

# Michigan Radiological Society News

SPRING 2018

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## **Book Signing Event**

**Gold Medal** 

#### Save-the-Date

**Excellence is the Enemy of Good: When is Good Good Enough** I first heard this statement in the 1980's from Interventionalist Dr. Charles Tegtmeyer describing renal angioplasty and how the guest for total perfection can

result in disaster. Specifically, a good result after angioplasty should be the end goal. A "good" result is good enough as repeat inflations can result in dissection,

occlusion, perforation or other untoward events.

Outside of Interventional Radiology this principle at first seems harder to live None of us strives to be good....we strive to be excellent. Yet....

y day, we as radiologists, have to strive for excellence but answer the question when is good good ugh?

Good is good enough when the tissue for the CT guided lung biopsy has "black spots" and making additional passes might result in complication.

Good is good enough if there is enough information on the scan to make the diagnosis. Who cares if the bolus is perfect if you can see that there is or there is not a pulmonary embolus?

Good is good enough if the chest is negative but the costo-phrenic angle is cut off and a repeat film would be difficult to get or unnecessarily expose a young patient.

Good is good enough if there is mis-registration artifact on the PET/CT fusion images (making for lousy slides at tumor board) but you can still see the information.

Good is good enough if the additional views for the call back mammogram have a little motion and are blurry but you can still see the lesion and direct the patient to ultrasound.

We all make conscious decisions every day to do our best. We all strive for excellence, often make it to very good and usually settle for less than perfection (=good). This is a healthy balance and in my opinion is good for our practices and patients.

Of course, excellence is good enough too. But remember, excellence does not equal perfection.

Strive for excellence but know when good is, indeed, good enough.

Gonda, Jr., MD, FACR

nt, MRS

#### LEGISLATIVE UPDATE



James Cavanagh, JD, MRS Lobbvist

#### **OVERVIEW**

The Michigan Legislature returned from its spring break on April 10. Issues facing lawmakers this spring include putting finishing touches on the state budget, and considering legislation to require Medicaid recipients to work in order to be eligible for benefits.

#### **LEGISLATION**

#### INTERSTATE MEDICAL LICENSURE COMPACT

As predicted, this legislation (HB 4066 and 4067) was reintroduced early this session after it died last session. These bills would allow for reciprocity in licensure for physicians for those states that are members

of the compact. Many physicians including MRS members have serious concerns about this legislation and that opposition was a significant reason for its failure to get enacted last session. The chief sponsor of the legislation is Rep. Jim Tedder (R-Clarkston), who has the support of both Trinity and Ascension Health Systems. MRS is working in conjunction with MSMS to form opposition strategy. The House approved this legislation and the bills have remained with the Senate Committee on Health Policy.

#### CONTINUING CERTIFICATION REINTRODUCED

HB 4134, sponsored by Rep. Ed Canfield, D.O. (R-Sebewaing), is a reintroduction of a bill that died last session. It prohibits continuing education as a condition for licensure or renewal of licensure for physicians. This legislation has split the physician community. Some physician specialty groups such as internal medicine and OB-GYN strongly support removal of the requirement because of the expense and bureaucracy involved in licensing renewal. Other specialty groups feel just as strongly that high standards should be kept, even if it involves expense and time. The bill has been referred to the House Health Policy Committee where it received a hearing. However, it is unlikely this bill will reach the House floor.

#### CHIROPRACTORS SEEK REIMBURSEMENT

SBs 282 and 283 would eliminate the employer's authority to refuse reimbursement for chiropractic services to workers compensation and no-fault auto insurance matters. These bills were first assigned to the Senate Health Policy Committee but have now been re-referred to the Senate Insurance Committee.

#### EFFORT TO ADDRESS PRIOR AUTHORIZATION

MRS is participating in a work group along with MSMS, other specialty physician groups and other interested parties in seeking a solution to the arbitrary use of prior authorization.

Prior authorization is used by some insurers to control costs. However, its use has become more commonplace and hinders the practice of medicine and at times the best health interests of the patient. Prior approval and other methods of discouraging access to modern medicine is not only becoming an issue with drug therapy, but with imaging modality as well. The legislation being drafted by the work group would, among other things;

- Require an insurer to make current prior authorization requirements accessible on the insurer's website
- Mandate that the prior authorization requirements on the insurer's website be described in detail
- Require the insurer to make statistics available regarding prior authorization approvals and denials
- Place a time limit on the insurer for prior approval requests

### LEGISLATIVE UPDATE (CONT.)

Prohibit an insurer from requiring an insured's or an enrollee's physician to participate in a step therapy protocol if the physician considers that the step therapy is not in the patient/insured's best interest

MSMS has asked for financial assistance from MRS, other physician groups and patient advocates to support an effort to curtail the arbitrary use of prior authorization. I have already informed MSMS of the significant contributions which will be made by MRS toward this effort. Your thoughts on this project are welcome and will be presented at the next work group meeting. Work group members are weighing the best time for a bill introduction, as 2018 will be a big election year.

#### WHAT'S IN STORE FOR MEDICAID?

Sen. Mike Shirkey (R-Clarklake) has introduced SB 897 which would impose work requirements on those adults considered "able bodied" in order to obtain Medicaid benefits. The federal government has authorized similar work requirements in other states, most recently Kentucky. SB 897 has already received one hearing and I fully expect this or a similar bill to be reported to the full Senate yet this spring.

Rep. Gary Glenn (R-Midland) has introduced a similar bill to SB 897. HB 5317 would also impose a work requirement on Medicaid recipients in order for them to qualify for and receive benefits. The bill has been referred to the House Appropriations Committee. However, I believe SB 897 will be the legislation that sees action.

Another initiative, HB 5487, sponsored by Rep. Canfield, requires the State to create a universal credentialing program for Medicaid providers. Originally, the State was opposed because it would require significant resources to create and administer the program. Currently, Medicaid health plans have a number of different credentialing programs. Providers, such as physicians, are concerned that they have to be credentialed by numerous agencies, depending upon the insurance company or health plan. A single credentialing program, it is believed, would give Medicaid recipients greater access to providers and thus health care. This bill has passed the House after it was substantially amended to first allow for a study to be conducted on the effect of universal credentialing.

#### OTHER

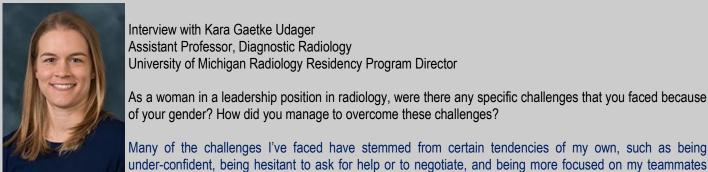
#### AWARD FOR EXCELLENCE

The American College of Radiology has bestowed upon the Michigan Radiological Society its "Excellence in Government Relations" award. In his letter to Roger Gonda, M.D., President of the Society, David Boyd, M.D., the Chair of ACR's Committee on Chapters, states, "your Chapter's commitment to excellence in government relations has not gone unnoticed." Dr. Gonda has asked that Stephen Kilanowski, incoming MRS President, receive the award on May 21, 2018 at the ACR National Conference in Washington, D.C. Congratulations to the members of MRS and in particular, Dr. Gonda, Dr. Joe Junewick, Chair of the Legislative Committee, and members of that committee. A job well done!

Register today for the Book Signing and Author Talk

Nine Lessons LL earned from My Father

#### DIVERSITY INTERVIEW



Interview with Kara Gaetke Udager Assistant Professor, Diagnostic Radiology University of Michigan Radiology Residency Program Director

As a woman in a leadership position in radiology, were there any specific challenges that you faced because of your gender? How did you manage to overcome these challenges?

under-confident, being hesitant to ask for help or to negotiate, and being more focused on my teammates than myself - these things tend to be more common in women. I've become much more aware of these Kara Gaetke Udager, MD issues over time by reading about them, attending courses, and talking to my mentors, and that increased awareness has helped me to gain confidence and ask for what I need. Another challenge has been balancing the demands of a leadership position with being a mom. Things can get hectic at times, but I wouldn't want my life any other way - I have the privilege

What advice would you give to women seeking leadership positions in radiology?

Believe in yourself and go after it! Radiology needs good leaders, including women. If you want to make a difference, even if it's something small at first, then be bold and do it. Put yourself and your hard work into the job, and be brave enough to take the opportunities that are given or to make opportunities for yourself.

What advice do you have for all of us regarding how to better meet the needs of women and minorities in the field?

of working with 44 incredible residents and the joy of watching my determined two-year-old daughter grow up.

Awareness is very important. Women and minorities are outnumbered, and it can be difficult to feel comfortable in the workplace. If the culture at work feels hostile, or if there is no support system, women and minorities will not be empowered to do their best or to take risks, like seeking a leadership position. We can all start with the little things, like being aware of the banter in the reading room and whether it might make someone uncomfortable. Those who have more influence can help by making mentors available, either informally or with a mentoring committee or other support group. We have a Women in Radiology group at our institution, and it's helped many of our women trainees and junior faculty to network and find professional opportunities. It's wonderful to see similar groups forming elsewhere – they can make a big difference.

Register today for the Book Signing and Author Talk

Nine Lessons I Learned from My Father

#### 2018 GOLD MEDAL AWARD

The MRS Gold Medal is awarded by the Board of Trustees an individual for distinguished and extraordinary service to the Michigan Radiological Society or to the discipline of radiology. The Gold Medal will be awarded on May 3, 2018 at the Marriott Auburn Hills Pontiac Campus.



James J. Karo, MD, FACR

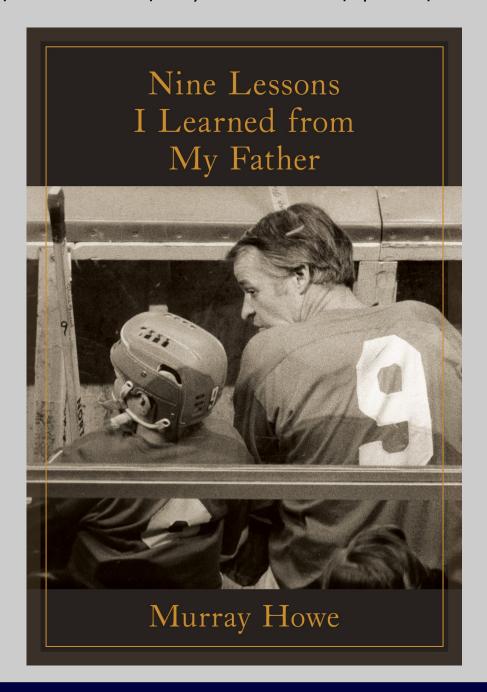
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Nine Lessons I Learned from My Father

#### BOOK SIGNING AND AUTHOR TALK

Please join us for an evening with Murray Howe, MD, author of Nine Lessons I Learned from My Father. Dr. Howe will show a powerful video about Mr. Hockey, and for the first time ever, will share a few of Mr. Hockey's remarkable radiologic imaging findings.

Signed copies of Nine Lessons I Learned from My Father will be available for purchase after the author talk.



### **BOOK SIGNING AND AUTHOR TALK**

# A GLOBE AND MAIL BESTSELLER

# **Nine Lessons I Learned from My Father**



# Author: Murray Howe, MD

PROGRAM:		
5:00 P.M.	BOARD OF TRUSTEES	
6:00 P.M.	RECEPTION	
6:40 P.M.	GENERAL MEMBERSHIP MEETING	
6:50 P.M.	GOLD MEDAL AWARD	
	JAMES J. KARO, MD, FACR	
7:00 P.M.	AUTHOR TALK	
	MURRAY HOWE, MD	
7:40 P.M.	BOOK SIGNING	
8:00 P.M.	ADJOURN	

**Register Now!** 

# 2018 BREAST IMAGING CONFERENCE



# 2018 Breast Imaging Conference

NOVEMBER 10 & 11, 2018

INN AT ST. JOHN'S, PLYMOUTH

Please join us at the Inn at St. John's in Plymouth, Michigan for a comprehensive and in-depth Breast Imaging course. Our Nationally renowned faculty include Rachel Brem, MD; Daniel Kopans, MD and Jean Seely, MD, as well as other Breast Imaging experts from across the State. Our speakers will

address the latest Breast imaging technology topics targeted for radiologists in private practice or academic settings, as well as technologists, nurses, residents and fellows.

15 AMA Category 1 and 15 ASRT Category A credits are pending approval.

Agenda Coming Soon!

#### Location:

#### Inn at St. John's, Plymouth

44045 5 Mile Road, Plymouth, MI 48170

Turisi and	Before	After
Tuition	1-Sep	1-Sep
MRS Member	\$450	\$495
MRS Member - (Sat. or Sun Only)	\$225	\$270
Non-Member	\$500	\$545
Non-Member - (Sat. or Sun Only)	\$250	\$295
Resident/Fellow	\$225	\$250
Resident/Fellow - (Sat. or Sun Only)	\$115	\$240
RN	\$225	\$250
RN - (Sat. or Sun Only)	\$115	\$250
Radiologic Technologist	\$190	\$210
Rad Tech - (Sat. or Sun Only)	\$95	\$115

The MRS has secured a reduced room rate at \$159 per night. To reserve a room at the Inn at St. John's, call 734-414-0600 and reference the event: 2018 Breast Imaging Conference. The cut-off for room reservations is October 25, 2018.

#### **Registration Information:**

<u>Click here</u> for more information or to register online.

#### **Sponsor Information:**

Click here for more information on sponsoring the event