



"It is the obligation, the responsibility we physicians have, to lead and direct the transformational change taking place in American medicine.

It is left to us to fight for what's best for the health of our patients.

It is what I hope to achieve this year . The commitment of every physician in this state, to take a leading role in his or her community to influence the shape of this new normal, in fashioning a healthcare system that serves us all."

*Doug Myers, MD
WSMA 2011-2012 President*



MISSION STATEMENT

The Spokane County MEDICAL SOCIETY exists to promote and provide leadership in the art and science of medicine. Furthermore, the Society strives to improve and preserve the health of the citizens in our community.

This is accomplished by:

- establishing and maintaining high ethical, educational and professional standards
- providing services and benefits to aid members in their professional pursuits
- enhancing goodwill, cooperation and unity among physicians
- firmly advocating the public's best interest in matters of health and medicine
- promoting and defending the physician's freedom to practice medicine in the patient's best interest and advantage
- providing a forum for the interchange of thought, opinion and experience so as to enhance the fellowship and solidarity of the physician community
- initiating and joint-sponsoring programs and seminars for Category 1 CME credit with a diverse number of organizations in the Spokane community and throughout the Inland Northwest



Spokane County MEDICAL SOCIETY

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THE MANY FACES OF LEADERSHIP



The Spokane County MEDICAL SOCIETY physician and physician assistant leaders were committed to your 2011 PRIORITIES.



Leadership is difficult even in the best of times, and it is even more challenging during times of significant changes.

The SCMS Leadership has advocated on your behalf at many venues, to many who would listen, for the benefit of the profession of medicine.

Your continued support will result in a healthier population (your patients) and the ability for physicians and physician assistants to practice the art and the science of medicine in our community.

“Early on I learned that change is a fact of life. And when you face it squarely, honestly and eagerly, you soon understand it is an essential quality of growth and improvement. Change can not only be good, it has the potential to make things better. It is a crazy time in healthcare and it is a time that calls for courageous leadership—physician leadership to guide us safely and wisely through this turbulence.”

*Dean Martz, MD
WSMA Past President*

ADDRESSING YOUR 2011 PRIORITIES

The Priorities for 2011 focused on a number of issues:

- Increase access to Primary Care
- Expand to a four-year Medical School and increase GME capacity in Spokane
- Create bridges on common issues to improve Hospital Relationships
- Strengthen Legislative Relationships for Advocacy
- Enhance Professionalism through leadership in Medicine

Your physician and physician assistant leadership was active in addressing all the priorities.

LEADERSHIP

The SCMS Physician Leadership spent extra time with additional task force and priority related meetings such as the GSI/WSU/UW Medical School Steering Committee and the Spokane Prescription Opioid Task Force.

Other physician discussions included the Oncologists who discussed PET reimbursement and pre-authorization with DSHS/Medicaid; the Board of Trustees talking about whether to consider membership for Advanced Registered Nurse Practitioners; and, the four hospital Emergency Department (ED) Medical Directors creating a dialogue with Medicaid about appropriate care for Medicaid patients in the ED.

SCMS worked hard to develop and provide new social events for physicians throughout the year to encourage collegiality.

PROGRAMS

The Informatics Committee was engaged in a number of IT topics involving meaningful use, HIE's, and the BCIN project, along with expanded access to Medico's authoritative information.

The CME Committee had discussions leading to fewer but expanded program activity for 2012.

The Grievance Committee considered whether a process to accept third party “complaints” related to high volume or high dose physician prescribers of opioids was appropriate for SCMS action.

Staff continue to improve the quality of the newsletter through engaging physicians and physician assistants for contributions based on the annual editorial calendar.

The SCMS provided a collaborative credentialing process with the local hospitals that makes it much more efficient for new physicians entering the community.

The newly hired Project Access (PA) Director improved operations and incorporated a rigorous program for finding medical homes for patients to better maintain health. This assists the specialists who volunteer their services because patients are appropriately referred for care.

Significant recognition for the PA volunteer network of physicians and physician assistants, hospitals and allied healthcare providers was carried out in October and November to support this worthwhile program for low-income uninsured adults.

ADVOCACY

The SCMS advocated, with the WSMA, at the local, state, and federal levels, to maintain reimbursement for a number of programs that were slated for significant budget cuts such as the Medicaid Interpreter program.

Countless hours were spent by physicians to advocate for and support the development of the four-year medical school in Spokane. Physicians who attend medical school and residency in the same community have a 70% chance of staying in that area to practice medicine. This will significantly improve the recruitment and retention of primary care physicians in our region.