

Staffing Shortage in Health Care

Practices Step Up Recruitment and Retention

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David M. Nowak, Executive Editor dnowak@slmms.org

James Braibish, Managing Editor **Braibish Communications** editor@slmms.org

Graphic design by Lisa Troehler Graphic Design, LLC

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- Impact on Local Practices By Jim Braibish, St. Louis Metropolitan Medicine
- Why the Shortage? What Is Being Done? By Katie Kenison, Favorite Healthcare Staffing



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ST. LOUIS METROPOLITAN MEDICINE NOW QUARTERLY

St. Louis Metropolitan Medicine contains timely news and features impacting medicine in the St. Louis area. For current SLMMS news, watch for the Member Update email about the 15th of each month. If you are not receiving the Member Update, contact Dave Nowak at dnowak@slmms.org.

Next issue: March 1 | Article and ad space reservation deadline: Feb.1

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Removing the Stigma from Mental Illness

Physicians should recognize problems of anxiety and depression and prioritize self-care

By M. Laurin Council, MD, MBA, FAAD, FACMS, President, St. Louis Metropolitan Medical Society 2023



M. Laurin Council, MD, MBA, FAAD, FACMS

And if you can't see mental illness, you don't necessarily know that it exists, and it's incredibly challenging to monitor something that you can't easily, objectively measure.

he SLMMS continuing medical education workshop earlier this year offered members the opportunity to hear from a variety of speakers around the subject, "Coping with Change Post-Pandemic: Building and Sustaining a Healthy Foundation in Medical Practice." One of the speakers was Jessi Gold, MD, MS, assistant professor and director of wellness, engagement and outreach in the Department of Psychiatry at Washington University School of Medicine. Although her presentation focused on finding meaning and self-compassion in a challenging workplace, one of the most moving moments of the discussion was when Dr. Gold disclosed that for years, she personally felt shame in the fact that she took an anti-depressant and saw a therapist. Why are we, physicians, still struggling with stigma around mental health?

For me personally, the topic of mental health sometimes comes up when I'm asked about my family. On a random Thursday, 16 years ago last month, my life was changed forever when my oldest brother, David, committed suicide at my parents' home. I felt so helpless and distraught when it occurred, knowing that there was nothing that I could do to change the situation. I vowed to do what I could to prevent this from happening to anyone else. I vowed to take mental illness seriously.

I honestly believe that mental illness is something that I will never fully understand. I'm a dermatologist; my world is visual. Yet mental illness is something that you can't always see. And if you can't see mental illness, you don't necessarily know that it exists, and it's incredibly challenging to monitor

something that you can't easily, objectively measure.

But a quick look at the data around mental illness will show some alarming trends. According to the National Alliance on Mental Illness (NAMI), 1 in 5 U.S. adults experiences mental illness, 1 in 20 U.S. adults experience serious mental illness, and 17% of youth 6-17 years of age experience a mental health disorder.¹

Additionally, the presence of mental illness can have a ripple effect on other aspects of an individual or society's well-being. For example, people with depression are 40% more likely to develop cardiovascular and metabolic disease than the general population. A third of individuals with mental health conditions additionally suffer from substance abuse. The rate of unemployment of individuals with mental illness is higher than those who do not have mental illness. In the U.S., serious mental illness is estimated to cause \$193.2 billion in lost earnings annually. Across the global economy, depression and anxiety cause \$1 trillion in lost productivity.1

What Can Physicians Do?

So what can we as physicians do to combat these statistics? First, as Dr. Gold so eloquently described, we have to be comfortable talking about the problem. Physicians are in a unique position to influence the public perception of mental illness, and as such, we have to remove the stigma. We have to normalize discussions around anxiety and depression so that our patients, families and colleagues are comfortable sharing their feelings with

us. We must create an environment supportive of open communication, for without open communication, we may not fully understand the depth and breadth of mental illness in our community.

In the process of creating this open environment, it's important that we also prioritize our own well-being. A 2018 study published in the Journal of Internal Medicine highlighted some of the consequences to patient care from lapses in physician well-being.² Physician burnout is associated with a doubled risk of medical error and a 17% increased odds of being named in a medical malpractice suit. Additionally, such errors are associated with worsening burnout and depressive symptoms, suggesting a bidirectional relationship. Another consequence of decreased well-being is decreased productivity and even leaving medicine altogether. A physician can't take care of others if he or she doesn't take care of themselves first.

It's incredibly difficult to speak openly about mental illness, but also so incredibly important. Being open and honest about our own experiences with anxiety and depression invites others to be open and honest about theirs.

We as physicians have a duty to promote well-being of others. We must normalize conversations around mental illness and the treatments and resources that are available. As part of our community outreach events, we have to include mental health education to the same extent that we promote awareness of other conditions such as cardiovascular disease and cancer.

We must advocate for our patients at the local, state and federal levels for improved access to mental health care and resources.

Like Dr. Gold mentioned, it's incredibly difficult to speak openly about mental illness, but also so incredibly important. Being open and honest about our own experiences with anxiety and depression invites others to be open and honest about theirs. This dialogue will allow us to identify and help others who are suffering, to share resources that can change the trajectory of the illness, and to fully understand the extent of the problem with which we are dealing. We have to change the statistics and reverse the growth in mental illness. This can have an incredible impact not only on individuals, but on society as a whole. We must prioritize our own well-being, for this is beneficial for our patients as well, and will demonstrate to others that self-care is important, normal and valuable. And finally, we must promote policy at all levels that will help our patients to receive the care that they need.

Mental health does not have to be an enigma. It is our duty, as physicians, to acknowledge its existence, to work towards a reduction of its impact on our patients, families, friends and selves, and to advocate for resources to combat its growing threat to public health.

M. Laurin Council, MD, MBA, FAAD, FACMS, is a professor of dermatology at Washington University School of Medicine, along with director of dermatologic surgery and director of the micrographic surgery and dermatologic oncology fellowship.

Reference

- 1. Mental Health by the Numbers. National Alliance on Mental Illness. https://www.nami.org/mhstats. Accessed on Oct. 4, 2023.
- West C, Dyrbye L, Shanafelt T. Physician Burnout: Contributors, Consequences and Solutions. Journal of Internal Medicine. 2018 June;283(6):516-529.

2024 Membership Dues – Have You Renewed Yet?

Your 2024 SLMMS membership dues statements were mailed to the preferred address in your membership record in September. Thank you to the more than 100 members who promptly renewed during the first two weeks. Per the SLMMS bylaws, your payment is not due until December 31, but your prompt payment is greatly appreciated, and helps save staff time and administrative costs associated with follow-up mailings.

For the eighth consecutive year, the SLMMS Council kept annual dues amounts steady with no increase—\$350 for active members, \$175 for first-year physicians and corresponding members, and \$100 for emeritus/retired members. On their dues statement, active members are asked to make an optional \$20 tax deductible contribution

to the St. Louis Society for Medical and Scientific Education (SLSMSE), the society's charitable foundation. This gift helps fund medical education and community programs.

For your added convenience, you may pay your SLMMS dues online by credit card using our secure payment gateway at www.slmms.org/join-the-medical-society/membership-dues. If you did not receive your SLMMS dues statement by mail or need another copy, or wish to pay by phone, contact Chris Sorth, business operations manager at 314-786-5473 ext. 103 or chris@slmms.org. You may also contact Chris if you wish to set up installments and spread out your dues over three monthly payments. <



2024 Annual Meeting and Installation Banquet

SATURDAY, FEBRUARY 3, 2024

The Saint Louis Zoo, The Living World

6:00 p.m. Cocktail Reception 7:00 p.m. Dinner, Installation and Awards Presentation

HONORING



Kirsten F. Dunn, MD, 2024 President
Members of the 2024 SLMMS Council
The retirement of David M. Nowak, Executive Vice President

PRESENTATION OF SLMMS AWARDS



ROBERT SCHLUETER LEADERSHIP AWARD
Ravi S. Johar, MD
SLMMS and MSMA past president
and physician advocate



AWARD OF MERIT
Daniel F. Hoft, MD, PhD
Saint Louis University
School of Medicine

Resolutions Move Organized Medicine Forward

The 2024 session of the Missouri Legislature is upon us. As the legislature convenes in January, the SLMMS Political Advocacy Committee will be working to establish legislative priorities as well as preparing resolutions for the 2024 annual convention of the Missouri State Medical Association (MSMA), scheduled for April 5-7 at the Renaissance St. Louis Airport Hotel.

Resolutions are a prime example of organized medicine working for physicians to move medicine forward. If you're considering a topic for a 2024 resolution, even if it's still in its conceptual stage, please consider bringing it forward through SLMMS during the upcoming months.

The SLMMS Political Advocacy Committee will be meeting on **Tuesday, December 5 at 7:00 p.m**. virtually via Zoom to establish 2024 advocacy priorities and begin the process of discussing resolutions. For a resolution to be introduced and sponsored by SLMMS, we ask that it be presented and reviewed twice by our group of District 3 delegates. The first opportunity

will be at the SLMMS Delegates' Briefing Session to be held in January (date to be announced). All District 3 delegates will receive an email announcing this meeting, but all SLMMS members, including medical students, are invited to participate. Watch your email and the SLMMS website for details.

Resolutions drafted or accepted at that meeting will go forward for a second review and approval at the SLMMS Council meeting in March. Resolutions receiving final approval at this meeting will be submitted to MSMA as sponsored by SLMMS. The deadline for submitting resolutions to MSMA for inclusion in 2024 convention materials (as well as online comments) is Friday, March 15, 2024 at 5 p.m.

If you are a member of MSMA, you are free to submit your resolution on your own, but for it to be reviewed and sponsored by SLMMS, the above-referenced process must be followed. For questions or more information, please contact Dave Nowak at dnowak@slmms.org. -

Sponsorships Available for SLMMS Annual Meeting

Sponsorship packages are available for the 2024 SLMMS Annual Meeting and Installation Dinner on February 3, 2024 at the Living World at the Saint Louis Zoo. This is the Society's largest event of the year, and an excellent opportunity to support the physician community while gaining visibility and recognition for your practice or business.

Four sponsor levels are available:

- Diamond Presenting Sponsor \$3,500
- ► Gold Advocate Sponsor \$2,500
- Silver Table Sponsor \$1,500
- Bronze Event Sponsor \$500

Each level offers various advertising benefits and recognition. The Diamond, Gold and Silver levels include a table for eight persons at the Installation Dinner; the Bronze level includes two seats at the dinner.

For more information, visit www.slmms.org or contact Dave Nowak in the SLMMS office at 314-786-5473, ext. 105 or dnowak@slmms.org Sponsorships must be received by Monday, January 22 to be included in the event materials.

Magazine Offers Bulk Pricing for SLMMS Members

SLMMS members can purchase supplies of the new magazine HEALTH&CARE Journal to share with patients. The magazine publishes health-oriented features and patient stories. Its goal is to provide credible, healthenhancing and potentially life-saving information about



serious chronic diseases in an attractive, user-friendly and understandable format.

Pricing for SLMMS members is \$4.00 per copy, or \$3.50 each if purchasing more than 500. The practice name can be imprinted on the copies purchased. HEALTH&CARE Journal publishes twice a year. For more information, see the article on the SLMMS website under "Latest News."

Nathaniel Murdock, MD, Honored by Washington U.

Longtime SLMMS member and past president (2001) Nathaniel H. Murdock, MD, was honored by Washington University School of Medicine at the 2023 Homer G. Phillips Public Health Lecture on October 6.

Dr. Murdock, retired ob-gyn, was recognized for his career achievements in medicine and advancement of public health in St. Louis, and for his "untiring efforts to improve women's health and national leadership promoting health equity." The award was presented by Will Ross, MD, MPH, associate dean for diversity at the School of Medicine.

The Homer G. Phillips Lecture series is presented by the Office of Diversity, Equity & Inclusion in honor of the historic Homer G. Phillips Hospital in St. Louis. From its opening in 1937 to its closure in 1979, Homer G. Phillips Hospital was the premier training ground for African American medical professionals. By 1948, its medical residents included more than one third of all graduates from the two American Black medical schools. Dr. Murdock trained at the hospital and also served there for 16 years.



Dr. Murdock and his wife Sandra hold the award.

SLMMS Partnership Offers Members SAGE Scholars Tuition Rewards Program

Saving for college is one of the biggest challenges families face today. The SAGE Scholars Tuition Rewards program, offered through American Freedom Benefits, reduces financial stress and provides a simple and effective way for families to achieve their college savings goals.

SAGEScholars tuitionrewards.

Through a new member benefit partnership with American Freedom Benefits, SLMMS members have the opportunity to participate in the program and earn SAGE Scholars Tuition Rewards points to help offset the financial burdens of obtaining an undergraduate degree at any of the more than 450 participating network colleges and universities.

Following a member pulse survey earlier this fall, SLMMS members expressed interest in learning more about the program and its many benefits. Participation is voluntary and without obligation. (Please note the Medical Society has no financial relationship and receives no income from this partnership.)



Working with SAGE and American Freedom Benefits, members can accumulate credits, and you enhance your totals by doing business with an approved provider. This is not required nor pressured by the sponsor. The credits do not expire and can be transferred to

another family member, including children and grandchildren. American Freedom Benefits is also extending participation in the program to SLMMS member physicians' office staffs as an employee benefit, or physicians may choose to offer the program to their patients as well.

To learn more as well as view the list of participating colleges and universities, visit tuitionrewards.com For more information, contact Rafael Madrigal at 510-691-4362 or Rafael.madrigal@americanfreedombenefits.com.

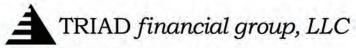
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12/31/10	\$1,000,000	\$1,000,000
12/31/22	\$ 2 , 984 , 571*	\$3,122,671*

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- * Based on a hypothetical \$1 million invested in positions held on in the S&P 500 Index. Over a 12-year period ending 12/31/2022, returns would have been \$138,100 higher with a 0.5% annual portfolio management fee versus a 1% fee. Past performance is not indicative of future returns.
- ** "Typical rate charged by financial advisors" claim is based on a 2016 InvestmentNews study (http://blog.runnymede.com/how-much-to-pay-a-fee-only-advisor-a-look-at-average-annual-fees) showing an average advisor fee of 1.01% for an account valued at between \$1 million and \$5 million. Rates charged by financial advisors vary. Other fees and transaction costs apply. Similar services may be available from other investment advisers at a lower cost.

All indices are unmanaged and investors cannot actually invest directly into an index. Unlike investments, indices do not incur management fees, charges, or expenses.

This is a hypothetical example and is for illustrative purposes only. No specific investments were used in this example. Actual results will vary.

Securities and advisory services offered through Commonwealth Financial Network, Member FINRA/SIPC, a Registered Investment Adviser. Fixed insurance products and services offered through CES insurance Agency.

Meet Your 2024 SLMMS Officer and Councilor Nominees

Election takes place online November 1-25

he St. Louis Metropolitan Medical Society is pleased to announce the slate of officer and councilor candidates who have been nominated to lead the organization in 2024. At the SLMMS General Society Meeting on September 12, the Nominating Committee presented its list of candidates. The nominations were approved by the membership and brought forward for the annual election that will take place online at www.slmms.org from Nov. 1 to 25. SLMMS members will receive an email with a link to cast their ballots during the voting period.



Dr. Kirsten F. Duni

Kirsten F. Dunn, MD, will succeed automatically to the position of 2024 SLMMS president from her current status as president-elect. An internist with Mercy Virtual vEngagement, Dr. Dunn is board certified by the American Board of Internal

Medicine and a Fellow of the American College of Physicians.

She earned her undergraduate degree at Harvard College and her medical degree from Saint Louis University School of Medicine, and completed her internship and residency at Stanford University Hospital and Clinics.

In addition to currently serving as president-elect, Dr. Dunn was SLMMS vice president in 2022 and a member of the SLMMS Council from 2019-2021. She has served on the SLMMS Executive, Finance and Endowment, and Strategic Planning committees. At the state level, she served as MSMA Young Physician Section vice chair from 2018-2019, as MSMA delegate, and as a member of an MSMA Reference Committee in 2018.

Dr. Dunn also sits on the Governor's Council, Missouri Chapter of the American College of Physicians. She joined SLMMS in 2017.

Born in Jefferson City, Mo., she currently lives in Chesterfield with her husband, Tim Dunn, MD, cardiologist, and their three children.

Election Candidates

Up for election will be candidates for SLMMS presidentelect, vice president and secretary-treasurer along with four councilors. The new councilors will be elected to three-year terms (2024-2026); an additional eight councilors will continue their unexpired terms.

Profiles of the nominated candidates are included in their biographies that follow. To help gain insight on their thoughts

on practicing medicine during this challenging time, we have asked them to respond to the question, "How do you believe SLMMS can best engage physicians in the greater St. Louis community to increase membership, involvement and awareness of organized medicine?"

Sara Hawatmeh, MD | President-Elect



Dr. Sara Hawatmeh

Practice: Internal medicine, specialization in obesity medicine. Certified, American Board of Internal Medicine and American Board of Obesity Medicine. Hospitals: Mercy Hospital South, St. Luke's Hospital, St. Luke's Des Peres Hospital.

Education: B.S., University of Miami; M.D., Ross University School of Medicine; Internship and residency, St. Luke's Hospital.

Birthplace: St. Louis.

SLMMS/MSMA/AMA Service: SLMMS councilor, 2021-2023; SLMMS Membership Committee; MSMA Young Physicians Section Councilor, 2022-2023; YPS vice councilor, 2020-2022, 2023-2025; YPS secretary, 2020-2023. Joined SLMMS 2018.

Other Professional Organizations: Obesity Medicine Association, National Arab American Medical Association, American College of Physicians Missouri chapter.

Personal: Spouse, Daniel Kakish; Hobbies and interests: travel, spending time with family and friends.

How do you believe SLMMS can best engage physicians in the greater St. Louis community to increase membership, involvement and awareness of organized medicine? In today's ever-evolving medical landscape, it's crucial we regularly survey the needs, preferences and concerns of current and potential members. This understanding is vital for shaping a medical society that speaks to physicians' expectations and addresses their advocacy and change priorities. Crafting a compelling value proposition that emphasizes the advantages of membership—including networking opportunities, educational resources, career support and advocacy for the medical field—will help boost participation and engagement within SLMMS. Additionally, introducing mentorship initiatives that facilitate connections among physicians and expose them to organized medicine's value could further engage the vibrant community of physicians eager to connect and learn from peers.

Richard H. Wieder, MD | Vice President



Dr. Richard H. Wieder

Practice: Associate professor of ophthalmology, Washington University School of Medicine. Certified, American Board of Ophthalmology.

Education: B.S. in Chemistry, University of Illinois; M.D., University of Illinois-Rockford; Internship, Jewish Hospital of Cincinnati;

residency, University of Cincinnati Medical Center.

Birthplace: Evanston, Ill.

SLMMS/MSMA/AMA Service: SLMMS vice president, 2023; SLMMS councilor, 2020-2022; SLMMS Executive, Finance & Endowment, Physician Grievance, and Continuing Medical Education committees. Joined SLMMS 1998.

Other Professional Organizations: Member, American Academy of Ophthalmology, American Society of Cataract and Refractive Surgery, Missouri Society of Eye Physicians and Surgeons, St. Louis Ophthalmology Society, Missouri State Medical Association.

Community/Volunteer Activities: Vision Walk to Support Foundation Fighting Blindness, St. Louis Community College at Meramec Symphonic Band, University City Summer Band, American Israel Public Affairs Committee (AIPAC).

Honors and Awards: Alpha Omega Alpha.

Personal: Spouse, Cathy Wieder; family, one daughter, two sons and two grandchildren. Hobbies and interests: playing the trombone, working out, listening to music, golf.

How do you believe SLMMS can best engage physicians in the greater St. Louis community to increase membership, involvement and awareness of organized medicine? In these days of ever-increasing challenges that all physicians face in their daily practices (whether they are in private practice or employed), we need a central voice to advocate for all of us on a consistent basis. None of us have the time or wherewithal to do this alone. SLMMS provides that resource to look out for physicians in the St. Louis area and to provide benefits to its members and the community at large. It is vital that we continue to have this going forward, despite the changes we have all seen over the last 25 years. SLMMS needs to better promote these benefits to local physicians to help them understand the value of membership.

Robert A. Brennan, Jr., MD | Secretary-Treasurer



Dr. Robert A. Brennan

Practice: Obstetrics and gynecology -OB hospitalist. Certified, American Board of Obstetrics and Gynecology. Clinical Consumer Majority Board for the St. Louis County Department of Public Health.

Education: A.B., Saint Louis University; M.D., Saint Louis University School of Medicine; Internship and residency, ob-gyn, Mercy Hospital St. Louis.

Birthplace: St. Louis.

SLMMS/MSMA/AMA Service: SLMMS secretary-treasurer, 2018-2023, 2014; councilor, 2015-2017, 2011-2013, 2004-2007; secretary, 2008-2010; Physicians' Wellness Conference chair, 2007-2009. Chair, SLMMS Continuing Medical Education Committee; Member, SLMMS Executive, Grievance, and Finance and Endowment committees; MSMA first vice president, 2012-13; MSMA 3rd District councilor, 2013-2022. Joined SLMMS 1979.

Other Professional Organizations: American Medical Association; St. Louis Obstetrical and Gynecological Society, secretary 1991-1992; American College of Obstetricians and Gynecologists; Society of Ob-Gyn Hospitalists. COVID-19 monitor for St. Louis County Department of Public Health, 2022.

Personal: Spouse, Joan Brennan; family, four sons and three grandchildren; Hobbies: walking, archery, reading.

How do you believe SLMMS can best engage physicians in the greater St. Louis community to increase membership, involvement and awareness of organized medicine? SLMMS can best engage physicians in the greater St. Louis community to increase membership, involvement and awareness of organized medicine in many ways, including (1) increase membership by having a representative of SLMMS appear at each hospital staff meeting. The representative can present the advantages of membership; (2) increase involvement by having both educational and social activities. The times for these activities should not conflict with peak vacation times and other significant events; and (3) increase awareness of organized medicine by taking a stand on social issues such as gun safety, community health measures, and climate change. We can publicize those opinions in newspapers, online and on the radio.

continued

Daniel J. Choe, DO | Councilor



Dr. Daniel J. Choe

Practice: Neuroradiology; West County Radiology Group. Certified, American Board of Radiology. Attending neuroradiologist, chair of technology, Mercy Hospital St. Louis.

Education: Undergraduate degree, University of Illinois Urbana-Champaign; D.O., Touro

New York College of Osteopathic Medicine; Internship, Morristown Medical Center Internal Medicine, Morristown, N.J.; Residency, St. Barnabas Medical Center, Livingston, N.J.

Birthplace: Boston, Mass.

SLMMS/MSMA/AMA Service: Joined SLMMS 2021.

Other Professional Organizations: Member, American Society of Head and Neck Radiology, American Society of Neuroradiology, Radiological Society of America, Missouri State Medical Association.

Personal: Spouse, Stacy Lee; children, one son and one daughter. Hobbies and interests: Teppanyaki (Japanese cuisine), basketball, photography.

How do you believe SLMMS can best engage physicians in the greater St. Louis community to increase membership, involvement and awareness of organized medicine?

As a recent transplant to St. Louis during the COVID-19 pandemic, I experienced firsthand the disconnect within our professional field heightened by physical isolation. I believe SLMMS provides an opportunity for professionals to reclaim meaningful interactions among colleagues as well as with the community through its adaptation to low-friction methods of engagement, particularly teleconferencing, diversified committees, legislative advocacy and commitment to positively impacting the local community. Reaching a greater audience through technology and modern forms of media can continue to raise awareness of the efforts of SLMMS.

Kanika A. Cunningham, MD, MPH | Councilor



Practice: Family medicine; Director of the St. Louis County Department of Public Health. Certified, American Board of Family Medicine. Hospitals: Barnes-Jewish Hospital; SSM Health St. Mary's Hospital.

Dr. Kanika A. Cunningham

Education: B.A., Biology, Saint Louis University; M.P.H., Saint Louis University; M.D., Saint Louis University School of Medicine; Internship and residency, Saint Louis University Department of Family Medicine.

Birthplace: St. Louis.

SLMMS/MSMA/AMA Service: Joined SLMMS 2023.

Other Professional Organizations: St. Louis Academy of Family Physicians, Missouri Academy of Family Physicians, American Society of Addiction Medicine, Alpha Omega Alpha Medical Society, Opioid Response Network Black Communities Workgroup.

Community/Volunteer Activities: Integrated Health Network, Regional Health Commission, Missouri State Opioid Response Team. Previous involvement with PreventEd (board member), MO Network for Opiate Recovery and Reform, Behavioral Health Network Advisory Council, Ecumenical Leadership Council (chief medical officer), Saint Louis University School of Medicine Executive Committee, Bridges to Recovery & Care (advisory board member).

Personal: Spouse, Carl Cunningham; children, one daughter (expecting a second daughter in December 2023). Hobbies and interests: spending time with family.

How do you believe SLMMS can best engage physicians in the greater St. Louis community to increase membership, involvement and awareness of organized medicine? SLMMS can best engage physicians by intentionally creating spaces for young and diverse physicians to have a voice and champion health concerns in the region through new partnerships and collaborations. We should start by asking questions about the most pressing problems we face and by increasing visibility in non-traditional settings. SLMMS can best address those problems with innovative and engaging activities and publications that center community and physician voice. Also, it is important to address the common issues the St. Louis medical community faces, including structural and institutional racism that directly impact medical care, lack of trust and relationship building between community and medical entities, and under-representation of Black and Brown people among medical schools, residency programs and hospital systems. It is imperative we support and promote regional work to embrace diversity, strengthen equity, and champion belonging in medicine as a true partnership. Lastly, it is key to engage both St. Louis City and St. Louis County health departments and embrace the intersection of community health with individual health.

Rachel Kyllo, MD | Councilor



Dr. Rachel Kyllo

Practice: Dermatology/Mohs Micrographic Surgery, Meramec Dermatology, LLC; Certified, American Board of Dermatology. Hospital: Mercy Hospital South. Education: B.S., University of Minnesota; M.D., Washington University School of Medicine. Internal medicine internship, St. Luke's Hospital; Dermatology residency, Barnes-Jewish Hospital; Mohs fellowship, Northwestern University.

Birthplace: Maplewood, Minn.

SLMMS/MSMA/AMA Service: SLMMS Political Advocacy Committee, 2023; MSMA District 10 Vice Councilor, 2020-2023; MSMA Young Physicians Section Councilor, 2023; MSMA Legislative Committee; MSMA Reference Committee, 2023. ASDS representative to the Resident & Fellow Section, American Medical Association, 2017-2019; ASDS representative to the Young Physician Section, American Medical Association, 2020-present; ASDS alternate delegate to the AMA, 2022; ASDS delegate to the AMA, 2023. Joined SLMMS 2022.

Other Professional Organizations: Fellow, American Academy of Dermatology (AAD), American College of Mohs Surgery; AAD Congressional Policy Committee, resident member, 2018-2020; AAD Advisory Board Executive Committee member, 2023-present. Member, American Society for Dermatologic Surgery (ASDS), ASDS Federal Affairs Committee 2019-2021, ASDS State Affairs Committee 2021-present. Missouri Dermatologic Society, Advisory Board representative, 2021-present; St. Louis Dermatologic Society, member.

Personal: Spouse, Karl Staser, MD, PhD, dermatologist; children, two sons and one daughter. Hobbies and interests: traveling, spending time with family, physician advocacy.

How do you believe SLMMS can best engage physicians in the greater St. Louis community to increase membership, involvement and awareness of organized medicine?

Membership in local, state and national medical organizations is the best way to become part of the physician community. Declining membership numbers threaten the ability of these organizations to continue representing a diverse array of physician interests. For example, many employed physicians are members of their hospital staff organization, but do not recognize the value of also belonging to an independent organization that represents physician interests. SLMMS resources benefit all physicians—and we need to make sure physicians from all practice settings have their interests represented within our organization. SLMMS-sponsored social events to build a sense of community, direct physicianto-physician recruitment, and increased awareness of our advocacy efforts are great ways to convince potential new members of the value of membership.

Kyle Moylan, MD | Councilor



Dr. Kyle Moylan

Practice: Internal medicine, geriatric medicine, hospice and palliative medicine; outpatient primary care with Esse Health. Certified, American Board of Internal Medicine. Hospitals: SSM Health St. Clare Hospital, Mercy Hospital South, St. Luke's Des Peres Hospital.

Education: Undergraduate and M.D., University of Missouri-Kansas City; Internship and internal medicine residency, Barnes-Jewish Hospital; Geriatric medicine fellowship, Barnes-Jewish Hospital.

Birthplace: St. Louis.

SLMMS/MSMA/AMA Service: Joined SLMMS 2017.

Other Professional Organizations: American College of Physicians; American College of Physicians Missouri Chapter Leadership Council.

Personal: Spouse, Lesli Moylan; children, two sons. Hobbies and interests: spending time outdoors, particularly at family cabin in rural Missouri; hiking, kayaking, foraging, swimming, cooking, bicycling.

How do you believe SLMMS can best engage physicians in the greater St. Louis community to increase membership, involvement and awareness of organized medicine?

Physician engagement is a real challenge in the current environment. The pressures on physician time continue to build, it feels like every week there is an added responsibility. Most of us get more emails, newsletters and journals than we could possibly read. To engage physicians, SLMMS has to show the value of membership. Social media is a powerful tool, but after the isolation of recent years I see this as a good time to create more in-person activities. SLMMS can help bring us together to learn, support each other, and socialize as a community. This could help mitigate widespread burnout in the profession. I would emphasize regional issues that aren't addressed elsewhere, local innovations, and interactive opportunities to share our challenges and successes.

Continuing on the Council (Terms began in 2022 or 2023)

- ► Brian J. Bausano, MD, MBA
- ► Richard A. Covert, MD, MPH
- Gary M. Gaddis, MD, PhD
- Dee Anna Glaser, MD
- ► George Mansour, MD
- Mark S. Pelikan, DO
- Rishi N. Sud, MD, MBA
- Sriram Vissa, MD

Staffing Shortage Impacts Practices

Physicians look to ways to recruit and retain staff

By Jim Braibish, St. Louis Metropolitan Medicine

eeding months to fill office or medical assistant positions that used to take just a few weeks. High turnover rates. Difficulty finding qualified applicants. These are common experiences of many private medical practices in the St. Louis area as the nationwide staffing shortage in health care continues.

At the same time, practices are taking steps to attract and retain staff. Besides increasing salaries and benefits, they are also offering more flexible work schedules. They are also re-evaluating workflows to increase efficiencies and job satisfaction.

"Our turnover rate has been at an all-time high since COVID began, and our office staff have proven to be the most difficult position to retain," said SLMMS member Derek Larson, MD, of St. Louis Kidney Consultants. "Prior to COVID, we would receive dozens of applicant inquiries and resume submissions within hours of posting a job opening. Currently, we may receive only a handful of interested applicants after weeks of the posting."



Nationally, only 25% of practices are operating at a 90% staffing level or better for clinical staff, and 39.5% are at 90% for administrative staff.

At Sound Health Services, SLMMS member James Hartman, MD, said it has been taking a month to a month and a half to fill positions, especially medical assistants and technicians. "Finding qualified staff is difficult. The pool of people with appropriate skills is much smaller," he commented.

Some physicians have found staff more willing to job hop. Plastic surgeon and SLMMS past president Samer Cabbabe, MD, explained: "We've had considerable trouble finding medical assistants and front office staff. Some are willing to leave for minimal pay increases. Others like the opportunity to work from home."

Dermatologist and SLMMS past president Erin Gardner, MD, added, "With the hot job market, staff hear of friends getting higher paying jobs and so they become interested in getting the same."



"Our turnover rate has been at an all-time high since COVID began, and our office staff have proven to be the most difficult position to retain."

Two ophthalmology practices report extra challenges. At Ophthalmology Associates, SLMMS member Ranjan Malhotra, MD, said it has taken a minimum of four to six months to replace many positions, including front desk, scheduling, medical technicians and testing technicians. Turnover also has been very high.

At West County Ophthalmology, SLMMS past president Stephen Slocum, MD, described the situation: "There seem to be fewer qualified applicants available for our three areas of clerical, technical and optical. It can take weeks just to find anyone to interview. Our turnover has become quite high."

Dr. Slocum also notes, "Attitudes toward work seem to have changed significantly since the pandemic. Lifestyle and family concerns tend to be the higher priorities."

"A couple of our offices have gone to four-day weeks or half days on Fridays. We also try to be flexible with staff's needs such as mothers taking time off to pick up their children."



Nationally, only 25% of practices are operating at a 90% staffing level or better for clinical staff, and 39.5% are at 90% for administrative staff, according to a May 2023 survey by the American Medical Group Association, which covers both private practices and health system-owned practices. AMGA notes that clinical staffing of registered nurses, licensed practical nurses and medical assistants, "remains in a downward trajectory" this year.1

A 2021 study by the employee benefits firm Mercer paints a dire picture. Among those working as medical assistants, home health aides or nursing assistants, some 6.5 million individuals will permanently leave their jobs as by 2026, leaving a shortage of 3.2 million after replacements are factored in. With regard to registered nurses, more than 900,000 will permanently leave the profession while employers will need to hire more than 1.1 million nurses by 2026.2

continued

WHY IS YOUR PRACTICE A GOOD PLACE TO WORK?

"As a small, physician-owned private nephrology practice, we have a close-knit and collaborative team environment. Employees have direct interactions with leadership and feel a strong sense of ownership and involvement. Also, our friendly atmosphere fosters positive relationships among colleagues."

Derek Larson, MD St. Louis Kidney Consultants

"We have a great team. Our staff members want to come to work and be productive in helping people with their illnesses. Staff members see themselves growing and contributing to a larger endeavor. When difficulties arise, we come together as a team."

Erin Gardner, MD Dermatology Specialists of St. Louis

"We have a professional, patientfocused work environment. Employees share in a collaborative, team approach."

James Hartman, MD Sound Health Services

"We are a small business, with flexibility for our staff. We also provide great benefits like profit sharing and cash balance plans as well as the perks associated with a plastic surgery office."

Samer Cabbabe, MD Cabbabe Plastic Surgery

"Our physicians and staff are involved in providing quality care in an honest, ethical and personal manner."

Stephen Slocum, MD West County Ophthalmology "We have a very good office culture between the staff and the doctors. We have a shortened workweek with Friday afternoons off."

Ranjan Malhotra, MD **Ophthalmology Associates**

"We are an employer of choice due to our locations, flexible hours and competitive compensation. Our cardiologists and nurse practitioners project an extraordinarily positive image of the organization wherever they practice. For students it's a great place to combine their classroom instruction elsewhere with real patient encounters."

Michael Rosenblatt, Chief Operating Officer St. Louis Heart & Vascular

Updating Compensation, Offering Flexible Work Schedules

All SLMMS member practices contacted for this article report that they have increased salaries and benefits since the pandemic. Nationally, median total compensation for five key clinical assistant and nursing positions increased by 5% or more from 2021 to 2022, according to the Medical Group Management Association (MGMA). Certified nursing assistants (10.6%) and licensed practical nurses (18.7%) showed the highest one-year upticks, with registered nurses gaining 5% in median compensation.³

The American Medical Group Association's May 2023 study indicates that medical groups are using recruitment and retention incentives, with 88.2% of respondents offering referral bonuses, 77.6% offering sign-on bonuses and 55.7% making benefits package changes in the past year.¹

Other strategies to attract and retain employees include greater flexibility in work schedules. Dr. Hartman said, "A couple of our offices have gone to four-day weeks or half days on Fridays. We also try to be flexible with staff's needs such as mothers taking time off to pick up their children."

Dr. Malhotra at Ophthalmology Associates added, "We eliminated Friday afternoon clinic so our staff could get an early start to the weekend. Overall, we realize that people today place greater value on work-life balance. That needs to be respected by employers."

Practices have redesigned workflows and care teams to make better use of limited staff and make best use of their skills.

Sound Health Services created a call center to handle patient calls, freeing the nurses and nurse practitioners to focus on patients in the office. They also developed a patient portal so patient information can be collected prior to the visit, Dr. Hartman added. All this helps relieves burdens on staff.

At St. Louis Heart & Vascular, where SLMMS member Toniya Singh, MD, practices, various steps have been taken. "We are making greater use of part-time employees who need to coordinate their schedules with school, parenting or other employment. We also have outsourced some work that can be done remotely such as billing," said Michael Rosenblatt, chief operating officer.



"Attitudes toward work seem to have changed significantly since the pandemic. Lifestyle and family concerns tend to be the higher priorities."

Physicians note the vital role of teamwork, workplace culture and making good hires.

Dr. Gardner focuses on hiring and retaining good people: "The most important factor with retention is maintaining a good team environment, in which people come to work not just for the pay, but for the satisfaction of performing the work. It's important to get the right person in the right role, and then to lead them well, helping them to grow and perform the facets of their jobs with efficiency and without undue obstacles."

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Long COVID Still Worrisome

A study from Washington University School of Medicine and the Veterans Affairs St. Louis Health Care system published in August shows that even two years after infection with the virus, fallout from COVID-19 may persist. In this study that gained national attention, researchers found that people who had COVID—including those who were hospitalized within the first 30 days following infection and those who were not—were still, up to two years after infection, at an elevated risk for many long COVID-related conditions including diabetes, lung problems, fatigue, blood clots and disorders affecting the gastrointestinal and musculoskeletal systems.

Why the Health Care Staffing Shortage Is so Prevalent and What We Need to Do Next

Flexible schedules, greater education support could help attract workers

By Katie Kenison, Favorite Healthcare Staffing

he health care labor shortage is a staffing crisis we can no longer ignore. While most people attribute the staffing shortage to COVID-19, the truth is that it was an issue long before the pandemic and will continue to be an issue long after.

The World Health Organization predicts a shortfall of 15 million health care workers worldwide in 2030. The International Centre on Nurse Migration projects there will be a shortage of 13 million nurses alone by 2030, up from a shortage of 6 million before the pandemic."1

This article uncovers the reasons why the health care labor shortage has progressed and what we still need to do.

Factors That Contribute to the Labor Shortage

While COVID impacted the staffing shortage, there are many other factors that have played a major role in this ongoing crisis. These include the aging population, burnout among health care professionals, a lack in investment in training health care workers, and more.

The aging population. As technology progressed, medical advancements have prolonged the average person's life span. While this is desirable, it also means that people today require care for longer periods of time. About 10,000 individuals aged 59-77 have joined Medicare plans, which has increased the demand for more health care workers in recent years.2

Burnout among health care professionals. Being a health care professional can be exhausting when labor shortages cause a high demand to work overtime. This inevitably leads to burnout, which has been proven to be a contributing factor to the staffing shortage in the health care industry. The pandemic caused unsafe nurse-to-patient ratios further contributing to feelings of burnout. A survey found that



Katie Kenison is marketing coordinator for Favorite Healthcare Staffing. She can be reached at Kate.Kenison@favoritestaffing.com.

34% of nurses wished to quit their health care jobs by the end of 2022, and 44% said this was due to burnout.1

Limited opportunities for training new health care workers. As health care professionals require specialized training, not just anyone can be hired to fill these types of positions. Training opportunities are severely limited due to the lack of nursing faculty available to train the next generation of health care workers. Universities turn away tens of thousands of applicants for nursing and health care programs each year.3 This is another leading cause as to why the health care labor shortage is so prevalent.



While COVID impacted the staffing shortage, there are many other factors that have played a major role in this ongoing crisis. These include the aging population, burnout among health care professionals, a lack in investment in training health care workers, and more.

Other contributors to the shortage. While the reasons listed above seem to have a bigger influence on the staffing shortage, there are other factors that have contributed to the issue such as the Great Resignation and increased demand for health care workers in remote or underserved areas.

The Great Resignation is a term that refers to a record number of workers that chose to quit their jobs, including health care professionals.4 Many factors have influenced the Great Resignation, such as lack of job satisfaction, health

continued

✓ STAFFING SHORTAGE ►

care decisions being politicized, and more.4 These factors are requiring health care employers to focus on employee wellbeing to attract and retain talent.



One study found that 55.4% of care providers had greater work satisfaction when given the opportunity to have a flexible schedule.⁵

When health care workers get sent to remote or underserved areas, they tend to be unsatisfied with their jobs for several reasons. First, health care professionals are relocated further from their friends and family. Second, these remote areas may not pay as well as other locations. Finally, these areas may not have the resources needed to properly treat their patients. This is unfortunate because millions of Americans live in these remote and underserved areas where trained professionals are lacking.1

Strategies and Solutions That Need to be Implemented

While the health care labor shortage continues to be a problem today, there are strategies that can be implemented to attract more workers into the industry. These strategies include allowing for more flexible schedules, offering tuition assistance or student loan repayment programs, providing online learning opportunities, and partnering with an agency to provide staffing solutions.

Flexible schedules. When health care professionals are expected to work long and unconventional hours, it seems necessary to allow more flexibility regarding scheduling. One study found that 55.4% of care providers had greater work satisfaction when given the opportunity to have a flexible schedule.⁵ The survey also found that 50% of respondents with flexible schedules experienced a better quality of life, feeling less stressed and more in control of their workload.⁵

Tuition assistance or loan repayment programs: As many people know, student loans are a huge deterrent when it comes to seeking out a medical career. However, if health care professionals were relieved of some of the burden that student loans place on them, then more people would consider entering the field. Health care employers could incorporate tuition assistance or student loan repayment programs into their benefits packages to entice potential future employees. Opportunities like this could then lead to more students being interested in health care careers.

Offer online learning and continued education: Getting a degree in a health care-related field can be a lengthy and draining process. If universities provide the option of obtaining a health-related degree and other certificates online, this could lead to an increase in people entering the medical field. Although clinicals would still need to take place in person, students could commute less and complete some of their course work in the comfort of their homes.³ Online learning opportunities offer people the ability to pursue higher education, which allows them to advance their health care career and move into roles that have a high demand.

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SLMMS members receive preferred pricing for staffing and personnel services, including short-term coverage as well as temp-to-perm and permanent placement solutions, from Favorite Healthcare Staffing. As an added plus, Favorite provides a small revenue share to the Medical Society for all services booked by our members. If you have staffing needs, mention your SLMMS membership when you contact Favorite's staffing experts via email at medical staffing@FavoriteStaffing. com or the SLMMS dedicated phone line at 314-561-8066. You can learn more about Favorite Healthcare Staffing by visiting www.FavoriteStaffing.com.

Per diem: In health care, per diem nursing allows nurses to pick up shifts on an as-needed basis. This is a valuable solution for the health care labor shortage because it allows health care facilities to fill shifts instantly when demand is high.

Per diem work not only benefits health care facilities, but also nurses. This is due to the high pay it offers, a flexible work schedule, and the opportunity to gain experience in a variety of specialties. Partnering with a health care staffing agency is a solution all health care facilities should consider during the ongoing medical staffing shortage.

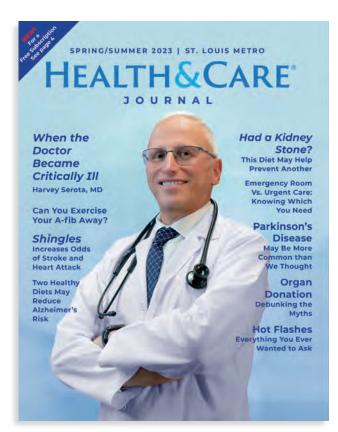
Direct Hire: Another ideal staffing solution is direct hire careers in health care. Direct hire and temporary-to-permanent jobs offer health care professionals the chance to establish their medical careers, while also providing health care facilities with skilled, long-term workers.

Health care staffing agencies provide dedicated placement consultants to ensure the candidate is the perfect match for the facility at which they will work. It has been shown that full-time direct hire and temp-to-perm options are affordable ways to counteract the staffing shortage among health care professionals.

As the demand for quality care continues to rise, we will need more health care workers than ever before. To ensure more health care professionals join the field, work schedules need to be more flexible, certain student loans should be evaluated, and online learning needs to be offered. The health care industry will not see an improvement involving the staffing shortage until these necessary changes have been made.

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Publisher toddabrams1@gmail.com 314-443-3024

Carol Kindinger

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Thank you for your investment in advocacy, education, networking and community service for medicine.

Joseph E. Cangas, MD

9788 Gerald Dr., 63128-1708
MD, Univ. of Illinois, Chicago, 2001
Born 1970, MO Licensed 2006 ► Active
Certified: Pediatrics

Emil Fernando, MD

522 N. New Ballas Rd., Ste. 199, 63141-6815 MD, Univ. of Missouri-Kansas City, 2011 Born 1987, MO Licensed 2017 ► Active Certified: Internal Medicine

Helen W. Garner, MD

1400 Lemay Ferry Rd., 63125-2408
MD, Mahatma Gandhi Memorial
Medical College, 1981
Born 1954, MO Licensed 1984 ► Active
Internal Medicine

Bijoy I. Hegde, MD

13238 Autumn Trails Ct., 63141-3210
MD, Kasturba Medical College, Manipal, 1992
Born 1962, MO Licensed 2002 Active
Certified: Physical Medicine & Rehabilitation

Sunna Khan, MD

777 Craig Rd., Ste. 130, 63141-7133 MD, Univ. of Missouri-Kansas City, 2019 Born 1994, MO Licensed 2021 ► Active Certified: Psychiatry

Jovita N. Oruwari, MD

3440 DePaul Ln., Ste. 110A, 63044-3546 MD, New Jersey Medical School, 1993 Born 1968, MO Licensed 2001 ► Active Certified: Oncologic Breast Surgery

Erum Qazi, MD

845 N. New Ballas Ct., Ste. 310, 63141-7169 MD, Dow Medical College, 1996 Born 1972, MO Licensed 2018 ► Active Certified: Psychiatry & Neurology

Deepu Sudhakaran, MD

17009 Waterside Heights, 63005-4665
MD, Government Medical College,
Thiruvananthapuram, 1998
Born 1973, MO Licensed 2015 ► Active
Certified: Surgery

Joseph S. Yazdi, MD

1034 S. Brentwood Blvd., Ste. 754 63117-1207 MD, Hahnemann Univ., 1994
Born 1968, MO Licensed 2014 ► Active
Certified: Neurological Surgery

WELCOME STUDENT MEMBER

Washington University School of Medicine Wilson X. Wang

Mary Anne Tillman, MD



Mary Anne Tillman, MD, a pediatrician, died August 11, 2023 at the age of 87.

Born in Bristow, Okla., Dr. Tillman earned both her undergraduate and medical degrees from Howard University in Washington, D.C.

She interned and completed her residency in pediatrics at the former Homer G. Phillips Hospital in St. Louis.

Dr. Tillman was in private practice for nearly 50 years. She was a professor at Washington University School of Medicine, and the first woman president of Mound City Medical Forum. In addition to her dedication to her young patients, she was widely known for her generosity and leadership in the St. Louis community. Among the many community agencies she supported, she served on the board of directors for Annie Malone Children's Home, and was a former St. Louis Globe-Democrat Woman of Achievement.

She joined the St. Louis Metropolitan Medical Society in 1962.

She was predeceased by her husband Judge Daniel Tillman. SLMMS extends its condolences to her children Dana Chee and Daniel T. Tillman, Jr., MD; her three grandchildren; and

Jorge M. Alegre, MD



Jorge M. Alegre, MD, a cardiologist, died September 5, 2023 at the age of 86.

Born in Callao, Peru, Dr. Alegre received his preliminary education and his medical degree from San Marcos University in Lima, Peru.

He came to the United States in 1965 to serve his internship at Barnes Hospital. He later completed his internal medicine residency and cardiology fellowship at St. Luke's Hospital.

Dr. Alegre served as a reserve commissioned officer in the U.S. Army from 1970-1977. He was in private practice with Cardio-Pulmonary Associates for more than 50 years. He was named an "Ageless Remarkable St. Louisan" in 2018 by St. Andrews Resources for Seniors System, an award that recognizes individuals who dedicate their golden years to bettering the St. Louis region through their careers.

He joined the St. Louis Metropolitan Medical Society in 1970.

SLMMS extends in condolences to his wife Perla Alegre and his son Jorge Alegre. ◄

Robert C. Packman, MD



Robert C. Packman, MD, internist/ endocrinologist, died September 30, 2023 at the age of 91.

Born in St. Louis, Dr. Packman earned both his undergraduate and medical degrees

from Washington University. He completed his internship and residency at Barnes Hospital, and his fellowship in endocrinology at Duke University. He served as a captain in the U.S. Air Force from 1958-1960.

During his training at Barnes Hospital and WUSM as chief resident, he created the first modern edition of the Washington Manual of Medical Therapeutics, transforming a handbook for in-house medical trainees into a reference for clinicians everywhere, and becoming a worldwide best-selling medical textbook. Dr. Packman was in practice with the Maryland Medical Group, and served as a professor of clinical medicine at Washington University for more than 35 years. Two professorships were established in his name at WUSM. After retiring from clinical practice, he joined Centene Corporation as chief medical officer, and was eventually appointed senior vice president of medical affairs. He joined the St. Louis Metropolitan Medical Society in 1963.

SLMMS extends its condolences to his husband and life partner Leonard Powers. Dr. Packman was predeceased by his brother Paul Packman, MD, also a long-time member of SLMMS.

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The Good, the Bad and the Ugly of Running for **Public Office**

By George Hruza, MD, MBA

n 2023, for the first time in 12 years, there was no physician in the Missouri Senate. Plus, a long-time friend of physicians, Sen. Bill White of Joplin, also left the Senate in 2023. As a result, the forces arrayed against providing high quality, safe care went on the offensive and gained multiple wins that will be detrimental to patient care in Missouri.



Dr. Hruza and supporters walk in the 2022 Kirkwood Greentree Festival Parade on behalf of his then-candidacy for the Missouri Senate.

The Need for Physician Advocacy

Our MSMA advocacy team and many of you made a valiant effort to defeat the most objectionable bills and make others less problematic. We had the best attended White Coat Day at the Capitol in years, but based on this year's legislative session outcome, it is clear to me that we need to redouble our advocacy efforts and increase our physician numbers in the legislature.



George Hruza, MD, MBA, is medical director of Laser & Dermatologic Surgery and an adjunct professor of dermatology and otolaryngology at Saint Louis University. He is past president of SLMMS, MSMA, the American Academy of Dermatology, the American Society

for Dermatologic Surgery and the American Society for Lasers in Medicine and Surgery. He is a candidate for the 2024 Republican nomination for the Missouri House of Representatives representing the 89th district (Des Peres, Frontenac, Town and Country, Huntleigh, eastern Chesterfield and unincorporated St. Louis County east of Manchester).

Many of you have stepped up to support our efforts. Thank you! I want all physicians to get involved and, whenever possible, recruit their patients. Our issues all revolve around making sure that our patients have accessible, affordable, high-quality health care. That message should resonate with patients and legislators. We must get it to them loud and clear.

Here is my pyramid of increasing levels of advocacy and influence. You should consider pursuing these and move up the pyramid (I have done all 11):

- Belong to MSMA, SLMMS, and your specialty society.
- Volunteer for MSMA, SLMMS, and your specialty society committees and leadership positions.
- Respond to calls to action by contacting your legislator(s) and sharing your personal story about the issue—by email, phone, mail and, best, in person.
- Attend White Coat Day in Jefferson City.
- Generously support MSMA's MMPAC.
- Generously support your specialty PAC.
- Support your legislators directly.
- Testify on behalf of physicians in Jefferson City.
- Organize a fundraiser for your legislator(s).
- 10. Develop a relationship with your legislator(s) (based on the above "touches").
- 11. Run for public office.

In politics, if you are not at the table, you are on the menu. I want us to have a strong voice of medicine at the table fighting for our patients, the physician-patient relationship, and the ability to continue to be able to practice and take care of our patients.

We currently have only two physicians in the Missouri House: Lisa Thomas, MD, and Majority Floor Leader and Speakerelect Jon Patterson, MD. Having Dr. Patterson in House leadership is an incredible achievement for him and is great for Missouri patients and physicians. He will need support and help from the physician community. I threw my hat in

I was overwhelmed by and so grateful for the incredible outpouring of help and support from the many volunteers and supporters, especially from the physician community in St. Louis, across the state and across the country.



Dr. Hruza, center, with a few of his supporters from the Missouri House: Rep. Chad Perkins, Rep. Rene Reuter, Rep. Adam Schwadron, Majority Floor Leader and Speaker-Elect Jon Patterson MD, Rep. Jeff Myers, Dr. Hruza, Rep. Ben Keathley, Rep. Tricia Byrnes, Rep. Alex Riley, Rep. Travis Wilson.

the ring to run for the House to provide that support. I would encourage those of you that have moved up toward the top of the pyramid of influence to join me in running for office.

Meeting the Voters

I found running for the Missouri State Senate last year a purposeful and personally rewarding experience. As part of the campaign, I had the opportunity to meet with many of our legislators and statewide office holders. I was most impressed by the dedication of many of our legislators, but the most valuable, intense and fulfilling part of the campaign was the "door knocking."

We knocked on 49,450 doors and had innumerable conversations with voters. The vast majority of them were welcoming and open about sharing their views and issues of concern. Most of us live in a "bubble" in our everyday lives. We met voters of all political stripes, backgrounds and diversity. Without running for public office, I would never have met 90% of these individuals or found out their take on the issues of the day. It was very reassuring that the vast majority do not subscribe to the radical views on either extreme of the political spectrum filling our airwaves. Many voters expressed frustration with the apparent inability of our elected officials to get things done on behalf of their constituents.

I was offered multiple bottles of ice-cold water and cooling off in the air-conditioned comfort of voters' home during the summer. I even did three impromptu skin cancer screenings! The most memorable door knocking moment happened in Kirkwood where I met a gentleman whose father-in-law served in Gen. George Patton's 71st infantry that liberated my mother from Gunskirchen concentration camp on May 4, 1945. Also part of that unit was Gen. Dwight Eisenhower's son, who served under an assumed name.

There certainly were some negative experiences in the campaign, with the usual doxing and negative ads full of lies, innuendo, misinformation and disinformation by my opponent that seem to be part and parcel of many political campaigns today. The liberating aspect of this was that you don't need to worry about skeletons in your closet as the opposition will just conjure them up from thin air if you don't have any. Fortunately, most voters discount the negative ads as they have been so overused and discredited. More concerning were some of the overly enthusiastic supporters of my opponent who made expletive-filled attack calls to my office staff and to my after-hours patient emergency line. One even tried to run my campaign manager off I-270. In a more humorous interaction, an enthusiastic opponent threw a Big Gulp at my wife's car on the highway not realizing that her window was closed, so the car just got a bit sticky.

The positive aspects of the campaign far outweighed the negatives. I was overwhelmed by and so grateful for the incredible outpouring of help and support from the many volunteers and supporters, especially from the physician community in St. Louis, across the state and across the country. I am now running in the 2024 election to represent physicians and our patients in the Missouri House and hope that some of you will choose to run for office and join me in the Legislature.

I will gladly share the good, the bad and the ugly of running for office. If you do choose to run for office, it is essential that you have the full support of your spouse. My wife Carrie was and is truly my secret weapon and partner in this endeavor. There is strength in numbers!

For more information about my campaign and platform go to hruzaformissouri.com.

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