FAMILY MEDICINE SECTION PROGRAM

Millard Collins, M.D., Section Chair Proposed Maximum # of CME 21.5

Saturday, July 29

7:30 – 12:00 Annual Walk a Mile with a Child

1:00 – 3:00 Edward C. Mazique, M.D. Symposium

Sunday, July 30

8:00 – 8:05 **Welcome**

Millard D. Collins, M.D., FAAFP

Chair, NMA Family Medicine Section

8:05 – 8:30 **Resident Presentations**

Moderator Riba C. Kelsey, M.D., MSCR, FAAFP

Associate Professor of Clinical Family Medicine Director, Family Medicine Residency Program Assistant Dean of Graduate Medical Education

Morehouse School of Medicine

Atlanta, Georgia

9:00 – 11:00 Edith Irby Jones, M.D. Plenary Symposium

Afternoon Sessions

2:00 – 2:45 John Chissell, M.D. Memorial Complementary Medicine Lecture

Heal the Healer

Melissa Walker, DO, MPA

Assistant Professor

Osteopathic Principles and Practice – Clinical Integration

The University of the Incarnate Word School of Osteopathic Medicine

Primary Care Physican/Owner

Carol Clinic for Family-Centered Healthcare

San Antonio, Texas

2:45 – 3:45 American Board of Family Medicine (ABFM) Update

What's New to Support Your Certification Journey?

ABFM was the first primary care specialty board of the ABMS. ABFM's primary role is to support family physicians who are committed to achieving excellence in improving the health of their patients, their families, and their communities. Certification is voluntary and requires attaining high standard and a lifelong commitment to learning and professional development. Understanding the recertification process allows physicians to be better prepared to meet and maintain certification standards without causing undue stress or taking away from their important clinical time.

Following this lecture, attendees should be able to: 1) 1. Describe the purpose and value proposition underpinning continuous board certification; 2) Articulate recent improvements to the certification process and activities, including the longitudinal assessment alternative to the one-day exam, new and improved self-assessment options, and more relevant and seamless ways to meet the PI requirement; and 3) Discuss issues related to Professionalism in Family Medicine

Introduction Warren A. Jones, M.D.

Family Physician and Adolescent Medicine Specialist Chief Health Officer, The Jones Group of Mississippi

Ridgeland, Mississippi

Speaker Gary Lewis LeRoy, MD, FAAFP

Senior Vice President of Diplomate Experience

American Board of Family Medicine

Monday, July 31

8:00 – 9:30 Inclusion, Diversity, and Equity: Importance for Patients with an Advanced Illness

In the context of social determinants of health, this symposium will explore the importance of inclusion, equity and diversity for persons with an advanced illness. Panel members will share strategies based on years of experience that enable necessary conversations and access to

Panelists B. David Blake, MD, DABFM

President, Georgia State Medical Association

Associate Medical Director VITAS Healthcare of Atlanta

Diane Deese, MCLSS-GB, CDEI-HC, CACPFI, CDEI-PM, EMT

Vice President of Community Affairs

care, including hospice and palliative services, earlier in the disease process.

VITAS Healthcare

Kristopher T. Halsey, PhD, D.DIV Bereavement Services Manager VITAS Healthcare of Philadelphia

9:30 – 11:00 **Telemedicine Update**

The Family Medicine Section of the NMA has been at the forefront in increasing access to care in Telemedicine. The Covid-19 national emergency and public health emergency (PHE) were declared on January 27, 2020. On May 11, 2023, the PHE expired. As a result, the care of our patients has been greatly impacted. For example, it is estimated that Millions of Americans will lose health insurance

coverage under Medicaid. Congress banned the states from disenrolling patients from the Medicaid program during the PHE. Because of this, during the PHE, Medicaid enrollment surged 30%. Which resulted in more than 83 million lives covered.

In December 2022, Congress severed the Medicaid protections. This means that if a person no longer met Medicaid eligibility, then states were allowed, at that point, to start withdrawing people from Medicaid, beginning April 2023.

The American Academy of Family Physicians wrote to the Senate Telehealth Working Group in response to a request for feedback in looking at the reintroduction of the Creating Opportunities Now for Necessary and Effective Care Technologies for Health Act. (CONNECT) The AAFP addressed our concerns as Family Physicians regarding pay equity in Telemedicine, and access to care for our patients. In addition to this, the AAFP informed congress that the rise in inbox messaging and other digital tools have placed an unforeseen burden on physicians, clinicians, and staff. Lastly, the AAFP also addressed, what boots on the ground Family Physicians, did not see coming, is the impact of direct-to-consumer marketing of our patients. The AAFP offered guidance to Congress on how to prevent direct-to-consumer marketing from disrupting the patient-physician relationship.

Physician Burnout is ever-present. According to Forbes, 1.7million people left their healthcare jobs in the last year.

Telemental Health

For the last 3 years, the need for patients with mental health conditions has been on the rise. In the height of the pandemic, rates of suicide increased. According to the CDC, since 2020, "The new provisional data show the number of suicides increased from 45,979 in 2020 to 47,646 in 2021" Isolation, fear of potentially contracting a deadly illness, loss of loved ones, and loss of income exacerbated the need for help. Improving access to care in mental health, as in the treatment of all conditions was immediately necessary.

"PMHCA, a program developed to aid in the care of children with mental illness, has helped address increased mental and behavioral health needs in light of ongoing workforce shortages by meeting children and adolescents where they are. In Fiscal Year 2020, approximately 3,000 children and adolescents in 21 states were served by pediatric primary care providers who contacted the pediatric mental health team. Two out of every three of these patients lived in rural and underserved counties."

"More than one-third of the U.S. population lives in areas that are underserved by mental health professionals, and more than half (56%) of adults with a mental illness currently receive no treatment" In developing this program for adults, we can help close this disparity gap.

Telemedicine and the Law

The end of the PHE has removed protections, that physicians have had during the PHE in HIPPA compliance. The use of a HIPPA compliant platform is now required.

Family physicians must continue to use Best Practices in the care of our patients both in the live office and our virtual offices and avoid potential pitfalls. In private practices as well as in large medical groups, it is important to onboard new physicians and Advanced Practice Professionals (APPs) in the training of Best Practices, as well as the staff that they are working with.

This includes the review of the Board Rules on the practice of Telemedicine in their respective states. In addition, it is recommended that every physician, APP, and staff member reviews these guidelines annually.

REFERENCES

- 1. Covid- 19 Public Health Emergency Waivers and Flexibilities Status Update by the Association of American Medical Colleges
- 2. https://www.aafp.org/news/government-medicine/connect-act-telehealth.html
- 3. https://www.aafp.org/dam/AAFP/documents/advocacy/health_it/telehealth/LT-Congress-CONNECTforHealthAct-013023.pdf
- 4. Kaiser Family Foundation, "Mental Health Care Professional Shortage Areas (HPSAs)." Updated September 30, 2022. Available at: https://www.kff.org/other/state-indicator/mental-health-care-health-professionalshortage-

areashpsas/?currentTimeframe=0&sortModel=%7B%22colld%22:%22Location%22,%22sort%22:%22asc%22%7D

5. Mental Health America, "Access to Care Data 2022." Available at:

https://mhanational.org/issues/2022/mentalhealth-america-access-care-data

6.https://www.cdc.gov/nchs/pressroom/nchs press releases/2022/20220930.htm#:~:text=The%20findings% 20are%20featured%20in,2020%20to%2047%2C646%20in%202021.

7. https://www.forbes.com/sites/debgordon/2022/05/17/amid-healthcares-great-resignation-burned-out-workers-are-pursuing-flexibility-and-passion/?sh=3fe7dfa57fda

Following this symposium, attendees should be able to:1) discuss the changes in CMS guidelines in the treatment of patients via Telemedicine post the end of the PHE; 2) discuss the impact of the Covid-19 pandemic on the care of our patient's mental health needs; 3) discuss how to care for our patients via Telemedicine to decrease health disparities; 4) understand how to avoid the legal pitfalls in the care of our patients via Telemedicine; 5) increase awareness of what is coming next in the landscape of care of patients via Telemedicine; and 6) recognize the rise in inbox messaging and other digital tools that has placed an unforeseen burden on physicians, clinicians, and staff.

9:30 – 9:35 Moderator	Welcome Angela Y. Mosley-Nunnery, M.D, ABFM Assistant Professor, Baylor College of Medicine Area Medical Director and Chair- Texas Division Physician Enterprise Telehealth Committee Baylor St. Luke's Medical Group/ CommonSpirit Health
9:30 – 9:35	What's Next? Angela Y. Mosley-Nunnery, M.D, ABFM Assistant Professor, Baylor College of Medicine Area Medical Director and Chair- Texas Division Physician Enterprise Telehealth Committee Baylor St. Luke's Medical Group/ CommonSpirit Health
9:50 – 10:15	Telemental Health Rahn Bailey, MD, D.F.A.P.A. 113th President National Medical Association

Chair, Department of Psychiatry Louisiana State University School of Medicine New Orleans, Louisiana.

10:15 - 10:45 **Telemedicine and the Law**

Tricia C.K. Hoffler, J.D.

78th President of the National Bar Association

CEO, The C.K. Hoffler Firm

10:45 – 11:00 Questions and Answers

11:00 – 1:00 Visit the Exhibits

Afternoon Sessions

1:00 – 2:30 Wiley T. Armstrong, M.D. Memorial Symposium

Diversity in MedicineKelly C. McCants, M.D.
Acting Executive Director

Norton Healthcare Institute for Health Equity

Louisville, Kentucky

2:30 – 3:30 Promoting Heart Health Equity in Primary Care: Using Point-of-Care

Artificial Intelligence Technology to Overcome a Crisis in Primary

Care Misdiagnosis of Valvular Heart Disease

Following this session, participants should be able to: 1) Develop an evidence-based understanding of cardiovascular disease related disparities and how they will impact clinical practice in the future; 2) Discuss currently available technological innovations and how they can be used to make clinical primary care practice more efficient and allow for reimbursement optimization; and 3) Develop a practical, cost-effective primary care model to achieve health equity in underserved populations.

Introduction Mercy Obeime, M.D., DIMPH

Director of Community and Global Health, Franciscan Health Director of Public Health Training, Marion County Public Health

Department

Co-Founder, Timmy Global Health

Indianapolis, Indiana

Presenter V. Antoine Keller, M.D., FACC, FACS

Clinical Assistant Professor

Department of Surgery, School of Medicine Louisiana State University Health Sciences Center

Lafayette, Louisiana

Cardiovascular, Thoracic and Endovascular Surgeon

Ochsner Lafayette General Hospital

Lafayette, Louisiana

3:30 - 4:00	Break
4:00 – 5:30	Presidential Session on Sickle Cell Disease Roland B. Scott, M.D. Memorial Symposium: Childhood to Adulthood: Life course implications of Sickle Cell Disease Care Delivery Systems and Discovery Historical Background
Moderator	Yasmin Tyler-Hill, M.D., FAAP Chair, NMA Pediatric Section
4:00 – 4:20	Transition of Care from Childhood through Adulthood Michael Rutledge DeBaun, M.D., MPH Director, Vanderbilt-Meharry Center for Excellence in Sickle Cell Disease Professor of Pediatrics and Medicine Vice Chair for Clinical and Translational Research Department of Pediatrics Nashville, Tennessee
4:20 – 4:25	Q&A
4:25 – 4:45	Biree Andemariam, M.D. Professor of Medicine University of Connecticut Health Farmington, CT 06030
4:45 – 4:50	Q&A
4:50 – 5:10	Ofelia A. Alvarez, M.D. Director, Pediatric Sickle Cell Program University of Miami Health System Miami, FLorida
5:10 – 5:15	Q&A
5:15 – 5:30	Panel Discussion

Tuesday, August 1

Morning Sessions

7:30 – 9:30 **APOL1-Mediated Kidney Disease Symposium**

This symposium is designed to raise awareness and understanding of the rare APOL1-meditated kidney disease. APOL1 genetic variants account for much of the excess risk of chronic and end stage kidney disease of people of African descent. APOL1 is driven by

genetic factors, is undiagnosed, and APOL1 explains the disproportionate rate of kidney disease in people of African descent. Symptoms do not present until the kidney is damaged, and current therapies for APOL1-meditated kidney disease do not treat the genetic cause of this disease and often do not stop progression to kidney failure. Increased awareness and understanding of the genetic causes of this rare kidney disease could lead to early diagnosis and care for some of the most vulnerable populations and empower and educate those

at-risk on how to manage it.

7:30 – 7:40 Introduction and Pre-Test
Moderator Warren A. Jones, M.D., FAAFP

APOL1 and its role in health and disease

APOL1 mutations were most likely developed in antiquity to protect Sub-Saharan Africans from trypanosomiasis (sleeping sickness). APOL1 mutations predispose to Various forms of kidney diseases: HTN, HIVAN, CKD, Rates of many types of severe kidney disease are much higher in Black individuals than most other ethnic groups. Much of this disparity can now be attributed to genetic variants in the apoL1 (APOL1) gene found only in individuals with recent African ancestry. APOL1 mutations predispose to Various forms of kidney diseases: HTN, HIVAN, CKD. We address APOL1 induced renal injury and targets for therapy. These variants greatly increase rates of hypertension-associated ESRD, FSGS, HIV-associated nephropathy, and other forms of nondiabetic kidney disease. We discuss the population genetics of APOL1 risk variants and the clinical spectrum of APOL nephropathy. We also consider clinical issues that arise for the practicing Physician caring for the patient who may have APOL1 kidney disease.

7:40 – 8:15	Randall Maxey, M.D.
	Nephologist
	Inglewood, California

8:25 – 9:00 Clara Wade Truesdell, M.D.

Partner and Medical Director, Fresenius Kidney Care

N. Gwinnett Dialysis Center LLC

Partner, Berkley Lake Dialysis Center LLC Medical Director, Fresenius Kidney Care Stone Mountain Dialysis Center, LLC

President's Hypertension and Kidney Consultants of Georgia

Atlanta, Georgia

9:00 – 9:10	Post-Test and Audience Participation
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9:10 – 9:30 Audience Participation / Panel Discussion

9:30 – 9:45 Break

9:45 – 11:00 The Tridemic: COVID-19, Respiratory Syncitial Virus, and Influenza The Importance of Immunization

combined session with the Pediatric Section

Tanya Rogo, MD, MPH&TM, FAAP

Fellowship Program Director, Pediatric Infectious Diseases

Associate Professor of Pediatrics, Clinician Educator

Brown University Alpert Medical School

Providence, Rhode Island

Dial Hewlett, M.D. Medical Director

Westchester County Department of Health Clinics

Westchester, New York

11:00 – 1:00 Visit the Exhibits

Afternoon Sessions

1:00 – 2:30 Andrew A. Best, M.D. Memorial Lecture

Introduction Javette Orgain, M.D., MPH, FAAFP

Family Medicine Physician

Chicago, Illinois

Speaker Tochi Irochu-Malize, M.D., MPH, MBA, FAAFP

President, American Academy of Family Physicians

2:30 – 3:15 The Impact of the Memphis Meharry Medicos Fellowships in Family

Medicine Obstetrics: 1999-2023. Open Access, Higher Quality, Lower

Cost for the Patients and a Budget Surplus for the Dean.

The Benefits of in-office Ultrasound – Enhancing Revenue Stream

William M. Rodney, M.D. Family Medicine Physician

3:15 – 4:00 Family Planning in the Age of Dodd

Wednesday, August 2

Morning Session

8:00 – 11:00 Sports Medicine: A Primary Care Affair – Hot Topics

combined session with the Pediatric Section

Primary care providers are at the front line of decision making regarding young athletes: Should they participate? Can they safely RETURN to activity? When and to whom to refer for specialty care?

8:00 – 8:10 Overview and Introduction

Moderator: Angela Wheeler, M.D.

Chicago, Illinois

8:10 – 8:55 Sports medicine basics: The Importance of the Pre-Participation

Physical, Preseason cognitive tests - baseline for concussion care

Asthma, Heat/Hydration, Update on injury care

Larry L. Benson, M.D., CAQSM Sports Medicine Physician

	Shelley Street-Callender, M.D. Sports Medicine Physician
8:55 – 9:40	Sports and Cardiology: Hot topics Cardiac Arrythmia Disqualifying cardiac abnormalities, The hypertensive athlete
9:40 – 10:25	Sports Psychology: Hot topics for your consideration Effect of COVID-19 Pandemic, social media, Transgender athlete
10:25 – 11:00	Panel Discussion / Audience Participation