

Ursa Foundation Enriches Washington Osteopathic Foundation



From left, Ursa President Loren H Rex, DO, WOF President David Lukens, DO and Ursa Treasurer Sharelle Leick.

The Ursa Foundation was founded in 1976 because a group of osteopathic physicians felt an organization was needed to provide training in manual treatment techniques to interested parties without discrimination as to earned degree. Ursa courses emphasized a "hands-on" approach with a high faculty-to-student ratio in a low pressure learning situation. Courses were specifically designed for the clinician desiring to learn new techniques which could be put to immediate use in his or her practice.

Although not an osteopathic institution, Ursa was affiliated with WOMA since 1980 so that DO's attending courses could obtain 1-A AOA approved CME. During this seventeen year relationship, Ursa and Dr. Rex contributed nearly \$100,000 to WOF, most of which provided low-interest loans to osteopathic medical students intending to practice in Washington.

Upon Dr. Rex's retirement, Ursa dissolved and its board voted to donate its funds to the Washington Osteopathic Foundation stipulating its use for OMM training.

AOA CME Cycle Ends December 31st

If you still need Category 1-A credits for this CME cycle, WOMA has two programs scheduled to help you. On Saturday, September 26th, WOMA's annual OMM/WOF

fundraiser will be held at PNWU in Yakima. On Saturday, December 5th, WOMA's Winter Seminar, "The New Face of Chronic Health Problems" will take place at the Hilton

Marc Cote, DO Named Physician of the Year



WOMA President Harold Agner, DO, presents Dr Cote with an engraved crystal desk set commemorating his award.

Marc Cote, DO, became a WOMA member just seven years ago, getting involved immediately when a vacancy opened up for a District Trustee. He moved quickly up the ranks, serving as President in 2013.

Dr. Cote is a 1982 graduate of KCUMB. He completed a transitional internship in 1983 and an internal medicine residency in 1986 at Fitzsimmons AMC in Aurora, CO. He completed a nuclear medicine fellowship there in 1994. He left Fitzsimmons for Madigan AMC and served as Acting/substitute Chief Medical Officer and Chair of the Department of Radiology from 2004-2008.

He served as Senior Physician and Regional Medical Director of Clinical Operations for the Western Region Medical Command at Joint Base Lewis McChord before leaving the Army for PNWU. He currently serves as Chair of Clinical Medicine and Associate Professor and Division Chief of Internal Medicine.

Dr. Cote and his wife, Sherri, maintain homes in Olympia and Yakima.

Doubletree SeaTachotel. Watch your email or the WOMA website for registration information.



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The "Washington DO" is the official publication of the Washington Osteopathic Medical Association, published in February, May, August and November. Members are encouraged to submit articles for potential publication. Signed columns are, in all cases, the opinion of the author. For advertising information, please contact the WOMA executive offices at (206) 937-5358. Deadlines for ads and articles are the 10th of the month preceding the publication.

Meetings Notice

Friday, September 25, 2015

CME Committee

7:00 p.m.

Saturday, September 26, 2015

WOF Board

6:00 p.m.

WOMA Board

6:30 p.m. Dinner

All meetings are at the
Oxford Suites
1701 E Yakima Ave
Yakima, WA

Getting to Know You

WOMA is pleased to welcome the following new Active Members:

Marie Cadwell Meyer, DO graduated from PNWU in 2012 and just completed her residency at East Pierce Family Medicine.

Irene Grias, DO is a 2007 graduate of MSUCOM. She completed her internship and residency in Obstetrics and Gynecology at Botsford Hospital in 2011 and in 2013 finished a fellowship at Drexel University College of Medicine Hahnemann Hospital specializing in Minimally Invasive Gynecology. She currently practices the same specialty at St Anthony Hospital in Gig Harbor.

Deborah Havens, DO a 1999 graduate also from MSUCOM, finished her residency in Internal Medicine at Henry Ford Hospital in 2004 and fellowship in Occupational and Environmental Medicine at the University of Washington in 2012. Her present practice focus is Internal Medicine/Occupational and Environmental Medicine/Public Health/Research and is currently working at Valley Medical Center in Renton.

Kyong Kim, DO graduated from UNT/TCOM in 1991. He completed an internship at Oakland General Hospital and then a residency in Anesthesiology in 1995 at the Illinois Masonic Medical Center. Following, he finished two fellowships. The first being in Critical Care Anesthesia at Northwestern University School of Medicine in 1997 and the second in Pain Management at the New England Medical Center at Tufts University School of Medicine in 1998. He is currently the medical director at the Puget Sound Pain Clinic in Lakewood.

Jeffrey Krusniak, DO is a 1997 graduate of KCOM. He completed his internship and residency in Orthopedic Surgery at Genesys Regional Medical Center in 2002. He is board certified in Orthopedic Surgery and practices at Peace Health United General Medical Center in Sedro Woolley.

Mark Mikols, DO another MSUCOM graduate in 2001, completed his residency at Munson Family Practice

WOMA Welcomes New Members

At its quarterly meeting on June 25, 2015, the Board of Governors approved the following applications for membership:

Active

Marie Cadwell Meyer, DO PNWU '12

Irene Grias, DO MSUCOM '07
Deborah Havens, DO MSUCOM '99

Kyong Kim, DO UNT/TCOM '91

Jeffrey Krusniak, DO KCOM '97

Mark Mikols, DO MSUCOM '01

Steven Montague, DO COMP '92

Terri Turner, DO COMP '92

Associate

Patrick Wedlake, DO TCOM '87

Postgraduate

Annaliese Stone Casey, DO RVU '15

Jeremy Casey, DO RVU '15

Jacob Christensen, DO MWU '15

Stephanie Ellwood, DO MSU '15

Ragina Lancaster, DO LECOM '15

Student

Wesley Jones ATSU '16

Life

Bob Adams, DO

Tom Dawson, DO

Larry Lefors, DO

Judith Lewis, DO

Richard Simmons, DO

Residency Program in Michigan and practiced in Guam at the Naval Hospital for 3 years. He currently practices Urgent Care and Family Medicine at Valley Medical Center in Renton.

Steven Montague, DO graduated from COMP in 1992. His residency was completed at Swedish Medical Center, UW Family Medicine in 1995. His present practice focus is Personalized Medicine at Evergreen Health in Woodinville.

Terri Turner, DO is a 1992 graduate of COMP as well. She finished her Internal Medicine internship and residency at Alameda County Medical Center, Highland Hospital in Oakland, CA in 1995. She is currently working as a Hospitalist at the VA and in private practice in Spokane.

2016 WOMA Board Elected

At its annual membership meeting held June 26, 2015 at Blaine, WA, WOMA members elected its 2016 Board and AOA Delegates. The Executive Committee will assume its duties on January 1, 2016 for a one-year term. Incoming president Scott Fannin, DO, is encouraging members who are willing to serve on a committee to contact him or Executive Director Kathie Itter.

Joining Dr. Fannin on the Executive Committee will be President-elect Michael Scott, III, DO, Vice President Mischa Coleman, DO, Secretary David Farrell, DO, Treasurer Mark Hunt, DO and Immediate Past-President Harold Agner, DO.

Trustees elected to two-year terms commencing January 1, 2016 are District 1 Nathanael Cardon, DO; District Jeanne Rupert, DO; District III Rose-Marie Colombini, DO and David Lukens, DO; District 4 Amber Figueroa, DO and District 5 Heather Phipps, DO. (There is currently a vacancy for a Trustee representing District 1 which includes, Whatcom, Skagit, Snohomish, San Juan and Island Counties. If you are interested please contact Kathie Itter at kitter@woma.org or call 206-937-5358.)

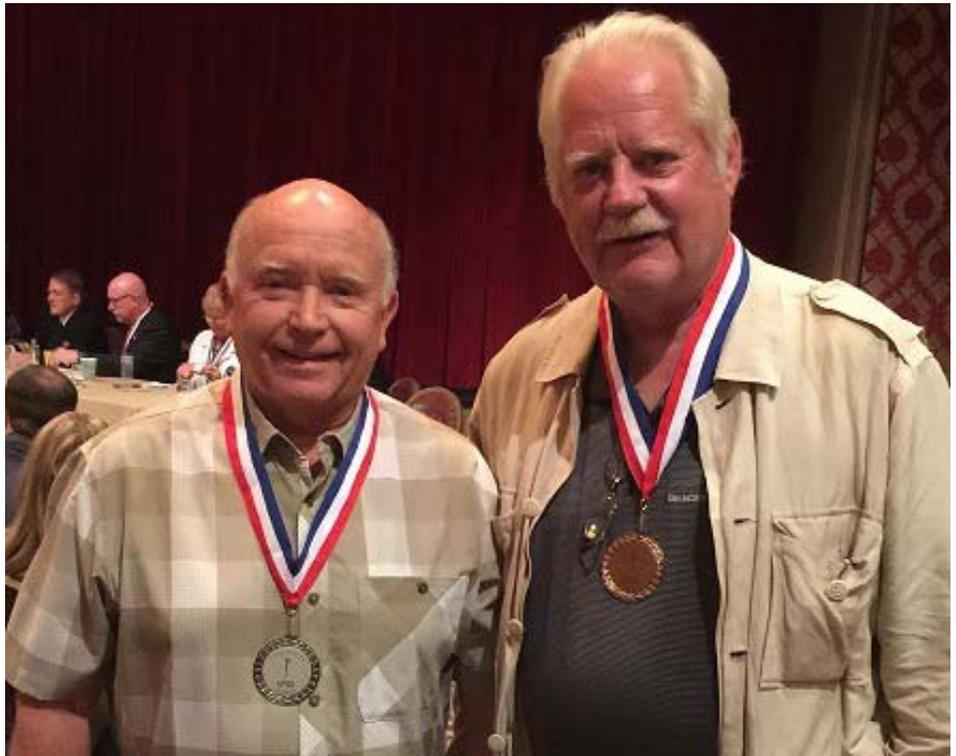
The Institutional Representative is Marc Cote, DO. Tara Nair, DO was elected as the postgraduate member and Tom Hanna, OMSII will serve as the student representative.

AOA Delegates for 2016 are Harold Agner, DO, Paul Emmans, Jr, DO, Paul Emmans, III, DO, Scott Fannin, DO, Amber Figueroa, DO and David Lukens, DO. Marc Cote, DO and Anita Showalter, DO were elected as Alternate Delegates.

Congratulations to everyone!

Save the Date!
103rd Annual Northwest Osteopathic Convention
June 23-26, 2016
Semiahmoo Blaine, WA

AOA House of Delegates



WOMA delegates David Lukens, DO and Paul Emmans, DO were honored for 30 and 25 years (respectively) of service as AOA Delegates at the annual meeting in Chicago in July.

I was again honored to attend the AOA House of Delegates annual business meeting in Chicago this past July and represent Washington State and WOMA along with my distinguished colleagues Paul Emmans, Jr., DO, David Lukens, DO, Scott Fannin, DO, Anita Showalter, DO, Marc Cote, DO Student Delegate Braxton-Jesse Lee and Student Alternate Taylor Brown.

As you may recall, last year was noteworthy in large part due to the approval of the AOA/ACGME joint accreditation process. This year, there were several resolutions and much discussion updating delegates on this issue. While that process is well underway, continuing approval and support was lent to the process.

I attended the Education reference committee where WOMA had a resolution presented. Our resolution was in opposition to MOC (maintenance of certification). Specifically, the resolution was to ensure that the MOC process was not tied to state licensure. There were at least 3 other very similar resolutions presented to the committee. These

resolutions were combined into one resolution which succinctly represented WOMA's interests for presentation to the floor. It passed easily upon presentation to the general assembly. There were a number of policy resolutions (referenced on AOA HOD highlights page) as well including:

- increased mental health resources for students and DOs
- support for ending ban on sperm donation by gay men
- support for expanding laws to protect physicians against violence
- New AOA policy for responsible antibiotic stewardship

Other highlights were the A.T. Still lecture delivered by President Peter B. Ajluni, DO, and the incoming president, Dr. John W. Becher's address during the Saturday sessions. The thrust of these messages were acknowledging the rapid growth of the osteopathic profession and using our numbers and influence to craft and influence policy in national medical politics.

Respectfully submitted,
Paul (PJ) Emmans III

2015 Convention Provides Great CME and Fellowship

Clockwise from top right: Registrants enjoyed plenty of lab time in an afternoon of OMM application to walking issues; two VIP tickets and an autographed Tim Allen poster started a bidding war in the WOF annual fundraiser auction; Sheila Kennedy, DO and David Escobar, DO try out techniques on Cheryl Hayes, DO; Long Vu, DO applies OMM techniques to wife Christen Vu, DO; Rebecca Locke, DO and Elina Chernyak, DO team up on patient Rose-Marie Colombini, DO; Minnie Mouse (Aurora McCone) assists in recruiting 2015 Osteopac Members; Lobbyist David Knutson provides a legislative update; President Agner presents Tom Dawson, DO with his Life Membership certificate; AOA Trustee Mark Baker, DO briefs registrants on the progress of the ACGME merger and the future plans of the AOA.



and A Venue for Old and New Friends to Network



Trustee David Hofheins, DO reports for District 5



Past President Scott Fannin, DO presents Harold Agner, DO with the 2015 President's Plaque.



Trustee Amber Figueroa, DO reports for District 4



Aurora McCone (daughter of WOMA member Lindy Griffin, DO) assists auctioneer Scott Fannin, DO in presenting an autographed Seahawks jersey for bidding.



Trustee Jeanne Rupert, DO reports for District 1



Auctioneer Scott Fannin, DO enjoys competitive bids for an array of home canned preserves from Dr. Figueroa.



Registrants enjoy new A/V as David Kanze, DO demonstrates techniques
Washington D. O. Summer 2015

WOMA Resolutions

At its annual meeting on June 26, 2015, the WOMA membership approved two resolutions. The first resolution, opposing Maintenance of Certification/Osteopathic Continuous Certification as a condition of licensure was submitted to the AOA House of Delegates. It reads:

WHEREAS, there is an education process (Continuing Medical Education) in place that has been effective for many years and the State Licensing and Disciplinary Boards have oversight that its physicians have fulfilled this requirement for licensure; and

WHEREAS, state licensing and disciplinary boards have mechanisms to identify and discipline osteopathic physicians who pose a threat to the public; and

WHEREAS, there is question as to the existence of documented evidence that proves that passing a written exam and recertification has any direct correlation on quality or protection of public safety above the established training and licensing program now, therefore be it

RESOLVED, that the AOA recognizes that the recertification requirements of maintenance of certification are costly, time consuming and disruptive of physician time for patient care, while lacking any proof of improving patient care; and BE IT FURTHER

RESOLVED, that the AOA opposes any efforts to mandate maintenance of certification/osteopathic continuous certification as a condition for state licensure, hospital staff privileges, reimbursement from third party insurance parties, malpractice coverage and as a requirement for physician employment; and BE IT FURTHER

RESOLVED, that the AOA advocates that if a state licensure entity chooses maintenance of certification/osteopathic continuous certification as an option for re-licensure, alternate existing requirements, such as CME, should remain an option for re-licensure.

The resolution was combined with similar resolutions from other osteopathic societies and approved by the AOA Delegates.

The second resolution, to be shared with members of the Washington State Legislature, opposes participation of Washington State in the Interstate Medical License Compact. WOMA is not opposed to a single credentialing system for those who wish to be licensed in several states, but it is concerned about the potential cost to licensees. The resolution reads:

WHEREAS, The Interstate Medical Licensure Compact (Compact) will supersede State authority and collection of fees for renewal of licenses originally processed by the Compact; and

WHEREAS, the implementation of the powers and duties of the Compact to establish and maintain an office (or offices) and employees could be cost-prohibitive; and

WHEREAS, Compact language states the Interstate Commission may levy and collect an annual assessment from each member state to cover the cost of the operations and activities of the Interstate Commission, and

WHEREAS, the possibility of civil suites adds another high cost for which member states could be liable; and

WHEREAS, the likelihood that the branches of government in several states could come to an agreement on any actions in a time-efficient manner to have meaningful impact on the enforcement of the Compact's purpose and/or intent

WHEREAS, state law requires that each professional licensing program is self-funded through licensing fees, passing any increase in program expenses levied by the Compact to be borne by the licensees which could dramatically increase those fees,

WHEREAS, it is the belief of the Washington Osteopathic Medical Association that the Compact should be self-funded by fees, just as is required for state licensure and therefore be it

RESOLVED, that the Washington Osteopathic Medical Association oppose any participation by the State of Washington in the Interstate Medical License Compact as it currently exists ; and, be it further

RESOLVED, that the members of the Washington State Legislature be encouraged to oppose any participation by Washington State in the Interstate Medical License Compact as it currently exists.

Explanatory Statement:

The Washington Osteopathic Medical Association supports the concept of an expedited credentialing process for licensing in multiple states. We have concerns with Washington State's participation in the Compact, as follows:

1. Once the expedited credentialing process has been completed, we do not believe that the licensee should have to renew and pay renewal fees through the Compact? (Section 7). The State should be able to process and collect fees of license renewals once an initial license has been granted using the expedited service of the Compact.

2. The implementation of the powers and duties of the compact (Section 12) to establish and maintain an office (or offices) and employees could be cost-prohibitive.

3. The Compact should cover the cost of operations and activities through fees collected, just as our licensing boards are required to do. States should not be required to subsidize any uncovered budgeted items. (Section 13)

4. The possibility of civil suits adds another high cost for which member states could be liable. (Section 14)

5. The accountability provisions are problematic. This organization proposes to make and enforce its own rules which have yet to be written. (Section 17) We question the likelihood that the branches of government in several States could come to an agreement on any actions in a time efficient manner to have any meaningful impact on the enforcement of the Compact's purpose and/or intent. (Section 16)

For these reasons we believe there is a potential for the Compact to infringe upon the authority of the Board of Osteopathic Medicine and Surgery and raise licensing fees dramatically.



Bear Droppings... ..

by Loren H. Rex, D.O.

Back in the day, when I was a "Show Bum", time tended to be measured in "Seasons" which were about 30 to 35 weeks long. The shows I was a part of were called by different names, one of which was "wild animal circuses" and were seen as educational for children without access to Zoos rather than terrible people doing even more terrible things against defenseless animals. However, no matter what, the owners could not stop feeding the side show animals just because the season was over. Besides there was not going to be any income until spring which was several weeks away. Therefore, when the show was contacted about the possibility of renting an elephant for a fall parade it was welcomed as a godsend to the hay budget for winter.

What could be more American than a good old fashioned parade? Who doesn't love a parade? There are brass bands with Drum Majors and a bevy of beautiful Majorettes along with a number of floats and the usual King and Queen Contest. Of course, there needs to be a constant infusion of new ideas to keep the whole thing fresh and appealing to the locals. Still with all the input, it often seems somehow that something is missing. With this in mind, a regional dairy that had for years provided a float concluded, no doubt an idea that came from someone in the bowels of the advertising department, that this year the way to provide the missing feature could be an ELEPHANT! OK, OK I already know that each and every time I write about those big gray killers, waiting for their chance, I will get hate mail from the Loxodontaphiles in the world, so fire away.

The idea was that the dairy would construct a replica of a milk carton of the day, which as some of you will remember, these cartons were rectangular, made from waxed cardboard and glued together in a little tent at the top. This

configuration allowed one side of the top to be pulled open providing a spout for the contents. The idea was absolute genius; all that was needed was a calm elephant to provide a back as a stable platform for carrying the milk platform in the parade. This was overall a simple request and fortunately the circus had the perfect elephant for the job: MYRTLE

Myrtle's stellar qualification for the job was an obvious anomaly concerning her tail. Her tail was approximately one foot shorter than would be expected for an elephant of her size. Years before, Myrtle had the habit of flipping her tail into the lion's cage while standing in the sideshow and eating grass. Apparently, the lion considered this some sort of indignity to him in the order of jungle ranking and taking umbrage to the whole thing, one night he simply bit off Myrtle's tail. This had failed to rouse Myrtle from her usual semi-comatose condition when eating. The legend of Myrtle's docility was born. Obviously, Myrtle was perfect for the job.

On the day of the great parade, Myrtle was transferred by private motor coach, read truck, to her position along the parade route where she was to be fitted with the aforementioned replica milk carton and then inserted smoothly into the parade at the proper moment. There are two basic means for placing something or someone onto an Elephant. If you are trying to get on an Elephant, you can stand in front of the Elephant and grab onto the Elephant harness and be lifted on to the head or if it is a structure, the elephant gets down on their tummy and the load is placed on their back and then the Elephant arises and the load is secured. The latter was used in preparing Myrtle for the parade. All necessary straps were secured and Myrtle placidly munched the tasty fall grasses within reach awaiting her chance for stardom. What could possibly go wrong?

As with most historical stories, there is no way to know what caused the next happening. As these things become legend, the possibilities become more numerous. Who is to say, perhaps it was a bright light that flashed in Myrtle's dimly lit brain or perhaps there was a noise heard only in a range within Myrtle's hearing. I suppose it could even have been a sudden realization that she suffered from Lactose Intolerance: naw! Whatever it was, we do know that there was a sudden trumpeting followed by a general fertilization of the immediate area and Myrtle was off to the races. A rapidly disappearing ponderous Pachyderm rearranging a white picket fence's orientation from vertical to horizontal, clothes lines becoming part of Myrtle's parade dress, complete with sheets flapping on either side behind her were seen. Bushes ripped up and flying, garden produce disappearing beneath large grey flat feet and ineffective humans who were being left in the rear of a totally new parade route. On and on Myrtle rambled toward an unknown destination or perhaps a destination known only to her. Myrtle was flattening fences, pulling up clothes lines, adding debris to her collection of attached articles and maintaining her Elephant induced mayhem for what would soon be legend.

Then, as quickly as it had started, it was apparently over. Myrtle stopped her headlong flight and began standing in the midst of her ill-gotten collection of suburban treasures. From a human perspective Myrtle was most likely chargeable with a bout of bad behavior. On the other hand, let he who is without sin cast the first stone. At any rate, when the local posse of interested parties, who were generally quite winded from the adventure, caught up with Myrtle, there was nothing left to do but breakout the yellow CRIME SCENE tape and the cameras. Myrtle, the perp of all the action, was quietly doing her thing, availing herself of the succulent remains of summer gardens and showing herself to be the Elephant of legend: unflappable Bear

Medical Marijuana Authorizations Reporting

The Department of Health has completed two important tasks required to be in place July 24, 2015:

1. Providing a way for healthcare practitioners to report each calendar month they write more than 30 new or renewed authorizations for the medical use of marijuana. Reporting is required beginning July 24, 2015, and ends July 1, 2016. Healthcare practitioners who write more than 30 authorizations in a calendar month must report using the Medical Marijuana Authorizations Electronic Survey. A link to the form is located at www.woma.org.

2. Developing a standard form for medical marijuana authorizations. Starting July 24, 2015, all new authorizations must be written on the standard form below. Starting July 1, 2016, all authorizations must be on this new form in order to be valid. The form must be printed on tamper-resistant paper. A link to the form is located at www.woma.org.

Please direct questions to medicalmarijuana@doh.wa.gov.

ProviderOne compatibility with new Microsoft internet browser "Edge"

HCA and DSHS have received reports of providers encountering issues while using ProviderOne on Microsoft's new Edge internet browser, which replaces Internet Explorer in the new Windows 10 release.

Most of the issues have arisen because Edge automatically enables a pop-up blocker. When using ProviderOne, your browser's pop-up blocker must be disabled. Please refer to the instructions attached to this communication for instructions on how to set the pop-up blocker to "off" in Edge.

In addition, ProviderOne is not yet fully compatible with Edge, so to

Prior Authorization to be Required for Methadone by Apple Health

Effective for dates of service on and after September 1, 2015, Washington Apple Health (Medicaid), administered by the Health Care Authority, will require prior authorization for methadone.

The agency is changing the authorization status for methadone as directed by the Washington Medicaid Drug Utilization Review board due to concern over the high number of methadone related fatalities in the State of Washington. The agency will require authorization for new starts for methadone when medically necessary, as evidenced by intolerance to or failure of all generic long-acting opioids to treat the client's pain.

The agency will allow clients currently receiving methadone to continue receiving methadone without authorization or restriction when the agency has record of payment for methadone in the last two months.

The agency will also continue to cover methadone without restriction for clients actively being treated for cancer pain, using expedited authorization (EA) code 85000000040.

For clients new to Washington Apple Health for whom the agency does not have current record of payment for methadone, but who have been actively taking methadone paid for out-of-pocket or by another payer, pharmacies may request authorization by calling toll-free 1-800-562-3022 ext. 15483 and indicating that the methadone is a continuation of current treatment for the client.

For more information, see the agency's Washington Preferred Drug List (WPDL) and Expedited Authorization List (EA).

prevent further issues, you can also enable Edge to open as Internet Explorer 11. Those instructions are also included in the attachment and should be used if there are additional

Small Practice Termination by Insurer

Earlier this year we received notice from a member that his contract with a large insurer had been terminated. Unfortunately he had waited until after the appeal deadline to bring this to our attention. If you receive a notice of termination from an insurer, the AOA recommends you take the following action:

You will usually have a short amount of time to refute a termination, so make sure that you follow all steps outlined in the letter. These steps should include the following:

1. Immediately call the telephone number on your termination letter to request reports related to your practice's panel size, administrative compliance and patient-specific information. The requested data SHOULD BE returned to you by fax and/or email within one business day. If you request that the information be returned to you via email, be sure that responses are not delivered as spam.

2. If you have a subspecialty, make sure your claims data is compared to the appropriate specialty.

3. After you review the documentation you receive for accuracy, write a letter to refute the termination that includes specific information. For example:

4. Illustrate that the geographic region may be underserved

5. Provide background that the plan may not have, such as the network would be too limited due to factors such as the retirement of certain physicians or other information

6. Describe the unique services offered by the terminated physician

7. In addition, appeal letters should request a physician-to-physician conversation with the medical director.

8. Your justification and supporting documentation should be mailed via certified mail within the stated time frame.

problems encountered while using ProviderOne in Microsoft Edge.

If you have further questions or concerns, please contact mmishelp@hca.wa.gov.

PNWU Receives \$1.75 Million Grant

Pacific Northwest University of Health Sciences (PNWU) has received a \$1.75 million grant from the Health Resources and Services Administration's (HRSA) Primary Care Training and Enhancement (PCTE) program. The purpose of this five-year grant is to develop an interprofessional practice program that covers primary care fields including pediatrics, internal medicine, family medicine, long-term care and rehabilitative care. This project is a collaboration between Heritage University's Physician Assistant (PA) Program and the PNWU College of Osteopathic Medicine. The project will contribute to the development of the Yakima Valley Interprofessional Practice and Education Collaborative (YVIPEC).

The grant will allow faculty members and students to learn and engage in team-based care which begins with fundamental concepts in the classroom, simulation training and standardized patient activities, culminating in clinical training at primary care facilities in the local community.

"This grant represents a significant step forward to developing clinical sites within our community that will be using a team-based approach to medical education," said Dr. Robert Sutton, one of the key organizers of YVIPEC and Senior Advisor to the President at PNWU.

"Health education has traditionally been conducted in discipline specific

silos that discourage adequate preparation of future practitioners for team-based care and collaboration. Interprofessional collaborative education, conversely, occurs when health professions students learn about, with, and from one another," Dr. Sutton continued.

Throughout the program students will learn how to engage patients and their families, and assess effectiveness in terms of team-based collaboration, quality of care, patient outcomes and patient satisfaction.

The collaborative project will be administered by Pacific Northwest University of Health Sciences (PNWU) College of Osteopathic Medicine and Heritage University Physician Assistant Program. The aim of the project is to create a rural primary care workforce that engages in team-based clinical practice. The collaboration will align the education of the primary care workforce with changes in the clinical practice environment through enhanced training of current and future primary care physician assistants (PA) and doctors of osteopathic medicine (DO), preparing them for interprofessional primary care teams.

Other local organizations participating in the project are the Yakima Union Gospel Mission, Toppenish Community Hospital, Community Health of Central Washington, Yakima Valley Farmworkers Clinic and Landmark Care Center.

HCA Provider Alert

Effective August 1, 2015, all claim denial and service limit requests submitted through Contact Us will be issued a confirmation page that includes a date and time stamp instead of a service request number.

At the Contact Us form screen submit the claim denial or service limit request and the confirmation page will be displayed. A print button is provided at the lower right corner of the screen to print the confirmation for your records.

The Claims Processing Office will reply to the request using a new email address. This address is claimerror@hca.wa.gov. Please do not send replies to this address.

Any additional or follow-up questions to your response should

be submitted through Contact Us at <https://fortress.wa.gov/hca/p1contactus/> including the ticket number entered into the Other Comments field.

Note: Please be sure to add the claimerror@hca.wa.gov email address to the Safe Senders list in the email system you use so it will not be blocked or received in your junk email folder.

This notice applies only to Claim Denial and Service Limit inquiries. All other types of Contact Us requests will continue to be issued a service request number and processed by the Medical Assistance Customer Service Center (MACSC).

PNWU Student Receives Prestigious Scholarship



Patricia Egwuatu, OMSIV

Pacific Northwest University of Health Sciences student Patricia Egwuatu has been awarded the William G. Anderson, DO, Minority Scholarship by the American Osteopathic Foundation.

According to the Foundation, the scholarship recognizes an outstanding minority osteopathic medical student who is committed to osteopathic principals and practice, has excelled academically, and has proven to be a leader in addressing the educational, societal, and health needs of minorities. Student Doctor Egwuatu served as the student representative to the WOMA Board of Governors in 2014.

"We are immensely proud of Student Doctor Egwuatu's accomplishment," said Dr. Thomas Scandalis, Dean of the College of Osteopathic Medicine. "Dr. Anderson has been a beacon for our profession, and it is noteworthy that Student Doctor Egwuatu has been chosen as the recipient of the scholarship that bears his name," Dr. Scandalis continued.

Student Doctor Egwuatu will receive a \$7,500 scholarship award to be presented at the annual Osteopathic Medical Conference held this coming October.

2SSB 5052 – Cannabis Patient Protection Act

On April 24, 2015, Gov. Inslee signed 2SSB 5052, the Cannabis Patient Protection Act (PDF). This act creates licensing and regulation of all marijuana producers, processors and retail stores under the oversight of the renamed Washington State Liquor and Cannabis Board (LCB). Information about licensing is on LCB's website. It also directs the Department of Health to complete tasks that include:

Contracting with a third party to create and administer a medical marijuana authorization database; Adopting rules relating to the operation of the database; Adopting rules regarding products sold to patients and their designated providers; Consulting with the LCB about requirements for a retail store to get a medical marijuana endorsement; Creating a medical marijuana consultant certification program; Developing and approving continuing education for healthcare practitioners who authorize the medical use of marijuana; and Making recommendations to the legislature about establishing medical marijuana specialty clinics. **Effective April 24, 2015:**

The department must begin work to establish the database.

No person under the age of 21 may participate in a collective garden or receive marijuana that is produced, processed, transported or delivered through a collective garden. A valid designated provider age 21 or older may participate in a collective garden on behalf of the patient.

The LCB may conduct controlled purchases from licensed retailers and collective gardens to ensure they're not providing marijuana to people under the age of 21.

Effective July 24, 2015: Post-traumatic stress disorder and traumatic brain injury are added as qualifying conditions. A qualifying condition must be severe enough to significantly interfere with the patient's activities of daily living and ability to function, which can be objectively assessed and evaluated. All new authorizations must be

written on a form developed by the department and printed on tamper-resistant paper. Patient examinations and re-examinations must be performed in person at the healthcare practitioner's permanent business location. Healthcare practitioners who write more than 30 authorizations per month must report the number to the department. Healthcare practitioners cannot have a practice that consists primarily of authorizing the medical use of marijuana. No more than 15 plants may be grown in a single housing unit even if multiple patients or designated providers reside there. Butane extraction is prohibited unless the person is a processor licensed by the LCB.

Effective July 1, 2016:

All marijuana producers, processors and retail stores must be licensed by the LCB. All marijuana and marijuana products must be tested for safety and THC/CBD levels, accurately labeled, and sold in child-resistant packaging. Licensed retail stores may apply for and get a medical marijuana endorsement. All authorizations must be written on a form developed by the department and printed on tamper-resistant paper. All other forms of documentation are no longer valid. Patients under 18 years of age must have permission from a parent or guardian, and must participate in treatment. The database becomes operational. Patients and designated providers may be entered into the database by presenting their authorization to a licensed retail store with a medical marijuana endorsement. Possession amounts change depending on whether the patient or designated provider is entered into the database: **Entered:** May purchase up to three times the current limits at licensed retail store with a medical marijuana endorsement and may possess six plants and eight ounces of useable marijuana; healthcare practitioner may authorize additional plants to a maximum of 15; purchases at retail stores with a medical marijuana

endorsement are not subject to sales tax; provides arrest protection. **Not entered:** Patient or designated provider can be arrested but has an affirmative defense to criminal prosecution for possession of up to four plants and six ounces of useable marijuana; may not participate in cooperatives; purchases at retail stores limited to amounts for all adults and are subject to sales tax.

Up to four patients and designated providers may form a cooperative at the residence of one of the members and may grow the total authorized amount for the four members. Cooperatives must be registered with the LCB. A healthcare practitioner may sell or donate to patients topical products that have less than 0.3 percent THC. Collective gardens under the old law are no longer allowed. New language allows for cooperatives with specific restrictions.

Decision from the Washington Supreme Court

A May 2015 decision by the Washington Supreme Court has clarified that Chapter 69.51A RCW doesn't legalize the medical use of marijuana. It only provides qualified patients holding a valid recommendation and their designated providers with an affirmative defense to criminal prosecution.

Is Your Listing Current?

One of the benefits of WOMA membership is inclusion in the Find a DO Directory on the WOMA website. It is set up to search for a physician by last name, specialty, city or zip code.

Members are encouraged to check their information in the listing and notify WOMA staff of any corrections. Go to www.woma.org. Log in using the primary email address you provided to WOMA and the password you chose when you first logged in. If you need assistance, call the WOMA office at 206-937-5358.

Convention Supporters Appreciated



President Agner thanks Executive Director David Tate for the grant provided by the NOMF.

WOMA is thankful to the Washington Osteopathic Foundation and the Northwest Osteopathic Medical Foundation for their grants in support of the convention CME program.

The following firms are also recognized for their support as exhibitors: AbbVie, Amgen, Atossa Genetics, ATSU-SOMA, Cell Science Systems, HEAL-WA, Indivior, Lilly and Company, Medical Protective, National Reference Lab for Breast Health, NW Osteopathic Medical Foundation, Osteopac, Physicians Insurance, PNWU, Purdue Pharma, Sanofi Diabetes, Teva Pharmaceuticals, US Air Force, and Western U COMP NW. Please express appreciation for their support if the opportunity presents itself.

Fall Seminar Features Cases and Lab Time

WOMA's Fall Seminar is scheduled for Saturday, September 26th at PNWU in Yakima. Program Chair David Kanze, DO, and faculty members Harold Agner, DO, Michele Coleman, DO and Steven Leifheit, DO will present an interesting array of cases utilizing OMT to discuss. Different treatments will be examined and taught with plenty of lab time to practice.

All faculty are donating their time so that the proceeds may benefit the Washington Osteopathic Foundation which provides support to osteopathic medical students and training programs.

DEA Announces 10th National Prescription Drug Take-Back

DEA Acting Administrator Chuck Rosenberg today announced that the 10th National Prescription Drug Take-Back will take place September 26th from 10 am-2 pm local time in every state but Pennsylvania and Delaware, where the event will take place on September 12. As with the previous nine Take-Back events, sites will be set up throughout communities nationwide so local residents can return their unwanted, unneeded, or expired prescription drugs for safe disposal.

Collection sites in every local community can be found by going to www.dea.gov. This site will be continuously updated with new take-back locations.

The National Prescription Drug Take-Back addresses a vital public safety and public health issue. Many Americans are not aware that medicines that languish in home cabinets are highly susceptible to diversion, misuse, and abuse. Rates of prescription drug abuse in the U.S. are at alarming rates, as are the number of accidental poisonings and overdoses due to these drugs. Studies show that many abused prescription drugs are obtained from family and friends, including from the home medicine cabinet. In addition, many Americans do not know how to properly dispose of their unused medicine, often flushing them down the toilet or throwing them away – both potential safety and health hazards.

“Prescription drug abuse is a huge problem and this is a great opportunity for folks around the country to help reduce the threat,” Rosenberg said. “Please clean out your medicine cabinet and make your home safe from drug theft and abuse.”

In the previous nine Take-Back events nationwide from 2010-2014, 4,823,251 pounds, or 2,411 tons of drugs were collected.

If you are unable to attend but would like to make a tax-deductible contribution to the Foundation, send your check made payable to WOF to PO Box 16486, Seattle, WA 98116-0486.

Suicide Prevention Training Update

This year, the legislature passed Engrossed Substitute House Bill 1424. The governor signed it into law, becoming effective July 24, 2015. The new law delays the suicide prevention training requirement for allopathic and osteopathic physicians and physician assistants, nurses, chiropractors, naturopaths, and physical therapists until January 1, 2016. Training taken between June 12, 2014 and January 1, 2016 (including WOMA's seminar on March 22, 2015) is valid and fulfills the requirement as long as the training met the requirements of the law and for your profession.

It requires the Department of Health (DOH) to adopt rules establishing minimum standards for the suicide prevention training programs by January 1, 2016. It requires that by July 1, 2017, only trainings that meet the new minimum standards can be on the department's model list of suicide prevention training programs. Three-hour training programs developed prior to July 24, 2015 must also be included on the model list.

The law requires all health care professionals who are required to take suicide trainings take trainings from the model list beginning July 1, 2017. Training taken before July 1, 2017 is valid and fulfills the requirement. It exempts certified nurse anesthetists, allopathic physician residents with a limited license, and osteopathic physician postgraduate licensees from the training requirement.

The DOH began rule-making activities in July to establish minimum standards for suicide prevention training programs.

Affected boards and commissions will revise their rules to implement the new law. Some began the work in July and some will wait until after the minimum standards are developed.

The DOH will update the current model list by December 31, 2015 and provide updates on these activities as they move forward. Please contact Kathy Schmitt at 360-236-2985 if you have questions about the new law.

Washington Osteopathic Foundation Contribution Form

(Please print legibly)



Donor Name _____

Address _____

City, State, Zip _____

Phone _____ Email _____

Amount of tax-deductible donation \$ _____

The WOF Tax-ID number is 23-7115033.

You may make your contribution in memory of a deceased person or in honor of someone living. If you wish to do so, please indicate below:

My contribution is in memory of _____

Or

My contribution is in honor of _____

Unless otherwise indicated, donations will be deposited in the general account to support loans, osteopathic training and CME in Washington State.

_____ I prefer my donation to go to the general loan fund.

_____ I prefer my donation to go to the Warren Lawless Scholarship Fund

_____ I prefer my donation to go to the Eugene Imamura Scholarship Fund

_____ I am interested in sponsoring a named scholarship fund. Please contact me.

Authorization to Charge Credit Card

Please charge to the credit card listed below: ___ Visa ___ MasterCard

Credit Card Number _____

Expiration Date _____ CID Number*

Name _____

(as it appears on the credit card)

Billing Statement Address _____

City, State, Zip _____

Authorized Signature _____ Date _____

*3 digit number on the back of credit card

Please send your form and contribution to:

WOF/PO Box 16486 / Seattle, WA 98116-0486

Phone 206-937-5358 /Fax 206-933-6529

Legislative Update

by David Knutson, Lobbyist

The 2015 Legislative Session adjourned on July 10, 2015, after 176 days, the longest legislative session in Washington State history.

The legislature passed a \$38.2 billion two-year operating budget that includes large increases in funding for transportation projects and education. There were also notable increases in health care and mental health funding. Some of the budget items that WOMA advocated for include funding for additional in-state residencies, funding for the Loan Repayment Program, and increased funding for mental health services. WOMA also was successful in defeating a proposal to increase B&O taxes on physician practices.

Operating Budget

Budget increases of interest to WOMA include:

- Lawmakers invested \$24.4 million in the Family Medicine Residency Network, the group of 24 primary care graduate medical education programs in the WWAMI region. HB 1485 provided that the Dean of PNWU and a representative of WOMA will be permanent members of the Residency oversight committee will be permanent members, and the Dean and his or her designee will be the permanent Co-Chair of the committee.

- A further \$8 million was invested in the UW Psychiatric Residency Program.

- Full funding (\$9.6 million) was restored to the Health Professional Student Loan Repayment Program for primary care health professionals.

Another area of emphasis in the budget includes mental health care, with an additional \$98 million for mental/behavioral health services to end the psychiatric boarding of mental health patients in hospitals as well as other mental health care needs; \$11.5 million in start-up capital for the newly established medical school at Washington State University; \$110 million for the state's health benefit exchange (\$40 million less than requested by

exchange officials); continuation of the Hospital Safety Net Assessment; and extension of the Children's Health Insurance Program.

Policy Legislation

SB 5175 – Provides reimbursement for services provided to patients using telemedicine technology.

SB 5084 – An All Payer Claims Database will be established to collect claims data from all health carriers operating in Washington State to improve health care transparency.

HB 1485 - Creates the Family Practice Oversight Committee and designates the Dean of PNWU and a WOMA member as permanent members of the Committee. The Dean of PNWU will Co-Chair the Committee with the Dean of the UW Medical School.

Bills that were defeated during the 2015 legislative session include:

SB 5815 – Which would have allowed Naturopaths to prescribe Schedule II-V drugs;

SB 5040 – Mandating a lay letter be sent to patients related to breast density; and

SB 5815 – Expanding the scope of practice for dentists.

Looking Forward to the 2016 Legislative Session

The 2016 legislative session begins on January 11, 2016, just 169 days away!

Legislators are already making plans for bills they plan to introduce in 2016. Likewise, interest groups and stakeholders that were not successful during the 2015 Session will be working to get their legislative proposals passed during the 60 day legislative session in 2016. A bill that "died" during the 2015 Session is still "alive" through the end of the 2016 Session, and can be enacted by the Legislature unless it "dies" again in 2016. Needless to say, bills that died this Session will be monitored to ensure they do not come back to life.

How does Osteopac Help Osteopathic Physicians?

Keeping informed about the osteopathic profession helps to prepare physicians when an issue arises that needs action. As a profession, we must ensure that those elected have the best interests of patients, physicians and the healthcare of Washingtonians in mind. Osteopac works to elect and re-elect pro-physician, pro-patient legislators by contributing to the campaigns of those with a history and/or platform showing support of the profession.

How can you get involved?

Donate - Consistent physician support is the only way WOMA can advocate for the profession. Without the voluntary support of the osteopathic physicians of Washington, representation of the profession would not be possible.

Stay Informed - Read WOMA legislative updates sent via email and in the Washington DO newsletter.

Respond - VoterVoice Alerts will be sent when we need physicians to mobilize and contact their legislators. Your voice makes a difference!

Participate - This is the single most effective way to ensure the voice of the profession is heard. Take one day per year to visit the State Capitol and advocate for your profession through the DO Day in Olympia Program.

Share Information - Don't let your colleagues be apathetic! Continuously stress the importance of advocacy and their obligation to their patients and profession. Let them know about all the things WOMA and Osteopac do for them!

Recognition - The Osteopac Capitol Club recognizes members who generously and consistently contribute to Osteopac. Capitol Club members receive annual recognition in the Washington DO newsletter (see page 16), recognition on the WOMA website, and a special name badge ribbon at the WOMA Annual Convention.

OSTEOPAC

Washington Osteopathic Physicians and Surgeons Political Action Committee
PO Box 16486 / Seattle / WA / 98116-0486 / (206) 937-5358 / Fax (206) 933-6529

August 7 , 2015

To All Washington Osteopathic Physicians,

We can all agree that health care delivery continues to undergo massive changes that threaten the economic future of most of us to one degree or another. The extent and manner of change as it affects us individually and as a professional family is most directly controlled by public policy conceived in the Legislative process and in regulatory agencies of the federal and state governments. The changes made can prove adverse or beneficial to the osteopathic profession's interests. Which label applies depends entirely on the level of our interest and participation as a concerted group and as individual advocates of a profession-wide position on each issue.

To participate in the process, the osteopathic profession formed the Washington Osteopathic Physicians and Surgeons Political Action Committee (OSTEOPAC). Though your membership is strictly voluntary, it is, no less, essential to your own self-interest. Through your support, OSTEOPAC funds three tools to use in the process. Each tool requires financial support and your time to the extent you are able to invest.

DO Day in Olympia is scheduled for Tuesday, February 23, 2016. This activity provides you an opportunity to meet with your own legislators to discuss issues of concern. We make your appointments and provide you with talking points. A registration form is enclosed in this newsletter.

VoterVoice is a grassroots public affairs software program that allows us to provide you with timely pre-written email messages to which you can add your personal comments to send to your legislators about a specific issue and/or impending vote on a bill. All you need to know is the address at which you are registered to vote – usually your residential address. The program finds your district, senator and representatives and sends your message directly to them. Please make sure we have your correct address.

Like it or not, a major part of our participation must be financial support of those legislators who have demonstrated friendliness to the special needs and interests of osteopathic medicine. If they are not in office, they can't help us.

We will need about \$25,000 to fund these projects. Thanks to our convention kickoff we one-fifth of the way to our goal. We hope we can count on you to help us raise the remaining \$20,000. Please use the Osteopac Registration Form included in this newsletter.

Sincerely,
Lindy Griffin, DO, President



D.O. Day in Olympia
Tuesday, February 23, 2016
9:00 a.m. to 3:00 p.m.
 Columbia Room
 Legislative Building



Join your osteopathic colleagues in Olympia as we discuss healthcare issues that will impact your practice. This is your opportunity to voice your concerns as the Washington State Legislature enacts healthcare reform and other policies that will affect you and your patients.

The day will start at 9:00 a.m. with everyone assembling for instructions on the issues to discuss in your meetings with the legislators and updates on current legislation. Appointments with legislators will start at 9:30 a.m. Participants will meet with legislators and provide OMM demonstrations and free blood pressure checks to the public and legislators. All legislators will be invited to a lunch with our participants hosted by WOMA. Meetings will continue after lunch until 3:00 p.m. Please complete this registration form and fax or mail it to WOMA by **Monday, January 4th** to allow time to schedule appointments. This is a joint project with PNWU and those coming from the Yakima area are invited to ride the bus from PNWU to Olympia and back. Please indicate below if you want to ride the bus from Yakima.

Name _____

If you are a registered voter in Washington State please provide your **Registered Voter Address** so we may identify your legislators:

Address _____

City _____ Zip _____

Cell Phone _____ Email _____

Please send registration to: WOMA
 PO Box 16486
 Seattle, WA 98116-0486
 Or fax to: 206-933-6529

If you are coming from the Yakima area, indicate below if you wish to ride the bus from PNWU.

_____ Yes, I would like to ride the bus to Olympia from Yakima on February 23rd

Return by January 4, 2016

More information will be provided as we get closer to the opening of the Legislative Session in January.

2015 O S T E O P A C Capitol Club

The Washington Osteopathic Physicians and Surgeons Political Action Committee (Osteopac) was established in 1985 to support advocacy efforts on behalf of the osteopathic profession in Washington State. The "Capitol Club" recognizes those who generously and consistently contribute to Osteopac. The list below includes contributions received through August 7, 2015. Thank you to all of our current Capitol Club members!

Platinum Club (at least \$5,000 since 2006)

H Ken & Sharon Cathcart, DO
Loren H Rex, DO

Gold Club (from \$2500 to \$4999 since 2006)

Dan Dugaw, DO
Lindy Griffin, DO
Monica Haines, DO
Sheila Kennedy, DO
Steven Leifheit, DO

Silver Club (from \$1,000 to \$2499 since 2006)

Harold Agner, DO
Timothy Anderson, DO
John Baumeister, DO
Bill Betz, DO
Lloyd Butler, DO
Bill Dickinson, DO
Paul Emmans, Jr, DO
Larry Greenblatt, DO
David Hofheins, DO
John Hunholz, DO
Vincent Koike, DO
Richard Koss, DO
David Lukens, DO
Chris Peterson, DO
Robyn Phillips-Madson, DO
Kathleen Schuerman, DO
Dan Shelton, DO
Dan Wolf, DO

Bronze Club (from \$250 to \$999 since 2006)

Juan Acosta
Dennis Anderson
Ruth Bishop, DO
Dan Brzusek, DO
Robert Coleman, DO
Rose-Marie Colombini, DO

Marc Cote, DO
Nick Curalli, DO
Thomas Dawson, DO
Dieter Eppel, DO
Scott Fannin, DO
David Farrell, DO
Janis Fegley, DO
Amber Figueroa, DO
John Finch, DO
Stan Flemming, DO
John Fuchs, DO
Glenn Gasstineau, DO
Larry Hoover, DO*
Lon Hoover, DO*
Gordon Hsieh, DO
Mark Hunt, DO
James Keene, DO
Karl Kranz, DO
Huong Lakin, DO
Philip Matthews, DO
Allen Quinn, DO
Marck Raney, DO
Lyndsey Rasmussen, DO
Richard Richards, DO
David Ryan, DO
Ken Scherbarth, DO
Charles Schuetz, DO*
Paul Shelton, DO
Tom Shelton, DO
Donald Sinden, DO
Gerald Stanley, DO
Joe Thomas, DO
Christen Vu DO
Lynda Williamson, DO
Don Woods, DO*
Suzanne Yeary, DO
Alan Zend, DO

*Deceased

It's not too late to join the 2015 Capitol Club. Membership requires a minimum donation of \$250 since 2006. Just complete the Osteopac registration form on page 17 and submit with your check made payable to Osteopac. If you have made contributions during this time and would like to know your accumulative amount, please email Kathie Itter at kitter@woma.org or call her at 206-937-5358.

OSTEOPAC

Washington Osteopathic Physicians and Surgeons
Political Action Committee

PO Box 16486 / Seattle / WA / 98116-0486 / (206) 937-5358 / Fax (206) 933-6529

2015 Membership Registration

(*Information required by State campaign finance laws and must be provided with contribution)

Date _____

*Name _____

*Address _____

*City _____ *State _____ *Zip _____

_____ Retired _____ Self Employed

*Employer (if other than self) _____

*Employer Address _____

*City _____ *State _____ *Zip _____

- _____ \$ 25.00 ----- _____ \$ 100.00 _____ \$ 365.00

_____ \$ 50.00 _____ \$ 200.00 _____ Other \$ _____

Make Your Personal Check Payable to: OSTEOPAC

Please complete this form and send with your personal check (no business checks) made out to OSTEOPAC to P.O. Box 16486, Seattle, WA 98116-0486

* Information required by Public Disclosure Commission

Why WOMA?

This Washington Osteopathic Medical Association has been the voice of osteopathic physicians in Washington since 1901. We're most often associated with advocacy for the osteopathic profession at the local, state and federal level.

From our office in Seattle and with our lobbyist in Olympia, our staff assists and advocates for the doctors of osteopathic medicine and their patients in the Evergreen State.

Thanks to WOMA's dedication to - and advocacy for - the osteopathic profession, D.O.s around the state of Washington enjoy the same practice rights as our medical doctor (M.D.) colleagues. Today, WOMA has a seat at the table when issues important to physicians and healthcare arise!

Membership is important for WOMA to be able to continue its advocacy. If WOMA is not there to represent you, who will be? If you are not a member, please consider joining now. It is time to step up and stop depending on others to maintain your profession's advocacy efforts.

Instead of asking "Why" ask yourself "Why not WOMA?" Dues vary according to how long you have practiced in Washington. Regardless of the amount, it is cheaper than not having a voice. If you have any questions or concerns, you are welcome to call or email Executive Director Kathie Itter at 206-937-5358 or kitter@woma.org. A membership application is on the last page of this newsletter.

Events Schedule

August 14, 2015	12:00 p.m.	PNWU Community Fair	Yakima
August 19, 2015	7:00 p.m.	Executive and Public Affairs Committee	WOMA Office
September 25, 2015	7:00 p.m.	CME Committee	Oxford Suites Yakima
September 26, 2015	8:00 a.m. 6:30 p.m. 7:00 p.m.	WOMA Fall Seminar WOF Board WOMA Board Dinner	PNWU Oxford Suites Yakima
October 14, 2015	7:00 p.m.	Executive and Public Affairs Committee	WOMA Office
November 18, 2015	7:00 p.m.	Executive and Public Affairs Committee	WOMA Office
December 4, 2015	7:00 p.m.	CME Committee	WOMA Office
December 5, 2015	8:00 a.m. 5:30 p.m. 6:00 p.m.	WOMA Winter Seminar WOF Board WOMA Board Dinner	Doubletree SeaTac
December 18, 2015	1:00 p.m.	ATSU Student Presentation	Renton



WELLNESS PROGRAMS FALL 2015

MINDFULNESS FOR HEALTHCARE PROFESSIONALS

Five-week course on Thursday evenings from 6pm to 8:30pm and one Saturday 9am to 4pm

Dates: 9/10/15, 9/17/15, 9/24/15, 10/3/15 (Saturday), 10/8/15

720 Olive Way, Seattle WA

Mindfulness is designed to reduce stress and improve general mental health. Mindfulness does not eliminate life's pressures, but it can help health professionals respond to pressures in a calmer manner that benefits heart, head and body.

Course cost: \$175

To register, please visit: <http://mindfulnessforhealthcareprofessionals.eventbrite.com>

COMPASSION CULTIVATION TRAINING (CCT)

Eight-week course on Monday evenings from 6pm to 8pm

Dates: 10/5/15, 10/12/15, 10/19/15, 10/26/15, 11/2/15, 11/9/15, 11/16/15, 11/23/15

720 Olive Way, Seattle WA

CCT combines traditional contemplative practices with contemporary psychology and scientific research. Through instruction, exercises, daily meditation, mindfulness, and in-class interaction, participants strengthen qualities of compassion, empathy, and kindness. Learn how to train your mind to intentionally choose compassionate thoughts and actions and develop skills that help you relate to others—and yourself.

Course cost: \$175

To register, please visit: <http://compassioncultivationtraining.eventbrite.com>

ONE-DAY MINDFULNESS RETREAT

Saturday from 9am to 4pm

Date: 10/24/15

UW South Lake Union, 815 Mercer Street, Seattle WA

Workshop for those who have taken a mindfulness course and are looking to re-engage and refresh their practice, or for those new to mindfulness and meditation.

Workshop cost: \$85

To register, please visit: <http://mindfulnessretreat.eventbrite.com>

WPHHP Wellness Programs are open to any physician, dentist, veterinarian, physician assistant, or podiatrist. No past or current involvement with WPHHP is necessary. Spouses and partners are also encouraged to attend. For more information, please email wellness@wphp.org.

WOMA ACTIVE MEMBERSHIP APPLICATION

Date _____

*Unless otherwise requested, the primary form of communication whenever possible will be email.
Please print or type legibly or application will be returned.*

Attach current CV with all training, certification and past practice information.

Name _____ Email _____

Physical Address of Current Practice _____ Phone () _____

City, State, Zip _____ County _____

Residential Address _____ Phone () _____

City, State, Zip _____ County _____

Mailing Address () Office () Residence () Other _____

City, State, Zip _____

Gender M F AOA# _____ Birthdate _____ Spouse's Name _____

PRACTICE INFORMATION

WA State License Number _____ Date Issued _____

Other Current/Past State Licenses _____

Present Practice Focus _____

Hospital Staff (Present) _____

Hospital Staff (Past) _____

Other State Divisional Society Memberships (Past and Present) _____

Have you ever had a license limited, suspended or revoked? No _____ Yes _____ If yes, please attach explanation.

Have your prescribing privileges ever been limited or suspended? No _____ Yes _____ If yes, please attach explanation.

I am willing to have premed students shadow me I am willing to precept 3rd and 4th year osteopathic medical students

“By my signature, I hereby authorize release of the information contained in this application and WOMA membership file to those organizations or hospitals to whom I may subsequently apply for membership; and release to WOMA, by organizations, agencies and hospitals of information relative to my membership in those organizations and my professional practice. I understand that withholding or falsification of information will result in denial of membership.”

Please list a WOMA member who can recommend you for WOMA membership:

If you do not know any WOMA members, please check here: _____

Signature of Applicant _____ Date _____

Charge my application fee and Dues of \$

Enclosed is my application fee of \$35.

First year -\$160; Second year -\$320; Third or more

year of practice in WA- \$640

Dues may be pro-rated quarterly

Visa MasterCard

Card Number _____

3-digit security code _____ Expiration Date _____

Name on Card _____

Signature _____

Return to W.O.M.A.

P.O. Box 16486 / Seattle, WA 98116-0486

(206) 937-5358

FAX (206) 933-6529