

VIRGINIA MEDICAL NEWS

Member Magazine of the Medical Society of Virginia

2023 Issue

AI IN MEDICINE

Check out the series of articles inside to learn all about
the use and future of AI in medical practice



2024 LEGISLATIVE PREVIEW

What to expect during the upcoming
Virginia General Assembly

GET TO KNOW YOUR MSV OFFICERS

Learn about some of the leaders who
are guiding MSV this year

2023 HOUSE OF DELEGATES

See all the highlights from this year's
HOD sessions and the MSV
Annual Meeting



A Letter from MSV's CEO and EVP

MSV Members,

The end of the year is traditionally a time of reflection and gratitude for all that we have and all we have accomplished.

I continue to be thankful for the privilege of serving this organization and its exceptional membership. I am energized by the extraordinary work you do for your patients, your teams, your practices, your communities, and for the advancement of healthcare. Without a doubt, these are challenging times for our industry, and you have consistently persevered to rise to the occasion over and over again. I would like to personally thank you for your fortitude, flexibility, and focus, and for your steadfast commitment to making a difference every day.

In our roles we are uniquely situated on both sides of the table, as healthcare leaders as well as patients ourselves. Like you, as a patient I understand and highly value the importance of the strong relationship between patient and physician, one grounded in mutual trust and respect, and one that thrives when patients know you genuinely care about them. I am grateful for the many ways I see our members' dedication to the health and well-being of their patients demonstrated in the work we do here together at MSV.

I extend a sincere thank-you for your ongoing support and for so earnestly contributing your voice, ideas, advocacy, and effort toward strengthening who we are, what we do, and how we impact our members and the healthcare community. I am so proud of all we have accomplished. With your input and guidance we continue to create and deliver innovative programs that empower our members to be their best, like SafeHaven, our confidential clinician well-being program, and our Physician Leadership Institute, both of which were created with your input and influence. You have also been instrumental in driving the success of VMAP, the Virginia Mental Health Access Program, which delivers the critical resources you need to access vital pediatric mental health services and training across the commonwealth.

The end of the year is also a time to look forward with excitement and enthusiasm for the possibilities and opportunities that lie ahead. I am confident we will continue to collaboratively advance the mission of our organization, innovate together for the benefit of our patients and practices, and collectively champion the importance of building and maintaining trust in the physician voice as the primary source of truth in our communities.

Together we can — and will — transform the Virginia healthcare landscape in worthwhile, relevant, and meaningful ways in 2024 and beyond.



Melina Davis
CEO and EVP
The Medical Society of Virginia





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October 2023 marked another successful MSV Annual Meeting. Thanks to all of our members, staff, and friends for making this such a wonderful and memorable weekend! Whether you were able to attend in person or not, read on to learn all about the major decisions that were made by your MSV House of Delegates (HOD), which determines how the MSV will consider legislation, regulation, and all related issues by establishing, amending, or re-affirming official MSV policy.

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Self-Care Tips for 2024

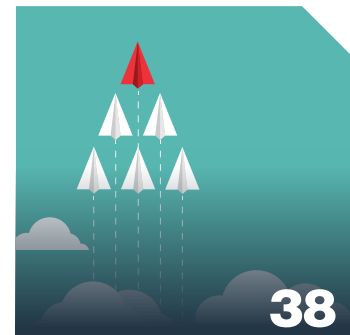
You talk to your patients about making self-care a priority. It's time to take your own advice! You need to take care of yourself so you can provide the best care for your patients.



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The Case for Physician and PA Leadership

Learn about the importance of having physicians and PAs in leadership roles, and about ways that you can get involved.



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2023: Year in Review

The MSV is making big moves! See some of the many ways we've been making an impact around Virginia and beyond.



2023 HOUSE OF DELEGATES

As MSV's policy-making body, the House of Delegates (HOD) determines how the MSV will consider legislation, regulation, and all related issues by establishing, amending, or re-affirming official MSV policy.

This year, the Speakers of MSV's House of Delegates, Dr. Alan Wynn and Dr. Michele Nedelka, convened the Annual Meeting on October 13, 2023. This meeting marks the last time that Dr. Wynn will serve as Speaker of the House. The MSV's HOD has been under his careful and considerate watch as Vice-Speaker and Speaker for the past seven years, and we are eternally grateful for his contributions to organized medicine in the Commonwealth. The meeting also marked the election of the first female Speaker of the House, Dr. Nedelka, who has served as Vice-Speaker of the HOD for the past two years. The House also elected its new Vice-Speaker, Dr. Atul Marathe of District 8, who previously served as a reference committee chair during the last two HOD meetings. We look forward to seeing the direction Dr. Nedelka and Dr. Marathe take the HOD during their tenure.

During HOD, delegates considered 26 resolutions that spanned the healthcare continuum, including supporting insurance coverage of fertility care, expanding SafeHaven™ access to medical and PA students, and opposing the criminalization of healthcare providers and their patients. Delegates also

approved the proposed 2024 budget and elected new officers and directors, including our new President, Dr. Alice Coombs.

We had delegates representing physicians, PAs, residents, and medical students across Virginia. Members from component societies, specialty societies, at-large districts, health systems, and medical schools participated this year. Physician participation from different geographic regions, specialties, and practice settings is essential to fortify MSV's policy with a full range of perspectives and practice experiences.

The House was joined by special guests including Medical Society Presidents from several neighboring states and Secretary John Littell, Virginia Secretary of Health and Human Resources.

Thank you to all our physicians, PAs, students, and special guests who made the 2023 Annual Meeting a success!

For more information and materials from MSV's 2023 Annual Meeting, visit www.msv.org/msv-annual-meeting.

Delegates approved new policy on pertinent healthcare issues:

Public Health

- Supporting the increased oversight and investigation of Medicare Advantage plans by relevant authorities
- Encouraging hospitals and health systems to reduce carbon emissions related to healthcare



Medical Education

- Affirming AMA Policy supporting graduate medical examination equity between MD and DO students applying to residency positions



Practice Issues

- Endorsing the need for equitable access to operating room time for non-employed surgeons who have admission privileges in Virginia hospitals
- Supporting a study to determine the feasibility of establishing an employed physicians' section within the MSV
- Endorsing AMA policy on virtual credit card payments and supporting the requirement that physicians must opt-in to receiving such payments
- Supporting the expansion of career fatigue and wellness programs at Virginia medical schools and PA programs
- Supporting efforts to advance health equity with the addition of health literacy curricula at academic health centers in Virginia
- Opposing efforts to criminalize obtaining or providing healthcare to patients consistent with the standard of care



Helping Patients

- Supporting insurance coverage for diagnosis and treatment for those suffering from male and female factor infertility
- Endorsing AMA policy on the unique healthcare needs of children living in foster care
- Supporting the increased investigation, understanding, and awareness of sudden unexpected death from epilepsy including public education and support for affected families



2024 LEGISLATIVE PREVIEW

The Medical Society of Virginia (MSV) is working hard preparing for the 2024 General Assembly session. The MSV is committed to bringing the physician and PA voice forward by serving as a resource to all stakeholders and bringing subject matter experts to the General Assembly. Advocacy with our state leaders is a year-round effort. Your Government Affairs and Policy team are here to help members establish and maintain relationships with Virginia's lawmakers. We have spent the last few months of this important election year traveling across the Commonwealth to introduce the MSV to the soon-to-be new Delegates and Senators and talk about the medical community's legislative priorities for the upcoming session.

Prior Authorization Reform

Virginia currently has no law preventing an insurance carrier from retroactively denying a previously approved prior authorization. States such as Utah, Rhode Island, Ohio, New Jersey, and Kentucky have passed legislation preventing health plans from revoking prior authorization if eligibility requirements are met, the claim is accurate, and not based on fraudulent or materially incorrect information.

After meeting with the Virginia Association of Health Plans and sharing the stories from our members and their patients, our team is preparing to introduce legislation to reform the prior authorization process.

SafeHaven Expansion

Since its creation in 2019, the SafeHaven program has continued to grow, assisting more and more health professionals with career fatigue, burnout, and wellness. Seeing that success, we are introducing legislation to add licensees of the Board of Dentistry to the program in collaboration with the Virginia Dental Association.

The MSV is also considering ways to enable SafeHaven to do more than review, evaluate, and make recommendations related to provider wellness. For example, some providers need to be connected to a physician for prompt treatment or need to be referred to a pharmacy. The MSV will continue to work with our program partners and the General Assembly to support the wellness of our healthcare workforce.

Virginia Mental Health Access Program (VMAP) Funding

The MSV worked with the Virginia Chapter - American Academy of Pediatrics and the Department of Behavioral Health and Developmental Services (DBHDS) to secure additional funding for the VMAP program for services that include ages 0-5 and to establish postpartum support services. The final version of the budget allocated \$3.95 million in new funding—about half of our total ask in 2023. The MSV is grateful for this investment in pediatric mental health and will return this year to advocate for the remaining amount to ensure continuity of the program's success.

Scope of Practice

We will undoubtedly see legislation to expand the scope of practice of Nurse Practitioners and CRNAs in 2024. Data shows us, and the MSV knows, that the extensive clinical training requirements for physicians prepare them to be the leaders in team-based care. Providers working together in the healthcare system have the best proven health outcomes for patients.

Similarly, legislation was introduced in 2022 to create the profession of “Associate Physician” for individuals who completed medical school but did not match into residency. The MSV anticipates the legislation will be reintroduced after it was sent to the Department of Health Professions this past year to study. We remain opposed to legislation that undermines the importance of clinical experience and the training of residency.

The MSV will continue to fight against any legislation designed to expand scope where those providers are not trained to the highest standards.

Medical Licensure

The MSV anticipates legislation will be introduced by state and national organizations to allow out of state healthcare providers to treat patients in Virginia without a Virginia license. Virginia has one of the best licensure models in the country which allows the Virginia Board of Medicine to discipline bad actors in the event of patient harm or injury. Efforts to undermine our current arrangements will weaken patient protection. The MSV continues to work with allied stakeholders to oppose such legislative or regulatory efforts.

The Medical Malpractice Cap

The General Assembly has seen legislation introduced in 2020, 2021, and 2022 to eliminate the medical malpractice cap. Each year, the MSV pulled together over 40 healthcare organizations in opposition to the bills, ultimately defeating these efforts each time. If and when this legislation is reintroduced, we will continue to lobby against the bill to prevent increased costs of care.

2024 Lobby Days
Mark your calendars to support
MSV's legislative work!



January 16, 2024
January 23, 2024
February 7, 2024
February 19, 2024

If you have any questions about this year's General Assembly session, please email govtaffairs@msv.org.

What Is **Artificial Intelligence** and What Does It Mean in Medicine?

It seems you can't scroll, watch, listen to, or read anything these days without seeing the term "artificial intelligence." It's everywhere, including healthcare channels — and perhaps especially in healthcare channels.

What is artificial intelligence?
And what does it mean in medicine?



The best explanation of artificial intelligence — also known as AI — is a simple one from IBM: “Artificial intelligence leverages computers and machines to mimic the problem-solving and decision-making capabilities of the human mind.”

More than mere speed of calculations, for which computers have long been relied on, AI mimics the mind. Compared to computers as we’ve known them, AI does more.

How much more does AI do? McKinsey & Company adds to the explanation: “AI is a machine’s ability to perform the cognitive functions we associate with human minds, such as perceiving, reasoning, learning, interacting with an environment, problem solving, and even exercising creativity.”

In fact, AI was developed to replicate human intelligence. As human intelligence is complex, so is AI. AI isn’t a single piece of technology. It’s a combination of technologies applied together, including the following technologies specifically relevant to AI in medicine: machine learning, natural language processing, rule-based expert systems, physical robots, and robotic process automation.

From a medical perspective, the use of AI can make healthcare more personalized, predictive, preventative, and interactive. It has enormous potential to impact research, patient care, administrative processes, and more. In fact, it already has.

A SHORT HISTORY OF AI IN MEDICINE

Modern-day AI has actually been around since the not-so-modern days of the 1950s, when the term was coined. So, age-wise, this wild new technology is actually a Boomer.

Fast-forward to the 1980s and an AI Boom exploded, thanks to research breakthroughs, increased government funding, and key advancements allowing computers to learn from their mistakes and make independent decisions. Setbacks, cutbacks, and stagnation followed, until the late 1990s when everyday AI products hit the market, namely Windows voice recognition software and, later, the Roomba. By 2006, Facebook and Netflix, among others, were using AI in their algorithms. Perhaps the best-known and most widely used AI application, Siri, was born in 2011.

Before the AI Boom of the 1980s, AI in medicine gets its first big nod in 1971, when an algorithm was developed to reach diagnoses. Since then, AI in medicine has experienced many milestones, with applications like a 1989 tool that helped identify heart patients most likely to experience another coronary event, a 1991 pathology reporting system with 95 percent accuracy, the 2003 Human Genome Project data on the genetic bases of disease, and the first AI-powered device for operating room use, which was approved by the FDA way back in 2017.

www.msv.org

TODAY’S LANDSCAPE

Today AI continues to generate revolutionary advancements and big benefits in medicine. Predicting cancer in children. Using retinal images to identify signs of heart, eye, and neurological disorders. Helping a paralyzed man move his arms and hands.

But there’s a catch. There are quite a few catches currently being debated and explored in the healthcare community.

AI isn’t human. Though AI can do many things our human brains can do and more — and even more every day as its capabilities continue to grow — it can’t do everything a human can do. One big difference: AI doesn’t have empathy or compassion. It also lacks the complex decision-making skills to provide holistic patient care beyond diagnosis and treatment decisions.

Another big challenge is bias. AI contains human bias that’s been added — and is still being added — by humans and the data we collect to train it.

Right now, patients don’t trust AI either. In a recent Pew Research Center study, 60 percent of American respondents said they would be uncomfortable if their provider used AI for their healthcare. Though, to be fair, according to the study, people do recognize AI’s benefits in areas like reducing errors by healthcare providers and in improving bias and unfair treatment.

Modern medicine is faced with how to apply AI’s remarkable capabilities in research and patient care. At the same time we need to stay focused on priorities like maintaining humanity in healthcare, eliminating bias, and protecting patient privacy and data security. It’s a tall order.

Join us as we take a deeper dive into AI in a 5-part series exploring AI in Medicine. In addition to this introductory article, we’ll take a look at AI’s benefits, questions and concerns about AI, and AI applications in medicine. We’ll wrap up the series with recommendations about how physicians can be leaders in AI.

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4. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC9908503/#:~:text=servers%20%5B12%5D,-,AI%2Dbased%20systems%20raise%20concerns%20regarding%20data%20security%20and%20privacy,records%20is%20crucial%20%5B13%5D>

Outgoing President Remarks

Harry L. Gewanter, MD, FAAP, MACR

President-Elect Coombs, Honored Guests, Board Members, Delegates, Friends and Visitors,

While I am honored to stand before you today as I complete my year of service as the 202nd President of your Medical Society of Virginia, my heart is heavy as I think of all the unnecessary and unfortunate deaths, damage and associated despair in our world. Murder is murder and is unacceptable, no matter the rationalization. There are no moral equivalences. Before we continue, I ask that you rise and bow your heads in respect to all who have died in our country, Ukraine, Israel, Palestine, Sudan, Ethiopia, Guatemala and elsewhere due to ideological, religious, political or personal violence.

I realize today is to be a celebration and this is a somber start. But I cannot help it. Our profession's purpose is to save and prolong lives while improving the quality of lives of the the people we serve. The constant and increasing worldwide violence, both physical and rhetorical, is making our jobs ~ and our lives ~ increasingly difficult. The additional workplace pressures to meet metrics not in the best interests of our patients further increases our stress, moral injury, and burnout.

And yet, when we are able to do our job in the manner we visualize and were taught, all those negative feelings and pressures melt away. The smile, the "thank you", the hug is why we do what we do. There is a Yiddish term for it ~ nachas ~ the best translation of which is the warm wonderful feeling one gets when one of your children does something positive.

My world view is ~ or was ~ of being in the eye of a hurricane, not now in the global and national sense, but of our profession, both nationally and in Virginia.

The classic concept of the eye is a place of calm and serenity amidst the swirling chaos surrounding it. Those powerful winds have the potential to destroy all that we have created and to even destroy us. Being within the eye, amidst the relative quiet, however, does not mean we are in a passive spot. Rather we are in a place of strength with the opportunity to gather our



thoughts, assess our situation, create plans and take meaningful actions.

That is where I see us today.

You have heard this before and you will hear this again and again: what makes MSV successful and a national example of what a state medical society can and actually accomplish is its staff. MSV's culture results in over 50 individuals working collaboratively, creatively and professionally with a vision to improve the lives of our membership and the patients we serve. I believe our senior leadership team's brains operate with bifocals ~ they not only are focused on today's issues, but are simultaneously visioning and planning future successes. Our membership continues to grow while our SafeHaven and VMAP programs are expanding and receiving national recognition and replication. The MSV Foundation is ready to launch multiple programs into other critical health domains. And don't forget to donate to the Foundation while you are here. Our insurance agency continues to grow and has a ridiculously high retention rate for the industry. We have been able to stabilize, diversify and grow our finances so that we are now in a position to take on new projects and programs. Finally, our Government Affairs and lobbying teams had a nearly perfect year of positive outcomes, both from the perspective of having our priorities passed and implemented as well as defeating or neutering legislation or regulations we opposed. While I would



love to take credit for all these successes, that would be more than a little misleading.

Similarly, I have to express my deep thanks and gratitude to the Board, my advisors and executive committee for their advice, wisdom and patience with me. I can be a bit impulsive and they helped to keep the MSV boat stable and on course.

I want to offer my congratulations and best wishes to our incoming president, Dr. Alice Coombs, and our new board. I pledge to assist her in any way possible as her presidency will be dealing with the hurricane's winds and the rain.

My apprehensions about the chaos that surrounds, and I believe will soon engulf us, comes from the attacks from multiple sides on our core activity ~ the physician patient relationship. Our profession is suffering a death by a thousand cuts from health services corporations ~ formerly known as health insurers, PBMs, etc. ~ hospital conglomerates, private equity firms and legislatures. And to that last point, we are in the midst of significant elections over the next two years that I believe will determine the long-term direction of our profession, our Commonwealth and our country.

Almost 40% of the next General Assembly will be new as over 600 years of seniority ~ and many of the friends of medicine ~ are not returning. Your MSV has already started the process of meeting and educating the many candidates who will be elected in just over 3 weeks. But the staff cannot do this alone ~ it requires each and every one of you, your colleagues and every clinician to do the same. While each of us may personally prioritize any of the many potentially divisive issues, we must stand united and educate all the future "hired help" on the need to keep the physician-patient relationship and decision-making process sacrosanct. Legislators have no business practicing medicine — unless, of course, they are individually licensed to do so. I urge you to reach out to your candidates, meet with them, ask them to come visit your office and teach them about the realities of the current practice of medicine and the challenges of practicing in today's environment.

I also want you to invest in the MSVPAC today. Your Board has pledged to add to every donation made during this Annual Meeting. No amount is too small, but, obviously more is better. Your investments help improve our access to our state legislators, thereby increasing our ability to educate them on our priorities. And next week I want you to reach out to your respective practices as well as your local and specialty societies and insist that they also contribute to the MSVPAC. As an example, I am proud to say that the

Virginia Society of Rheumatology invested \$10,000 in MSVPAC. I realize not every practice or society can match or exceed that investment, but some of you can. And should. We will be going head-to-head with organizations and corporations whose PACs contribute multiples of what we have. Please speak with Andrew Densmore, our Government Affairs staff person who leads the PAC ~ or, for that matter, any of our staff ~ for more details and information how you can help.

Finally, and no less importantly, VOTE! And encourage your colleagues, family, neighbors, friends and enemies to vote as well. It is how each and every one of us can influence the future.

I know I have gone on a bit long, but I am passionate about our profession and our ability to care for our patients in the best means possible. And, since we are also all patients, I also want each of us to receive the best care possible from our physicians.

Thank you for your attention, support and criticisms ~ er, suggestions ~ over the past year. Work hard this weekend, enjoy yourselves, go forward in peace and perform Tikkun olam ~ healing the world through your actions ~ today and every day.





Clinician Well-Being Program

Rediscover meaning, joy, and purpose in medicine.

SafeHaven ensures that you can seek support for burnout, career fatigue, and mental health reasons without the feat of undue repercussions to your medical license.



Independence.

Legislation allowed for the creation of the MSV SafeHaven Program, which is a confidential resource for clinicians seeking help to address career fatigue and other mental health issues



Reporting.

Clinicians participating in the SafeHaven program will not be reported to the Virginia Board of Medicine unless they are not competent to practice or are a danger to themselves



Privileged Communications.

Consultations which take place under the scope of the MSV SafeHaven Program are considered privileged communications

Resources For You And Your Family Members



Clinician Peer Coaching — talk with someone like you who can help you grow both personally and professionally



Counseling — available in either face-to-face or virtual sessions



In-the-moment **telephonic support** — available 24/7



WorkLife Concierge — a virtual assistant to help with every day and special occasion tasks



VITAL WorkLife App — mobile access to resources, well being assessments, Insights, videos and more

MSV LEADERSHIP PROFILE
IMMEDIATE PAST PRESIDENT

Q: What do you specialize in?

Dr. Gewanter: I am “sorta” retired, but I specialize in specialty pediatrics/ pediatric rheumatology.

Q: What is your favorite movie or TV Show?

Dr. Gewanter: It’s a tie between Dogma & The Princess Bride

Q: What book would you recommend for a fun, leisure read?

Dr. Gewanter: “Lamb” by Christopher Moore. It’s a story of the “lost” years of Jesus through the eyes of his childhood friend, Biff.

Q: What book would you recommend to your fellow physicians to support in their professional life?

Dr. Gewanter: “If I Betray These Words” by Wendy Dean, the book offers examples of how to make medicine better for providers and their community.

Q: If you could go back and talk to yourself as a medical student, what would your advice be?

Dr. Gewanter: I’d simply tell my younger self to “chill.”

Q: Why is being a member of the MSV Important?

Dr. Gewanter: Corporations, insurers, hospitals, etc., are succeeding because they are dividing us - and as physicians, we are helping them. We are only able to speak up for our patients and our profession by uniting against all those who are trying to limit our ability to follow our oaths to care for our patients in their best interests.



**Harry L. Gewanter,
MD, FAAP, MACR**



VIRGINIA MENTAL HEALTH ACCESS PROGRAM

Supporting Our Most Vulnerable Populations

It's no secret that children are being affected by mental illness at an ever-increasing rate. With 1 in 5 children beginning kindergarten with a mental health diagnosis,¹ and a nearly 30% increase in child and adolescent anxiety and depression in recent years,² the need for effective pediatric mental health care in America is at an all-time high.

In Virginia, we are currently ranked 37th in the nation in terms of our mental health workforce—and that's down from 48th just a few years ago.³ Only *two* of the 95 counties in our state have enough psychiatrists for the population of children they serve, and over half of these counties don't have a single child or adolescent mental health professional.⁴ This means that when a pediatrician has a patient who is experiencing mental health concerns, they often can't access a specialist. Support from such specialists in these scenarios is crucial, as 65% of pediatricians say they don't know enough about mental and behavioral health care to provide proper treatment on their own.⁵

As many of you already know, the Virginia Mental Health Access Program (VMAP) was designed in 2018 to address this severe shortage of pediatric mental health providers. The first way VMAP does this is through the VMAP Line, which offers consultations and care navigation for pediatricians and other primary care providers who call about a child or adolescent patient with mental and behavioral health issues. The second is through hosting continuing medical education (CME) opportunities, such as REACH, Project ECHO, and QI Initiatives, which prepare providers to care for these kinds of patients.



With a rise in calls for patients aged 0 to 5, VMAP launched an early childhood expansion initiative in the summer of 2022. We kicked off this expansion by adding early childhood physicians to our team on the VMAP Line. These experts began offering full-time coverage to help callers handle the unique mental health concerns of their littlest patients, which has been a huge win for VMAP and everyone we serve!

Alongside this effort, VMAP created two specialized Project ECHO cohorts. The first, "Birth to 5: A Deeper Dive", focuses on mental health issues that appear in infants and toddlers. The second, "Systems of Care for Kids", educates physicians on systems of community support for families with young children. Both courses provide CME credits, which means that physicians can renew their licensure with coursework that prepares them to handle the pediatric mental health concerns they see in their practices.

Without the support and involvement of physicians, this expansion—and VMAP as a whole—would never have been able to reach the thousands of children and families that it has in the last few years!

Physicians: the dedication you have to your pediatric patients is at the core of our success. You make it possible for us to recognize their needs, which means we can continue adapting our program with important expansions like this one. You play a massive role in the growth and expansion of this program across the state, and we are so grateful for your support and expertise as we continue to focus on helping you support children, adolescents, and families in your practices.

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VMAP 2023 Executive Summary

VMAP was strategically designed in 2018 to address pediatric mental health challenges occurring in the Commonwealth of Virginia through a multi-tiered and culturally responsive lens. Engaging a wide range of operating partners, funding stakeholders, and income streams that total over **\$11.5 million**, VMAP now offers a scalable model that helps **mitigate the shortage of Virginia's pediatric mental health workforce** through **improving primary care providers' (PCP) understanding of assessing, treating, and managing pediatric mental health conditions**. VMAP offers a variety of services tailored to PCPs seeing patients age 21 and under offering same-day mental health consultations and care navigation services, as well as a suite of tailored and specialized pediatric mental health trainings that provide Continuing Medical Education (CME) or Maintenance of Certification (MOC) credit to participants. Additionally, VMAP's marketing and outreach campaigns disseminate knowledge of its services to PCPs, resulting in:

1,053 PCPs
registered for VMAP

225% increase
in registered providers
from 2020 through 2022

60% increase
in new users visiting the
VMAP website in 2022

THE VMAP LINE

The VMAP Line employs over **35 staff**, including child and adolescent psychiatrists (CAP), licensed mental health professionals (LMHP), and care navigators, across **seven hospitals** and Community Service Boards (CSB) throughout VMAP's **five regional hubs**.

Since the VMAP Line opened in August 2019, it has:

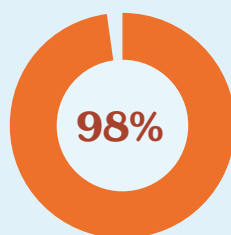
Received
3,886
calls
from PCPs

Completed
2,799
mental/behavioral
health consultations¹

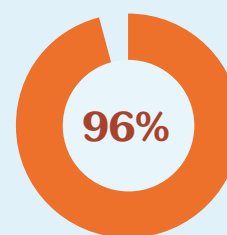
Completed
2,036
care navigation
requests¹

Served
3,360
Virginia pediatric
patients²

According to post-VMAP Line surveys*:



of PCPs found their behavioral health
consultation **Very helpful** or **Extremely helpful**



of PCPs indicated they were **Extremely likely**
to use the VMAP Line again

*VMAP received 113 post-VMAP Line surveys.

¹Please note more than one service (CAP consultation, LMHP consultation, and care navigation) can be requested in a single call.

²This is how many patients VMAP has served directly through their provider calling the VMAP Line. However, VMAP is estimated to currently reach hundreds of thousands of Virginia children through their PCPs, which is roughly estimated using the number of providers trained by VMAP combined with the average patient panels of pediatric-serving PCPs.



Incoming President Remarks

Alice Coombs, MD, MPA, FCCP

“Live the questions and NOT answers” from Angela Coombs, “Granddaughter of Lightning.”

In the summer of 1855, Yellow Fever was the greatest pestilence that Virginia had ever experienced. The people in this very city, Norfolk and also Portsmouth suffered. They were drowned by fear, uncertainty, sickness, and death. Many thought the illness was contagious, not knowing it was transmitted by mosquitos.

An observer commented, “I find, however, a great prejudice existing, especially among the poor, against going to the hospital: and this owing mainly to the idea that the patients at the hospital are considered by the physicians as fit subjects to experiment upon.”

A chilling reminder of many chapters of COVID-19. The history of healthcare disparities and patient trust is a reoccurring theme in the US healthcare landscape. Our patients deserve better! Since I was a little girl, I witnessed my mother, Elba Tolbert, visiting the sick and shut in. Cancer mortality is higher in persistent low-income counties than higher income counties. In 2020, African America infants were 2.4 times more likely to die when compared on non-Hispanic whites. We have learned from McGinnis’ analysis that in 2010, nearly half of all deaths—48 percent—were linked to behavioral and other preventable causes, the same share as in 1990. Similar results are prevalent today. As physicians, our goals are gargantuan and complex: optimizing health delivery, improving, and focusing on preventive health.

How does the Medical Society of Virginia help physicians take care of patients?

Our Medical Society must have Influence, Melina has work closely with members to identify this. Thank you Harry Gewanter and the Board for the influence you continue to have.

Never underestimate the power of dreams and the influence of the human spirit. We are all the same. In this nation, the potential for greatness lies within each of us.



Strategically, we have an opportunity to learn from every group within our Society and learning is listening.

We need to be a rethinking organization, seeking to be curious to explore new avenues opening ourselves up to innovation and transforming healthcare policy. Everyone doesn’t think the same. I was groomed for rethinking by my siblings Junior, Gloria, Louise, Vanessa, and Tommy. With my family it was the debating and dialogue.

Do your homework! As we advocate for new healthcare policy, patient support, drug price control, and relief from barriers to practice medicine, we need to know the history of what hasn’t succeeded and why in terms of successful passage of bills.

Advocacy always requires “fire in your belly”. When there are distorted health policies, or even worse, payment delay policies that impact your cash flow, it’s like giving a person a Neuromuscular paralytic agent without sedation. You are painfully awake, you know precisely what is happening but you have no capacity to breathe! Things have got to change!

In 2010 the Patient Protection and Affordable Care Act was signed into law which expanded healthcare to the uninsured and the underinsured. Imagine that in 2010 prior, to the ACA, there were 48 million uninsured persons; 18.2 percent uninsured.



Currently, in 2022, 92.1 percent of people, or 304 million, had health insurance at some point during the year, representing an increase in the insured rate and number of insured from 2021 (91.7 percent or 300.9 million).

Working with the AMA, the Medical Society of Virginia, our Virginia AMA Delegation was instrumental in being on the right side of history, thank you MSV!

When the eyes of our patients are staring into our souls it directs us to a higher calling that only we can fulfill. Putting patients first is what matters!

Mentors- I want to encourage every MSV member to reach across the aisle, even in this meeting, to form a new relationship and consider a young physician to encourage and build up. Wellness is partly enhanced by a sense of belonging. One of my mentors, Marlene Meyers, here tonight, has mentored me for more than 40 years. I have greatly benefited from her wisdom and guidance. Also, my mentors Wilbur Jordan and John Butterworth have also guided me at different times in my life

Before you retire, reproduce yourself. Physicians of MSV I urge you, don't leave medicine without reproducing yourself by identifying someone with your passion and skillsets.

To the Students: today you are dealing with challenges that include the cost of education and the difficult choices of specialties, and overall well-being.

We know that burnout is a major cause of healthcare provider attrition, job dissatisfaction, and can compromise patient quality. Thank you SafeHaven. We must create an environment where we learn from not only our "golden moments but also from our failures." Failing in Safe places is part of the landscape of medicine!

We are not alone! We are linked with nurses, pharmacist, therapists, and the entire healthcare team. We cannot function without the contributions of the entire team!

First let us remember that whatever we do we must put patients FIRST.

Physicians in the board room empower the voice of patients which gets the attention of policymakers making decisions. OUR role in advocacy is to bring the patient into the boardroom putting the patient first. We are stronger together!

In conclusion, don't miss your moment. Please turn to your neighbor and tell them, "don't miss your moment."

Each of us is given finite time on this earth, we will care for patients, we will impact families, and we will care for our own families and for ourselves.

We are made of a unique fabric, some silk, some wool, but the fibers of our lives have been woven into experiences that make you uniquely positioned to apply your signature. **DON'T MISS YOUR MOMENT!**

Thanks to God, Albert Coombs, my husband who has supported me amazingly for 40 years, my children Alby, Andrew, Angela, and Marlene, and all of my family and friends, Iris, Keira, and Christy.

Special thanks to Dr. Harry Gewanter, MSV Staff, Melina, my Virginia AMA Delegation family, and I want to especially thank my Dean, Dr. Art Savedra, VCUSOM and the MCV Foundation.

Thank you, Medical Society of Virginia Nominating Committee, and the House of Delegates, for electing me as President.

I am so blessed by your show of support. I will do my best to work hard, do my homework, advocate and represent MSV well.





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MSV LEADERSHIP PROFILE

PRESIDENT

Q: What do you specialize in?

Dr. Coombs: Specialty Anesthesiology, Critical Care Medicine.

Q: What is your favorite movie or TV Show?

Dr. Coombs: The Wiz and The Color Purple

Q: What book would you recommend for a fun, leisure read?

Dr. Coombs: "Think Again: The Power of Knowing What You Don't Know" by Adam Grant is a great book that talks about the importance of being open to new beliefs or challenges. I'd also recommend "The Covenant of Water" by Abraham Verghese follows three generations of one family in South India and the medical innovation through the years.

Q: What book would you recommend to your fellow physicians to support in their professional life?

Dr. Coombs: "The Practice of Adaptive Leadership: tools and Tactics for Changing Your Organization and the World" by Ronald Heifetz, is full of tools, worksheets, and stories to help develop leadership skills. I also want to recommend "Outliers: The Story of Success" by Malcom Gladwell which takes the reader on the journey through the world of successful people and what makes them that way.

Q: If you could go back and talk to yourself as a medical student, what would your advice be?

Dr. Coombs: Don't miss your moment, don't fast forward your life, enjoy or experience every moment as a learning opportunity, do your homework and "give the most that you can, to as many as you can, for as long as you can, you will be blessed"



Alice Coombs, MD,
MPA, FCCP

Q: Why is being a member of the MSV Important?

Dr. Coombs: Being a member allows me to work together with other likeminded individuals to promote better healthcare through advocacy, development of state and federal health public health policy. Being a member allows me to give back and appreciate and learn from the "wisdom of the crowds."



24 Physician *Self-Care* Strategies for 2024

You talk to your patients about making self-care a priority. It's time to take your own advice! You need to take care of yourself so you can provide the best care for your patients.

To help you address your own self-care needs in the new year, we put together a list of 24 physician self-care strategies for 2024. Some take only a few minutes and can be done anywhere, anytime. Others require more thought, space, or planning to put into action. Try something new. Mix and match. Do one thing. Do everything. Use this list as an inspirational starting place for self-care — then keep it up!

1

Focus on Fitness - Exercise benefits body and mind.

6

Seek Social Support - Build and nurture relationships that give you a sense of belonging.

2

Get the Help You Need - If you're struggling with mental health, reach out for confidential support through MSV's SafeHaven program.

7

Shift Your Negative Self-Talk - While you can't always turn critical mental chatter off, you can control how it influences you.

3

Do What You Love - Make time to do things that make you happy.

8

Laugh - It's true, laughter is one of the best medicines.

4

Relax — Really - Try progressive muscle relaxation.

9

Take a Break - Take a vacation day if you can, or focus on smaller breaks and timeouts.

5

Recharge - Moderate activity temporarily boosts alertness and energy.

10

Reduce Screen Time - Excessive social media use can add to anxiety and negative emotions.

11

Try Yoga ~ Yoga boasts a trifecta of self-care strategies: meditation, light exercise, and controlled breathing.

12

Listen to Yourself ~ Be willing to give yourself what you need when you need it.

13

Breathe. ~ Mindful breathing can help physicians calm down and improve their concentration.

14

Get Your ZzZs ~ You need good sleep.

15

Meditate ~ Meditation comes with all kinds of benefits, including a positive mood and better sleep.

16

Eat Better ~ Be mindful about your nutrition.

17

Express Gratitude ~ Expressing gratitude boosts your well-being and increases happiness.

18

Focus Inward ~ Tune into your truths and shape how you show up in life.

19

Try Journaling ~ Journaling is calming and can help you let go of stress and negativity.

20

Stop Procrastinating ~ Being more in control will improve your productivity while reducing stress.

21

Stretch ~ Stretching is a stress-smasher and releases muscle tension.

22

Grab a Nap ~ Just 15 to 20 minutes can help — though more couldn't hurt.

23

Get Outside ~ Nature's benefits include lowering stress and improving your mood.

24

Connect ~ Spending time with family and friends is essential to your health and happiness.

Which of these 24 physician self-care strategies for 2024 are realistic for you? Reflect on these and other self-care strategies and stress-busting methods. Make a list of what works — and use it. Add ideas, then experiment with those approaches. Track what works and when it works. Repeat the good and keep trying new things to give yourself the care you need in the new year.

The Medical Society of Virginia creates solutions for our members.

Our work ensures that physicians and PAs are not only successful, but also cared for, protected, and heard!

We are making Virginia the best place to *practice medicine* and *receive care*!

The Problem

We heard from many of our members that physicians, PAs, residents and medical students were struggling with **burnout, mental health concerns, and the inability to get confidential support**. You can only be effective if you are being cared for, but we know that your patients come first for you.

Our Solution

The MSV created SafeHaven, our well-being program designed to ensure you, your families, and your teams can **seek confidential mental health support** without fear of repercussions to your medical license. You care for your patients. We care for you.



The Problem

PCPs shared that they needed resources to **support their pediatric patients' mental health needs**. Your patients are the reason for the profession. But we know you can't solve every access issue.

Our Solution

The MSV took on the Virginia Mental Health Access Program (VMAP) in order to help healthcare providers take **better care of children and adolescents** with mental health conditions.



The Problem

Our members came to us with serious concerns about the safety of themselves and their teams in the workplace due to **increasing threats of violence to healthcare professionals**. This means you can't do your job effectively and in turn hurts patients and dramatically reduces your comfort in the workplace.

Our Solution

The MSV worked with the General Assembly to **increase legal protections** for threatening a healthcare provider in care settings outside the hospital – including physicians' offices and free clinics.



The Problem

In Virginia, the previous mental health questions asked by the Department of Health Professions added to the **shame and stigma** around healthcare providers seeking **treatment for their mental health and well-being**. Such questions were a barrier to healthcare providers seeking behavioral healthcare when they needed it, creating a risk to patients and the entire healthcare team.

Our Solution

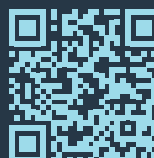
The MSV worked closely with the Dr. Lorna Breen Heroes Foundation to change the mental health question on the Department of Health Professions applications and further **reduce the stigma** around doctors getting **help for depression, anxiety, and burnout**.

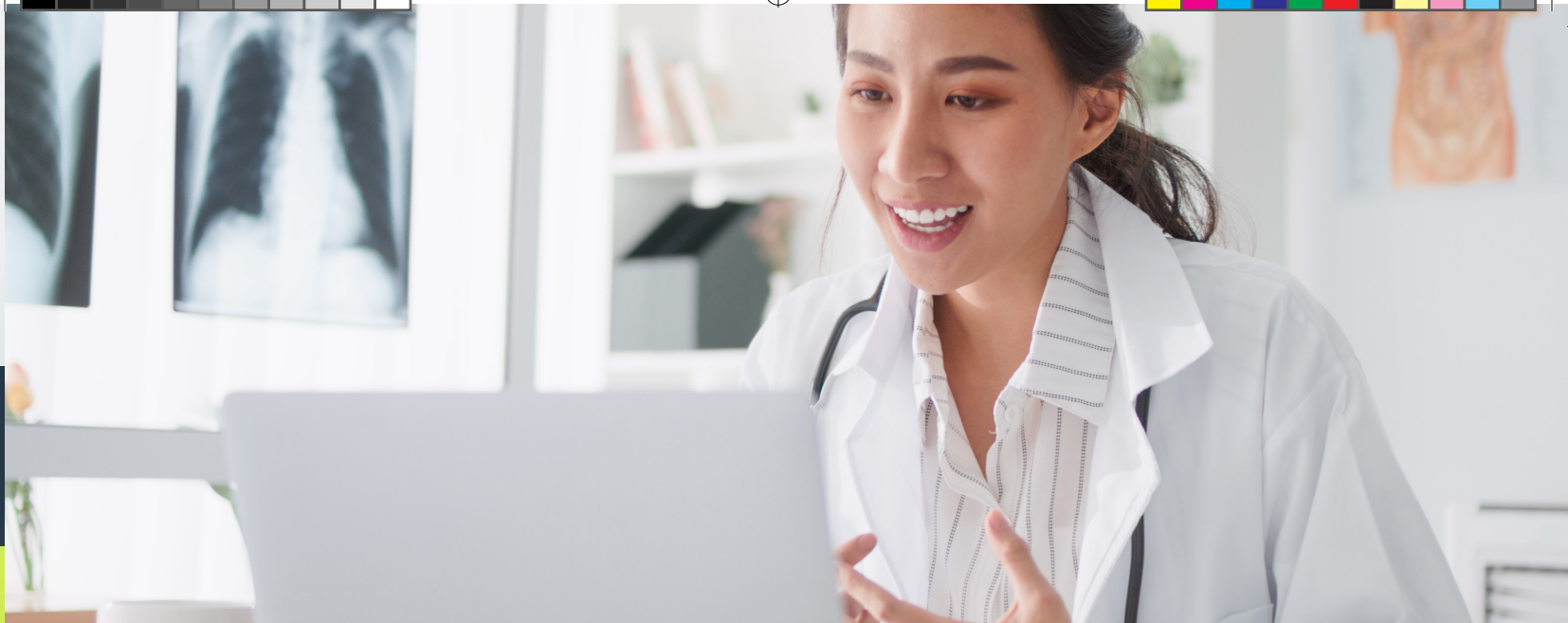


The MSV creates solutions and change for YOU!
Membership ensures we can continue this necessary work.

Renew today and ensure we can continue creating the solutions your profession needs!

Visit www.MSV.org/membership
or Scan the QR code





Enhancing Compliance and Communication in Healthcare:

The Strategic Partnership Between Voyce and the Medical Society of Virginia

In a significant advancement for healthcare communication, the Medical Society of Virginia (MSV) has partnered with Voyce, a leader in remote video and audio language interpretation services. This collaboration addresses the critical need for Health Insurance Portability and Accountability Act (HIPAA) compliance in healthcare interactions, ensuring meaningful access for all patients. For those requiring sign language interpretation, Voyce is compliant with the Americans with Disabilities Act (ADA), and provides sign interpretation in multiple languages as well as Certified Deaf Interpreters.

HIPAA compliance emphasizes the importance of protecting patient privacy and security in telehealth services, including those provided through virtual technologies. This directive is crucial for healthcare providers increasingly relying on remote communication technologies to deliver care.

Voyce's role in this partnership extends beyond providing access to interpreters in over 240 languages and dialects. Voyce ensures that its ASL and trilingual interpretation (ASL, Spanish, English) services are fully compliant with ADA standards, thereby enhancing the healthcare experience for deaf and hard-of-hearing patients.

Organizations across various domains, including healthcare, education, and government, are mandated

to provide ADA-compliant services. Voyce's specialization in sign language interpretation plays a pivotal role in ensuring these organizations can meet their legal obligations and provide equitable care.

The partnership between MSV and Voyce is a proactive step towards ensuring healthcare providers are equipped to offer accessible services to all patients. This collaboration underscores a commitment to eliminating language barriers in healthcare while ensuring compliance with crucial regulations like HIPAA.

In an increasingly diverse society, the ability to communicate effectively with patients of different linguistic and physical abilities is fundamental to delivering compassionate and effective medical care. Voyce's technology solutions, aligned with HIPAA and ADA requirements, provide a secure and inclusive platform for patient-provider communication.

The partnership between the Medical Society of Virginia and Voyce represents a commitment to advancing healthcare quality by addressing communication barriers while strictly adhering to compliance laws, with a particular emphasis on providing sign language interpretation services. This collaboration is a testament to their dedication to fostering an inclusive, accessible, and legally compliant healthcare environment for all patients.

AI Delivers Real Benefits in Medicine



Today's headlines are loaded with the promises of artificial intelligence (AI). Faster! Better! Less! More! It's not just hype. AI delivers real benefits in medicine.

AI is already being used in drug development, health monitoring, medical and surgical treatment, disease diagnostics, managing medical data, appointment scheduling, and more. And with good reason — it delivers results. As AI continues to advance, it promises even more.

Here's a powerful summary of the benefits of AI from The Harvard Gazette: Properly designed AI "has the potential to make our healthcare system more efficient and less expensive, ease the paperwork burden that has more and more doctors considering new careers, fill the gaping holes in access to quality care in the world's poorest places, and, among many other things, serve as an unblinking watchdog on the lookout for the medical errors that kill an estimated 200,000 people and cost \$1.9 billion annually." Wow.

We've compiled a high-level look at 7 of the biggest benefits AI in medicine has to offer — and in some cases is already delivering — including some specifics related to each area.

1 AI increases precision and reduces errors.

- ▶ Reduces false-positive diagnoses, eliminating unnecessary work-ups.
- ▶ Reduces medication errors.
- ▶ Increases precision during surgical procedures, thanks to AI robotics.
- ▶ Analyzes CT scans, x-rays, MRIs, and other images to reveal findings a human may miss, like early signs of disease.
- ▶ Improves error detection.
- ▶ Improves drug management.
- ▶ Identifies and addresses insurance claims errors before insurance companies deny payment.

2 AI increases efficacy.

- ▶ Expedites and optimizes clinical decision-making, with access to vast amounts of real-time data.
- ▶ Performs screenings where there are physician shortages or other barriers to healthcare access, helping patients get diagnoses and treatment more quickly.
- ▶ Improves medical necessity determination and reduces denials.
- ▶ Trims years off discovery and development of pharmaceuticals to treat specific diseases.

3 AI increases productivity.

- ▶ Maximizes productivity hours by decreasing physician workloads, increasing patient face time and time spent on critical cases.
- ▶ Answers patient questions to determine whether symptoms require an office visit.
- ▶ Aids fraud prevention.
- ▶ Streamlines administrative and clinical tasks and workflows.

4 AI offers better monitoring.

- ▶ Monitors a patient in real-time to alert the patient to variations and also provides information to physicians about the patient's condition.
- ▶ Monitors patient medication use to reduce nonadherence rates.
- ▶ Helps identify errors in how a patient self-administers medication, like injections.
- ▶ Helps collect, store, and analyze data from monitoring devices in large populations in order to determine how to better treat and manage specific diseases.
- ▶ Helps detect and track infectious diseases, like COVID-19.

5 AI delivers more insights.

- ▶ Provides access to massive amounts of data — more information than humans could ever analyze unassisted.

All of this — more insights, more precision, fewer errors, better efficacy, better productivity, and better monitoring — combine to do two things that are the biggest benefits of all:

6

AI saves time and money
for patients as well as physicians, researchers, the healthcare system overall, and those who support and interact with it, like insurance providers.

7

AI improves patient outcomes
through improvements in diagnosis, treatment, patient care, patient safety, and access to care.

At the end of the day, better patient outcomes are what we all strive for every day. That's hands-down the biggest benefit of AI in medicine.

If better patient outcomes is the major "pro" for AI in medicine, what are the "cons"? Next in our 5-part series exploring AI in Medicine we'll take a look at the questions and concerns about AI specific to healthcare.

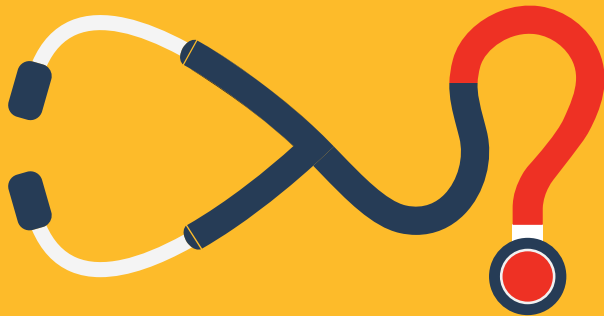
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www.msv.org

27



Physician Leadership Institute

THE CASE FOR PHYSICIAN AND PA LEADERSHIP

by Mark D. Townsend, MD, MHCM | Executive in Residence



Innovative Leader
outperform non-
innovative leaders
some key areas.

<https://hbr.org/2016/12/the-5-s>



Virginia Medical News | Annual Issue 01, 2023



A case for physician and PA leadership is this: if you aren't at the table, you are on the menu. Regardless of our current role as clinical leaders, the absence of our involvement in the administration of healthcare leaves us at the mercy of administrators. I am not OK sitting on the sidelines; are you?

Medical school and PA school prepares us to practice medicine, but it does not position us to be leaders in healthcare. We are taught to 'enter orders', to optimize patient care, and even to focus on quality and safety... but we are left with knowledge gaps when it comes to finance, advocacy, personal growth, and innovation.

The Physician Leadership Institute (PLI) was modeled after the renowned Claude Moore Leadership Institute that was delivered by the Medical Society of Virginia (MSV) from 2006 through 2011. Now updated to include 32 AMA PRA category 1 credits, the PLI is orchestrated by the MSV Foundation and represents a renewed commitment to empowering clinical leaders throughout the Commonwealth. Small cohorts are nominated each year, and alumni have advanced to leadership positions throughout healthcare. Alumni include Chief Medical Officers and Executives at major health systems, a previous Secretary of Health and Human Services, a previous State Health Commissioner, and nine MSV presidents. The PLI serves as an incubator for MSV leadership, and plays an active part in succession planning as we equip the next generation of healthcare leaders in Virginia.

Beginning with a standardized inventory that helps one understand their leadership style and how they interact with others, our cohorts use the framework of self-discovery to empower their professional development through PLI. As our members complete the intensive and interactive curriculum, they leave with enough exposure to each discipline represented to 'speak the language' as they sit at a leadership table. Regardless of whether our alumni are looking to accelerate their leadership journey within a practice, within a health system, or within the community, they take a network

of like-minded leaders with them at the completion of the curriculum.

Through my service as the facilitator of the PLI, I am blessed by the tremendous gratification of interacting with our alumni in multiple leadership roles. I have had the pleasant surprise of seeing our alumni nominated to serve on boards in the community. I have seen them recognized by the MSV Foundation's Salute to Service awards. Several of our alumni took their PLI journey one step farther and are now enrolled in graduate school. Seeing the intentional development of our alumni as they build on their foundational experience at PLI gives me an incredible sense of pride! I would not be where I am in my career without the mentorship

of a PLI alumnus, and facilitating the Institute helps me 'pay it forward' to the next generation.

While we use a nomination process to curate our cohorts, we also accept direct interest without a nomination.

We recognize that many physician and clinical leaders are new in their

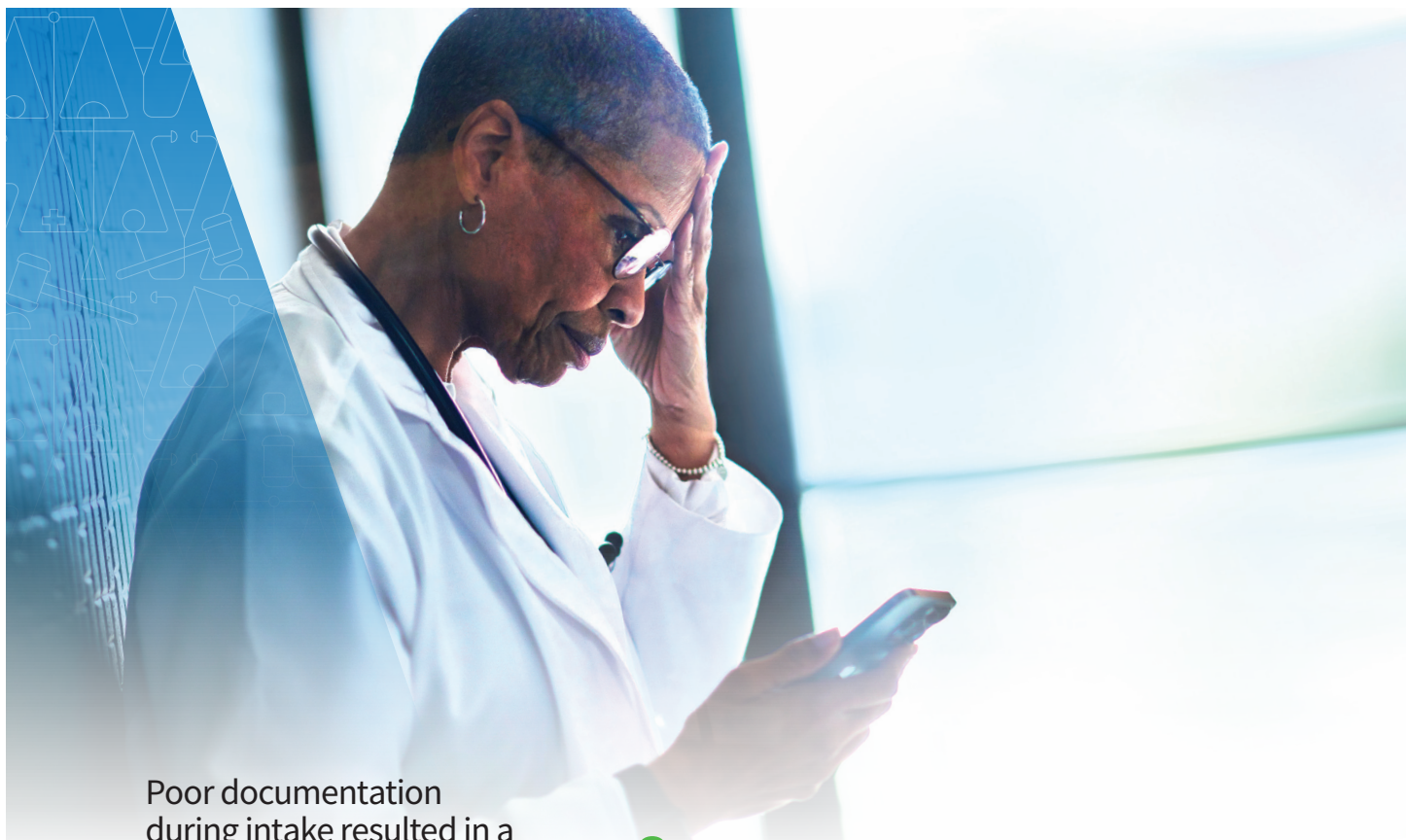
leadership journey and may not be active in the MSV yet. Joining a cohort paves the path for involvement in the Annual Meeting, in advocacy through our Advocacy Summit, and in engagement in the community of Medicine. The future leadership of the Commonwealth depends on leaders like you, and we look forward to having you join us!

Learn more at www.msv.org/PLI.

“Medical school and PA school prepares us to practice medicine, but it does not position us to be leaders in healthcare.”



Mark D. Townsend, MD, MHCM is the Executive in Residence of Bon Secours Mercy Health and the Vice-President of the MSV Foundation Board of Directors. He also serves as a Director on the MSV Board and as the facilitator of the PLI program.



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causing permanent
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MSV LEADERSHIP PROFILE
PRESIDENT ELECT

Q: What do you specialize in?

Dr. Bundy: Nephrology

Q: What is your favorite movie or TV Show?

Dr. Bundy: Star Trek (the OG)

Q: What book would you recommend for a fun, leisure read?

Dr. Bundy: The Kite Runner by Khaled Hosseini

Q: What book would you recommend to your fellow physicians to support in their professional life?

Dr. Bundy: The Alchemist by Paulo Coelho. Coelho tells the story of Santiago, an Andalusian shepherd boy who dreams of traveling the world in search of treasure. The Alchemist is a mystical tale of self-discovery and teaches the reader the importance of listening to your heart and follows your dreams.

Q: If you could go back and talk to yourself as a medical student, what would your advice be?

Dr. Bundy: Work on finding balance between your profession and spending time with those you love, especially family. Your children will grow up and that time will be forever lost...

Q: Why is being a member of the MSV important?

Dr. Bundy: It is an organization with a diversity of thought on the important topics we face so there are always great ideas to build upon. It is also a tribe of individuals with a common bond centered around the delivery of care, not only to those in our community but for ourselves.



*Joel T. Bundy,
MD, FACP, CPE*



2023

Salute to Service

AWARDS

Recognizing the Outstanding Efforts of Our Community

The Salute to Service Awards recognize outstanding efforts by a physician, medical student, or resident who has substantially improved patient care, both locally and abroad.

Join us in congratulating the winners of the 2023 Salute to Service Awards!

Service by a Medical Student or Resident



Shreya Mandava
*4th Year Medical Student –
University of Virginia
School of Medicine*

Service to the Uninsured and Underserved



Abraham Hardee III, DO, PhD
*Associate Chair of Family Medicine and
Rural Primary Care of the Edward Via
Virginia College of Osteopathic Medicine*

Service to the Profession



**L.D. Britt, MD,
MPH, D.Sc. (Hon)**
*Chair, Department of Surgery –
Eastern Virginia Medical School*

Service to the International Community



Jeffrey Mapp, MD, MBA
*Executive Director, Extra Mile Pediatrics
and Assistant Professor – Pediatrics,
Virginia Commonwealth University
Health System*

Service for Advancing Patient Safety & Quality Improvement



Raymond McCue, MD, MBA
*Former VPMA and Chief Medical Officer,
Chesapeake Regional Medical Center*

Is there someone you'd like to recognize? Nominations are open April through June annually.
Visit www.msv.org/foundation/salute-to-service-awards to learn more.



The MSV Foundation is Empowering *People who Help People.*

The MSV Foundation is dedicated to developing and managing programs that support physicians, residents, PAs, and medical students so they can focus on what they love, caring for patients and communities.

We do this through our many community and education programs designed to support YOU!



A clinician well-being program designed to take care of the entire healthcare team, providing support to reclaim work-life balance and joy!



A program designed to develop physicians' and PAs' leadership skills, enabling them to drive transformation and positive change in their workplaces and communities.



Virginia Mental Health
Access Program

A statewide initiative that helps health care providers take better care of children and adolescents with mental health conditions.



A partnership with the Virginia Department of Health to encourage medical practices and Virginians to be Stroke Smart.

A donation to the MSV Foundation ensures these necessary programs can continue! Make your donation today.
www.MSV.org/Foundation

Thank You, Second Century Circle Members

Your participation in the endowment supports MSV for its next 200 years.

Monroe Baldwin, MD
Arturo Saavedra, MD
Thomas Eppes, MD
Kathy Scarbalis, PA-C

Anthony Miller, PA-C
Cynthia C. Romero, MD
Danville-Pittsylvania
Academy of Medicine

To learn more about the Second Century Circle and how you can become a member, email Denise Kranich at dkranich@msv.org.



SERIOUS QUESTIONS ABOUT AI'S USE IN HEALTHCARE



In many ways, artificial intelligence (AI) seems like a panacea for what's wrong with healthcare, or, at the very least, for addressing challenges we want to improve. And when something seems too good to be true, our next question usually is: "What's the catch?"

In the medical community and beyond, there are serious questions about AI's use in healthcare — perhaps as many questions and concerns as there are benefits.

Modern medicine is faced with how to apply AI's remarkable capabilities with consideration for the questions and concerns — and, ideally, with solutions addressing them. Because the AI genie is already out of the bottle, we're parallel-pathing explorations of serious questions at the same time AI technology is racing forward at an astonishing pace.

In this article we highlight some of the key AI questions healthcare is facing, and some of the thinking around those questions.

Will AI replace healthcare providers?

If AI can do many things healthcare providers do, and in some cases do them better than humans, it's natural to question what happens to the humans. A Harvard Medical School article recently reported physicians are safe — for now: "It's unlikely that AI will completely replace physicians anytime soon. The human aspects of care, including empathy, compassion, critical thinking, and complex decision-making, are invaluable in providing holistic patient care beyond diagnosis and treatment decisions." The article continues: "So, rather than fully replacing physicians, AI will likely empower the practice of medicine, with physicians leveraging the technology to enhance clinical care. To this point, the American Medical Association recommends that technology be used to augment, rather than replace, human intelligence."

Is AI in medicine moving too fast?

Some say "no," reflecting on the fact that some video games have more sophisticated AI applications than is

accessible in healthcare. However, some say "yes," and are sounding the alarm on the need to examine things like security protocols, regulation, policy, training, risks, and ethical considerations. The majority of Americans are definitely in the "worried" camp. In a recent Pew Research Center study, 75% of respondents reported they're concerned healthcare providers will move too fast implementing AI in healthcare before fully understanding the risks for patients.

Is AI safe?

From this question a slew of sub-questions emerge about everything from protecting patient data to the malicious capabilities of intelligent technology. Bottom line: AI is as safe as we can make it — until we can't. An article by the Drexel University College of Computing & Informatics offers this perspective: "As AI is generally dependent on data networks, AI systems are susceptible to security risks. [With] the onset of Offensive AI, improved cyber security will be required to ensure the technology is sustainable. According to Forrester Consulting, 88% of decision-makers in the security industry are convinced offensive AI is an emerging threat. As AI uses data to make systems smarter and more accurate, cyberattacks will incorporate AI to become smarter with each success and failure, making them more difficult to predict and prevent. Once damaging threats out-manuever security defenses, the attacks will be much more challenging to address."

Is AI biased?

Like AI being as safe as we can — or can't — make it, AI is as biased — or unbiased — as we make it. Like the old saying "garbage in, garbage out," if AI software is trained on data sets that have biases, if it is poorly designed, or if

it has incorrect or unbalanced data, its outputs will reflect those biases. Eliminating data biases is a critical challenge to solve in order to ensure equity for diverse populations.

How will AI impact provider-patient relationships?

Because AI is not human, there's concern that increasing its use in medicine will result in colder interactions and loss of the human touch. In fact, in the Pew Research

The human aspects of care, including empathy, compassion, critical thinking, and complex decision-making, are invaluable in providing holistic patient care beyond diagnosis and treatment decisions.



Center study, 57 percent said they expect a patient's personal relationship with their healthcare provider to deteriorate with the use of AI in healthcare settings. On the other side of the coin, however, consider AI can and already is reducing physician workloads by streamlining administrative and clinical tasks, freeing physicians up for more patient face time and giving them more time to spend on critical cases.

The list of questions and concerns about AI in medicine goes on. And on. AI can lead to job redundancy and loss of employment. AI has a "black box" problem – because AI algorithms learn and improve over time, it can be difficult to know how a recommendation or diagnosis is determined. AI requires human input and surveillance to maximize its effectiveness – how will that be ensured, balanced, and monitored?

In fact, the World Health Organization (WHO) spent 18 months collaborating with experts to explore questions and concerns about AI in medicine. The 2021 report, "Ethics and Governance of Artificial Intelligence for Health," identifies ethical challenges and risks to using AI in healthcare. It outlines six consensus principles to ensure AI works for the public's benefit: protecting autonomy, promoting human safety and well-being, ensuring transparency, fostering accountability, ensuring equity, and promoting tools that are responsive and sustainable. You can download the full report on the WHO website.

Virtually every industry is examining questions and concerns about the use and development of AI. Healthcare may be unique in how expansive this process is, extending the full depth and breadth of medicine itself as well as to all the industries that support, regulate, guide, and interact with it.

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MSV LEADERSHIP PROFILE
SECRETARY - TREASURER

Q: What do you specialize in?

Dr. Mitchell: Family Practice

Q: What is your favorite movie or TV Show?

Dr. Mitchell: Star Trek, The Original Series. I was in the sixth grade when this series began in the fall of 1966. It sparked my imagination and opened my mind to a universe far beyond my mountain home in southwest Virginia. Although I didn't know her at the time, my future wife was also a fan of Star Trek. My love of science fiction has continued throughout my life. For this reason, my favorite movie is Star Wars, the original movie. My wife and I watched it in a theater in Columbia, South Carolina, while on our honeymoon in 1977.

Q: What book would you recommend for a fun, leisure read?

Dr. Mitchell: The Nightingale by Kristin Hannah. This historical fiction novel is about two estranged sisters living in Nazi-occupied France during World War II. Isabelle, the rebellious, adventurous sister, risks her life to save downed allied pilots and guide them on the perilous journey over the Pyrenees to neutral Spain. "The Nightingale" is Isabelle's codename in the French Resistance. Vianne is more of a homebody, left alone with her daughter while her husband is at war, but she also risks her life when she takes in the young son of a Jewish neighbor who was taken to a concentration camp. She pretends the child is her nephew to deceive the Nazi officer who is quartered in her home, and she later works to save other children from deportation to the camps. It is an inspiring although sometimes brutal story.

Q: What book would you recommend to your fellow physicians to support in their professional life?

Dr. Mitchell: The Seven Habits of Highly Effective People by Stephen R. Covey. There is a lot of wisdom in this little book. I found its advice about time management to be invaluable for running a successful practice and not risking burnout.



*Larry Mitchell, MD,
FAAFP*

Q: If you could go back and talk to yourself as a medical student, what would your advice be?

Dr. Mitchell: Love your patients, and don't let the system distract you from that love. Also, learn to type. You will not always have a transcriptionist, and voice recognition software is imperfect.

Q: Why is being a member of the MSV important?

Dr. Mitchell: Because, if you don't have a seat at the table, you will end up on the menu. We physicians need strong and constant advocates to represent us and enable us to practice good medicine and serve our patients in Virginia.

MSV LEADERSHIP PROFILE
SPEAKER OF THE HOUSE

Q: What do you specialize in?

Dr. Nedelka: I work in Radiation Oncology

Q: What is your favorite movie?

Dr. Nedelka: My favorite movie is Forrest Gump.

Q: What book would you recommend for a fun, leisure read?

Dr. Nedelka: I would recommend the book "Eat, Pray, Love: One Woman's Search for Everything Across Italy, India, and Indonesia" by Elizabeth Gilbert for a fun, leisure read. This book tells the story of a woman who has everything she'd ever wanted, but still isn't happy. She embarks on a journey of self-discovery against the backdrop of different cultures.

Q: What book would you recommend to your fellow physicians to support in their professional life?

Dr. Nedelka: I would recommend "The Spirit Catches You and You Fall Down: A Hmong Child, Her American Doctors, and the Collision of Two Cultures" by Anne Fadiman to my fellow physicians to support them in their professional life. This book illustrates a cultural division between Hmong immigrants and western medicine.

Q: If you could go back and talk to yourself as a medical student, what would your advice to yourself be?

Dr. Nedelka: If I could go back and talk to myself as a medical student, I would tell myself, "Always work hard for what's best for your patients, worry less about what attendings and colleagues think about you, and you'll never go wrong."



Michele Nedelka, MD

Q: Why is being a member of the MSV important?

Dr. Nedelka: I became a member of MSV at the beginning of medical school because I recognized that many physicians were complaining about medicine, but few were trying to steer the profession in a constructive, positive direction. I decided that, if I chose a medical career, I absolutely must simultaneously choose to work on solutions. MSV was the perfect vehicle for change.





MSV IS MAKING BIG MOVES!

2023, another successful year in the books for the Medical Society of Virginia! Through the work of our members, staff, and partners, we have accomplished so much this year.

Exceeded expectations with our strongest membership year in **over a decade**, with a net gain of over

675

dues paying, physician members.



Presented by **physician leaders**, MSV's membership program was showcased at at **dozens** of medical staff meetings, local society meetings, practice gatherings, and social events throughout the year.



Composed MSV Board-approved reports on **Hospital Medical Staff Self Governance** and **Housing as Healthcare**.

Received nearly

\$4 million

in the Virginia Budget to expand VMAP to **0-5-year-olds** and **perinatal mental health**.

Launched the **Physicians Foundation Grant** to support the onboarding of SafeHaven to **7 State Medical Societies** for both the *legal protections* and *well-being resources*.

Onboarded SafeHaven to many staff at the

28+ FQHC's

as well as select clinicians and staff at **all of the Free and Charitable Clinics**, increasing enrollees by nearly

2,000.

Managed a successful 2023 MSV House of Delegates meeting that saw increased engagement from delegates and medical students and considered

26

resolutions.

Raised

\$232,300

in Annual Meeting and Gala sponsorships.

Passed **all proactive legislation** in the 2023 General Assembly session, including *increasing the penalty for threatening a healthcare provider* and changing the language on all Department of Health Profession's applications to *destigmatize mental health treatment*.

Launched a successful Endowment campaign and **welcomed our founding members** of the Second Century Circle.

Developed criteria to define a **Stroke Smart Medical Practice** and gained approval from the **Virginia Stroke Systems Task Force**.

Achieved a retention rate of

98.5%

among MSV Insurance Agency clients



Redesigned and improved the SafeHaven website to **elevate the user experience.**

Held the first in-person VMAP REACH in September in Partnership with Carillion Children's Hospital, training

over 35 providers.

Led by the MSV Insurance Agency, we donated

over 74 pounds

of food to FeedMore



Partnered with the Virginia Department of Health to provide VMAP **pediatric mental health training** to Emergency Department providers with funding from HRSA.

All of this is made possible because of **YOU!**
We look forward to what 2024 will bring.



Join Our White Coats on Call!

While the Virginia General Assembly is only in session for two months, the House of Medicine needs your advocacy 365 days a year. Hospitals, health plans, and other health care stakeholders work on advancing their agendas year-round. If Virginia's physicians wait until January to make their interests known, it will be too late. By reaching out to legislators outside of session, you are establishing yourself as their go-to constituent for healthcare issues. Personal relationships are the key to strong advocacy and give MSV more power and influence at the Capitol.

Becoming a WCOC 365 member couldn't be easier. All you need to do is raise your hand (or check a box). No commitments. No costs.



By saying you want to be a 365 advocate, you will have access to:

Tailored advocacy training

Exclusive advocacy news updates
as issues arise

The support of MSV Government
Affairs and Policy staff

Membership-vetted
talking points

Early access to General Assembly
preview and wrap-up articles

Invitations to attend political
events in your area

By joining WCOC 365, you are joining the 'special forces' of MSV's advocacy work. We need as many members as possible to reach out and lobby their legislators year-round on issues important to patients and physicians. You can engage in a variety of ways, including:

- ▶ Take part in the MSV Advocacy Process – Advocacy Summit, Specialty Advisory Council, Advocacy Committee
- ▶ Share, Like and Comment on Social media
- ▶ Send letters to the editor of your local newspaper (MSV staff can help write)
- ▶ Email/call legislators
- ▶ Attend our lobby days
- ▶ Testify in committee
- ▶ Attend legislator events
- ▶ Host legislator visits in your practice
- ▶ Invest in MSVPAC
- ▶ Take part in the MSV and AMA resources for physicians interested in running for public office
- ▶ And more!

**To learn more or sign up today,
visit www.msv.org/WCOC or scan the QR code.**



MSV LEADERSHIP PROFILE

VICE SPEAKER

Q: What do you specialize in?

Dr. Marathe: I specialize in Gastroenterology.

Q: What is your favorite movie or TV Show?

Dr. Marathe: I love Stranger Things.

Q: What book would you recommend for a fun, leisure read?

Dr. Marathe: The Charm School by Nelson DeMille, a cold war spy thriller where U.S. POWs are forced to teach KGB agents how to be model U.S. Citizens. It's a thrilling read.

Q: What book would you recommend to your fellow physicians to support in their professional life?

Dr. Marathe: Mindset: The New Psychology of Success by Carol S. Dweck, PhD. This book demonstrates how powerful a person's mindset can really be.

Q: If you could go back and talk to yourself as a medical student, what would your advice be?

Dr. Marathe: I'd tell myself to learn and understand the business and political aspects of medicine. I'd also encourage myself to cultivate hobbies and interests outside of medicine.

Q: Why is being a member of the MSV Important?

Dr. Marathe: The MSV offers us opportunities to advocate for issues that impact our profession and that of our patients. You get to be involved in the policymaking process.



**Atul V. Marathe,
MD FACP**



4 BIG WAYS MEDICAL STUDENTS BENEFIT FROM MEMBERSHIP WITH MSV



By Mary Beth McIntire,
Chief Programs Officer

When entering medical school, your first few weeks of orientation are packed with lectures and activities from the dozens of clubs and organizations you've been given the opportunity to join; each with a unique value proposition and list of benefits. Most clubs are clearly understood from their title such as the pediatric student interest group, yoga club, and women in medicine. You know what you're signing up for.

Then you come across The Medical Society of Virginia (MSV), and its joint membership package with The American Medical Association (AMA), which fall into the category of organized medicine. You've probably heard of AMA in the news while reading how physicians were managing the COVID-19 pandemic. But what does becoming a member of MSV and AMA mean? And how can you take advantage of your membership to strengthen your medical school career?

The AMA represents physicians, medical students and patients on a national scope, lobbying Congress, while the MSV represents physicians, medical students and patients on a state scope, lobbying the Virginia General Assembly. The MSV and AMA are both led by their members: physicians, residents, and medical students. All policies, advocacy efforts, and organizational goals are debated and voted on by members – and medical students have a powerful voice and vote!

As a medical student member, you can take advantage of a combined membership with MSV and AMA for the duration of your medical school career. You get to decide how you'll use your membership. Regardless of how engaged you become, the fact that you're a member makes an impact in MSV and AMA's advocacy work. More members equal greater influence in achieving important goals such as increasing access to care for our most vulnerable populations, or ensuring physicians can do what's best for their patients without legislators or regulators dictating how care should be provided.

For medical students looking for more from their membership, medical students can have a major impact on changing healthcare through AMA and MSV.

Crafting Policy

Virginia medical students have been successful in crafting state and national policy through authoring resolutions. Several examples include:

- ▶ AMA – New policy to oppose the discriminatory blood donor criteria for gay and bisexual men
- ▶ MSV – New policy to support increased access and coverage for HIV-PREP
- ▶ MSV – New policy protecting care for individuals regardless of immigration status, gender identity, or expression

Leadership Positions

Medical Student Members are given the opportunity to hold leadership positions through MSV and AMA. The leadership opportunities include:

- ▶ Leading your school's AMA/MSV chapter
- ▶ Serving on a state or national medical student section (MSS) committee:
 - ▶ MSV has standing committees on advocacy, community outreach, and member engagement
 - ▶ AMA has committees focusing on topics such as bioethics and humanities, economics and quality in medicine, and minority issues.
- ▶ Leading the MSV MSS on the MSS Executive Committee
- ▶ Joining AMA MSS's Region 6 Leadership Board, leading medical students from VA, DC, MD, NJ, and PA
- ▶ Representing medical students on one of MSV's Boards: MSV Board of Directors, MSV Foundation Board of Directors, or MSV Political Action Committee Board of Directors

Access to Healthcare Influencers

Attending MSV and AMA meetings and events grant you with direct access to healthcare influencers and legislators.

- ▶ MSV and AMA hold lobby days for you to meet with your state legislators in Richmond, Virginia (MSV) and federal legislators in DC (AMA)
- ▶ Past speakers and attendees that students have met with at AMA and MSV conferences include leaders such as: national specialty society presidents, The Surgeon General, The Governor of Virginia, Virginia's Health Commissioner and CEOs and Chief Medical Officers of hospitals and health tech companies.

Connect with Students and Physicians

Woven throughout all MSV and AMA events and leadership opportunities is the opportunity to connect with passionate medical students seeking to positively impact healthcare at your school, throughout Virginia, and throughout the nation. The friendships and professional relationships formed will have a lasting impact! The community powerfully galvanizes around doing what is right for patients and physicians.

You've earned the opportunity to join the hundreds of thousands of physicians and medical students who are members of AMA and MSV. Take advantage of a joint MSV + AMA membership to support our efforts to make Virginia and America the best place to practice medicine and receive healthcare!

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