



INDIANA PODIATRIC MEDICAL ASSOCIATION

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ISSUE THREE | FALL 2024

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PRESIDENT'S MESSAGE

KATHLEEN NEUHOFF, DPM | IPMA PRESIDENT

The fall season means the approach of the IPMA Annual Conference. The IPMA has revamped the conference this year and I hope members will attend. Beyond the tremendous educational content, the IPMA Board will be proposing a dues increase and discussing other important matters of the association. A full letter on the reason for the increase can be found on page 3.

I certainly understand that everyone is busy with the many demands of family and practice but as an association, our conference remains a fantastic opportunity to catch up with friends and colleagues from throughout the region.

I ask you to continue to support the IPMA/APMA with your membership dues and participation. The IPMA needs you to be involved and engaged to make change happen for podiatrists, our patients, and our practices. Please keep an eye out for your dues invoice that will be sent in mid-May.

As always, we continue to need the time and talents of all members in order to remain a strong organization. Podiatry is a great profession but also has challenges. We must stay united to meet these challenges and the key to that is a robust IPMA and APMA. 



ASK AN EXPERT

BENEFITS ADMINISTRATION

So many business owners have questions about employee benefits, insurance (both health and life), and how best to prepare for retirement for themselves and their employees.

Join our experts, Leslie Hurd, Principal at VantagePointe Benefit Solutions and Greg Hardy, CFP®, AEP®, to learn about all things benefits!

August 27, 2024



September 17, 2024

October 15, 2024



noon until 12:30



August 27th

September 17th

October 15th



Securities offered through Registered Representatives of Cambridge Investment Research, Inc., a broker/dealer, member FINRA/SIPC. Advisory services through Cambridge Investment Research Advisors, Inc., a Registered Investment Adviser. Cambridge Investment Research, Vantage Pointe Benefit Solutions and Beyond Financial Planning are not affiliated.

IPMA ANNUAL MEMBERSHIP MEETING NOTICE

This notice will serve as satisfying the IPMA Bylaws requirement (Chapter VI, Section 1) that notice be communicated to members prior to the meeting.

The annual meeting of the IPMA membership will be held on September 21, 2024 from 11:00 am to 12:30 pm at the Renaissance Indianapolis located at North 11925 N. Meridian Street Carmel, IN 46032.

This meeting is during the annual convention of the IPMA that takes place September 20 - 21. You do not have to be registered for the conference to attend the IPMA annual meeting, but

please notify the IPMA office if you plan on attending the annual meeting ONLY.

The IPMA Board will review the past year's activities of the association and will submit the following action items for member consideration:

- Nominating Committee Report
- Proposed FY 2024 Budget
- Proposed Dues Increase

You can register online for the entire conference through the IPMA website at indianapodiatic.org/annual-conventions. 

IPMA BOARD PROPOSED DUES INCREASE

BY KATHLEEN TOEPP-NEUHOFF, DPM
PRESIDENT, INDIANA PODIATRIC MEDICAL ASSOCIATION

After careful consideration and review, the Board of Directors has decided to propose a \$225 per year dues increase for full active members effective for the 2025-2026 membership year. I would like to take this opportunity to provide you with the context and rationale behind this decision.


We are committed to providing exceptional value to our members. The additional funds from the dues increase will allow us to continue to provide an exceptional annual conference, expand and enhance our programs through new online CME opportunities, and maintain critical representation in Indianapolis.

The Board has proposed a level increase that will permit members to attend the annual conference at no cost. Additionally, the Board has approved an annual virtual learning series to provide additional CME hours to members. These will also be provided at no additional cost.

The Board believes that continuing education, and the camaraderie and networking of these opportunities remains the highest priority for the IPMA. We believe that increasing the dues to provide these opportunities at no cost will offer substantial benefits and further enrich your membership experience.

This restructuring will ultimately result in an overall lower cost to members who have attended the annual conference and hope it will encourage those who have been unable to attend in years past.

We deeply value your continued support and commitment to our organization. Your contribution plays a vital role in helping us achieve our goals and serve our community effectively. We believe this adjustment will enable us to enhance our offerings and ensure that we can continue to deliver on our mission.

Thank you for your understanding and ongoing support. We look forward to your continued participation and engagement with our organization. 

NOMINATING COMMITTEE REPORT

BY CATHY COKER, DPM
CHAIR, IPMA NOMINATING COMMITTEE

The Nominating Committee of the Indiana Podiatric Medical Association met via e-mail and telephone. The following members have been contacted via e-mail and telephone and all have agreed to serve if elected:


- Second Vice President Sarah Standish, DPM
- Secretary-Treasurer Zahid Ladha, DPM
- Central Trustee (3 year term) Matt Lining, DPM
- APMA Delegate..... Sandra Raynor, DPM
- APMA Delegate..... Wendy Goldstein, DPM
- APMA Alternate Delegate Patricia Moore, DPM
- APMA Alternate Delegate Zahid Ladha, DPM

Board Members with remaining years on their current term for 2024 are as follows:
South Trustee (1 year term)Matthew Parmenter, DPM
North Trustee (2 year term).....Eric Rindlisbacher, DPM

The IPMA Bylaws were changed in 2017 to create an automatic ascension of the officer positions on the IPMA Board. These officer positions need no further voting:
President Nathan Graves, DPM
President-Elect.....Michael Carroll, DPM
First Vice PresidentGage Caudell, DPM
Immediate Past President..... Kathleen Toepp-Neuhoff, DPM

INDIANA MEDICAID UPDATE

After the announcement of the nearly \$1 billion shortfall in Indiana’s Medicaid budget in December of 2023, state officials announced a raft of policies intended to curtail Medicaid spending, including restricting individuals authorized to provide attendant care services, pausing a planned 2% Medicaid rate indexing/increase for certain providers, and instituting a waitlist for elderly and disabled individuals seeking home and community-based services (HCBS) under Medicaid waivers.

Further complicating Indiana’s Medicaid landscape is a recent Federal Court decision that revoked the Federal government’s approval of Indiana’s Section 1115 Medicaid waiver, which approved the current structure of Indiana’s Healthy Indiana Plan and Hospital Assessment Fee. FSSA has appealed the decision and filed a motion to stay the implementation of the decision pending appeal. With all of these factors taken together, we expect that the next budget session will be heavily focused on balancing the provision of services to Medicaid recipients with the desire from legislative fiscal leaders to right-size the Medicaid budget and ensure its stability into the future. 

UPCOMING EVENTS

- September 1
Deadline to Submit APMA Committee Nominations
- September 10
Falls Prevention Clinician, Research and Community Connections
webinar registration coming soon, 1.0 CECH
- September 20-21
IPMA Annual Convention
Indianapolis
- September 21
IPMA Annual Meeting
Indianapolis
- September 22
APMA/TDI Fellowship Application Deadline
- October 15
IPMA Virtual Learning Series
- November 13
IPMA Virtual Learning Series
- January 22
IPMA Virtual Learning Series
- February 13
IPMA Virtual Learning Series

IPMA Annual Convention

September 20-21, 2024

Renaissance Indianapolis North

CONVENTION INFORMATION



IPMA Annual Convention

September 20-21, 2024

Renaissance Indianapolis North | Carmel



Convention Information

Location & Hotel Accommodations

Renaissance Indianapolis North
11925 N. Meridian Street
Carmel, IN 46032



The Renaissance Indianapolis North is offering a special rate of \$169 for the IPMA Convention. Reservations must be made by August 29, 2024, to receive this rate. To make reservations, call 800-228-9290 or [click here](#) to reserve online.

Questions?

Please contact the IPMA office with any questions. We are happy to help. Email us at inpma@indianapodiatric.org or call 888.330.5589.

Parking

Complimentary self parking is available at the Renaissance Indianapolis North.

Convention Registration

The convention registration fee includes all education sessions, as well as breaks and lunch on Friday and Saturday. You must pre-register for the lunches. To register online, [click here](#) or scan the QR code.



Scan Me

Need assistance? Call 888-330-5589.

Registration Fees

IPMA Member.....	\$295*
APMA Member.....	\$395*
Non-Member	\$595*
IPMA/APMA Life Member.....	Complimentary*
Resident/Student.....	Complimentary
Medical Assistant/Office Staff	\$135

An additional fee of \$35 will be added to all registrations received after September 12, 2024. After September 12, complimentary registrations will increase to \$35.

Continuing Education Credit

This activity has been planned and implemented in accordance with the standards and requirements for approval of providers of continuing education in podiatric medicine through a joint provider agreement between the American Academy of Podiatric Practice Management and the Indiana Podiatric Medical Association. The American Academy of Podiatric Practice Management is approved by the Council on Podiatric Medical Education as a provider of continuing education in podiatric medicine. The American Academy of Podiatric Practice Management has approved this activity for a maximum of 13 continuing education contact hours. The Office Staff/Medical Assistant program on Friday, September 20 will offer 6 continuing education contact hours, pending approval from the Commission on Accreditation of Podiatric Medical Assisting Certification.

IPMA Annual Convention

September 20-21, 2024

Renaissance Indianapolis North | Carmel



Doctor Schedule

THURSDAY, SEPTEMBER 19

7:00 p.m.-9:00 p.m.

IPMA Board of Trustees Meeting

FRIDAY, SEPTEMBER 20

CME Sign-in:

#1 – 9:30 a.m.-10:00 a.m.

#2 – 3:30 p.m.-4:00 p.m.

7:00 a.m.-5:00 p.m.

Convention Registration

7:30 a.m.-8:00 a.m.

Practical Biomechanical Exam: Information That Actually Drives Better Conservative and Surgical Treatment | .5 CECH

Patrick DeHeer, DPM, FACFAS

8:00 a.m.-8:30 a.m.

1st MPJ Arthrodesis: The GOAT Foot Surgical Procedure | .5 CECH

Patrick DeHeer, DPM, FACFAS

8:30 a.m.-9:00 a.m.

Realignment Hindfoot Arthrodesis | .5 CECH

Douglas Blackledge, DPM, FACFAS

9:00 a.m.-9:30 a.m.

TAR | .5 CECH

Douglas Blackledge, DPM, FACFAS

9:30 a.m.-10:00 a.m.

Break with Exhibitors

10:00 a.m.-10:30 a.m.

Transverse Tibial Cortical Transport Osteotomies and Their Potential Role in Limb Salvage | .5 CECH

Townsen Kennington, DPM

10:30 a.m.-11:00 a.m.

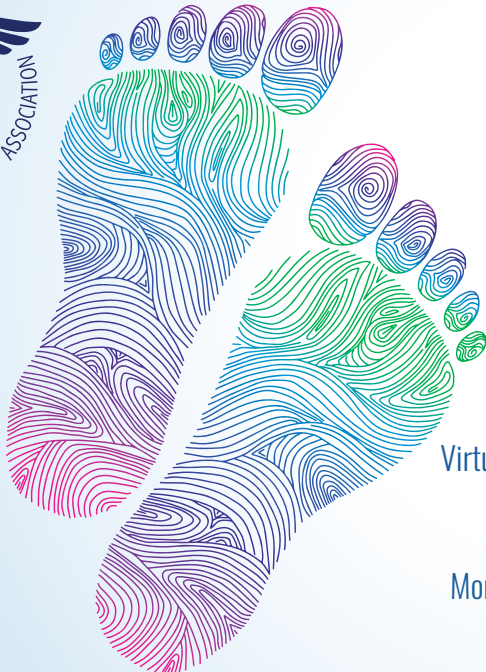
Surgical Wound Care: A Case-Based Approach | .5 CECH

Robert Clemency, DPM, MS, FACFAS

11:00 a.m.-11:30 a.m.

Arthrobrostrom and Non-Distraction Ankle Arthroscopy | .5 CECH

Charles Sisovsky, DPM, FACFAS



IPMA Virtual Learning Series

2024: October 15 | November 13

2025: January 22 | February 13

8 Hours of Education

The Indiana Podiatric Medical Association is pleased to announce its Virtual Learning Series. These live webinars will include case debates and timely topics, providing two continuing education contact hours each.

Webinars will be offered **complimentary** to IPMA members. More information will be available soon. Visit indianapodiatic.org for updates.

IPMA Annual Convention

September 20-21, 2024

Renaissance Indianapolis North | Carmel



Doctor Schedule

FRIDAY, SEPTEMBER 20 *(continued)*

11:30 a.m.-12:00 p.m.

Midsuabstance Achilles Tendinopathy | .5 CECH

Charles Sisovsky, DPM, FACFAS

12:00 p.m.-1:30 p.m.

Lunch and Vendor Showcase

1:30 p.m.-3:30 p.m.

Abstract Presentations | 2 CECH

Gage Caudell, DPM, Moderator

3:30 p.m.-4:00 p.m.

Break with Exhibitors

4:00 p.m.-5:30 p.m.

Abstract Presentations | 1.5 CECH

Gage Caudell, DPM, Moderator

SATURDAY, SEPTEMBER 21

CME Sign-in:

#3 – 7:00 a.m.-11:00 a.m.

#4 – 1:30 p.m.-2:30 p.m.

7:00 a.m.-12:30 p.m.

Convention Registration

7:30 a.m.-8:00 a.m.

What's the Best Procedure for Charcot Foot? | .5 CECH

Naohiro Shibuya, DPM, MS, FACFAS

8:00 a.m.-8:30 a.m.

Is DVT Prophylaxis Necessary in Foot and Ankle Trauma Surgery? | .5 CECH

Naohiro Shibuya, DPM, MS, FACFAS

8:30 a.m.-9:00 a.m.

What's the Best Medial Column Procedure in Flatfoot? | .5 CECH

Naohiro Shibuya, DPM, MS, FACFAS

9:00 a.m.-9:30 a.m.

My Approach to Flatfoot Reconstruction | .5 CECH

Jordan Grossman, DPM, FACFAS

9:30 a.m.-10:00 a.m.

A Rational Approach to Lisfranc Injuries | .5 CECH

Jordan Grossman, DPM, FACFAS

10:00 a.m.-10:30 a.m.

Femoral Head Allografts for Large Bone Voids in Ankle Surgery | .5 CECH

Jordan Grossman, DPM, FACFAS

10:30 a.m.-11:00 a.m.

Running a Busy Practice and How to Balance Work and Outside Endeavors | .5 CECH

Amanda Meszaros, DPM, FACFAS

11:00 a.m.-12:30 p.m.

Annual Meeting and Lunch

12:30 p.m.-1:00 p.m.

First Ray Complications | .5 CECH

Amanda Meszaros, DPM, FACFAS

1:00 p.m.-1:30 p.m.

MIS Bunion Surgery | .5 CECH

Steve Douthett, DPM, FACFAS

1:30 p.m.-2:00 p.m.

Insertional Achilles Tendinopathy | .5 CECH

Steve Douthett, DPM, FACFAS

2:00 p.m.-2:30 p.m.

Hallux Valgus and Utilization of Cutting Guides for Lapidus Bunionectomy | .5 CECH

Gage Caudell, DPM

IPMA Annual Convention

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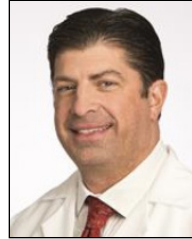
Renaissance Indianapolis North | Carmel



Faculty



Douglas Blacklidge, DPM, FACFAS
American Health Network – Foot and Ankle
Indianapolis, IN



Jordan Grossman, DPM, FACFAS
Akron General Orthopedics
Akron, OH



Gage Caudell, DPM, FACFAS
Fort Wayne Orthopedics
Fort Wayne, IN



Townsend Kennington, DPM
Fort Wayne Medical Education Program,
Foot and Ankle Fellow
Fort Wayne, IN



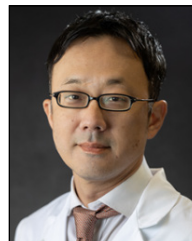
Robert Clemency, III, DPM, MS, FACFAS
Community Healthcare Systems
Munster, IN



Amanda Meszaros, DPM, FACFAS
Sheffield Foot and Ankle
Oberlin, OH



Patrick DeHeer, DPM, FACFAS
Hoosier Foot and Ankle
Indianapolis, IN



Naohiro Shibuya, DPM, MS, FACFAS
University of Texas Rio Grande Valley
Harlingen, TX



Steve Douthett, DPM, FACFAS
Orthopaedics Northeast
Fort Wayne, IN



Charles Sisovsky, DPM, FACFAS
Orthopaedic Associates of Southern
Indiana
Evansville, IN

IPMA Annual Convention

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Renaissance Indianapolis North | Carmel



Medical Assistant & Office Staff Schedule

FRIDAY, SEPTEMBER 20

7:30 a.m.-5:00 p.m.

Convention Registration

8:30 a.m.-9:30 a.m.

Compression Therapy Made Easy: Indications, Uses for Compression Therapy | 1.0 CME

This interactive workshop will review current compression therapy modalities, indications and hands-on applications.

9:30 a.m.-10:00 a.m.

Stepping Up Your Intake Game | .5 CME

Tressea Harvey, PMAC, CMOM-POD

This interactive lecture and Role Play will provide the attendee valuable knowledge, insight and skills to effectively and efficiently complete the Intake Process for any New, Update or Established patient.

10:00 a.m.-10:30 a.m.

Break with Exhibitors

10:30 a.m.-11:30 a.m.

Mastering the Art of Patient Evaluation | 1.0 CME

Tressea Harvey PMAC, CMOM-POD and Jeffery Leibovitz, DPM, FASCFA

In this interactive presentation, participants will learn to discover the true reason for the visit, and in multiple complaint situations, determine the most pressing issue. They will also acquire advanced knowledge of the appropriate questions to ask (based on chief complaint in both initial and follow up visits) and how to effectively redirect patients who are easily distracted.

11:30 a.m.-12:00 p.m.

Hostage Negotiations | .5 CME

Jeffrey Leibovitz, DPM, FACFAS

Make your day go easier by understanding your patient's motivations. This session will help you gain a better understanding of dealing with all patients including the "difficult" patient, and help you find and conquer patient objections.

12:00 p.m.-1:30 p.m.

Lunch and Vendor Showcase

1:30 p.m.-2:00 p.m.

Skin Substitutes: What Are They and How Do We Use Them? | .5 CME

Colin Greely

This lecture and hands-on workshop will give the attendee a better understanding and knowledge of the various skin substitutes including indication, uses and application process.

2:00 p.m.-2:30 p.m.

Padding, Cushioning, Strapping and Other Commonly Used OTC Devices in the Podiatric Office | .5 CME

This interactive lecture will provide the attendee hands on insight into proper indication, applications and uses for various OTC devices commonly used in podiatry.

2:30 p.m.-3:00 p.m.

Closing the Deal | .5 CME

Tressea Harvey PMAC, CMOM-POD

This interactive lecture will provide the attendee with tips, pearls and ideas to enhance patient compliance.

3:00 p.m.-3:30 p.m.

Break with Exhibitors

3:30 p.m.-4:00 p.m.

Hygiene and Environmental Management | .5 CME

Rachel Martinez

This workshop will explore the importance of maintaining a healthy environment and how it contributes to a comprehensive foot care plan. We will explore treatment options and the positive clinical impact of establishing an effective cleansing routine to treat and prevent acute and chronic skin conditions.

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Medical Assistant & Office Staff Schedule

FRIDAY, SEPTEMBER 20 *(continued)*

4:00 p.m.-5:00 p.m.

Podiatric Jeopardy | 1.0 CME

*Tressea Harvey, PMAC, CMOM-POD
and Zahid Ladha, DPM*

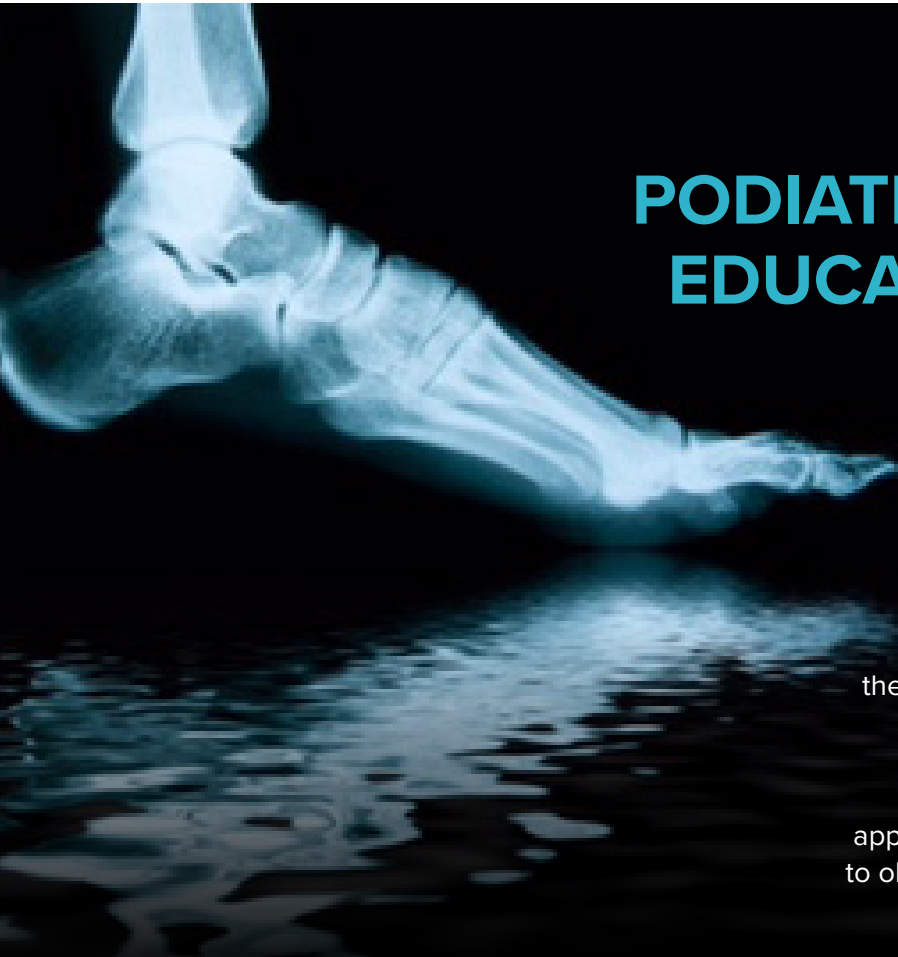
This activity will provide an interactive clinical quiz to promote, stimulate and encourage discussion of knowledge and information regarding podiatric conditions, basic anatomy, insight into the practice of podiatric medicine and surgery applicable to both clinical and administrative assistants.

5:00 p.m.-5:30 p.m.

Medical Assistants Round Table

*Tressea Harvey, PMAC, CMOM-POD
and Zahid Ladha, DPM*

This session will allow the attendees an opportunity to freely talk and discuss individual concerns and questions that they may be experiencing in their offices.



ONLINE LIMITED PODIATRIC RADIOGRAPHY EDUCATIONAL PROGRAM

The Indiana State Department of Health (ISDH) requires all podiatric medical assistants who take x-rays to be licensed as a limited podiatric radiographer.

The IPMA wants to remind the membership of its limited podiatric radiography program that meets the ISDH requirements and is designed to instruct the podiatry assistant in the safe and effective use of x-rays in the podiatric practice.

At the successful conclusion of the program, the applicant will have the proficiency and skill necessary to obtain the limited podiatric radiography license and will receive a Certificate of Completion.

To learn more about this program or to register, [click here](#).

IPMA Annual Convention

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Renaissance Indianapolis North | Carmel



General Information

Attire

The suggested attire for all events is business or business casual.

Lectures

The topics and speakers may have changed since this brochure was produced. Please visit indianapodiatic.org for the most up-to-date schedule and for lecture descriptions and learning objectives.

Intended Audience

This convention will be of interest to podiatric physicians and surgeons. Other health care professionals with special interest in the diagnosis and treatment of lower extremity disorders will also benefit from this convention.

Convention Purpose and Objectives

This convention will provide information on the most up-to-date diagnostic and treatment methods for lower extremity disorders. Objectives include:

1. To provide the podiatric physician with a broad range of programs offered in an intensive three-day convention.
2. To establish an understanding of developing concepts in the diagnosis, evaluation and treatment of lower extremity disorders and foot conditions.

About IPMA

The Indiana Podiatric Medical Association represents podiatrists throughout the state with the goal of furthering the specialty of podiatry at the local and national level. IPMA actively educates, supports and advocates for podiatrists and their patients on a wide variety of administrative, licensing, legislative, and patient-care issues.

IPMA's mission is to ensure the highest quality of lower extremity health care for patients by advancing the art and science of podiatric medicine through advanced continuing education, legislative advocacy, public education and promotion of the profession.

Privacy and Confidentiality Policy

The Indiana Podiatric Medical Association's (IPMA) Policy on Privacy and Confidentiality dictates the Association's handling of a learner's personal information. This policy is enforced in all areas of the Association's business, including online communications, offline communications, direct marketing, and event registration.

IPMA maintains a comprehensive database of information on its learners in accordance with the general needs and expectations of the organization and its learners. This information is intended exclusively for purposes related to official Association business and to facilitate interaction between the Association and its learners. Directory information in the database may include home or work addresses, telephone numbers, fax numbers, e-mail addresses, and activity registrations/online purchases.

Consent to Use Photographic Images

Registration and attendance or participation in the IPMA Fall Convention constitutes an agreement providing permission for the use of the registrant's image or voice in photographs or recordings at the event without compensation. IPMA can use the images for promotions in any and all media. IPMA or its successors are exempt from any liability for the use of photographic images. You may revoke this authorization at any time by notifying IPMA at inpma@indianapodiatic.org.

Support Your Industry!

The IPMA Foot Support PAC is a nonprofit, bipartisan fundraising committee through which podiatrists support state candidates who support podiatric medicine's issues before the Indiana General Assembly.

The Foot Support PAC's role is to support candidates seeking office in the Indiana State Senate or Indiana House of Representatives.

Donate to the Foot Support PAC



APMAPAC
Promoting Professional Excellence and Patient Advocacy

★ ENSURING THE ★

**SUCCESS
OF PODIATRIC MEDICINE**

SINCE 1972

eAdvocacy
Federal & State
Action Center

Visit www.apma.org/donate.

Make a difference for podiatry. Join TEAM APMAPAC today!

PURPOSE: The American Podiatric Medical Association Political Action Committee's purpose is to raise and disburse funds to candidates for federal office who support the legislative priorities and goals of the podiatric medical profession.

IMPORTANT: You may contribute or not contribute without concern of being favored or disadvantaged. Occupation/Employer information is required for aggregate annual contributions of more than \$200.00 by the Federal Election Campaign Act. Federal election law does not permit corporate contributions to be used for donation to candidates for federal office. Political contributions are not deductible for income tax purposes.

DESPITE DROP IN BURNOUT, WOMEN PHYSICIANS STILL FEELING BURDEN

BY GEORGIA GARVEY, CONTRIBUTING NEWS WRITER,
AMERICAN MEDICAL ASSOCIATION

In a disturbing but consistent trend, women physicians continue to be more likely to experience symptoms of burnout, feel less valued at work and have lower job satisfaction than their male counterparts, even while they're less likely to say they intend to leave their current positions, exclusive AMA survey data shows.

FIGHTING PHYSICIAN BURNOUT

Reducing burnout is essential to high-quality patient care and a sustainable health system. The AMA measures and responds to physician burnout, helping drive solutions and interventions. More than 12,400 responses from physicians across 31 states were received from 81 health systems and organizations who participated in the AMA Organizational Biopsy® last year. The AMA National Comparison Report—which is exclusive data to the AMA that is not published anywhere else—reflects 2023 trends in six key performance indicators—job satisfaction, job stress, burnout, intent to leave an organization, feeling valued by an organization and total hours spent per week on work-related activities (known as “time spend”).

The purpose of the aggregated data is to provide a national summary of organizational well-being and to serve as a

comparison for other health care organizations. The results may be limited by the health systems that chose to participate. For 2023, 48.2% of physicians reported experiencing at least one symptom of burnout, down from 53% in 2022. But women physicians were more likely to suffer from symptoms of burnout—at 54.5%—compared to 42% of men.

Women physicians are also less likely to feel valued, at 45.8%, compared to 56.3% of men who felt valued. Meanwhile, 71.7% of women physicians felt satisfied with their jobs compared with 73.9% of their male colleagues. But 33.2% of women physicians said they intended to leave their current roles, compared to 35.9% of men.

All the figures—for both women and men—improved at least slightly according to exclusive AMA survey data in 2022, but the gender gap remained steady.

As the leader in physician well-being, the AMA is reducing physician burnout by removing administrative burdens and providing real-world solutions to help doctors rediscover the Joy in Medicine™.

MEMBERS SAVE ON HEALTH & WELLNESS

AMA members get worldwide access to thousands of top-rated gyms, fitness studios and spas from ClassPass.

THERE ARE COMPLEX ISSUES

Mary Pan, MD, is a family physician and chief wellness officer at Washington Permanente Medical Group in greater Seattle, where they're tackling the multifaceted reasons behind the differences in how often women physicians experience burnout, which research shows is linked to work overload.

Washington Permanente Medical Group is a member of the AMA Health System Program, which provides enterprise solutions to equip leadership, physicians and care teams with resources to help drive the future of medicine.

“We know there are complex issues that contribute to burnout among



50 Ways to Take a Break

Take a Bath



Listen to Music

Take a Nap

Go to a body of water

Watch the clouds



Light a candle

REST your legs up on a wall



Let out a sigh

Fly a Kite

Watch the stars



Learn something NEW



Read a Book



sit in NATURE

Write a Letter

Listen to a guided relaxation



2x Move twice as slowly

Take Deep Belly Breaths

MEDITATE



Call a Friend



Meander around Town

WRITE in a journal

Notice your Body



Buy some Flowers



Find a relaxing scent

WALK Outside

Go for a run



Take a bike ride

Create your own coffee break



View some ART

Shhh! Eat a meal in SILENCE

Turn off all electronics

pet a furry creature



read or watch something FUNNY

Examine an everyday object with Fresh Eyes

Drive somewhere NEW

Go to a park

Go to a Farmer's Market



Forgive Someone

Engage in small acts of KINDNESS

COLOR with Crayons



Make some MUSIC

Climb a Tree



Let go of something



Do some gentle stretches

Paint on a surface other than paper



Write a quick poem



Read poetry

Put on some music and DANCE



Give Thanks

>>CONTINUED FROM PAGE 14

women clinicians. We also know that there are some issues that specifically affect women more that relate to burnout,” Dr. Pan said. “We spend more time with patients and more time in the electronic health record. We have a more difficult time decompressing from work, and we receive more inbox messages than our male counterparts.

“So, the combination of these factors, we think, likely exacerbates the gap between men and women physicians in rates of burnout and work sustainability,” she added.

Here are some ways Washington Permanente Medical Group is working to reduce the gender gap in physician burnout.

TAKE STEPS TO REDUCE “PAJAMA TIME”

Dr. Pan said efforts to support physicians must consider the unique circumstances they face, particularly by those who are historically marginalized.

“As we’re thinking about building out our overall strategy and programs to address health care worker well-being in general, taking into account the unique challenges that certain groups have—including women clinicians—is really important to address this issue in an inclusive way,” Dr. Pan said.

She said their research shows no significant difference between women and men clinicians in their organization when it came to “pajama time” or “work outside of work” and the EHR side of the profession. But their survey data showed 59.3% of female physicians reported an intent to reduce their hours, much higher than the 34.4% of male physicians who said they planned to do so.

Of the top three things that could help keep them at their current hours, “No. 1 for both groups was staffing,” Dr. Pan said. “But No. 2 for female physicians was less work outside of work, and No. 3 was less documentation. “So, although reported rates for work outside of work and documentation were similar for men and women, our data suggests the impact of these issues on women clinicians is more significant.”

THE STANDARD OF CARE IN PHYSICIAN WELL-BEING RECOGNITION

Institutions in this article have been honored by the Joy in Medicine™ Health System Recognition Program.

PROVIDE COACHING OPPORTUNITIES


Washington Permanente Medical Group is currently in its third cohort of a women’s leadership coaching pilot program. Each cohort includes 10 to 12 physicians and other health professionals over a six-month period. They identified participants both through nominations and self-nominations, offering six one-on-one coaching sessions, three group coaching sessions, a 360-degree peer review and access to a coaching platform with additional resources.

In the medical group, a senior women leadership group also holds quarterly dinner gatherings and “a re-imagining of a group called Yin of Medicine, which is specifically to support our women,” Dr. Pan said. These are efforts that “give women a chance to mentor and sponsor each other and learn from the wisdom of other women leaders in the organization.”

“When you have a chance to build each other up and have that opportunity for your own professional development, and to be mentored and mentor or sponsor others who you see potential in, it can make a big difference,” she said.

Recent AMA burnout assessments at Washington Permanente Medical Group showed the targeted efforts are bearing fruit. They saw not just overall improvement in well-being scores, from 58.1% to 62.6%, but also a significant narrowing of the gap between men and women clinicians, Dr. Pan said, from a 4.6% gap in 2022 to a .9% gap in 2023.

“The positive response and self-assessments really suggest that this evidence-based intervention is helping our women clinicians, in particular,” Dr. Pan said. “We’re just now looking at how we can continue to scale these offerings, potentially offering group coaching and targeted supports for emerging women leaders.”

Discover how the Washington Permanente Medical Group fights burnout by seeing each decision through a well-being lens. 

UNLOCKING SUCCESS PART 4

THE POWER OF MISSION, VISION, AND PURPOSE IN GROWING YOUR PRACTICE

BY DR. PETER WISHNIE

Remember, we started by imagining a journey without a clear destination in mind. You wander aimlessly, lacking direction and focus. The same holds true for growing your practice. To achieve long-term success and fulfillment, it is vital to establish a strong foundation built upon a clear mission, vision, and purpose.

By defining your mission, vision, and purpose, you align your entire team toward a common goal. Each member understands their role in advancing the practice's mission, enabling a collaborative and synergistic environment.

DECISION-MAKING FRAMEWORK

Armed with a clear vision and mission, you gain a decision-making framework that helps you prioritize actions and allocate resources effectively. Decisions become aligned with your long-term goals, fostering a proactive approach to growth.

ENGAGED TEAM

A strong mission and vision foster a sense of belonging and purpose among your staff. They become invested in your practice's success and are more likely to go above and beyond to deliver exceptional patient care.

PATIENT LOYALTY

When patients can sense a practice's strong sense of purpose, it builds trust and loyalty. They feel connected to the practice's mission, resulting in a deeper, more meaningful patient-provider relationship.

ATTRACTING TALENT

A compelling mission, vision, and purpose serve as a powerful magnet for attracting top talent. Like-minded individuals who



resonate with your practice's values are more likely to join your team, further propelling growth.

In the quest for growing your practice, don't overlook the power of knowing your mission, vision, and purpose. These foundational elements provide the compass for your journey, guiding your practice towards success and fulfillment. By crystalizing your vision, defining your mission, and embracing your purpose, you create a roadmap that inspires your team, attracts loyal patients, and propels your practice towards unparalleled growth. Embrace the power of these elements and watch as your practice flourishes in ways you never thought possible. 🏆

Dr. Peter Wishnie is the author of "The Podiatry Practice Business Solution". He was the CEO of his podiatry practice for 32 years before becoming a business coach for doctors and CEOs. He is also the Director of Physician Programs and Practice Management Consultant for Top Practices Virtual Practice Management institute. You can find out more about Top Practices Management Programs at www.TopPractices.com. You can reach Dr. Wishnie at Peter@TopPractices.com.

GOOD ATTENDANCE = HAPPIER STAFF, HAPPIER DOCTOR, AND HAPPIER PATIENTS

BY TINA DEL BUONO, PMAC
DIRECTOR TOP PRACTICES VIRTUAL PRACTICE MANAGEMENT
INSTITUTE

When staff members are absent, no matter how long or short of a time, it creates stress in the office. Chronic absence or tardiness is a problem that needs to be addressed as it will not improve on its own. Here are some key points you can discuss with your staff members either at an office meeting or as an office in-service teaching regarding the importance of adhering to office attendance policies and the effect they have on each person in the practice.

Punctuality and reliability: Consistently adhering to office attendance policies demonstrates punctuality and reliability. It shows that employees value their roles, take their responsibilities seriously, and respect their colleagues' time.

Team collaboration: Regular attendance ensures smooth collaboration and effective teamwork. When everyone is present as expected, it becomes easier to plan and execute projects, meet deadlines, and maintain a cohesive work environment.

Patient service and satisfaction: When attendance is poor or hit and miss from some staff members it directly impacts patient service and satisfaction. Our patients rely on consistent service, and when staff are absent without proper notice or on a regular basis, it can lead to disruptions, delays, and lower customer satisfaction levels.

Workload distribution: When staff are dependable and consistently attend work, it allows for better distribution of workloads. Frequent absences can burden other team members who have to pick up the slack, leading to increased stress, decreased productivity, and potential burnout.

Professionalism and reputation: Consistent attendance demonstrates professionalism and commitment to the job. It helps build a positive reputation with both your employer and your coworkers. When you consistently show up on time and as scheduled you are more likely to be seen as reliable and dedicated not only by your employers but with everyone you work with.

Career growth opportunities: Adhering to attendance policies can positively impact career growth opportunities in the practice. Employers often consider attendance records when making decisions about promotions, salary increases, and additional responsibilities. Consistently demonstrating a commitment to attendance can enhance an employee's professional reputation and increase their chances for advancement.

Practice culture and morale: A strong attendance culture contributes to a positive work environment and boosts overall employee morale. When everyone adheres to attendance policies, it fosters a sense of fairness and equality among team members, reducing the potential for resentment and conflicts.

Effective planning and resource allocation: Attendance policies enable employers to plan and allocate resources effectively. Knowing who will be present on any given day allows for better scheduling of meetings, patient interactions, and getting all necessary tasks completed. It helps maintain productivity levels and prevents unnecessary disruptions which no one likes.

Everyone works better when everyone shows up and is ready to work! 🩺

Tina Del Buono is a Performance Coach, Consultant and Mentor for physician and her fellow office managers/administrators and their staff. She has been a practice manager for over 25 years. Tina is the author of a National Indie Award Winning Book, "Truth from the Trenches" The Complete Guide to Creating A High-Performing, Inspired Medical Team. She works side-by-side with Physicians and their Management Staff to take their practices to the next level of success and beyond.



IS IT A PERMITTED OR REQUIRED DISCLOSURE?

BY TAHLIA BRODY, VP CLIENT SERVICES
TLD SYSTEMS

HIPAA has specific guidelines on who you can share patient information with.

PERMITTED DISCLOSURE WITH CONSENT

Medical providers are permitted to share PHI with anyone the patient authorizes. You should have documentation in the patient's chart on who the patient authorizes you to share their information with. Patients have the right to stipulate what extent of information you share with the individual(s), the time frame you are permitted to share their information, and they can revoke this authorization at any time. Keep that documentation up to date so that everyone in your office can refer back to this when there is a request for patient information. If they are not on the list, you may not share information with them unless (1) they have a signed letter/form from the patient or (2) if they have the power of attorney.

You are permitted to disclose patient information with clinical registries. Patients have a right to ask you not to share their information with registries. States may require disclosure of patient information for prescription drug registries. See below on required disclosures for more information.

PERMITTED DISCLOSURE WITHOUT CONSENT

Medical providers are permitted to share patient information without the patient's consent in a few cases.

You are allowed to share patient information with other providers that are involved with the treatment of the patient. You are not required to share information. Before you share patient information, verify that who you are sharing the information with is part of their care team. Patients have the right to tell you that you may not share information with other members of their care team. Create an office policy as to whether you automatically respond to requests from members of the care team or if you will reach out to patients for permission before sharing information. You should also verify that your state laws allow you to share information in these cases without patient consent.

You are allowed to share patient information with health plans. Part of the form you should have patients sign before beginning care is granting you permission to share their information with their health plan. If the patient's insurance company audits you for claims, you are permitted to share claims and documentation. However, if a patient pays for services without utilizing their

insurance company (even if all fees go towards co-payments, co-insurance or deductibles) and requests that you not share the claim to the insurance company, you are not permitted to share the records for those visits. This is a rare occurrence.


COST OF IMPROPER PATIENT DISCLOSURE

If you disclose patient information without consent, the patient's right to privacy has been violated. St. Joseph's Medical Center paid \$80,000 to OCR after photos and information about the facility's patients were shared without the patients consent. \$853,000 was awarded to a patient when her PHI was shared with an ex-boyfriend (Byrne v. Avery Center for Obstetrics & Gynecology, P.C.).

REQUIRED DISCLOSURES

You are required to share patient information with the patient. This is stipulated under the Right of Access Rule (<https://tldsystems.com/understanding-hipaa-right-access-rule>). You are required to share patient information with anyone the patient directs you to share information with. Get all patient directed disclosures in writing for your records to prevent the patient from later claiming that they did not give you authorization.

You are required to share patient information when you receive a subpoena except in the case of prosecution related to reproductive healthcare. If your records include details on reproductive health, you should get an attestation that the information will not be used for investigating or prosecuting an individual for receiving lawful reproductive health care. It is always advisable to consult with your healthcare attorney to ensure that you are following federal and state regulations related to the privacy of patient records.

States may require that you share information with the state prescription drug registry. If your state has a narcotic prescription drug registry, then it is likely that your state requires you to check the registry to make sure that the patient has not received the same prescription from another doctor. This is intended to fight the opioid epidemic. When a patient receives a prescription for narcotics, the prescription needs to be reported to the state prescription registry. Typically, the reporting is done by the pharmacy, but your state may also require you to report it. Check with a healthcare attorney in your state to find your regulations. Or you can go to your state's prescription drug registry website. 

Questions: Call Us (631) 403-6687 or Email atinfo@tldsystems.com

APMA MEETS WITH CMS DIRECTLY REGARDING NON-PRESSURE ULCER EPISODE-BASED COST MEASURE

APMA recently meet with CMS to discuss ongoing concerns related to the development of the Non-Pressure Ulcer Episode-Based Cost Measure. APMA's concerns follow previous formal comments and a meeting with Acumen, LLC, which CMS contracted to develop methodology for analyzing costs related to non-pressure ulcers. While APMA has numerous concerns related to this measure's development following the field testing, we highlighted the following concerns as most pressing: lack of clarity in the feedback reports as to how a practice or clinician is determined to reasonably influence the frequency, intensity, or occurrence of the clinically related services provided to a non-pressure ulcer patient; lack of meaningful quality measures to link with the proposed non-pressure ulcer episode-based cost measure, particularly as existing measures are topped out and

subsequently removed and not applicable to all patients with non-pressure ulcers; and as the reports are currently structured and designed, the average clinician will not be able to understand or meaningfully act on the cost reports they receive if attributed under this measure, whether correctly or incorrectly.

APMA has worked directly with Acumen, with two podiatric physician representatives participating on the Clinician Expert Workgroup: APMA President Lawrence Santi, DPM, and APMA Senior Medical Director, and Director of Clinical Affairs Dyane Tower, DPM, MPH, MS, CAE. 🏥

Read this and all past comment letters in full at www.apma.org/commentletters. If you have questions or concerns, contact the APMA Health Policy and Practice department at healthpolicy.hpp@apma.org.

APMA/TDI PUBLIC HEALTH FELLOWSHIP CALL FOR APPLICANTS

APMA is pleased to announce the opening of the APMA/TDI Public Health Fellowship application process for the 2025–26 academic year! The APMA/TDI Public Health Fellowship was established to enable podiatric physicians with an interest in public health to earn a master of public health (MPH) degree from the Geisel School of Medicine at Dartmouth (formerly Dartmouth Medical School).

The fellowship curriculum is designed to provide the fellow with the fundamental skills, knowledge base, and philosophical foundation in health policy and clinical practice, with specific attention paid to public health, clinical/health services research, and health-care leadership.

Eligible applicants for the APMA/TDI Public Health Fellowship must be APMA members, have graduated from a college of podiatric medicine accredited by the Council on Podiatric Medical Education, have completed their podiatric residency training by June 30, 2025, and have a strong interest in public health.

The deadline for applications is September 22. Applications must be submitted by email to Young Physicians/Clinical Affairs Program Coordinator Julia Jacobson at jjacobson@apma.org. 🏥

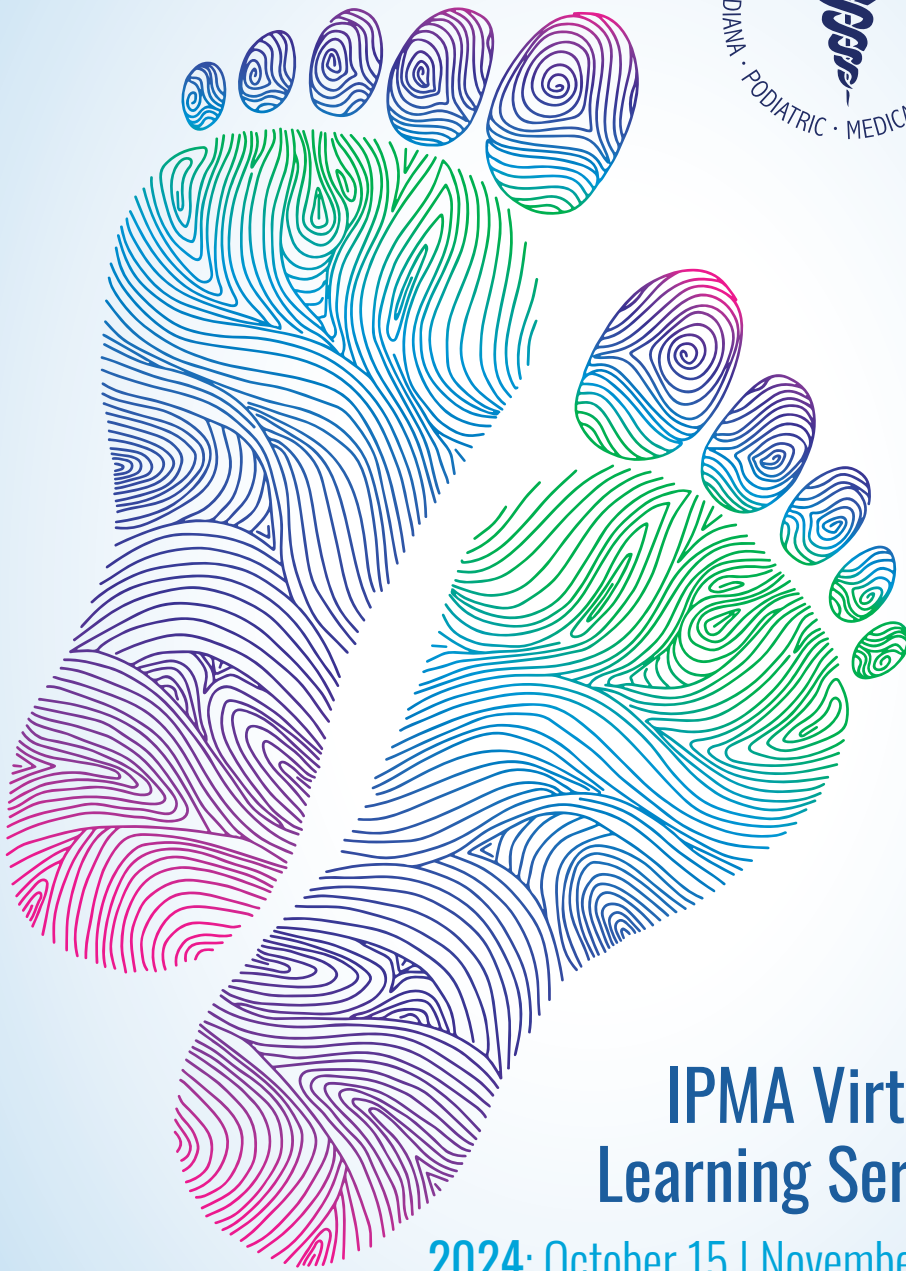
For more information and to apply, visit www.apma.org/tdi.

APMA CODING WEBINAR SERIES

APMA is happy to announce a new Coding Webinar Series beginning in September. This new webinar series will cover topics that significantly impact APMA members. Below is the list of upcoming webinars:

- September 9, 8 p.m. EDT—Coding Updates for the New Year: ICD-10
- October 10, 8 p.m. EDT—The Top Five Coding Errors
- December 12, 8 p.m. EST—Coding Updates for the New Year: CPT®
- February 20, 2025, 8 p.m. EST—Routine Foot Care
- April 17, 2025, 8 p.m. EDT—Coding Social Determinants of Health
- June 26, 2025, 8 p.m. EDT—Evaluation and Management (E/M)

Stay tuned for more details, registration, and other coding information in APMA Weekly Focus and on www.apma.org/coding. 🏥



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