



AAPHP E-News, January 28, 2009

This is an electronic update for members and friends of the American Association of Public Health Physicians (AAPHP). We issue this from time to time, whenever several items of interest come to our attention.

Please send items of interest for the E-News -- and any other feedback -- to E-News editor [Kevin Sherin, MD, MPH](#). . Thanks!

MARK YOUR CALENDARS: AAPHP Meets in Chicago at the AMA, June 13-15, 2009!

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1) Challenge to the FDA/Tobacco Bill, 2009:

Over the past two years, the AAPHP Tobacco Control Task Force has been actively engaged in addressing issues related to the FDA/Tobacco bill introduced last year by Congressman Waxman and Senator Kennedy.

This bill, titled The Family Smoking Prevention and Tobacco Control Act, is a 160 page piece of legislation that purports to give FDA authority to regulate tobacco product manufacturing, labeling, and marketing. It has been heavily promoted and is widely supported in House, Senate and among health-related organizations.

The summary used to promote the bill sounds very promising. The bill itself, as seen by the detailed analysis done by the AAPHP Tobacco Control Task Force, is severely flawed. In our opinion, if passed in its current form, it would do more harm than good in terms of future rates of teen smoking and future rates of tobacco-related illness and death.

The bill was negotiated with Altria/Philip Morris.

Its provisions are out of step with what we know about how tobacco products produce illness and death.

It effectively prevents the FDA from taking any action that might displease this largest of American tobacco companies.

Our challenge document (one of many related papers posted on www.aaphp.org, under Tobacco Issues) outlines eight major problems with the bill and urges that concerned public health physicians

and others petition their Representatives and Senators to urge Waxman and Kennedy to amend the bill before it is reintroduced into the new 111th Congress.

2) President Obama and Healthcare reform

President Obama was elected on mandates of Hope and Change. Health care reform is at the top of his new administration's agenda for both hope and change.

The Congress already has bi-partisan legislation readied in both houses of Congress with Senator Baucus (D-MT) and Senator Grassley (R-IA) sponsoring legislation in the Senate. The last time that the US addressed health care reform was in the early 1990's.

AAPHP expects this to have a fast track. We have signed on with other public health organizations to advocate a meaningful role for public health in the new health care system.

Local meetings to organize stakeholders are taking place throughout the US. Consider joining one of these local meetings in your own state or city.

Go to www.change.gov and click "health care reform" for more information.

3) AMA Resolutions at November Interim Meeting in Orlando

The AMA Interim meeting in Orlando passed the AAPHP resolution on text messaging and injury prevention.

Your AMA delegates, Arvind Goyal and Joe Murphy, represented AAPHP and the resolutions very well in committees and in the AMA House of Delegates.

This resolution was one of a handful that were highlighted in the AMA News.

AAPHP is your voice in the AMA House of Delegates.

Please consider writing important resolutions now for the AMA Annual Meeting in June at Chicago. E-mail your resolutions to Dr. Goyal at "arvindkgoyal@aol.com".

4) Third-hand Smoke

Geoffrey Kabat is a senior epidemiologist at the Albert Einstein College of Medicine in New York City. He has written a critique of the current research on the topic of third-hand smoke. Please click the link and read his commentary based on a study from the journal "Pediatrics". Is it a political ploy? Or is it based on sound science? What would you advise for your patients, your community and for public policy?

AAPHP members need to read Geoffrey Kabat's blog from the Columbia University Press, Third hand smoke.

<http://www.cupblog.org/?p=493>

5) Financial Incentives for EHR adoption

The Certification Commission for Healthcare Information Technology (CCHIT) is a not-for-profit Federally recognized entity that certifies electronic health records (EHR) in ambulatory clinical settings.

\$700 million has gone to EHR adoption nationally, offering 47,000 physicians access to funds for acquiring and implementing EHR. CCHIT has identified

55 programs which subsidize medical offices with bonuses of as much as \$58,000 per provider.

E-prescribing alone adds quality, improves patient safety, and improves clinic throughput. The incentivized 5-year program is gearing up in 12 states and regions. "Bridges to Excellence" is a quality-improvement recognition and rewards program for physicians. Starting in Jan. 1, 2009, and continuing through 2010, Medicare will pay a bonus of 2 percent of all allowed billings for professional services. That bonus tapers to 1 percent in 2011 and 2012, and 0.5 percent in 2013.

Here's the other side of the coin: In 2012, physicians still not prescribing electronically pay a 1 percent penalty, increasing to 1.5 percent in 2013 and then 2 percent indefinitely.

All of the incentive programs are summarized at:

<http://ehrdecisions.com/incentive-programs>.

For more information, and for possible collaboration, contact Lauren Hames or Public Communications Inc.,
35 E. Wacker Drive, Ste. 1254 Chicago, IL 60601; 312-558-1770 ext. 118.

6) Physician Training in Preventive Medicine:

Shannon Mejri, from the American Cancer Society, asked us to publicize the following opportunity for Physician Training Award in Preventive Medicine, which has a deadline of April 1, 2009.

The American Cancer Society, invites applications from qualified institutions for the Physician Training Award in Preventive Medicine. This award is designed to support the training of physicians in preventive medicine with an emphasis on cancer prevention and control. The objective of the award is to increase the number of preventive medicine residency programs offering high quality training in cancer prevention and control, and, ultimately, the number of preventive medicine specialists engaged full or part-time in cancer prevention and control.

Awards are for four years in the total amount of \$300,000, based on an average of \$50,000 per resident training year. These grants are renewable.

How to Apply: Apply Electronically. You may obtain more information by visiting our web site at www.cancer.org/research. To access application information, select Funding Opportunities > Index of Grants.

The annual deadline for applications is April 1.

If you have program-specific questions, please contact Virginia Krawiec, MPA at 404-329-7612 (voice), 404-321-4669 (fax), or Ginger.Krawiec@cancer.org (E-mail).

7) AAPHP management services contract

The AAPHP has a new management services contract, with Comprehensive Association Management (CAM) from Green Cove Springs, FL. The Executive Director for CAM, our new ED, is Sandy Magyar. Sandy is a seasoned Association Management consultant who is also a past president of the Southern Health Association and the Florida Public Health Association.

The Board and I have confidence that Sandy can succeed in handling management services and that you will see an improved quality in the level of service for the annual dues that you each pay. Sandy's email address is magyarsf@bellsouth.net.

Please bring your own membership status to current active status and consider a 2009 commitment to Sustaining or Supporting membership status. For our various membership categories, please visit our website at <http://www.aaphp.org>.

8) Membership, Recruitment, and Program Planning

Our esteemed Vice President, Neil Winston, MD, is our membership chair and program chair for 2008-2010.

Please make tell five of your colleagues about AAPHP in the next month.

What are the benefits of AAPHP Membership?

1) Advocacy efforts within the AMA.

2) Representing and supporting physicians who work and practice in public health, AAPHP is the only national organization that advocates to improve job opportunities for public health physicians.

- 3) Influence on tobacco and other policies at the National level.
- 4) E news monthly.
- 5) Specialty society benefits at a very low cost of only \$95 for full dues paying members.

Also please consider helping Neil Winston (and our new ACPM liaison Herman Ellis, MD, MPH, Deputy Health Commissioner in Delaware) in helping to select our program speaker for the annual meeting at Chicago.

Dr. Winston's email is nwinston@pol.net .

9) To Join AAPHP

AAPHP is the voice of public health physicians and welcomes all physicians who are committed to the public's health. AAPHP accomplishes its work with a maximum of volunteer labor and a minimum of cash expense.

We are proud to make the E-News and other AAPHP materials available without charge to physicians and medical students interested in public health. If you haven't done so already, please download AAPHP's 2009 Membership Form right away at <http://www.aaphp.org/Membership/2009MembForm.pdf> and send it to us by fax or postal mail.

Please make your 2009 membership as generous as you can. Consider "Supporting" or "Sustaining" membership for 2009 if you are able to do so.

AAPHP is a 501(c)(6) professional membership organization that informs and represents Public Health Physicians. AAPHP dues may be deductible as an "ordinary and necessary business expense" under the Internal Revenue Code. Details may differ based on your individual situation.

AAPHP dues can be paid by credit card -- either by faxing the membership form to (847) 255-0559 or by calling the AAPHP Secretary's secure mobile/voicemail at (360) 870-2483.

Please also tell your friends and colleagues about AAPHP's representation of Public Health Physicians.

E-News subscriptions are still free, on request, to any interested physician or medical student. We welcome new subscribers and members.

Thank you for your support!

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***** About AAPHP E-News *****

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