Elie C. Azrak, MD, FACC, FSCAI
SLMMS President 2009

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ON ILLNESS
Some people must pay increasing amounts of “rent” to stay in their “houses.”

The analogy here is pretty easy to understand, I think. We only have a “lease” on this life, and we pay “rent” to inhabit our bodies during our lifetime. What is the “rent”? It is the increasing number of difficulties we encounter as we age: more doctors and pills; more aches and pains; fewer functions that work. If that ain’t rent payment, what is? And I think most of us would exchange payment in dollars for that “kind” of rent any day. Unfortunately, the lease is life-long, and the rent is not controlled. The last payment occurs when we vacate, and any security deposit is left with the land-Lord. It is similar to declaring a building unfit for habitation and razing it. So get ready for some big rent money if you want to remain a tenant. You (and I) are going to need it.

Harry’s Homilies©
Harry L.S. Knopf, MD

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SCAM-Q*
*How insurance companies, hospitals, government, etc.
Slice Costs And Maintain Quality

Honest Rod in the Land of Lincoln

By Richard J. Gimpelson, MD

I cannot believe that everyone is jumping all over poor Rod Blagojevich and demanding that he step down as governor of Illinois. Why is everyone so angry? Is it because Blagojevich is one of the few honest politicians we have left? Yes, I said honest. Honest Rod will deliver if you give him the money. Give him $50,000, and your hospital gets a Certificate of Need. Give him $100,000, and your race track gets slot machines. Give him $1,000,000, and you will be a U.S. Senator.

Heck, many candidates spend $5,000,000 or more and still lose their elections. The AMA spends $10,000,000 a year, and barely gets bupkis. Maybe if the AMA gave money directly to one more than half of the House and Senate members, we could get all the legislation we desire passed on the first attempt.

Just to show you how politicians work, I will relate a true story. Several years ago one of the Missouri statewide candidates spoke at the St. Louis Metropolitan Medical Society. She said “You doctors just don’t get it. For every dollar you give to a candidate, the lawyers give ten dollars.” She is now a U.S. Senator and has done little to advance good medical care. In other words, don’t expect any favorable legislation unless you contribute to her campaign. The difference between her and Honest Rod is that she wouldn’t give specifics on her favorable legislation; whereas with Honest Rod you get what you pay for.

My own experience demonstrates why dealing with someone like Honest Rod could be very rewarding. I ran for the U.S. House of Representatives in 2000. The Missouri Medical PAC gave me $1,000, but did not endorse me because I gave the money to charity. My slogan was “I want your vote, not your money.” Although I would obviously vote for legislation supporting good medical care, I did not offer the quid pro quo. Now I am not bitter. When I ran for the U.S. Senate in 1986, not only did the PAC fail to endorse me or give me any money, it actually gave my opponent $3,000 and endorsed him. However, my opponent didn’t promise anything to physicians for the money or the endorsement, and has not done much to advance good medical care. He was no Honest Rod. Maybe if I would have been more like Honest Rod, I would have gotten the money, the endorsement, and physicians and patients would have been enjoying better medical care today. Unfortunately, my slogan at that time was, “If you can trust me with your life, you can trust me with your vote.” With Honest Rod you know what you will get. No surprises, no disappointments. Honest Rod tells you what he wants. Give him what he wants, and you will get what you want. Now, why can’t all politicians be like Honest Rod? My new slogan is “I don’t want to BE a politician; I want to BUY a politician.”

Abe Lincoln would be proud of Honest Rod.

*Note: Prices subject to change based on the economy.

The two senators described in this column represent both the Democratic and Republican parties respectively.

Dr. Knopf is editor of Harry’s Homilies.©
He is an ophthalmologist retired from private practice and a part-time clinical professor at Washington University School of Medicine.

Dr. Gimpelson, a past president of SLMMS, is a gynecologist in private practice.
SLMMS 2009

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The advertisements, articles, and “Letters” appearing in St. Louis Metropolitan Medicine, and the statements and opinions contained therein, are for the interest of its readers and do not represent the official position or endorsement of the St. Louis Metropolitan Medical Society. SLMM reserves the right to make the final decision on all content and advertisements.
It is with distinct honor and humility that I accept to serve as your president. Over the past few years I have served as a member of the Council and of the Executive Committee, and it gives me great pride to be associated with physician leaders who give so much of their time and energies to the cause of medicine. Let me then first take a moment to pay tribute to all my predecessors, particularly Dr. Stephen Slocum and Dr. George Hruza, for their insightful leadership of this organization over the last two years.

I also would like to acknowledge the wisdom and strength that Executive Vice President, Tom Watters, and his administrative team have conferred to this organization and its management. Without them it would be hard for any of us to take as much pride in the work of our Medical Society.

I have to say that a good support staff makes the duties of the president easier to carry, but I could not stand here today without the support of those whose presence is central to all that I do: my family. My lovely wife Carine puts up with my schedule daily. I thank her for her continued sacrifice. My four children know all too well the words: “another meeting, Dad!” To them I say: “I love you,” and “I am very proud of you.” To express their influence on me I want to borrow the words of Jack Nicholson: “You make me want to be a better man.” Last but not least, I would like to thank my mother, Jeanne Claude, who is here with us tonight, for her many years of sacrifice, and I would also like to honor the memory of my late father: Through his example of personal integrity and honesty, he will always guide my steps.

My friends and colleagues, this volunteer association of physicians was chartered in the year 1835. In the early years, members shared information about public health concerns, medical education and physician credentialing. One hundred and seventy-four years later, I believe that the existence and the role of organized medicine are still as relevant.

In a time of faltering economy, we can feel in our own practices the ill-effects of rising unemployment rates and the erosion of employer-based health insurance. The costs of health care continue to rise. Yet, for the past decade, Congressional inaction has effectively led to an unsustainable decline in physician reimbursement. A crisis in primary care is looming.

In response to this crisis our nation faces, “change” has been the slogan of our elected officials. “Change is coming,” we are told! Yet in the past 60 years, almost every decade has seen its fair share of the health-care debate. We know all too well the recent outcome of organized medicine’s repeated pleas to Congress to address the defective Sustainable Growth Rate formula for the physician fee schedule, and the tort-reform struggle.

Nevertheless, I believe that our Medical Society should remain focused on the issues important to our members. Several years ago, the passing of tort reform legislation in our state set a clear example of successful actions physicians can take to preserve the viability of their practices.

The conditions in which we practice medicine change constantly. Unfortunately, this change has been for the worse in the recent years! Whether they relate to Medicare and Medicaid reimbursement, pay-for-performance, hospital medical staff issues, or health coverage for our patients, I believe the role of our organization is to monitor those conditions, to educate our physician members on the pertinent questions, to represent them when their interests and those of their patients are threatened, and to advocate on their behalf in the state legislature.

It appears essential that we directly engage all stakeholders in the health-care arena, be they friends or foes, to ensure a voice for the physician at the table of the health-care debate.
Indeed I believe that the central functions of the Medical Society, of unequivocal value to our members, are education, representation and advocacy.

Our role in education has been strengthened over the past two years with the successful launching of the spring and fall continuing medical education programs, such as the electronic medical records symposium, the physician wellness program and the practice management seminar, all with one vital purpose: to improve our members’ ability to practice medicine in an increasingly complex and hostile environment.

With that in mind, financial support from the St. Louis Society for Medical and Scientific Education, your Medical Society’s foundation, has been crucial in making those programs possible at no cost to our members. I want to continue this important activity, but I do want to start today by asking for your support of the foundation, to ensure its growth as a valuable resource to this organization.

I have long pondered over how best we can represent our physician members and their practices. Through the physicians’ grievance committee we provide an effective avenue for members to voice their concerns to third-party payers and hospital administrators. However, it appears not only logical to me, but essential as well, that we directly engage all stakeholders in the health-care arena, be they friend or foe, to ensure a voice for the physician at the table of the health-care debate. This year, I plan to ask the Council for guidance and direction in this approach.

A few weeks ago, Secretary-Designate for Health and Human Services, Sen. Tom Daschle, called for a public debate in communities across the country, inviting new ideas in our health care sector. I believe that our Medical Society can, and should act as a grassroots organization, a forum for deliberations in this community. By building bridges and developing alliances, we can strengthen our standing, and ensure a voice for physicians and their patients.

Those of us who practice today with one eye looking to the future, recognize a course of compelling events shaping our professional as well as economic fate. We look upon this very organization as our advocate, and place our hopes in its leadership. There are many issues facing organized medicine at the policy and legislative levels. In this regard, I see our strong tradition of working with the Missouri State Medical Association as a great asset for our advocacy efforts. I want to build on this strength, and continue to petition our friends in Jefferson City to enact legislation rightfully defending our members, and the lives they have pledged to protect. To name only a few issues I cite Medicaid reimbursement, the non-physician practice of medicine, and the very definition of the practice of medicine.

I come from a country where private citizens do not always have the tools to engage in public life, or to affect their destiny and that of their profession. Our membership and involvement in this organization is an invaluable asset to the cause of medicine. I ask all of you to reach out to nonmembers, and invite them to join the Medical Society. Let us invest our time, energies and resources, in order to help us deliver the medical care we want to deliver, the medical care we were trained to deliver, the best medical care, and to shape a better outlook for medicine, at a time when many questions are still looking for answers, and problems are looking for resolution.

I congratulate the elected Council members and Officers. I thank you for your trust, and look forward to a great year!
It has been a great honor to be allowed to serve as your president during the past year. My success as your president and that of the Society would not have been possible without the excellent work of our executive vice president, Tom Watters, his executive assistant, Liz Webb, and all the other hardworking employees of the Society. I also want to thank members of the Council for their service and especially Dr. Stephen Slocum, the immediate past president for his sage and more often than not humorous advice and to Dr. Elie Azrak, our incoming president, for his energy and insightful suggestions. On a personal note, I want to thank my fiancée, soon to be wife (in one week), for supporting me throughout the year as I went about the business of the Society and for her editorial acumen in improving my presidential columns in the magazine.

The Society had a very successful year, with a number of achievements realized. For the second year in a row, our operational budget has been almost balanced after many years of significant deficits. This was achieved through significantly increased advertising revenues for the magazine thanks to the efforts of the associate editor, Jim Braibish, and through stabilization of Society membership. On the expense side, Tom Watters has been able to streamline and increase efficiency of our operation to the tune of more than $100,000 in annual, ongoing savings.

In spite of fiscal restraint, your Society has been very active in member education, advocacy and expansion of member benefits. Under the excellent guidance of Dr. Azrak, the Society put on CME symposia on electronic medical records and practice management. The Hippocrates Society heard from Dr. Michael Maves, the AMA executive vice president, about the impact of the election on health-care reform.

In the area of advocacy, we had one big loss in the ill-conceived decision by the Missouri Supreme Court that upheld the lay midwifery law that allows just about anyone to deliver babies, perform abortions and perform Caesarian sections. On the plus side, Aetna shelved the proposal to stop paying for IV sedation for colonoscopies; working with the MSMA we were able to stop a bill that would have given psychologists medication prescribing authority. We have held meetings with Anthem Blue Cross and Blue Shield about their year-long disastrous computer “glitches.” These problems arose out of the integration of Missouri BCBS into Anthem and have resulted in delayed payments, payments sent to the wrong office and incorrect (lower) payments.

We have launched the Grim Reaper and Golden Angel awards based on Dr. Bean’s suggestion for the worst and best health insurers in the treatment of their customers (our patients), respectively. We have met with HHS Sec. Michael Leavitt about adoption of electronic health records by physicians and with former Speaker Newt Gingrich to discuss consumer-driven health care.

We have gained media exposure in the St. Louis Post Dispatch through at least a half-dozen stories including liability insurance, Medicaid, pharma guidelines, lay midwifery, and slow insurance payments to physicians. We have enhanced the SLMMS Web site with the addition of a physician finder section. Membership benefits have been beefed up with the MedjetAssist program. For the first time, SLSMSE has made a significant financial contribution to the Missouri Physicians Health Program.

In conclusion, SLMMS is in a strong position to advocate on behalf of our members and patients and to provide valuable member benefits. Thank you for the confidence and trust you have placed in me this past year.

“SLMMS is in a strong position to advocate on behalf of our members and patients and to provide valuable member benefits.”
SLMMS 2009 Installation Banquet

Medical Society 2009 officers, from left: David Pohl, MD, treasurer; Thomas Applewhite, MD, vice president; Sam Hawatmeh, MD, president-elect; Elie Azrak, MD, president; George Hruza, MD, immediate past president. Not pictured: Robert Brennan, Jr., MD, secretary.

SLMMS past presidents, from left, John Rollo, MD; Carol Williams, MD; Jeffrey Thomasson, MD; Edmond Cabbabe, MD; Erol Amon, MD; 2009 President Elie Azrak, MD; Al Elbendary, MD; George Hruza, MD; Arthur Gale, MD; Ravi Johar, MD; Stephen Slocum, MD; Nathaniel Murdock, MD; and Jay Meyer, MD.

2008 SLMMS President George Hruza, MD, left, is recognized for his service by incoming President Elie Azrak, MD.

Sally and Erol Amon, MD; Edmond Cabbabe, MD; John Rollo, MD.

MSMA President and SLMMS Past President Jeffrey Thomasson, MD; Teresa Knight, MD; Marc Clemente, MD.
Katia and Ghassan Khoukaz, MD; Bishop Nicholas Samra; Sima and Bassel Beitinjaneh, MD.

SLMMS Past President Al Elbendary, MD, and his wife Suzanne; Randa and Sam Hawatmeh, MD, SLMMS president-elect.

Cheri and new SLMMS Councilor Michael Stadnyk, MD; Sam Page, MD, and Jennifer Page, MD.

SLMMS Councilors Janet Ruzycki, MD, and Stacey Tull, MD; Frank Tull, MD.

SLMMS 2009 President Elie Azrak, MD, center, with his wife Carine, to his right; his mother, Jeanne Claude, front; and family and friends.

SLMMS President Elie Azrak, MD, and his wife, Carine, with their children, from left, Carl, Ingrid, Cesar and William.