



MOS Annual Report 2015-2016



Membership Report

2016

Regular Member	59
Military	1
Life	1
Retired	2
Student/Resident/Intern	<u>41</u>
Total	104

2015

Regular Member	24
Military	0
Life	1
Retired	7
Student/Resident/Intern	<u>55</u>
Total	87

Membership Campaign

- Letters and brochures mailed in March 2016 to 950 DO's in the state inviting them to join MOS
- Total of 23 new members have joined from campaign (16 regular members, 1 military, 1 retired, 5 student/resident/intern)
- Increased our total number of new members to 56

Percentages

- 19.5% increase in total members since 2015
- 28.4% increase in membership due to membership campaign
- 145.8% increase in regular members since 2015
- 55% retention rate for 2016

Massachusetts Osteopathic Society Legislative Efforts and Policy 2015-2016

- **H1025** creates a special commission to investigate and study coverage gaps experienced by individuals transitioning between publicly subsidized health coverage programs. The commission includes representatives from across health care delivery, but fails to include MOS.

NOTE: The AOA and MOS sent a letter requesting inclusion of a representative for MOS on this commission and provide a technical correction to the bill on 10/9/2015.

- **H1170** creates a parole board consisting of nine members from across legal services and health care delivery. The board would be required to include an M.D. with a board certification in psychiatry, but fails to identify osteopathic physicians (D.O.s), who are recognized equally under the Medical Practice Act and issued the same license to practice medicine by Massachusetts.

NOTE: The AOA and MOS sent a letter requesting that the bill be amended to require an MD or DO board certified in psychiatry as a member of the parole board on 10/9/2015.

- **H 1920** creates a mobile integrated health advisory board to assist in developing and implementing the state mobile integrated health plan. The advisory council includes representatives from across health care delivery, but fails to include MOS.

NOTE: The AOA and MOS sent a letter requesting inclusion of a representative for MOS on this commission on 10/16/2015.

- **H 1889** would greatly expand the scope of practice for nurse practitioners (NPs) by allowing them to independently perform advanced assessment and diagnoses, issue written prescriptions and select, order and administer tests and therapeutics. It would also place responsibility with NPs to recognize the limits of their knowledge and experience, and to provide for consultation, planning and coordination of care and referrals and transfers of patients to other providers as appropriate. **NOTE: The AOA and MOS sent a letter in opposition on 11/16/2015.**

- **H 1996** would expand the scope of practice for nurse practitioners and nurse anesthetists by allowing them to dispense, administer or conduct research on controlled substances without physician supervision.

NOTE: The AOA and MOS sent a letter of opposition on 11/16/2015.

- **H 1998** would create a committee on midwifery that consists of eight members that will be appointed by the governor, to include an obstetrician certified by the American Board of Obstetrics and Gynecology (ABOG). The bill fails to recognize obstetricians certified by the

American Osteopathic Board of Obstetrics and Gynecology (AOBOG).

NOTE: The AOA, MOS and ACOOG sent a letter requesting inclusion for AOBOG-certified physicians on 11/16/2015.

- **243CMR2.00** regulates licensure and the practice of medicine in the Commonwealth of Massachusetts. While the equivalency of osteopathic and allopathic physicians is generally respected in most areas under 243CMR 2.00, we found several sections where the rules fail to recognize postgraduate medical training accredited by the AOA.
NOTE: The AOA and MOS sent a letter requesting the section should be amended to recognize equivalent AOA accredited postgraduate training programs on 11/18/2015.
- **H 1935** would create the ePrescribing Implementation and Trust Fund Advisory Board to make recommendations to the commissioner of public health concerning the implementation of electronic prescribing for controlled substances across the Commonwealth, but fails to include MOS among the health care organizations represented on the Board.
NOTE: The AOA and MOS sent a letter requesting MOS inclusion on 12/02/2015.
- **H 824** would require the Center for Health Information and Analysis to consult with various state health care and insurance organizations prior to adopting regulations regarding hospital cost reporting, but fails to include MOS.
NOTE: The AOA and MOS sent a letter requesting MOS inclusion on 12/07/2015.
- **H 1023** would delay implementation of electronic health records from 2017 to 2022.
NOTE: The AOA and MOS sent a letter requesting MOS inclusion on 12/07/2015.
- **104 CMR 27.03** relates to licensing and operational standards for mental health facilities. It specifies that a mental health facility director must be certified by the American Board of Psychiatry and Neurology, but fails to recognize the American Osteopathic Board of Neurology and Psychiatry.
NOTE: The AOA, MOS and the American College of Osteopathic Neurologists and Psychiatrists (ACONP) sent a letter requesting osteopathic recognition on 03/01/2016.
- On March 3, 2016, the MOS signed a letter in support for nomination of Scott Howell, DO, MBA, MPH&TM, MA to the **Medicare Payment Advisory Commission (MedPAC)**
- **On 5/31/16, the AOA and MOS sent a letter in support of provisions within 130 CMR 417.423** that clarify requirements and qualifications for provider participation in MassHealth. The letter also requested an amendment to address a technical error in the current language and include recognition of AOA postgraduate training.

- **S1207 (companion bill to H1996)** expands the scope of practice for nurse practitioners (NPs) and nurse anesthetists (NAs) by allowing them to dispense, administer and conduct research on controlled substances without physician supervision.
NOTE: The AOA and MOS sent a letter in opposition on 6/22/2016.
- The MOS and other osteopathic organizations signed a letter that the AOA sent in support of the passage of **MACRA (Medicare Access and CHIP Reauthorization Act)** on **June 27, 2016.**
- Signed on with the AOA and other osteopathic organizations in partnership and in support of the Health and Human Services and White House efforts to combat opioid abuse, including a letter that supported the bipartisan work that led to the passage of **Comprehensive Addiction and Recovery Act (CARA), which was sent to members of Congress on 7/14/16.**
- Signed on with the AOA and other osteopathic organizations in opposition to the VA (Department of Veterans Affairs) proposed rule **RIN 2900-AP44**, allowing advanced practice nurses (APRNs) full practice authority in VA facilities, regardless of state scope limitations. The AOA sent the letter to the VA on July 25th.

AOA House of Delegates 2016

- **Provided representation at the AOA House of Delegates July 22-24, 2016**
- **Dr. Chrisostomidis served on the Credentials Committee**
- **Submitted 2 resolutions to the Committee on Educational Affairs**
 - Opposition to Osteopathic Continuous Certification
 - Opposition to Time-Limited Specialty Board Certification
- Outcome: The House of Delegates voted to disapprove both resolutions, which sparked a discussion as many others have voiced their discontent with the current OCC system. Resolution 210, which also addresses OCC, was passed with amendments and the following explanation: "THE AOA HAS ALREADY SCHEDULED A BOARD CERTIFICATION SUMMIT JULY 30-31, 2016, TO ADDRESS THE OCC PROCESS. ANY CHANGE IN AOA SPECIALTY BOARD CERTIFICATION MUST MAINTAIN THE QUALITY, INTEGRITY AND ACCEPTABILITY OF AOA CERTIFICATION FOR CREDENTIALING AND REIMBURSEMENT PURPOSES. TO GAIN INPUT FROM SPECIALTY COLLEGES, THERE WILL BE A PERIOD OF PUBLIC COMMENT FOR POLICIES PROPOSED THROUGH THIS PROCESS BY THE BUREAU OF OSTEOPATHIC SPECIALISTS."

MOS Student Update

Throughout my two years as the student representative of the Massachusetts Osteopathic Society, I have had the opportunity to help further develop and establish the core Osteopathic Principles. From recruiting fellow Osteopathic students to organizing and promoting the society on social media, the experiences that I have taken away in these two years have given me a unique insight into what it means to be an Osteopathic Physician. Attending meetings and having a firsthand view of how fellow physicians interact and promote Osteopathic Medicine has been an extraordinary experience. Moving on with my career, I now know how to promote our profession and not only incorporate Osteopathic Principles in my clinical practice but also in the community. I am grateful for the time that I had as the student representative of the MOS and will surely continue to be involved with the growth of Osteopathic Medicine as my career advances.

-Tim Klouda, DO