

Cleveland Academy of Osteopathic Medicine Annual Conference

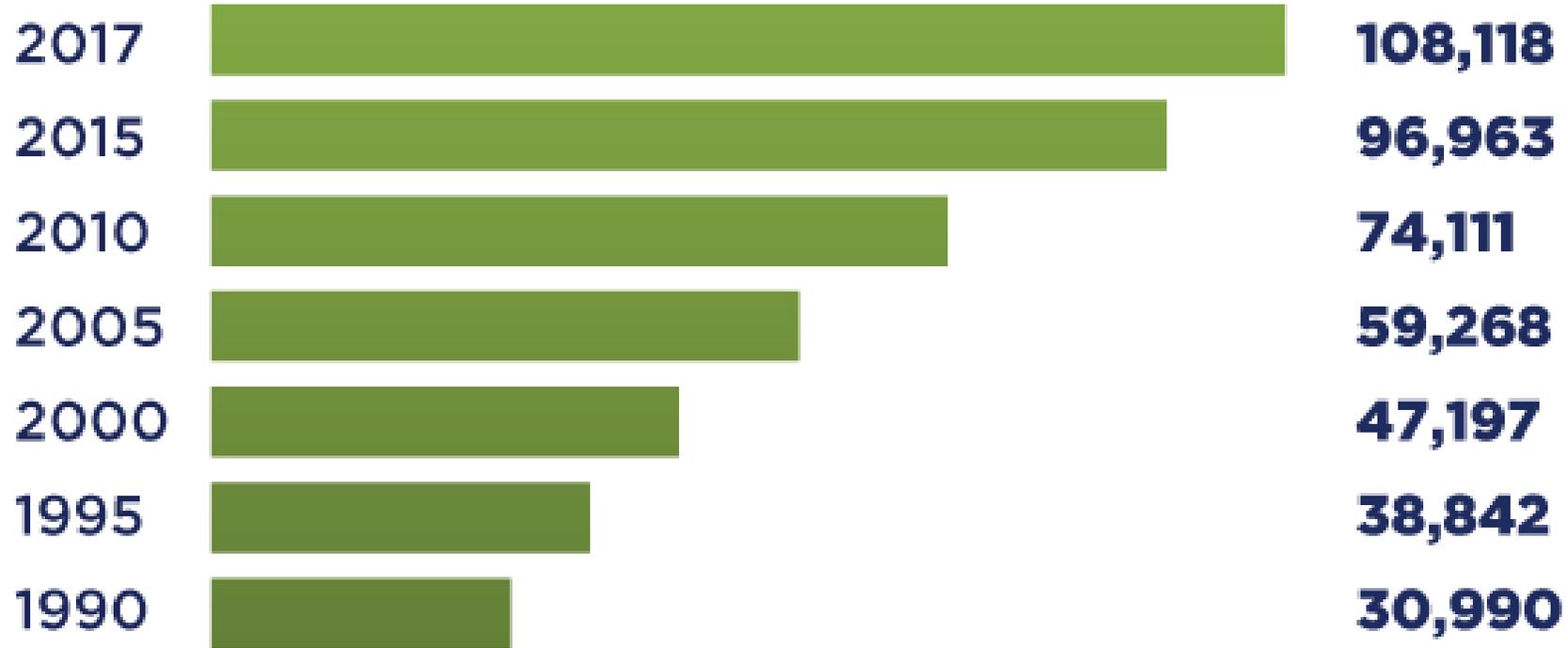
January 19, 2019



**OHIO
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A Growing Profession

TOTAL DOS 1990-2017

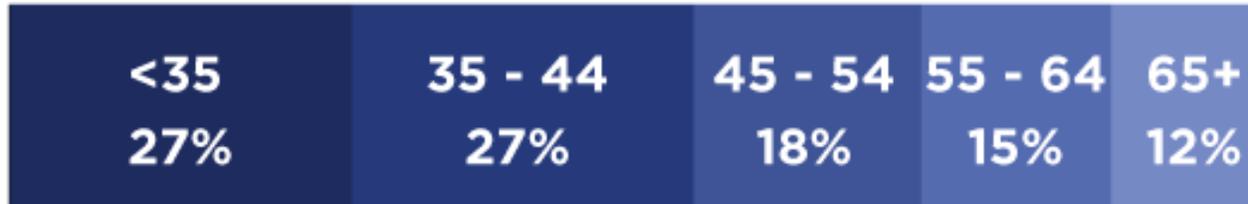


2018 DO figures

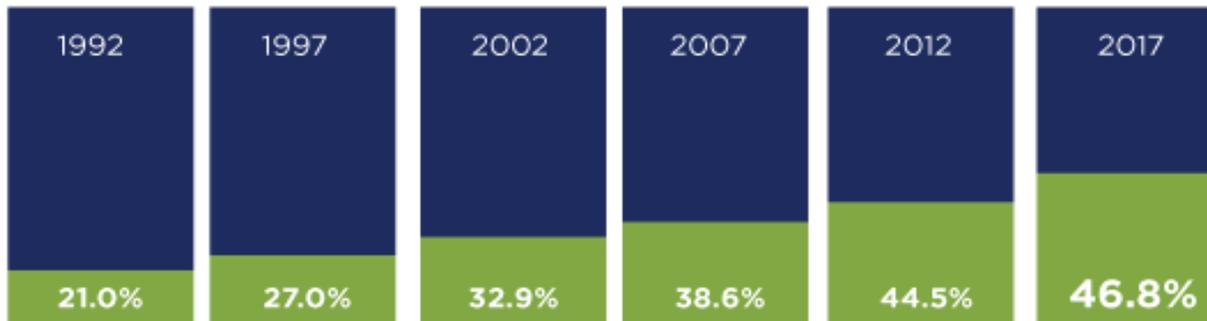
- ▶ In 2018, there were 6,504 graduates—the most in history
- ▶ 114,525 DOs in the US
- ▶ 30,918 osteopathic medical students
- ▶ 21,736 DOs enrolled in AOA & ACGME postdoctoral programs in '17-'18 academic year
- ▶ 60% of 2018 graduating class is currently pursuing the five most in-demand specialties: Internal, family, emergency, pediatrics & anesthesiology

Demographics

YOUNG AND GROWING DO Population - Age Distribution



WOMEN DOs ON THE RISE DOs Under 45 - Gender Distribution



Female DOs

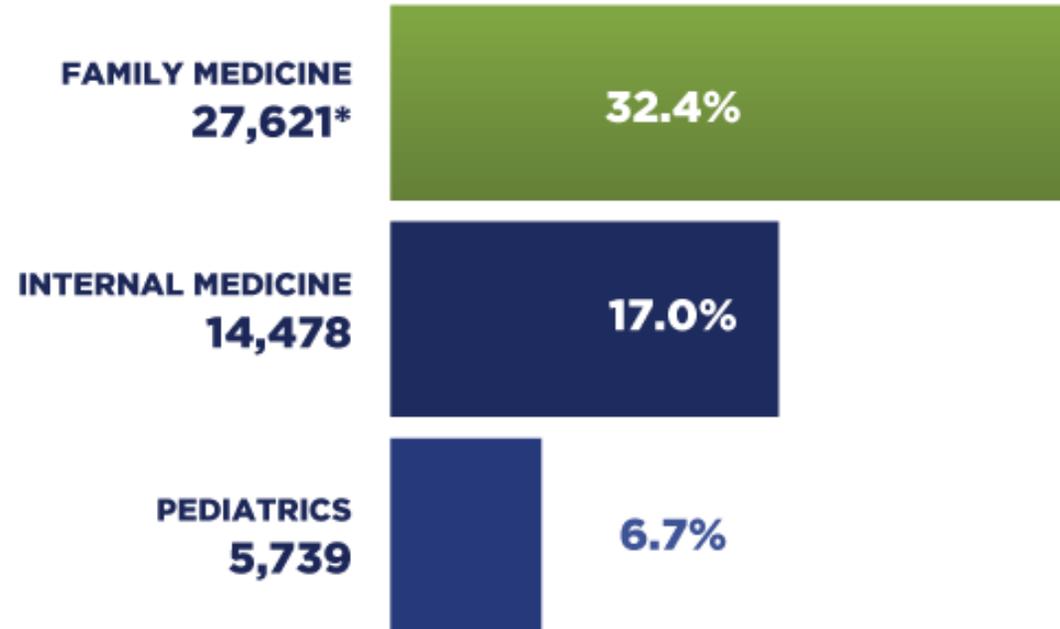


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Primary Care

PROVIDING FRONTLINE CARE

DOs Practicing in Primary Care Specialties



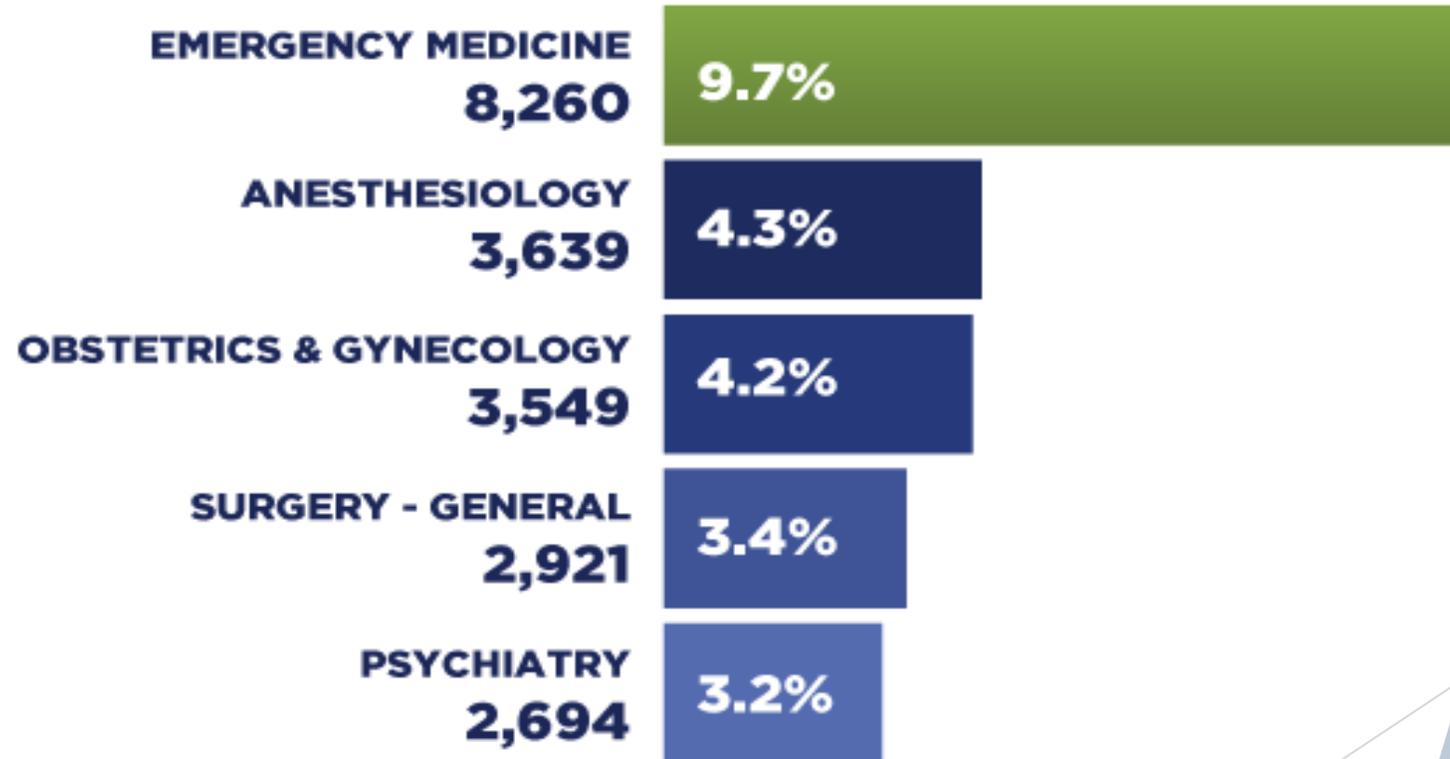
37,348 DOs practice in non-primary care specialties.

*Includes DOs who practice osteopathic manipulative medicine.



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Specialty Care



2018 AOA House of Delegates

- ▶ William S. Mayo, D.O. installed as the 122nd President of the AOA
- ▶ AOA Class Action Lawsuit settled
 - ▶ Suit brought by four members of the profession
 - ▶ No longer require board-certified physicians to maintain membership on the association
 - ▶ \$90 dues reduction to begin 6.1.19 for three years
 - ▶ Recognize online CME equivalent to live CME
 - ▶ Two free CME courses for three years
- ▶ MDs receive full membership
 - ▶ AOA Constitution and Bylaws amended to provide full membership rites to MDs
 - ▶ Ability to vote, participate in bureaus/committees/councils, hold leadership positions
 - ▶ 29 MD graduates on osteopathic-focused residencies accredited by the ACGME

Single Accreditation System

- ▶ AOA and ACGME three years into five-year transition to a single accreditation system for graduate medical education
- ▶ Board of Trustees created a path for MDs who complete osteopathic-recognized ACGME residencies to qualify for board certification

ACGME Transition

Accredited refers to any program fully transitioned to ACGME and includes:

- Dual programs that dropped their AOA accreditation
- Programs that merged with another through an increase request
- Programs with Continued and Initial Accreditation status and have not dropped their AOA status

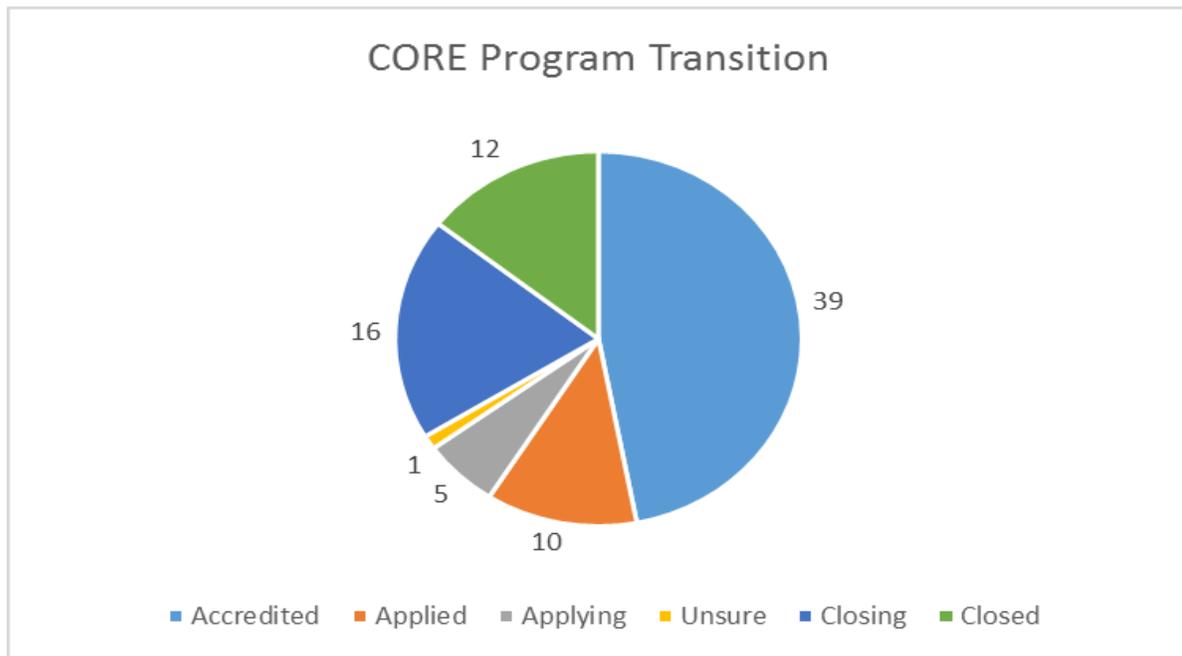
Applied refers to any program that is at Continued Pre-accreditation (currently no CORE programs are at Pre-Accreditation)

Applying refers to any program that the program leadership has said an application would be submitted or it is being worked on

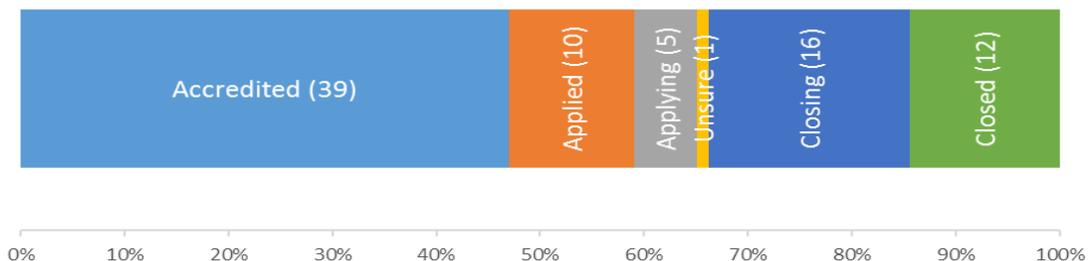
Unsure refers to any program that a decision to apply has not been made

Closing refers to any program that the decision was made to not apply, but still is actively training residents/fellows

Closed refers to those programs that did not apply and has terminated their AOA accreditation



CORE PROGRAM TRANSITION



Data as of 9/28/18

AOA Board Certification

The AOA's 2019-2021 CME Guide has just been released & the AOA is currently revising the AOA Board certification process in coordination.

Several items being considered:

- Eligibility: Qualified DOs and MDs eligible for osteopathic/OMT exam (eligibility in progress). All DOs and MDs eligible for core exam
- Test Convenience: Written exams up to 4X/year; OMT exam offered 2X/year; Develop remote oral exams
- Regarding continuing certification, there was special emphasis on their desire to create ongoing exams with shorter cycles.
- Pricing is yet to be determined. Although if an oral or practical exam are also included there would be additional costs
- Currently, there are three format options being proposed for initial certification:
 1. Core exam + osteopathic written exam
 2. Core exam + osteopathic written exam + OMT
 3. Core exam only (no osteopathic content)
- More info will be shared as it becomes available

DOs in Ohio

- ▶ 4,700+ licensed osteopathic physicians (DOs)
- ▶ 16 percent of the total physicians practicing in Ohio
- ▶ 28 percent of the state's family physicians

New Leadership

Executive Director Harney



OU-HCOM



Athens campus: Approximately 140 students/year



Dublin campus: Approximately 60 students/year



Cleveland campus: Approximately 50 students/year

Ohio Physician Wellness Coalition

Goal: Online modules for various topics to improve wellness, including:

- ▶ Boundaries
- ▶ Gratitude
- ▶ Isolation/Socialization
- ▶ Mental Health for Attending Physicians
- ▶ Mental Health for Medical Students and Residents
- ▶ Time Management
- ▶ Vulnerability



- ▶ In 2016, the Ohio legislature passed SB 523 which legalized medical marijuana for 21 debilitating diseases or conditions
- ▶ State-licensed growing facilities, dispensaries, patient registration, & physician registration
- ▶ Physicians are required to receive 2 hours of medical marijuana education to attain certification to “recommend”
- ▶ Initially effective September 8
- ▶ First day of sales was January 16 from 4 dispensaries (totaling \$75k)
- ▶ 14 of the state-licensed 29 cultivators have been approved to grow the plant
- ▶ More than 3,575 patients have registered in the program since the registry opened in early December



The Patient and Caregiver Registry is the online portal where physicians with a certificate to recommend medical marijuana will register patients and caregivers, and issue recommendations. Patients and caregivers will also complete their registrations, and update their registration details, using the Registry.

www.medicalmarijuana.ohio.gov/patients-caregivers

For Registry questions, please contact the program's Toll-Free Helpline at 1-833-464-6627 or by email at MMCPRegistry@pharmacy.ohio.gov.

New DO on the Medical Board

Just a few months ago, Gov. Kasich appointed Sherry L. Johnson, DO, of Cincinnati, to the State Medical Board. Her term runs through April 25, 2023.

- ▶ 2001 graduate of Ohio University Heritage College of Osteopathic Medicine
- ▶ Dr. Johnson practices obstetrics and gynecology in Batavia and also works at HealthSource of Ohio, where she works with family medicine residents through the Wright Center for Graduate Medical Education.



OOA District Academies

- ▶ Current Districts were established in the 1940's
- ▶ Started with 14; now 10
- ▶ Centered around osteopathic hospital and DO referral patterns
- ▶ Administrative duties were performed by hospital medical staff secretaries or other hospital personnel



2018 OOA District Survey Results

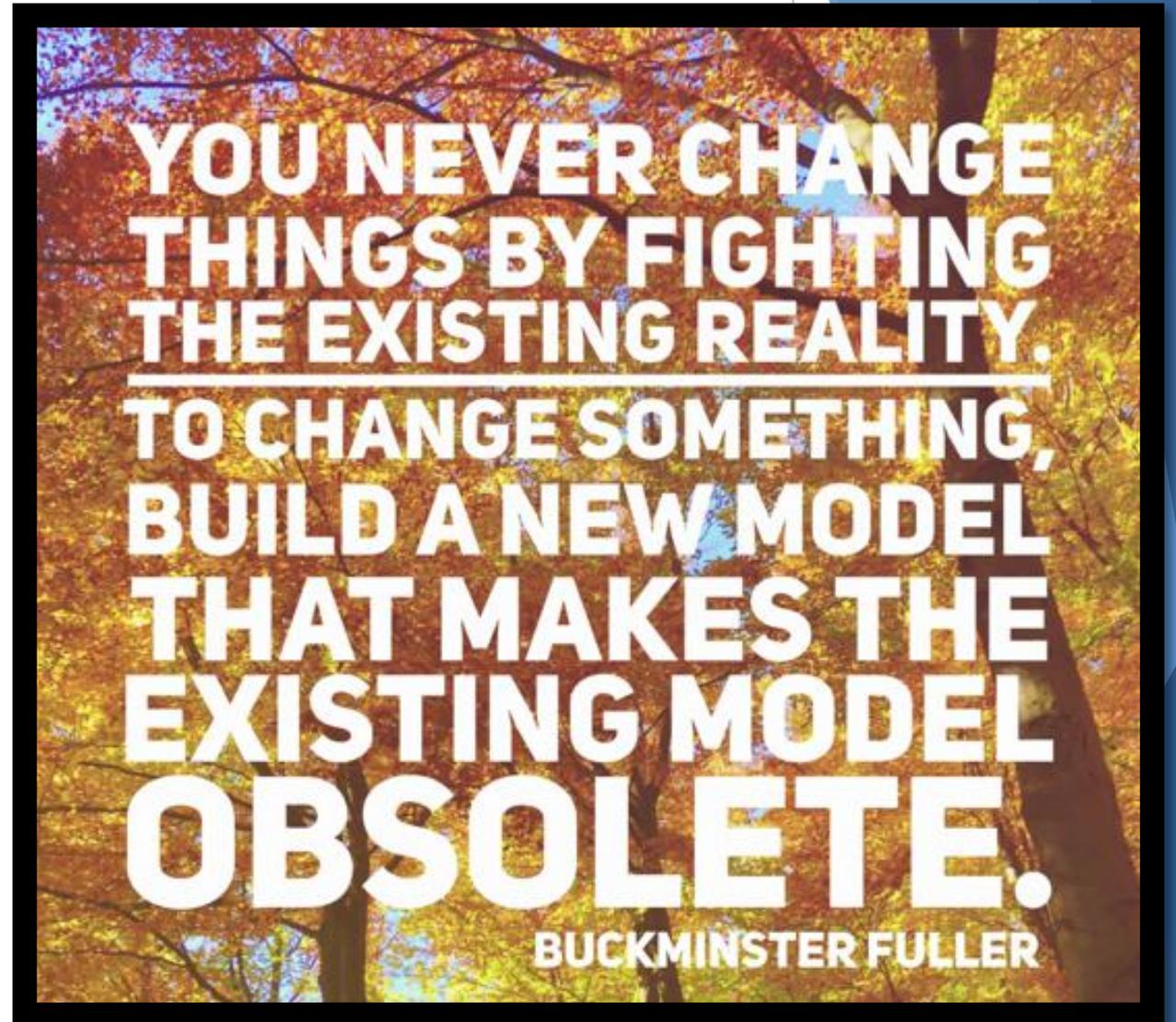
District	Const. & Bylaws	Officer elections	Communicates w/ members	Meeting Requirements	Annual budget	Full delegation
Northwest	Y	Y	Y	Y	N	N
Lima	N	N	N	N	N	N
Dayton	Y	Y	Y	Y	N	Y
Cincinnati	N	Y	N	Y	N	Y
Sandusky	N	Y	N	N	N	Y
Columbus	Y	Y	Y	Y	Y	Y
Cleveland	Y	Y	N	Y	Y	N
Akron-Canton	Y	Y	N	Y	Y	N
Marietta	N	N	N	N	N	N
Western Reserve	Y	Y	N	N	N	N

Compliance Updates

- ▶ In July, district academies were sent progress reports regarding status of their compliance
 - ▶ A handful of districts are seeking assistance
 - ▶ Follow ups were sent in October to districts still lacking compliance
 - ▶ A final communication will be submitted in coming weeks

Honest Assessment Required

- ▶ Are CME events enough of a reason for a district to exist?
- ▶ Are districts actively mentoring, inspiring, recruiting and training the next generation of DOs to lead?
- ▶ Are districts helping to maintain a strong statewide association to have influence health policy decision makers?
- ▶ Are districts helping expand OOA membership?



Next Steps

- ▶ We'll continue conversations with districts and a plan addressing OOA district academies will be presented at the 2019 OOA HOD
- ▶ We plan on beginning development of a centralized model for districts that allow for more coordination with the OOA & a more impactful use of resources

CME in Ohio

- ▶ In April, district academy leadership was informed of new protocol for CME process: co-sponsor approval form (Coordinated efforts with the OOA will allow us to maximize timing, content, marketing, and record-keeping)
- ▶ CME fee schedule updates: Co-sponsor pays OOF & OOF pays AOA (as the accrediting body)

Membership Matters

- ▶ We must grow membership to strengthen the profession
- ▶ Continue to advance our profession through legislative advocacy
- ▶ Explore new ways to engage students/young physicians
- ▶ Expand CME offering & coordinate CMEs

Legislative Update



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Bills that became law



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HB 7: Provider Immunity

SB 265: Step Therapy (formerly HB 72/SB 56)



**OHIO PHYSICIANS
FOR STEP THERAPY REFORM**

HB 131: Physical Therapists to Diagnose Physical Conditions

HB 286: Support for Palliative Care

SB 259: PA Oversight

HB 145: One Bite

Signed by Governor on Feb. 8, 2018



Other monitored legislation



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HB 273: MOC/OCC

OOA interested party-dormant in House Health Comm.

HB 326: Psychologists Prescribing Psychotropics

OOA opposed-dormant in House Health Comm.

HB 317: Physician Tax Deduction

OOA supported-dormant in House Ways & Means Comm.

HB 191: Allows CRNAs to prescribe medications

OOA opposed-dormant in House Health Committee

HB 726: APRN Practice Expansion

OOA opposed-dormant in House Health Comm.

Rule Updates for Ohio Revised Code

- ▶ The State Medical Board approved **final rules regarding the one-bite program**. The rules, which take effect January 31, cover eligibility, requirements, monitoring, treatment providers, and continuing care. The one-bite program provides treatment and monitoring for physicians and other health care professionals with substance abuse issues.
- ▶ The SMBO is **seeking public comment** for 4731-16-16, which would rescind the current rule prohibiting a licensee from utilizing a controlled substance for the treatment of an opioid dependence.
- ▶ Last month, the Board released **information about the new regulations when prescribing opioids** for the treatment of long-term pain (lasting 12 weeks or more) and subacute pain (lasting between six and 12 weeks) that went into effect December 23. The rules are intended to establish safety checkpoints on prescription opioids to ensure that treatment is improving patients' quality of life without increasing the risk of opioid misuse and addiction.



Bipartisan Opioid Legislation

- ▶ Creates a grant program for comprehensive recovery centers that include housing and job training, as well as mental and physical health care.
- ▶ Increases access to medication-assisted treatment that helps people with substance abuse disorders safely wean themselves.
- ▶ Changes a decades-old arcane rule that prohibited Medicaid from covering patients with substance abuse disorders who were receiving treatment in a mental health facility with more than 16 beds.
- ▶ Lifts that rule to allow for 30 days of residential treatment coverage.
- ▶ Require the U.S. Postal Service to screen packages for fentanyl shipped from overseas, mainly China (Sen. Rob Portman, R-Ohio)

2018 Ohio Elections

-Statewide candidates: Governor, Lt. Gov, State Auditor, Treasurer, AG

-1 U.S. Senator

-All 16 U.S. House seats

-99 state reps

-17 state senators

-2 members of Ohio Supreme Court

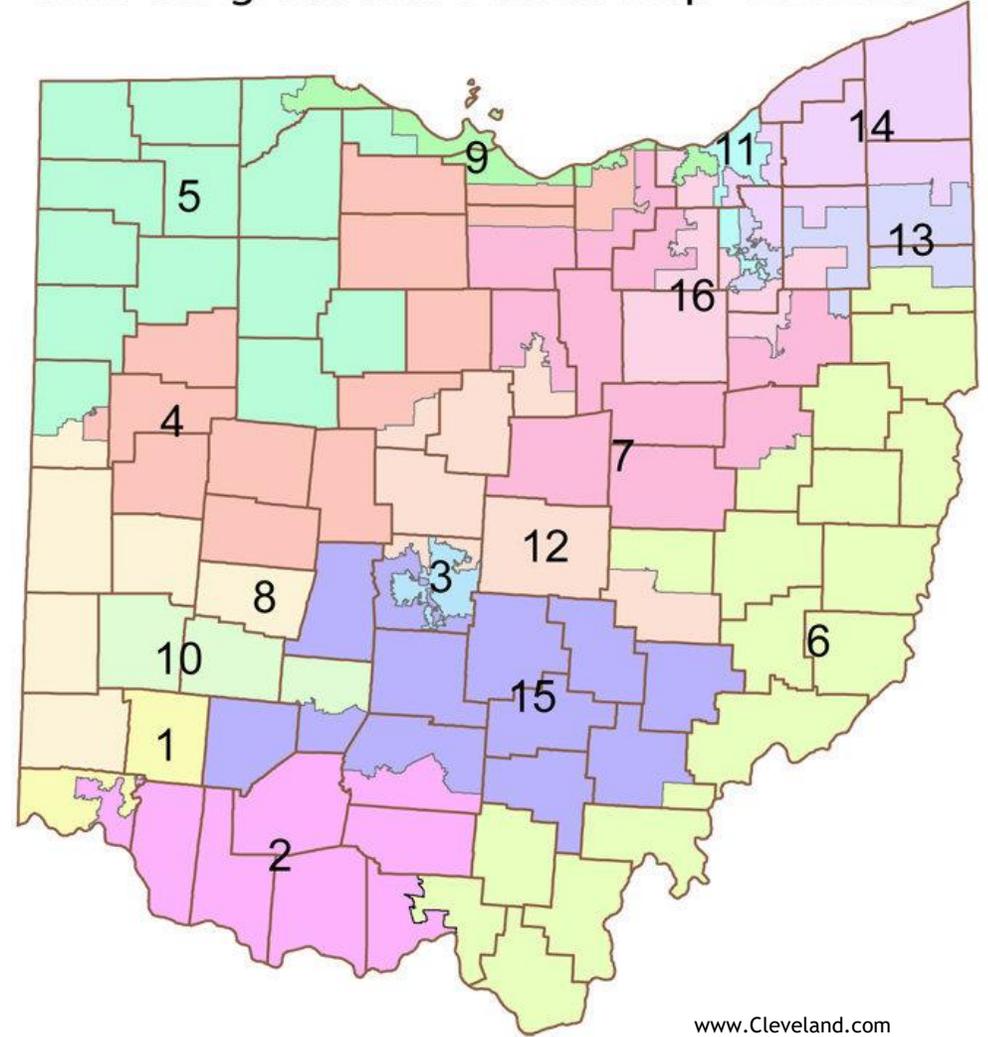
2018 Ohio Election Highlights

- ▶ Governor: Mike DeWine defeated Rich Cordray 50%-46%
- ▶ US Senate: Sherrod Brown defeated Jim Renacci 53%-47%
- ▶ 2 new state supreme court justices: Michael Donnelly & Melody Stewart

2018 Ohio Congressional Overview

Ohio Congressional District Map - 2012-2020

- ▶ Going into Election Day: 12 Republican-held seats, 4 Democrats
- ▶ Districts 1, 12 looked competitive with 10, 14, 16 within likely R
- ▶ After Election Day: same



www.Cleveland.com

2018 Congressional Overview

U.S. House flipped from Republican to Democratic control

115th U.S. Congress: 235 Republicans, 193 Democrats, 7 vacancies

116th U.S. Congress: 235 Democrats, 200 Republicans

Republicans held the U.S. Senate

115th U.S. Congress: 51 Republicans, 49 Democrats

116th U.S. Congress 53 Republicans, 47 Democrats

(R's flipped ND, IN, MO, FL. D's flipped NV, AZ.)

At the Statehouse

- ▶ State House: 66-33 Republican majority, now 61-38 Republican majority
- ▶ State Senate: 24-9 Republican majority—both before & after the election
- ▶ Busy lame duck session adjourned in late December
- ▶ Vote for Speaker earlier this month: Larry Householder (vs. Ryan Smith)
- ▶ New General Assembly was sworn in & convened this month

DeWine Administration

- ▶ Supported **Medicaid expansion** during his campaign
- ▶ Released a 12 point plan to **combat opioid epidemic** a year ago. Highlights include:
 - ▶ Declaration of public health emergency
 - ▶ Data infrastructure that allows real-time, statewide data sharing & state-of-the-art data analytics
 - ▶ 60 more specialized drug courts & double the substance use treatment capacity in Ohio.
 - ▶ Incentives for business owners who employ those with addiction
 - ▶ Special position reporting directly to the Governor with Cabinet-level authority, who works every day with the single-minded focus of fighting the opioid epidemic.
 - ▶ K-12th grade drug prevention education in all Ohio schools & statewide drug prevention media campaign.
- ▶ What are his priorities? Children's Initiative, mental health counselors in schools, rural jobs
- ▶ Roughly 2/3rds of the state budget is appropriated to education and health/HHS
- ▶ Relationship with the White House likely to improve

- ▶ We are proud to provide comprehensive support for the profession!
 - ▶ OOA: Professional home for DOs
 - ▶ OOF: Philanthropic & educational arm
 - ▶ OOPAC: political arm



The OOA works to benefit you!!

We'll soon be announcing even more-benefits; including strategic partnerships for professional liability insurance, financial planning, legal services & more!

Join today!



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OHIO OSTEOPATHIC SYMPOSIUM

A Collaboration of
Ohio University Heritage College
of Osteopathic Medicine
and Ohio Osteopathic Association

April 24-28, 2019

Hilton Easton in Columbus

More than 30 hours of 1-A CME

Topics including: Dermatology roundtable, orthopedics workshop, neurology, pain management, safe opioid prescribing, risk management & more

Keynote speaker announcement soon!



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OOA: Your Professional Home

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