes effect and prohibits the governor from reissuing a state emergency for 60 days, unless approved by the General Assembly by concurrent resolution.

COVID-19 UPDATES



Medical Reserve Corps Seeks Volunteers

The State of Ohio is seeking licensed healthcare professionals to assist with COVID-19 vaccination efforts. OHFAMA members interested in joining the fight against COVID-19 are encouraged to register for the Medical Reserve Corps today. To register:

1. Go to the Ohio Responds Volunteer Registry at <https://www.ohioresponds.odh.ohio.gov>
2. Click "Register Now"
3. Click "Add Organizations," select the plus sign (+) for a drop down of county MRC units.
4. Select your county of residence or employment
5. Complete the application (Select Podiatrist under the Occupation field)

Ohio Department of Health Issues Consolidated Health Order

The Ohio Department of Health issued a new health order for Ohioans on April 5 that streamlines previous orders and asks Ohioans to wear a mask outside of their home, to wash their hands thoroughly, to maintain social distancing in public, to avoid gathering in large groups, and to hold events outdoors rather than indoors.

Governor Mike DeWine has said all health orders, including the mask mandate, would be lifted when Ohio reaches a rate of 50 new COVID-19 cases per 100,000 residents during a two-week period.

Karen Kellogg, DPM, MBA, Shares Her Medical Reserve Volunteer Experience



Karen Kellogg, DPM, MBA

Earlier this month, I had the opportunity to volunteer for a mass vaccination clinic in Summit County. Ohio Responds sent me an email asking for volunteers for several upcoming clinics. I was assigned to a Saturday clinic at the Summit County Fairgrounds. This was a drive-up clinic so we were told to dress for the weather since we would be outside. We were also told to plan for a long day. Since this was the first day of the mass clinic, we got off to a slow start learning the iPads and fighting with Wi-Fi strength.

Once our "teams" got the routine down, we were off to the races! We developed an efficient and fast-moving lane. The lines of cars just kept coming! By 5:30 that afternoon, we had vaccinated 1,500 Ohioans! When we (finally) shot the last dose, we were exhausted and cold, but excited to have made such a difference. The recipients were so grateful and appreciative of the clinic, that we didn't even notice how sore our feet were.

As healthcare providers, many of us had the opportunity to get our vaccines early. Helping the rest of Ohioans get their vaccines is a very rewarding experience! I feel very fortunate to have gotten the vaccine when I did and now it is our turn to pay it forward.

MEDSHAPE
www.medshape.com

DYNACLIP FORTE

INTRODUCING THE LATEST NITINOL INNOVATIONS

DYNANAIL MINI

OHFAMA UPDATES

Registration for the 2021 Annual Scientific Seminar Now Open

The 105th Annual Ohio Foot & Ankle Scientific Seminar will be held June 10-12 at Columbus Hilton at Easton. Due to the COVID-19 pandemic, attendees will have the choice to attend the meeting in person or remotely when registering for the meeting.

The seminar will feature a top-notch program and a minimum of 23 continuing education contact hours. A one-day assistant's program will also be offered this year. Schedule details, exhibitor information, and a link to the Hilton Easton room reservation portal are available on the OHFAMA website.

For more information, please contact Ohio Foot and Ankle Medical Foundation Executive Director Luci Ridolfo at 614-457-6269 or via email at Lridolfo@ohfama.org.

Abshier Appointed Alternate Advisor to AMA CPT Panel



Dr. Sarah Abshier

Dr. Sarah Abshier was appointed in April as APMA's Alternate Advisor to the AMA CPT Editorial Panel. She will be replacing Dr. Phil Ward, who served in the position of alternate advisor and advisor for many years. Alongside Dr. Ira Kraus, Dr. Abshier will be working to represent our profession and working to maintain the integrity of the CPT code set.

The CPT Editorial Panel is tasked with ensuring that CPT codes remain up to date and reflect the latest medical care provided to patients. In order to do this, the panel maintains an open process and convenes meetings three times per year to solicit the direct input of practicing physicians, medical device manufacturers, developers of the latest diagnostic tests and advisors from over 100 societies representing physicians and other qualified health care professionals.

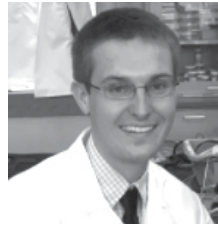
Dr. Abshier has served on the APMA Coding Committee since 2017 and has been a speaker and presenter on various coding topics at seminars, conferences, and webinars. She serves as OHFAMA 1st Vice President, has served on the OHFAMA Board of Trustees since 2015, and previously served in several leadership roles with the Central Academy.

Nominating Committee to Work to Identify Future OHFAMA Leaders

OHFAMA President Kelly Whaley, DPM, has formed an ad hoc Nominating Committee to identify, recruit, and cultivate future OHFAMA leaders.

Past OHFAMA presidents Corey Russell, DPM, Rick Kunig, DPM, Richard Schilling, DPM, and Karen Kellogg, DPM will work with

OHFAMA Welcomes New Student Member to Board of Trustees



Tyler Bowers

The Ohio Podiatric Medical Student Association (OPMSA) named Tyler Bowers as its representative to the OHFAMA Board of Trustees in February. Bowers replaces Annie Profeta, who has served on the OHFAMA Board of Trustees since 2019.

Bowers, a first-year student at Kent State University College of Podiatric Medicine, is a Fort Wayne, Indiana native who earned a bachelor's degree and master's degree in Biology from Purdue University Fort Wayne. Prior to enrolling at KSUCPM, he worked as a research scientist at Eli Lilly and Indiana University School of Medicine studying stem cells throughout different regions of the body.

OPMSA elects one member to serve as a voting ex-officio member of the OHFAMA Board of Trustees as means to strengthen ties between students and OHFAMA. Students enrolled at the KSUCPM, who are members in good standing of the American Podiatric Medical Students Association, may be members of OHFAMA.

Save the Date: Annual Business Meeting: November 6, 2021

The Annual Business Committee met in February to formulate plans for the inaugural OHFAMA Annual Business Meeting on November 6. The meeting, which replaces the OHFAMA House of Delegates, will be open to all members in good standing and feature updates on the association, elections, and votes on key issues, including the OHFAMA budget.

The Ohio Foot and Ankle Medical Foundation is planning to hold a Wound Care Seminar prior to the Annual Business Meeting to provide attendees with continuing education opportunities prior to the business meeting.



Dr. Whaley to reach out to Academies to strengthen the OHFAMA leadership pipeline.

If you are interested in serving in an OHFAMA leadership role, please contact Dr. Whaley or OHFAMA Executive Director Mike Mathy at mmathy@ohfama.org.



Celebrating PICA's 40th Anniversary

40 years of protecting the reputations and livelihoods of podiatric physicians and surgeons

40 years of influencing and growing with the podiatry industry and advancing the podiatric profession.

40 years of protecting our podiatrists so they can focus on patient care and being the best healthcare practitioner possible.

Forty years and forward!

Call today for your free quote!

picagroup.com | 800.251.5727, ext. 2750

LEGISLATIVE AND REGULATORY UPDATES

Telehealth Bill Passes House of Representatives

A bill that would permanently expand access to telehealth for all Ohioans unanimously passed the House of Representatives on April 15. House Bill 122, introduced by Rep. Mark Frazier (R-Newark) and Rep. Adam Holmes (R-Nashport), defines the practitioners, services, cost-sharing, and reimbursement standards associated with telehealth in Ohio.

The legislation will further enable flexibility for services to be rendered across state lines (as other states are able to perform in Ohio), in-person meeting stipulations, and provide guidance for pandemic circumstances. It will allow for a broad, site-neutral definition of telehealth.

HB 122 is needed to ensure that Ohio patients, providers and payers have the consistency they need to ensure those wanting

to utilize telemedicine can, with as much ease as possible. Furthermore, the bill will help ensure telehealth services are available for patients to the same extent that a plan covers in-person healthcare services, and without forcing a patient to pay a higher cost-sharing amount or reducing reimbursement for telehealth services covered under a patient's plan.

The introduction of HB 122 follows the Ohio Department of Medicaid's decisions to implement administrative rules to address issues of access and health disparities during the COVID-19 pandemic.

HB 122 will now move on to the Senate.

Ohio Department of Insurance Seeks Feedback on Surprise Billing Law

Governor DeWine signed House Bill 388 into law on January 7, 2021. This law protects patients from receiving surprise medical bills for emergency care or, in certain circumstances, unexpected out-of-network care.

Primarily, the law prohibits the practice of balance billing in these instances, leaving any price negotiation to be handled between the health provider and the health plan. The Ohio Department of Insurance (ODI) is responsible for administering and enforcing many provisions of this law beginning in January 2022.

The bill requires an insurer to reimburse:

- An out-of-network provider for unanticipated out-of-network care provided at an in-network facility
- An out-of-network provider or emergency facility for emergency services provided at an out-of-network emergency facility
- An out-of-network ambulance for emergency services provided in an out-of-network ambulance
- An out-of-network provider or facility for clinical laboratory services provided in connection with unanticipated out-of-network care or emergency services.

The bill further:

- Prohibits a provider, facility, emergency facility, or ambulance from balance billing a patient for unanticipated or emergency care as described above when that care is provided in Ohio.
- Provides that a covered person's cost-sharing responsibility for the services described above cannot be greater than if the services were provided in-network

- Establishes the default reimbursement rate as the greatest of the in-network rate, the out-of-network rate, or the Medicare rate and establishes procedures by which payees (providers, facilities, emergency facilities, and ambulances) may seek to negotiate the reimbursement in lieu of the default reimbursement rate.
- Permits certain payees to seek arbitration if negotiation is unsuccessful, establishes criteria to be eligible for arbitration, and establishes procedures for the conduct of the arbitration.
- Requires a provider to disclose certain information to patients regarding the cost of out-of-network services that are not unanticipated out-of-network care or emergency services
- Subjects payees and insurers to penalties for failure to comply with the act's requirements

The department intends to conduct a robust stakeholder engagement process to solicit ideas on the development of rules associated with implementation of House Bill 388. The stakeholder feedback process began in March 2021 and ODI will formally submit rules to the Common Sense Initiative (CSI) and the Joint Committee on Agency Rule Review (JCARR) in the coming months.

During the formal rule making process, members of the public will also have opportunities to provide input on the proposed rules through formal public comment periods with CSI and JCARR.

OHFAMA members interested in submitting feedback on the Surprise Billing legislation are asked to send comments to surprisebilling@insurance.ohio.gov.

LEGISLATIVE AND REGULATORY UPDATES

Ohio Department of Medicaid Selects Six Managed Care Partners

Ohio Department of Medicaid Director Maureen Corcoran on April 9 announced the selection of six health care organizations to lead the department's evolution of managed care services for its more than 3 million members and thousands of medical providers.

The selection comes after more than two years of intensive stakeholder engagement to define opportunities to strengthen the structure of Ohio's \$20 billion managed care program. It addresses Governor Mike DeWine's direction at the beginning of his term to re-evaluate Ohio's managed care system with the goal of making the system more focused on the health and well-being of individuals.

"Since the start of this process, we have listened to input and guidance from Ohio Medicaid members and their families, Ohio health care providers, and community advocates and stakeholders," said Corcoran. "This is a bold, new vision for Ohio's Medicaid program – one that focuses on people and not just the business of managed care."

The announcement, which followed a rigorous procurement process, "is a giant step toward a comprehensive overhaul of Ohio's managed care structure; it will deliver the kind of health coverage that Ohioans need and deserve," she said.

The guiding principles of Ohio Medicaid's vision for the next generation of managed care are a commitment to:

- Improve wellness and health outcomes.
- Emphasize a personalized care experience.

- Improve care for children and adults with complex needs.
- Reduce administrative burdens to give providers more time with patient care.
- Increase program transparency and accountability.

The six managed care organizations announced Friday are:

- UnitedHealthcare Community Plan of Ohio, Inc.
- Humana Health Plan of Ohio, Inc.
- Molina Healthcare of Ohio, Inc.
- AmeriHealth Caritas Ohio, Inc.
- Anthem Blue Cross and Blue Shield
- CareSource Ohio, Inc.

Ohio Medicaid is deferring for additional consideration its decision related to Buckeye Community Health Plan.

Ohio Medicaid's next generation managed care selection, contingent up on the signing of contracts, will begin covering members in early 2022. Members will continue to receive services with their current plans through the transition period and will have the opportunity to select a new plan through an open enrollment period beginning in late summer.

New Law Changes Continuing Education Hour Requirements

On January 7, 2021, Governor DeWine signed House Bill 442 into law, which makes several statutory changes impacting State Medical Board of Ohio licensees.

Below is a summary of the changes in Ohio law relating to podiatry that become effective April 12, 2021:

- The amount of continuing education hours a physician may earn providing health care services as a volunteer will be increased to ten hours, however the accrual rate will change. Five hours of volunteer time will be equal to one hour of CME.
- Visiting podiatric faculty certificates: This certificate fee for this license type has been eliminated.

Continuing Education Audits to Resume

In March 2020, the State Medical Board of Ohio suspended enforcement of continuing education (CE) requirements for licenses that were due to expire before March 1, 2021.

While enforcement was suspended, the legal requirement to complete the required CE still existed. The board-ordered suspension of enforcement has now expired, and licensees are now subject to audit for compliance with continuing education requirements.

LEGISLATIVE AND REGULATORY UPDATES - CONTINUED

Legislation OHFAMA is Monitoring

Below is legislation that has been introduced in the Ohio General Assembly that OHFAMA is monitoring.

Bill Aimed at Curbing Surprise Billing Introduced in the Ohio House

A bill designed to stop the practice of patients being charged for out-of-network services when they are performed at an in-network facility was introduced in the Ohio House of Representatives on March 3.

House Bill 160, introduced by Rep. Adam Holmes (R-Zanesville), would require podiatrists and other health care providers and health plan issuers provide patients with a cost estimate for nonemergency health care products, services, or procedures before each is provided.

The bill requires cost estimates on the total amount charged, reimbursement from the health plan issuer, and the patient's responsibility. The requirement does not apply when a patient seeks emergency services, a health care provider believes a delay in care could harm the patient, when only service a health care provider will provide is an office visit, and when a patient seeks care without an appointment and without a prescription or order from another provider.

Under the legislation, an out-of-network health care professional, who provides care during an in-network procedure, could elect to be paid the in-network rate by the insurance company or could negotiate a different rate with the insurance company. If no agreement is reached, the health care provider can pursue "baseball style" arbitration. Under this approach each side would submit documentation supporting their position to a neutral, third party arbiter who would make a final, binding decision.

The bill is before the House Insurance Committee, where the first hearing was held on March 10.

Licensing Bill Introduced in Senate

A bill that would require occupational licensing authorities to issue licenses to individuals who are licensed in other states was introduced in the Ohio State Senate.

SB 131, introduced by Senator Kristina Roegner (R-Hudson) and Robb McColley (R-Napoleon), would require the State Medical Board of Ohio to issue licenses to podiatrists who are licensed in other states and have satisfactory work experience under certain circumstances.

The bill would further require the state medical board to issue, without examination, a visiting podiatric faculty certificate to individuals who have a current, unrestricted license to practice podiatric medicine and surgery issued by another state and who has been appointed to serve on the academic state of Kent State University College of Podiatric Medicine.

The bill has been referred to the Senate Workforce and Higher Education Committee, which is chaired by Sen. Roegner.

Bill Prohibiting Physician Non-Compete Clauses Introduced in State Senate

Senator Terry Johnson, DO (R-McDermott) and Senator Sandra Williams (D-Cleveland) introduced a bill that would prohibit noncompete provisions in physician employment contracts.

Senate Bill 150 prohibits employers of physicians from requiring a physician or prospective employee to agree that, at the conclusion of employment with the employer, to refrain from obtaining employment in a specified geographic area, for a specified period of time, with a particular employer, or in a particular industry or practice specialty. The prohibitions in the bill, however, do not apply during the term of a physician's employment contract with an employer.

Senate Bill 150 was introduced on March 31 and has not been referred to a specific committee.

Advanced Practice Registered Nurse Bill Introduced

State Rep. Jennifer Gross (R-West Chester) and Rep. Tom Brinkman (R-Mt. Lookout) have introduced House Bill 221, legislation that modifies the laws governing the practice for advanced practice registered nurses.

Current law requires an advanced practice registered nurses -- certified nurse practitioners, clinical nurse specialists, or certified nurse-midwives -- to practice with a standard care arrangement with a collaborating podiatrist.

HB 221 allows an APRN who has completed 2,000 clinical practice hours under a standard care arrangement the option to practice without such an arrangement. Additionally, the bill allows an APRN who has not completed the required hours to enter into a standard care arrangement with an APRN who has completed 2,000 clinical practice hours.

The bill was introduced on March 17 and referred to the House Health Committee on March 23.

APMA UPDATES

Ohio Delegation Gathers in Columbus to Attend Virtual APMA House of Delegates

The 100th meeting of the APMA House of Delegates took place March 13-14 with delegates nationwide meeting via a virtual platform to consider a variety of business items and policy positions.

Ohio's APMA delegation, led by Mark Gould, DPM, gathered at the Columbus Hilton at Easton to participate in the event.

The following policy proposals were adopted by the House of Delegates:

Ohio APMA Delegates

Chair

Mark Gould, DPM

Delegates

Bruce Blank, DPM

Marc Greenberg, DPM

Kelly Whaley, DPM

Thomas McCabe, DPM

Anastasia Koss, DPM

Karen Kellogg, DPM, MBA

Alternate Delegates

Rich Kunig, DPM

Sarah Abshier, DPM

Policy Proposition 4-21: Growth of the Profession

This proposition created a policy that APMA support the ongoing growth of the podiatric profession through student recruitment, development of an adequate number of residency training programs, coordination with CPME to maximize class size and address the establishment of new colleges of podiatric medicine, and comprehensive annual reporting on the progress of this policy.

Policy Proposition 5-21: Residency Training Standards

This proposal made it APMA policy to support competency-based training methods for podiatric residents that implements the use of milestones in conjunction with activity volumes to evaluate competency.

Policy Proposition 1-21: Collective Professional Advocacy

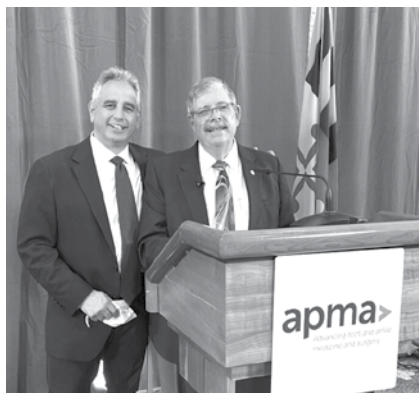
This proposal specified podiatrists should stay informed of issues that affect patient outcomes and advocate on behalf of patients, the profession, and the public. It suggested that podiatric physicians have an ethical responsibility to seek change when they believe the requirements of law or policy are contrary to the best interests of patients.

Policy Proposition 2-21: Podiatric Physician Routine Immunization

This proposal makes it APMA policy to encourage doctors of podiatric medicine to be routinely immunized, especially when safe and effective vaccines are available. APMA recognizes and respects that some doctors may be unable to take certain vaccinations for medical reasons or because of firmly held religious beliefs.

Policy Proposition 3-21: Podiatric Physicians Administering Vaccines

This proposition makes it official APMA policy to support inclusion of podiatric physicians, residents, and medical students in the pool of professionals who can administer vaccines, especially when called upon in public health emergencies.



Dr. Jerry Ferritto, Jr., DPM, (right) who recently retired, served his last year as Speaker of APMA House of Delegates, a position he's held since 2015. Dr. Ferritto, pictured with APMA Trustee and fellow Ohioan Alan Block, DPM, is a past president of OHFAMA and APMA, recipient of the OHFAMA Service Award, and a longtime member of the APMA Bylaws, Procedures, and Rules Committee.



Members and staff gather at the APMA House of Delegates in March. From left: Sarah Abshier, DPM; Karen Kellogg, DPM, MBA; Luci Ridolfo, CAE; Anastasia Koss, DPM; Kelly Whaley, DPM.

APMA Launches Keep America Active Campaign

APMA kicked off its 2021 Foot Health Awareness Month campaign, Today's Podiatrist Keeps America Active, on April 1. The campaign is designed to speak to the athlete in everyone with information about proper foot health for athletes and the role podiatrists play in sports medicine.



APMA strongly encourages members to take advantage of the wealth of promotional materials available as part of this campaign to promote their expertise in sports medicine. Visit www.apma.org/KeepAmericaActive.

The campaign materials include a special edition of the Footprints patient newsletter, suggested social media posts, and graphics for use online. Throughout the month, we will also be rolling out short videos demonstrating everything from stretching techniques

to footwear selection to proper lacing. These videos are great for sharing on social media or directly with patients.

Here's how your practice can help make this Foot Health Awareness Month successful:

1. Visit www.apma.org/KeepAmericaActive and scroll down to the "Access Digital Tool Kit" button to download materials you wish to use.
2. Customize and share materials to your patients, on your social media accounts, and with local media.
3. Share your own sports medicine story on social media—post pictures of yourself engaged in sports, treating a local team (be sure you have permission to share images), and talk about why you love treating athletes. Use the hashtag #KeepAmericaActive with your sports medicine posts.
4. Return to www.apma.org/KeepAmericaActive often to watch for added resources.

Widespread Post-Pay Service Specific Review Announcement – HCPCS Codes A6196, A6212, and A6210

CGS's Medical Review staff will be conducting a complex post-pay service-specific medical review of HCPCS Codes A6196 (Surgical Dressing – Alginate), A6212 (Surgical Dressing – Foam), and A6210 (Surgical Dressing – Foam Dressing) claims. This review will be conducted because data analysis revealed that Jurisdiction B's allowed dollars for HCPCS codes A6196, A6212, and A6210 were significantly above expected amounts. Additionally, the Surgical Dressing policy group ranked #4 in total CERT errors.

CGS would like to remind suppliers of the importance of responding to Additional Documentation Request (ADR) letters. Authorization for the collection of this information is included in Federal Law at SSA 1833 (e) and in Federal regulation at 42 CFR 424.5(a)(6). Suppliers are in violation of Supplier Standard #28 when, upon request, they fail to provide requested documentation to a Medicare contractor. Therefore, the consequences of failure to provide records may not only be a claim denial but also referral to the National Supplier Clearinghouse (NSC).

The ADR letter will contain the following information:

1. Preliminary dispensing order (if items were dispensed prior to obtaining a detailed written order);
2. A valid order that includes:
 - a. The type of dressing
 - b. The size of the dressing
 - c. The number/amount to be used at one time
 - d. The frequency of dressing change, and
 - e. The expected duration of need
3. Documentation defining the number of wounds being treated with a dressing.
4. Documentation of evaluation of the wound(s) during the month prior to the date of service on the claim that includes the type of each wound (e.g., surgical wound, pressure ulcer, burn, etc.), location, size (length x width in cm.), depth, amount of drainage, whether the dressing is a primary or secondary dressing and/or any other relevant information. Medical records must document that the LCD criteria has been met for the specific dressing type. These records must be obtained from the physician, nursing home or home care nurse. The source of that information must be documented.
5. Copy of an Advance Beneficiary Notice (ABN), if one was obtained.

The New 21st Century Cures Act is Now in Effect. Are You Ready?

By Michael Brody, DPM; Founder, TLD Systems



Michael Brody, DPM;

In 2020, the Department of Health and Human Services (HHS) issued two final rules implementing provisions of the 21st Century Cures Act. These two related final rules impact health IT vendors, health-care facilities, and providers and include significant financial penalties and other disincentives to discourage stakeholders from engaging in

information blocking that interferes with access, exchange, or use of electronic health information. All actors are required to comply with the information blocking provisions beginning April 5, 2021.

Let's look at the rule and make sure we understand what we need to do in order to be in compliance.

What are the Goals of the 21st Century Cures Act?

- Make Patient Data Requests Easy and Inexpensive
- Allow Patients, Doctors, and Health Care Systems to benefit from a vibrant application marketplace.
- Improve Patient Safety
- Prevent Information Blocking

Let's look at some situations you may face and see what you need to do.

If you have an existing contract, agreement or other arrangement that prohibits you from sharing data, then that agreement may put you into violation of the Information Blocking provisions of the 21st Century Cures Act.

What to do?

Review all of your contracts with your EHR and digital health vendors and make sure there are no provisions that conflict with the new rule. If you are not sure, please consult with an attorney.

What if you are not using Certified Health Information Technology (a certified EHR)?

The 21st Century Cures Act is not specific to any product. The rule applies to all information that you hold, whether it be in a Certified EHR, an EHR that is not certified, your billing system, your digital imaging system, or even word processing files. It is all subject to the rule.

What about paper records?

The 21st Century Cures Act is about electronic information. For details on paper records, you need to refer to the HIPAA Right of Access Rule.

Do you need to have your patient portal turned on?

This is an interesting question. The short answer is YES. But you do not have to have it turned on until you get a request for patient information through the portal. The moment you get such a request it needs to be turned on. If it takes 'too long' to turn on the portal and that results in a delay that the government believes it not reasonable you may be found to be in violation of the Cures Act. It is in your best interest to make sure it is turned on now rather than having to scramble the moment you get your first request.

How quickly do I need to make lab results available through the portal?

You need to make lab results available as soon as you get them unless you can demonstrate that releasing the lab results may result in patient harm, this is one of the exceptions to the Cures Act. If you make such a determination, it is vital that you document this decisions process so that you can defend yourself in an investigation.

What about "Draft Notes" and incomplete lab results?

Draft notes and lab results that are not finalized **MAY** not be appropriate to disclose or exchange due to the incomplete nature of the results. But if the information in the Draft note or incomplete lab result was used to make a medical decision then it must be disclosed.

Are there any exceptions to the Information Blocking provision of the Rule?

Yes, there are eight (8) exceptions to the rule:

■ Preventing Harm Exception

It will not be information blocking for an actor to engage in practices that are reasonable and necessary to prevent harm to a patient or another person, provided certain conditions are met.

■ Privacy Exception

It will not be information blocking if an actor does not fulfill a request to access, exchange, or use EHI in order to protect an individual's privacy, provided certain conditions are met.

■ Security Exception

It will not be information blocking for an actor to interfere with the access, exchange, or use of EHI in order to protect the security of EHI, provided certain conditions are met.

■ Infeasibility Exception

It will not be information blocking if an actor does not fulfill a request to access, exchange, or use EHI due to the infeasibility of the request, provided certain conditions are met.

■ Health IT Performance Exception

It will not be information blocking for an actor to take reasonable and necessary measures to make health IT temporarily unavailable or to degrade the health IT's performance for the benefit of the overall performance of the health IT, provided certain conditions are met.

■ Content and Manner Exception

It will not be information blocking for an actor to limit the content of its response to a request to access, exchange, or use EHI or the manner in which it fulfills a request to access, exchange, or use EHI, provided certain conditions are met.

■ Fees Exception

It will not be information blocking for an actor to charge fees, including fees that result in a reasonable profit margin, for accessing, exchanging, or using EHI, provided certain conditions are met.

■ Licensing Exception

It will not be information blocking for an actor to license interoperability elements for EHI to be accessed, exchanged, or used, provided certain conditions are met.



Do you have the *definitive diagnosis* for onychodystrophy?

With BakoDx laboratory testing, you can confirm your clinical suspicions and provide precision treatment.

The Standard of Care for Your Onychodystrophy Patients



KENT STATE UNIVERSITY COLLEGE OF PODIATRIC MEDICINE UPDATES

Bringing New Energy to Kent State University College of Podiatric Medicine!

At 9:35 a.m. on March 1, 2021, Dan Ridgway, Director of Operations for the Kent State University College of Podiatric Medicine (CPM), flipped a switch that would energize a new future of sustainable power on campus. The switch officially activated a brand new 315.2 kilowatt-DC solar PV array consisting of 788 solar panels and extending electrical connection to campus. In layman's terms: that's clean energy to serve nearly 30% of campus electricity!

The project began in Fall 2020 through an energy conservation project with The Brewer-Garrett Company. The 25-year Power Purchase Agreement requires no upfront capital expense to the college, and all electricity produced will be purchased at a negotiated rate with Paradise Energy Solutions, LLC, of Sugarcreek, Ohio.



"We need to be in front of this movement as a University, I think it's our responsibility," CPM Dean Dr. Allan Boike affirms, "And this project gives us the opportunity to reduce our energy costs by half a million dollars over a period of time, which is just amazing."

The field will produce a minimum 25-year electric cost savings of about \$16,500 the first year, and over \$550,000 after 25 years. In the summer months, when electricity use is at a high, the solar array will serve to reduce stress on the electric grid.

Now that the solar array is hard at work producing clean energy for campus, native pollinators will be seeded around the perimeter of the array this spring. The new perimeter will consist of wildflowers and other plants specifically selected for the area to increase numbers of honeybees and various other beneficial insects.

You can see the installed solar array and get more information on its benefits in the promotional video at <https://www.kent.edu/cpm/bringing-new-energy-cpm>. To follow-up on its progress, a solar energy dashboard is expected to be available on the CPM homepage allowing real-time data use for educational purposes and community interest.

AACPM Provides Updated 2021 Residency Placement Data

The American Association of Colleges of Podiatric Medicine (AACPM) announced that 100% of the 542 residency applicants have found residency positions for the 2021-22 training year.

530 of the positions were filled by podiatric physicians who graduated in the class of 2021 with 12 applicants from previous years being placed in residency positions for the upcoming training

year. Overall, there are 580 active residency positions out of 625 CPME approved positions. 45 positions are not filling for training this year.

Established in 1967, AACPM represents the nine accredited schools and colleges of podiatric medicine and more than 200 hospitals and institutions that offer postdoctoral training in podiatric medicine.



DRS. CENTRAL BILLING, LLC

www.drsbillinginc.com



6200 Pleasant Avenue • Suite 3 • Fairfield, Ohio 45014

A Podiatry Billing Service Exclusively for Ohio Podiatrists since 1995...

Why partner with us?

- Scheduling, Billing, and EMR all in one system
- Over 100 Podiatrists in Ohio as reference
- On-line system that links you live with us
- Full Credentialing Services free to all clients
- Coding reviews to assure maximum insurance reimbursement
- Accounts Receivable Management
- Full Practice Reporting and Real Time Eligibility

Contact Owner: Paul Fehring • PaulF@drsbillinginc.com

1-888-452-0124

Call Today to Boost Your Bottom Line



The OHFAMA Journal is published 4 times per year. The advertising deadline is mid-month preceding publication. Portions may be used with permission of the publisher.

PRESIDENT:

Kelly Whaley, DPM

PUBLISHED BY:

Mike Mathy, CAE, Executive Director

ADVERTISING:

Luci Ridolfo, CAE, Assistant Executive Director

CONTACT INFORMATION:

1960 Bethel Rd., Ste. 140 | Columbus, Ohio 43220

Phone: 614.457.6269 | Fax: 614.457.3375

Web page: <http://www.ohfama.org>

mmathy@ohfama.org;

lrldolfo@ohfama.org

EDITORIAL DISCLAIMER

The OHFAMA Journal is provided to Association members and Industry Affiliates of the profession as a part of our communications to inform/ update our members on podiatric issues and events. The contents of OHFAMA Journal are intended for general information purposes only and should not be read as specific legal, financial, or business advice regarding specific issues or factual events. We urge you to consult your legal, financial, and professional advisors with any specific questions you may have.

DISCLAIMER STATEMENT

The information published herein has been prepared for educational and informational purposes only. This information is not intended as legal, podiatry or practice management advice or an opinion on same. Circumstances change from day-to-day and one situation may differ from the next; the authors and publisher cannot assume responsibility for any actions taken based on the information contained herein. This information is not a substitute for expert advice specific to your situation. More specifically, legal or regulatory advice must be tailored to the specific circumstances of each case, and laws are constantly changing. Nothing provided herein should be used as a substitute for the advice of competent counsel. Federal law requires that the authors and publisher let you know that nothing published herein is intended or written to be used, and cannot be used for the purpose of avoiding any penalties under the law. The publication of the information herein is not intended to create, and receipt does not constitute a professional or contractual relationship between the author and the publisher and you. While the publisher tries to provide accurate and helpful information, they do not make any claims, promises or guarantees about the accuracy, completeness, helpfulness or adequacy of the information contained herein. No warranties are made for the information published to be accurate and no other warranties express or implied are made. The information here is presented "as is."

OHFAMA CLASSIFIEDS

Associate Position – Ohio-Greater Dayton Area

Established practice (four locations) looking for a full-time podiatrist with the opportunity for partnership. Individual should be highly motivated, personable and have a strong work ethic. Must have completed a three-year surgical residency and must be board certified by the American Board of Foot and Ankle Surgery or Board Qualified pursuing certification in forefoot and rear-foot surgery. Practice has excellent reputation, EHR, digital x-ray, DME supplies, hospital and surgical center affiliation. Competitive salary, bonus incentive, opportunity for ownership in practice and surgical hospital. Email cover letter, CV, transcripts and letters of reference to Podiatry2020@gmail.com

Seeking Employment – Northeast, Ohio

ABFAS-certified and ABPM-certified podiatrist seeking a parttime or full-time association position. Prefer the northeast Ohio area but able and willing to travel. Resume/CV available upon request. Contact – penguinpapa1975@gmail.com

Associate Needed – Warren/Youngstown, Ohio

NOMS Ankle & Foot Care Centers is a well-established private practice operating 18 locations in Northeast, Ohio and Western Pennsylvania. We are looking to add a full-time foot & ankle surgeon to help cover existing and expanding office hours. Tremendous growth opportunity for a hardworking individual with an interest in surgery, diabetic foot care, and wound care. Practice has extensive ancillary services to compliment physician services. Please email your letter of interest and CV to **Michael Vallas, Practice Administrator**, at mallas@nomshealthcare.com.

Burnett Cast Cutter for Sale

Retired now after 40+ years, selling Burnett Cast Cutter. Used but in very good condition. Plus 8 ½" cast spreader and two near 2 ½" blades for \$300. Great purchase idea if opening a satellite office or just starting practice. Will pay for shipping if OHFAMA member. TERMS: Will accept personal checks. If interested, please contact **Robert Atwell, DPM** at (740) 501-3516 or ratwell1@columbus.rr.com.

MinXray P200 for Sale

MinXray P200 with 3 cartridges and orthoposer; can easily be upgraded to Digital X-ray. \$500 or Best Offer!! **Call (216) 267-0304** or email bucketfootcare@sbcglobal.net.

Variety of Equipment for Sale

Recently retired from practice. I have a lot of new items that I can sell including DME. My plan is to sell at lower price than can be purchased new from the vendor on sale prices. Variety of items including, by not limited to, Accord III prefab AFOs, walking cast braces, ankle sprain braces, Anterior & Posterior PF night splints, postop shoes, cast boots, casting material, 15 day & 30 day Amerx Collagen Powder kits (A6010, A6216, A6219), etc. Email me & we can decide on price plus shipping for any or all. **Contact Bruce Blank, DPM**, at bruceblankdpm@gmail.com

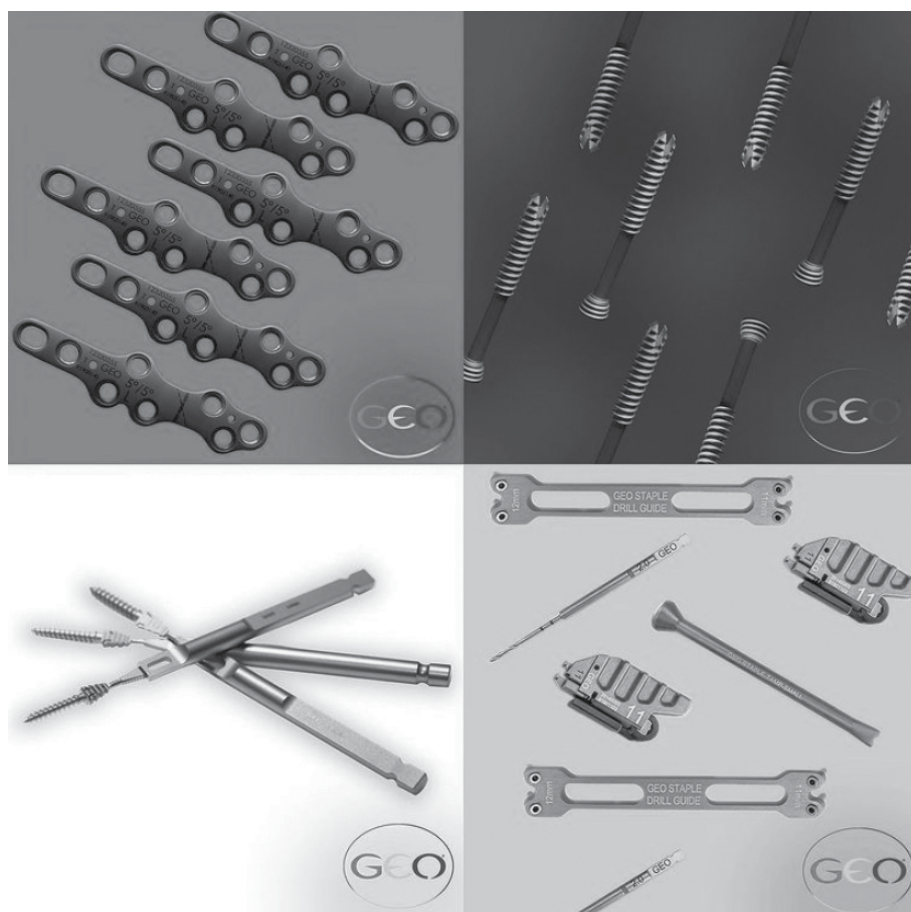
**Your colleagues are
giving back to podiatry;**

Are YOU?

**Won't you consider
assisting OPPAC
by making your
personal
donation today?**

**Important tax
information:**

OPPAC contributions
may not be deducted
as business or personal
deductions for income
tax purposes.





Ohio Foot and Ankle Medical Association
1960 Bethel Road, Suite 140
Columbus, OH 43220-1815

PRSRT STD
U.S. Postage
PAID
Columbus OH
Permit #7941

CHANGE SERVICE REQUESTED

**JUNE 10-12
2021**

THE ANNUAL OHIO FOOT AND ANKLE SCIENTIFIC SEMINAR

**IN-PERSON AND VIRTUAL
REGISTRATION AVAILABLE**

REGISTER TODAY AT WWW.OHFAMA.ORG



**COLUMBUS
OHIO**

**25 CME
HOURS**

**COLUMBUS HILTON
AT EASTON**