



**OHIO PODIATRIC  
MEDICAL  
ASSOCIATION**

# Journal

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Photo: Sarah Viselli, DPM, a resident from Grant Hospital, won the 2010 Gerard V. Yu Scientific Paper Competition. OPMA congratulates Sarah on a job well done!

## President's Message

# The Rewards of Giving

by Thomas W. Kunkel, DPM



2010 OPMA  
President

"SO, WHAT ARE YOU now?" my son asked me after yet another trip to Columbus.

"I'm the president of my state association – The Ohio Podiatric Medical Association," I told him.

"Oh wow! How

much do you get paid?"

"Well," I paused, "nothing—but plenty."

If I've learned anything as President of the OPMA so far, it is this: There is plenty to be gained by giving to your pro-

— particularly *this* profession. That may sound paradoxical, but the sentiment grows more self-evident with every board meeting, academy visit, or APMA/OPMA function that I've been a part of this year.

Without sounding too schmaltzy, I can honestly say that I receive as much or more than I give. Clearly, my favorite part of the job is observing the best in our profession and then bearing witness.

I can tell you that

while I preside over a Board meeting at the OPMA offices, I may be able to feign some sort of control. But, I also use it as an opportunity to gather and feed off the group's collective insight. With a few exceptions, the BOT is a veteran group and the dynamic on this year's Board exudes experience. That is not to say that our board is afraid of change. We're also poised to face a challenge by getting in someone's face. We will not allow any third party (in any form) to come between OPMA physicians and their patients. The OPMA Board is a workhorse that pulls our membership forward through often confusing and difficult healthcare terrain. (And, yes, non-members reap the benefits as well.) Our Board is a marvel to behold, and I am fortunate to sit at the end of that table.

The OPMA staff on Bethel Road in Columbus is quite a power

(Continued on page 2.)



## President's Message

(Continued from page 1.)

trio. They serve 550+ podiatrists in Ohio. Dr. Jimelle Rumberg and staff facilitate and enable the Board's leadership as we manage our practices. That is no small task. They work with the APMA, which presents its own benefits and challenges; add that to the regular slog of political action in the Statehouse and legal action in the courts. The recent Region IV meeting is an epic unto itself for our embattled staff. Throw in the daily calls/e-mails with "minor" crises that crop up. Join me and "give it up" for our Executive Director and her staff.

Jimelle would tell you that not *all* calls and inquiries her office receives are of the do-this-for-me variety. Members often engage in a sort of altruistic professionalism from the vantage of their offices. An example is the OPMA online TalkList. While not perfect, this electronic *suggestion box* can yield practice management pearls and unearth a policy change previously buried in the regulatory morass. Recently conversation on the OPMA TalkList is having more impact – don't be so quick to delete.

Washington, D.C. in March was nice. The OPMA delegation to the APMA House of Delegates was a trip, indeed! I was an alternate to the APMA HOD, but I nonetheless took much away from the experience. Incredibly, the APMA deliberated while the U.S.

Congress deliberated health care reform (during breaks, I ran on Capitol Hill and soaked in the import). The Ohio Delegation brought a resolution that would have earmarked *considerable* resources to ensuring podiatry's place in all Federal Legislation – Title XIX. Alas, the resolution failed, despite robust conversation courtesy of the Ohio delegation. After the APMA HOD adjourned, I visited Capitol Hill with OPMA's legislative team to talk more about podiatry's role in America's health. All in all, sights and sounds I'll not soon forget.

Then there are my Academy visits. The typical visit requires blocking a half, or an entire, day away from the office. Am I complaining? Well, yes, I knew it came with the territory. The fact is that what begins as a grudging let's-get-it-over-with meeting ends as another all-too-enriching learning and fellowship experience. With each Academy visit, I'm more impressed by who we are and what we do. Thanks for inviting me.

Addressing The Silver Gavel Club during the OPMA Scientific Seminar/APMA Region IV in June meant more to me than I think the group realized. The OPMA hosted a luncheon for this dedicated and dignified group of our profession's leaders. I should take this moment to apologize to members of The Silver Gavel if this part sounds familiar. Before I go on, does anybody here know what the Silver Gavel Club is? That's what I thought,

neither did I until last year. The Club is made up of OPMA's past presidents. My talk at the luncheon was an opportunity for me to share what being President of the OPMA means to me. Sometimes, it's "a pain" and I told them as much. More often, leadership in the OPMA clarifies and elevates podiatrists' irreplaceable role in this country's better health. When a third party tries to dictate a physician's worth at the expense of a patient's health, it's time to beat that drum.

The Silver Gavelers heard about a new patient who traveled some distance to see me in my office the day before. She is a registered nurse who probably passed a dozen or so podiatrists' offices *en route* to mine. She had heard "nice things" about me, but she had reservations about podiatrists in general. In the past, I would have been fine with her perception – it benefits me. These days, I'm going to put that ill-conceived perception straight. I spent at least five minutes telling this nurse how I, as an officer in my state association, have been privileged to see and work with a professional ethic and education that she could explore with confidence. Still, I was glad she walked in my door and welcomed her to refer any of her family and friends. I'm not a total idiot.

So, this year I am moonlighting as the president of my state professional association. Believe me when I tell you – it pays well.



Luci Ridolfo

## OPMA Welcomes the New Director of Education

OPMA would like to welcome **Luci Ridolfo** as Director of Education and Membership. Luci joins us after serving as Office Administrator at the Ohio State Chiropractic Association and a local association management company. A Columbus native, Luci holds a BA degree in Political Science from Ohio Dominican University.

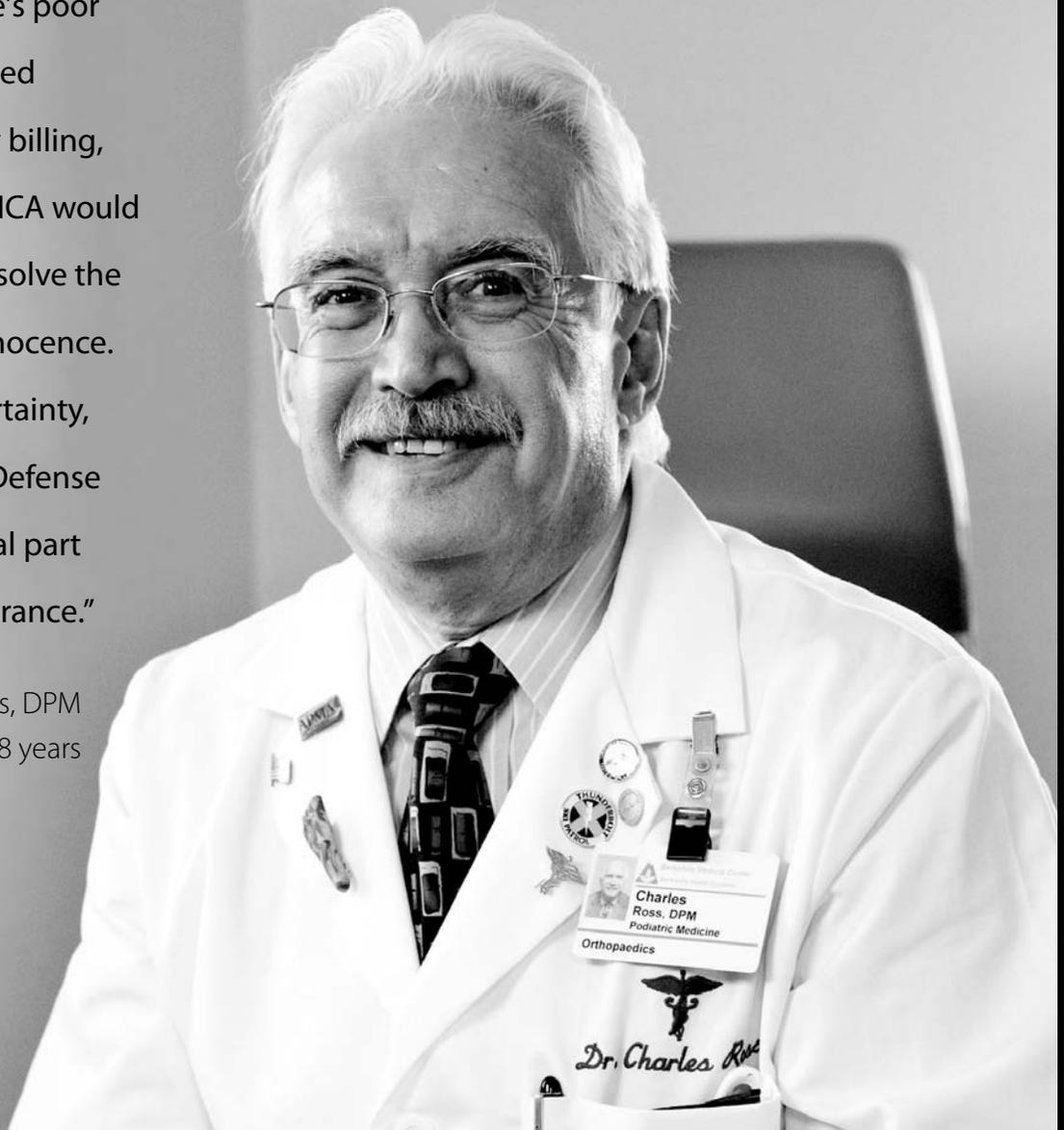
The Director of Education and Membership's duties include all CME and CPME reporting, GXMO, meeting planning, web development and membership support. Additional responsibilities include applications oversight and academy reporting.

Luci is married to Nick Ridolfo, an electrician. Luci replaces Lauren Stewart, who left OPMA in March to pursue a nursing degree.

Luci is delighted and proud to assist and promote the podiatric profession. Please welcome her and introduce yourself the next time you call OPMA.

“When a nursing home’s poor records management led Medicare to review my billing, I didn’t panic. I knew PICA would be there to help me resolve the issue and prove my innocence. In these times of uncertainty, PICA’s Administrative Defense Coverage is an essential part of my malpractice insurance.”

—Charles F. Ross, DPM  
Policyholder for 18 years



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[picagroup.com](http://picagroup.com) or call  
(800) 251-5727.

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For 30 years, PICA has been protecting podiatric physicians across the country with quality malpractice insurance coverage. We know that patient claims are not the only threat to your practice. That is why we offer Administrative Defense Coverage\*, to aid in your defense during Medicare audits, MCO de-certification/contract termination and similar actions. Our goal is to protect your whole practice, giving you the peace of mind you need to be your best.

*\*Not available in all states.*

# From The Desk of the Executive Director When The Big Rocks Morph Into Boulders

by Jimelle Rumberg, PhD, CAE



It seems that this time of year is when big challenges can become monu-

mental tasks. Beginning the third quarter exacerbates the urgency: getting CME, SGR cuts, DME, PECOS, PHI, HITECH, PCI—credit card protection of data, and now MITS—coming December 7 for Medicaid reimbursements. As physicians, it's impossible to be non-reactive.

TV Psychologist Dr. Phil would be the first to say that the frustration you feel is all about control. While working for the WV Psychological Association as executive director for eight years, I saw firsthand the many vicissitudes associated with state issues concerning insurance, drug formularies, mental health parity and behavioral health funding. Naturally, as professionals, we realize that we cannot control every situation; we only control how we react to situations.

As a physician, however, the requirements of the job demand control. Knowing that your control over the situation is typically the only variable that can

pulverize those boulders in your practice. You seek a logical means to attain the end results you desire. OPMA is positioned to be here to help you achieve your desired results with education, legislation and advocacy.

Mindful that all management theories will be the first to acknowledge that the need to control is power, let's face it—being a physician is not about total power or control rather the power to change or influence, to treat and to heal. The attribute of power is not, however, the negative connotation that one might imagine. The change or influence we seek as professionals can literally deflect those big rocks that are as powerful as your practice mission and life vision or your patients' expectations.

## Our Mission

OPMA has been diligent in fulfilling our mission's charge to develop many avenues to assist members to succeed. We are pleased to be of service to you in many ways.

Here are a few that merit your attention:

- **United We Stand**— There is strength in numbers, and in having one voice in Columbus.
- **Transmit timely, credible information**— Blast emails, Web site ([www.opma.org](http://www.opma.org)), and listserv.
- **Access to a "Seat at the Table"**— if you're not at the table, you're usually on the menu with Medi-

care, Medicaid and other state agencies that regulate your practice standards and rules.

- **Meetings and Events**— Region IV, GXMO, Coding Seminar, and Annual OPMA House of Delegates.
- **Member Services**— I.C. System (collections); CCI workers comp program (In 2009, OPMA members saved \$37K with this program); Affiniscape Merchant Solutions (in-office credit card processing at matched or low rates); and Accu Medical Waste Services, Inc.

## A New Partnership

A new cost-effective service that we've partnered with as of July 1 is *Accu Medical Waste Service, Inc.* If you're looking for low-cost, full-service medical waste management service, please call Jim Parks, or his son Doug Parks, in Marietta toll free at 866-696-8379 or cell 740-525-7198. Their web site is [www.accumedicalservices.com](http://www.accumedicalservices.com).

Since most podiatric practices are low volume in waste, this company caters to small practices at extremely cost-effective prices, and pickups are scheduled at your convenience. No monthly billing! And you'll see *substantial* savings over your current payments. One member actually saved enough to cover OPMA membership dues for 2011! Can you? To find out, give Accu Medical Waste Service, Inc. a call today.

## Sharing Our Successes

Our APMA Coding Seminar was a huge success, so much so that we exploded out of the room with attendees. Dr. Kinberg and Dr. Lieberman did a stellar job of detailing coding, modifiers and the like. Following that event was our most successful Region IV ever. We had almost 400 DPMs in attendance, with a total registration count of around 550. Our presentations were *top notch* in biomechanics, surgery and multidiscipline topic areas.

For an outstanding APMA Region IV, many special thanks go to Dr. Jeff Robbins and Dr. Jordan Grossman, Scientific Co-Chairs for 2010; Dr. Marc Greenberg, Scientific Paper Competition Chair; and Dr. Paul Lieberman, Exhibits Chair. We're growing and it's showing! We can assure you that 2011 will be even better. *Plan to attend on June 8-11, 2011.*

## Upcoming Plans

We are tentatively planning CPR training/recertification as well as coding on Wednesday. We want you to know that OPMA is addressing practice needs for you and your staff.

On our bucket list, we're hoping to partner with other associations in the health insurance arena for you, your family and staff—so stay tuned. We're crushing those boulders into little pebbles as we speak.

## MEDICAID PROVIDERS

# Paperless Provider Enrollment Going Live

In December 2010, paperless provider enrollment features will be available in the New Information Technology System (MITS) and MITS Go-Live Web Portal!

### MITS Provider Enrollment Features

Provider Enrollment is the MITS business function that will offer online enrollment and update capabilities for all providers interested in becoming an Ohio Medicaid provider. The new MITS Web Portal Provider Enrollment features include:

- Submission of new Provider Enrollment applications via the MITS Web Portal. Providers are guided through this process by a Provider Enrollment wizard;
- The option for providers to attach documents through the MITS Web Portal required to verify certification and licensure;
- Allows providers to check the status of a new application by using an Application Tracking Number (ATN) assigned to the application. The ATN serves as a receipt of the application submission;
- Providers can complete the application at a later time if the process is interrupted, and allows

## Online Enrollment Safeguards

To ensure the Provide Enrollment application is accurate and complete the Web Portal functionality will:

- Check for duplicate enrollment applications and status;
- Screen required data (NPIs, Tax IDs, and CLIA numbers);
- Verify provider status with internal and external entities; and
- Facilitate and increase efficiency of the Provider Enrollment application process.

The online application process will also include the enrollment of other entities that do business with Medicaid such as trading partners and sub-recipient state agency providers.



up to three days to make updates prior to submission;

- Providers can validate their information and keep information up-to-date; and
- Generate reminder notices 120 days prior to the re-enrollment date.

### Good-bye Paper

Paper applications will *not* be accepted after MITS Go-Live. New applicant provider enrollment will only be available via the MITS Web Portal.

### MITS Web Portal Provider Data Maintenance Business Function

The Provider Data Maintenance business function maintains comprehensive, current and historical information about providers who are eligible to participate in the Ohio Medicaid program. This function of the new MITS Web Portal will:

- Encourage the participation of qualified providers, making enrollment and re-enrollment efficient, and accurate;
- Help ensure that pro-

- viders are qualified by screening for state licensure, certification, and specialty and sub-specialty certification;
- Provide for processing of provider contracts and changes in a timely, accurate manner;
- Maintain control over all provider data;
- Establish and maintain a provider repository with:
  - ~ demographic information;
  - ~ certification and licensure information;
  - ~ reimbursement rates;
  - ~ summary of financial information; and
- Maintain functions to support provider training activities.

- Providers will be able to:
- Receive and acknowledge alerts and notices within Global Message viewer;
  - Search for all provider alerts regardless of the intended audience. For example, an optician can view all messages sent to optometrists;
  - Use the Demographic Maintenance to verify address, phone numbers, and other information

related to billing; and

- View/download reference extract files, such as fee schedules, Provider handbooks, FAQs, forms, and other publications.

Provider Data Maintenance and the entire new MITS system will meet the requirements of the National Provider Identification (NPI) standards of the Health Insurance Portability and Accountability Act (HIPAA).

### What About Training?

An extensive statewide outreach and training strategy is in development, with training to begin this fall. Watch for the most current news on the MITS Web site, <http://jfs.ohio.gov/mits/communication.stm>, about training and registration, and make plans for you and your staff to attend a seminar or webinar. For the most up-to-date information about the MITS Web Portal, as well as information on MITS functionality, tools and how the replacement system will impact you as a provider, visit online at <http://jfs.ohio.gov/mits/communication.stm>.

## REPORT FROM THE STATEHOUSE

# Creating The Best of Both Worlds

2010 is an active political year and with it comes limited days of legislative work at the Statehouse. This is not necessarily a negative fact if you are working to stop bad legislation. If you are working to pass good legislation, it can be frustrating. For the Ohio Podiatric Medical Association and our priority issues at the Statehouse, we have a little of both.

Looking at Ohio's political landscape, the May primary did not produce any significant upsets. The election simply lays the groundwork for a contentious battle for the Governor's office as former Congressman John Kasich (Republican) challenges incumbent Governor Ted Strickland (Democrat). Both political parties will also be focused on victories in the Auditor's office and Secretary of State's office, two critical positions that

play roles in redrawing district lines that determine legislative districts for the next ten years. Additionally, a number of races for seats in the Ohio House will also be closely watched as Republicans look to shift the 53-46 Democrat majority makeup of this important chamber.

Statehouse halls are quiet over summer months as legislators refocus priorities on working in their district and preparing for general elections. Legislators are not expected to return for full legislative activity until after the November 2nd elections.

### Statehouse Shuffling

Two new legislators recently took seats in the Ohio House. Joe Walter, Director of the Lucas County Emergency Management Agency, was elected to fill a vacancy created by Representative Peter Ujvagi. Cynthia Reece, formerly Cincinnati Vice Mayor and a Cincinnati City Councilman, recently replaced Representative Tyrone Yates, who was ap-

pointed to Ham-



*The Ohio House of Representatives in Session*

ilton County Municipal Court. Additionally, a number of House Committees were shuffled to address the restructuring. Rep. Tim DeGeeter now chairs the Criminal Justice Committee. Rep. Alan Sayre replaces Rep. DeGeeter as chair of the Public Utilities Committee. Rep. Tracy Heard has been appointed chair of the Public Safety & Homeland Security Committee, and Rep. Linda Bolon has been appointed chair of the Finance Transportation Subcommittee.

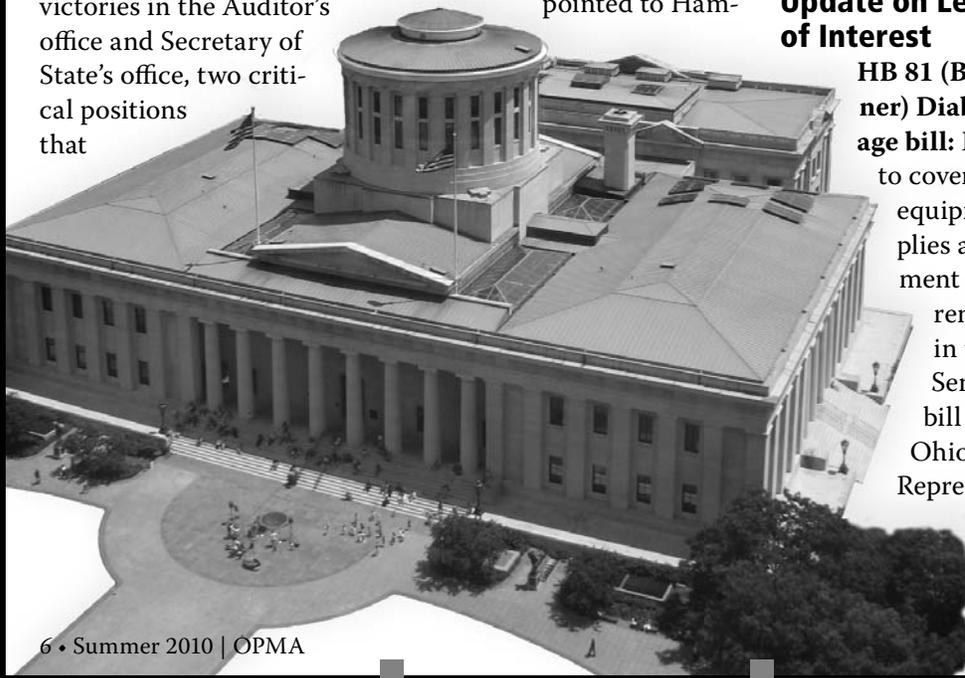
### Update on Legislation of Interest

**HB 81 (Boyd/Gardner) Diabetes coverage bill:** Legislation to cover the cost equipment, supplies and treatment of diabetes remains stalled in the Ohio Senate. The bill passed the Ohio House of Representatives in December 2009, but

Senate Leadership has said insurance mandate bills are low priority.

**HB 185 (Book/DeGeeter) Prohibiting unilateral contract changes:** Hearings have also stalled in the Ohio Senate on HB 185, legislation sponsored by Reps. Todd Book and Tim DeGeeter to clarify that any change to a contract between a health insurance company and a provider is signed off by both parties. As the insurance lobby has stepped up their opposition, it is clearer that the bill will be a hard sell in the Ohio Senate. HB 185 had opponent testimony on February 9, 2010, and has not had a hearing since.

**HB 122 (Boyd)/SB 98 (Patton) Physician designation bill:** The Academy of Medicine of Cleveland and Northern Ohio and the Ohio State Medical Association are working to set standards for physician rating systems established by health insurance companies. The OPMA was suc-



successful in advocating that the definition of *physician* in the bill also include *podiatric physicians*. The bill prohibits such systems from being based solely on cost measures. HB 122 was voted out of House in February 2010; SB 98 had a number of hearings. Both are pending a vote in the Senate Insurance Committee.

**HB 267 Official Prescription Drug Program, Introduced in House:** Rep. Clayton Luckie (D-Dayton) continues to advance his bill to create a mandatory prescription pad program in Ohio. The bill requires all prescribers in Ohio to purchase tamper-resistant pads from the Ohio Board of Pharmacy. Prescribers who lose or have pads stolen would be required to report that information to the board. The board would then alert pharmacies of the missing prescriptions in an effort to reduce fraud. In a compromise effort, Rep. Luckie proposed reducing the pads' annual fee from \$250 to \$100. Although HB 267 has not had a hearing for months, Rep. Luckie continues to talk to interested parties about his ideas. The OPMA will participate in these discussions and express our concerns about this proposal.

**HB 442, Complementary and Alternative Medicine:** Rep. Kenny Yuko (D-Euclid) has introduced a "perennial favorite" bill in the legislature to allow for the unregulated practice of alternative and complemen-

tary medicine. The OPMA testified in opposition to this bill in May, sharing our concerns that unregulated medicine can pose significant risks to patient safety and that the state needs to ensure alternative providers have appropriate training and oversight as they take the health and safety of Ohioans into their hands.

HB 442 is being heard in the House Commerce and Labor Committee that is chaired by the bill sponsor Rep. Yuko. We anticipate that Chairman Yuko will continue to push the bill during the lame duck session this fall.

**SB 86 (Buehrer) Expanded qualified immunity for ER Physicians:** SB 86, a bill to expand qualified immunity for physicians working in emergency departments and those who provide disaster relief services passed the Ohio Senate on May 19. The bill included a compromise to change the legal standard for physicians in emergency rooms to a slightly lesser standard of "reckless disregard." The higher standard of "willful and wanton disregard" stands for health care providers providing disaster relief services.

The OPMA was also successful in convincing the sponsor and committee chair of this bill to include *podiatrists* in the definition of eligible providers. SB 86 now heads to the House for further consideration. It has been referred to the House Civil and Commercial Law Committee.

## Ohio's Budget Crisis Impacts Providers

By Jimelle Rumberg, PhD, CAE, Executive Director

Challenges for podiatry are greater than ever in recent history. National health reform, electronic health records, third-party payers, state and federal deficits, SGR, Title XIX and residency shortages are areas where the best of podiatric leadership will be needed. Leadership can only be successful with substantial support from the "rank and file" podiatric physicians.

For example, let's illustrate how the budget crisis in Ohio's state government impacts Ohio podiatrists:

- The state budget must be balanced per the Constitution. With a budget of over \$50 billion, a projected \$8 billion hole was filled using on-time federal stimulus money.
- Ohio's unemployment compensation fund is bankrupt. Ohio owes the federal government \$4 billion that comes due, including interest payments, beginning in 2011.
- All five Ohio public pension funds are underfunded. Ohio taxpayers will be tapped to restore these funds.
- State elected officials have made commitments to public educa-

tion (K-12); add \$3-4 billion.

- Medicaid costs continue to rise. With HC Reform, 554,000 will be added to the ODJFS rolls and this will cost Ohioans \$1.45 billion.

The impact is uncertain. That's the reason OPMA remains always vigilant and proactive, calling for the support of *every* podiatric physician in Ohio. OPPAC contributions, paying dues to OPMA on time and supporting the OPMA Legal Fund are a few ways OPMA members provide support.

With PICA discounts at Region IV and the newest member benefit of Accu Medical, your savings more than pay your dues, possibly for two members! We use the most current means to keep you apprised and involved as members via the *Journal*, Web site, listserv, as well as blast emails and academy meetings. Membership has so many benefits. We will continue to strive to *exceed* your expectations and to serve you.

Podiatry's message is simple; "Healthy Feet Keep Ohioans Walking!" Our audience is legislators, neighbors, family and friends. *Stand tall and stand united in knowing that you support your professional association!* Together we will promote, protect and advance the practice of podiatric medicine in Ohio.

# The 2010 APMA Region IV Seminar Was A Success

**JUNE 3, 4, 5, 2010**

The 2010 APMA Region IV Seminar was a successful, informative event. Many thanks go to sponsors, attendees, members and participants.



*Dr. Lieberman shares his skill in Dermagraft placement during the Libation event.*



*Libation with Information Nosh.*



*OPMA Past Presidents gather for the Silver Gavel Club Luncheon and meeting at Region IV.*



*The 2010 Gerard V. Yu Scientific Paper Competition participants with winner Sarah Viselli, DPM, (front row, second from left) and Drs. John Stevenson, Marc Greenberg, David Hintz, and Peter Wiggin.*



*Exhibit Hall flurry with 72 Exhibits.*



*At left: Nicole Westrich of SafeStep shows students from OCPM various boots, shoes and orthotics.*



*Dr. Lieberman, Exhibit Hall Chair, (left) and Dr. David Hintz (far right) with door prize winner Dr. Kelly Whaley, who won an OPMA umbrella. Matt Whaley (center) is just enjoying the photo-op fun!*

# 2010 APMA Region IV Industry Affiliates and Grant Sponsors



*Bako Podiatric Pathology*



*PICA*



*Dermagraft*



*St. Jude Medical*



*EIP—Extremity Imaging Partners*



*BioMedix*



## OPMA Upcoming Events

### August 2010

- 5 Board of Trustees Meeting
- 27-29 GXMO Courses: Initial Course, Continuing Education Course, and Clinical Positioning

### September 2010

- 9 Executive Committee Teleconference
- 24-25 Midwest Podiatry Academy of Ohio Quickie Seminar

### October 2010

- 14 Board of Trustees Meeting
- 28-31 NEOAPM Northcoast SUPER SAVER Seminar

### November 2010

- 11 Executive Committee Teleconference

### December 2010

- 3 Board of Trustees Meeting
- 3-4 House of Delegates Annual Meeting

### June 2011

- 8-11 Region IV Seminar

## CONTINUING ED NEWS

# Continuing Medical Education Credits: Approval Policy for Ohio Credit

Many organizations and members submit continuing medical education programs to OPMA for podiatric-specific continuing medical education credits for approval by the State of Ohio.

As you know, the State Medical Board of Ohio approves all CME certified by the OPMA (Section 4731.281). Accordingly, the process for CME approval begins with OPMA.

OPMA's web site contains all the information needed for submission for course approval. (*Please note these changes have nothing to do with CPME [nationally recognized podiatric credit].*) Only CME programs for Ohio credit are affected.

We are writing to inform you of changes that will occur on *July 1, 2010*.

## The Updated Ohio CME Policy

On April 22, 2010, the Board of Trustees qualified the staff time spent on processing the many CME applications OPMA

receives. The motion advanced by the Budget and Finance Committee for consideration was adopted by the Board of Trustees as OPMA policy.

The newly adopted OPMA policy establishes the fee schedule for CME approval (Effective July 1, 2010.) See inset:

The OPMA web site will continue to post all approved CME programs or courses for member audits for reference purposes. All programs submitted and

CPME or Ohio CME approved course programs) will not be posted, but the attendee requesting the credit will be notified after the program/meeting brochure is reviewed by our CME Chair. (i.e., going to Texas to attend a Hyperbaric Oxygen lecture program for physicians at a hospital). We can approve those programs pre- or post-; however, the cost increases after a 30-day period. The brochure or a copy must accompany your request for program

important for all events that would involve *out-of-state participants* and would give recognized accepted credit in any state for events approved by OPMA. If you hold a license in another state, CPME approved programs are accepted outside the state of Ohio.

Once OPMA receives this certification from CPME, OPMA will host a conference call for all interested academies so that we can clarify the CPME requirements for programs or CME

## Continuing Medical Education Approval Fee Schedule

- \$0 for all OPMA Academies
- \$25 for members for CME pre-approval of credit for all programs and courses either hosted or sponsored
- \$25 post facto approval for members for CME approval for courses attended within 30 days (Not CPME approved podiatric programs, but those in or out of state for physicians, diabetes or education appropriate programs that would like Ohio CME credit)
- \$50 post facto approval for members for CME approval for courses attended after 30 days (Not CPME approved podiatric programs, but those in or out of state for physicians, diabetes or education appropriate programs that would like Ohio CME credit)
- Corporate fees remain the same

approved will be notified promptly.

Program sign-in sheets for hosted or sponsored courses are required to validate physicians that attended the program for our files or OSMB audits.

Courses attended by individuals (i.e., outside the state of Ohio that are not

review by OPMA's Chair.

## OPMA Seeks CPME Accreditation

OPMA would also like you to know that we are in the process of applying for accreditation as a CPME approved sponsor through the Council of Podiatric Medical Education. This is

for Ohio only program credit. Please feel free to contact Executive Director Jimelle Rumberg or Luci Ridolfo, Director of Education and Membership at OPMA should you have questions regarding either educational credit venue.



## WORKING SMARTER

# Accu Medical Waste Services, Inc.

OPMA IS PLEASED to announce that an affinity agreement has been established with Accu Medical Waste Services, Inc. Accu Medical is an Ohio corporation headquartered in Marietta. They are a full-service medical waste management company.

Accu Medical Waste Services, Inc. provides legal transportation and disposal

of infectious waste, including support and assistance for cost-effective waste management programs for the health care profession. Accu Medical Waste Services meets or exceeds federal, state and local regulatory expectation with cost-effective packaging, manifest tracking, and legal transportation and disposal of bio-medical infectious waste. Accu Medical can advise you on expired pharmaceuticals disposal (lower classification drugs) and Hazmat disposal should an expired item warrant special disposal.

Accu Medical Waste Services is endorsed by the Ohio State Medical Association, Ohio Health Care Association, Ohio Academy of Nursing Homes and sev-

en other medical societies in Ohio. Additionally, Accu Medical Waste Services is licensed by The Ohio EPA, Ohio State Board of Pharmacy, and The West Virginia Department of Health.

Accu Medical caters to the needs of small providers with cost-effective options and personalized waste reduction programs that help you save money.

For further information and price quotes for your practice, call Doug or Jim Parks toll free at 1-866-696-8379.

**Tell them you're with OPMA to receive special pricing available only to OPMA members.**



## Accu Medical services include:

- Medical waste transportation and legal disposal.
- Skilled, trained, professional personnel. Friendly, personal phone support with no pre-recorded messages. Customer service representatives are dedicated to quickly and accurately serving you.
- Efficient, well-maintained equipment.
- Prompt, dependable pick-up service.
- Documentation of statutory requirements.
- Guidelines so you are always in compliance with OSHA and EPA regulations.

# A better way to be safe, and secure



## if your patients have diabetes.

One in four Americans will develop foot complications due to their diabetes. Properly fitted shoes are essential for reducing these risks. Dr. Comfort shoes are made from the finest leathers and are scientifically designed for the diabetic foot. Call now to experience exceptional quality and profitability with our exclusive turn key program for your podiatric practice.



*The Finest Quality Diabetic Footwear* **Period!**

1-800-556-5572 [www.drcomfortdpm.com](http://www.drcomfortdpm.com)

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Thomas W. Kunkel, DPM

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- Animesh Bhatia, DPM.....New Albany
- David Bettenhausen, DPM ..... Fostoria
- Jane Graebner, DPM ..... Ostrander
- D. Charles Greiner, DPM .....New Albany
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- John Clarke, DPM.....Fremont
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## ONE SMALL STEP . . . **Baby Steps**

### **Online Health Care Reform Updates**

Ohio launched a website to keep people informed about health care reform activities. This website is available at <http://healthcarereform.ohio.gov/pages/default.aspx>.

### **HITECH Articles Review**

The 2009 winter issue of the *OPMA Journal* listed information regarding HITECH on page 5. To keep you informed, here are some recent "meaningful use/HITECH" articles.

- [fierceemr.com/story/intermountain-would-miss-36-48-current-mu-requirements/2010-06-10](http://fierceemr.com/story/intermountain-would-miss-36-48-current-mu-requirements/2010-06-10)
- [zdnet.com/blog/health-care/expect-slippage-on-meaningful-use-guidelines-and-dates/3715](http://zdnet.com/blog/health-care/expect-slippage-on-meaningful-use-guidelines-and-dates/3715)

care/expect-slippage-on-meaningful-use-guidelines-and-dates/3715

- [nytimes.com/2010/06/08/health/policy/08health.html](http://nytimes.com/2010/06/08/health/policy/08health.html)

### **Texas Podiatric Medical Association Denied Review by Texas Supreme Court**

We regret to report that Texas Podiatric Medical Association (TPMA) got a denial from the Texas Supreme Court to grant our Petition for Review on June 18. The effect of this adverse action:

- a. The Rule defining "foot" remains in place and the scope stays the same until all remedies are exhausted at the Supreme Court.
- b. TPMA will immediately

file the Motion for Rehearing with the Supreme Court. That could take from 60 days to 6 months.

- c. The Motion for Rehearing should stay any actions by hospitals pending the final outcome of the Supreme Court, but in the meantime TPMA will respond with assistance and support as may be appropriate for members who may get questions or modifications of privileges from their hospitals.

Unless TPMA gets the rehearing, TX podiatrists may be limited to "at or below the ankle" and probably will lose "above the ankle" privileges that they have had for several years (unless they can get regulatory or leg-

islative intervention). This battle has been ongoing for the past ten years.

### **Senate Passes Six-Month SGR Fix**

The U.S. Senate passed an amended version of H.R. 3962, now called the "Preservation of Access to Care for Medicare Beneficiaries and Pension Relief Act of 2010," by unanimous consent. This legislation provides a 2.2 percent Medicare physician payment update for six months, from June 1 through November 30, in lieu of the 21 percent cut scheduled for 2010.

Once H.R. 3962 is passed by the House and signed by President Obama, CMS will retroactively adjust any June claims that have been paid.

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## INDUSTRY AFFILIATE SPOTLIGHT

### Extremity Imaging Partners, Inc.

Extremity Imaging Partners, Inc. ("EIP") was founded in 2001 to provide MRI services of extremities and small joints, particularly the foot and ankle. EIP owns and operates MRI centers in Youngstown, Cleveland, Canton, Akron, Columbus and Dayton, Ohio. Since inception, EIP has provided over 43,000 podiatric-specific MRI scans, with patients rating EIP's service as very good to excellent 97% of the time.

EIP's free-standing centers offer patients access to

MRI services outside hospital settings. The unique MRI machine provides patients with an anxiety-free experience. Only the patient's foot and ankle are placed inside the MRI unit. Claustrophobic patients who otherwise could not tolerate a traditional whole-body MRI are able to receive treatment.

Unlike other imaging providers, EIP's focus has always remained exclusively on extremity imaging with expertise in podiatric MRI. EIP utilizes dedicated scanners specifically designed to enhance imaging of extremities. Additionally, teleradiology technology is used to provide sub-specialty podiatric interpretations without geographic boundaries. The interpreting physicians

are fellowship-trained, board-certified musculoskeletal (MSK) radiologists experienced in podiatric MRI interpretations.

EIP's service model is designed to provide first-class customer service to the referring podiatrist, staff and patient. EIP excels in providing timely, efficient and value-added service. Due to customized podiatric protocols, referring podiatrists receive reports that are tailored to their specific area of interest – reports that are comprehensive, consistent and accurate.

As part of EIP's mission to provide best-in-class foot and ankle MRI services, EIP supports the field of podiatry through various sponsorships and educational activities. This commitment

to the podiatric community was very important to EIP's Podiatric Medical Director, the late Dr. Gerard V. Yu. EIP continues its support of the podiatric profession begun with its founding. Through specialization, teleradiology and focused customer service, EIP has developed a sub-specialty podiatric MRI service that puts the needs of podiatrists and their patients first.

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