

NEW HAMPSHIRE **PHYSICIAN**

A PUBLICATION OF THE NEW HAMPSHIRE MEDICAL SOCIETY



NHMS 2023 Annual Report

Volume 4 | 2023

SICK OF HIGH PRESCRIPTION COSTS?

Save up to 80% on prescription drugs with New Hampshire Rx Card.

This Program is **NOT** Insurance.

Pharmacy Coupon | **Prescription**

Coupon MBR ID: Enter Year & Time
(Example: Year 2023; Time 9:14; Enter ID 2023914)

RxGRP: NHRX

RxBIN: 610709



This coupon has no expiration date and is reusable on Brand and Generic Rx's. Savings can be as high as 80%.

PATIENT INSTRUCTIONS: This card/coupon is pre-activated and can be used immediately. Present this card/coupon to any participating pharmacy to receive a discount on prescription medications.

PHARMACIST INSTRUCTIONS: Submit as a primary claim (cannot be processed as secondary) using the following pharmacy processing information. For processing questions and comments please call the Pharmacy Helpline below.



Customer Service: 877-321-6755 Pharmacy Helpline: 800-223-2146 This is a point-of-sale discount program.



PROGRAM HIGHLIGHTS

Save up to 80% on prescriptions | Free pharmacy coupon card | Discounts on brand & generic drugs
Accepted at over 68,000 pharmacies nationwide | No restrictions & HIPAA compliant



For more information contact:
MaryWest@nhms.org

LEARN MORE AT

NHRXCARD.COM
and get your Free Prescription Savings Coupon Card

Proud Supporter of:



**Children's
Miracle Network
Hospitals®**

This drug savings program grants funds to CMN Hospitals to help children within their local communities.

In this issue...

New Column: My Story

Legislative Update from our new Director of Advocacy

Members' Corner: Polypharmacy



New Hampshire Medical Society

7 North State Street

Concord, NH 03301

603 224 1909

603 226 2432 fax

nhmedicalsociety@nhms.org

www.nhms.org

Maria T. Boylan, MD

President

Jane Tewksbury

Interim EVP

Mary West

Editor

NHMS Welcomes 192nd President.....	4
My Story: "Honey"	6
NHMS A Year in Review	8
2023 Annual Scientific Conference..	10
Advocacy Update.....	12
NHMS Welcomes New Members	14
Medical Records: Protecting Patients	
Confidentiality	15
Member's Corner: The Perils of	
Polypharmacy	16

*Opinions expressed by authors may not always reflect official NH Medical Society positions. The Society reserves the right to edit contributed articles based on length and/or appropriateness of subject matter. Please send correspondence to "Newsletter Editor," 7 N. State St., Concord, NH 03301.

Do you or a colleague need help?

The New Hampshire Professionals' Health Program (NH PHP) is here to help!

The NH PHP is a confidential resource that assists with identification, intervention, referral and case management of NH physicians, physician assistants, dentists, pharmacists, nursing licensees, veterinarians, chiropractors, dietitians, licensed drug and alcohol counselors, mental health practitioners, midwives, optometrists, podiatrists and psychologists who may be at risk for or affected by substance use disorders, behavioral/mental health conditions or other issues impacting their health and well-being. NH PHP provides recovery documentation, education, support and advocacy – from evaluation through treatment and recovery.

For a confidential consultation, please call Dr. Molly Rossignol @ (603) 491-5036 or email mrossignol@nhphp.org.

Board of Directors:

Executive Officers

President

President-Elect

Immediate Past President

Treasurer

Secretary

AMA Delegate

Trustee: Bowler Bartlett Foundation

Chair/BOD

Director-at-Large

Director-at-Large

Director-at-Large

Director-at-Large

Council:

Penultimate Past President

Speaker

AMA Alternate Delegate

Member-at-Large

Member-at-Large

Member-at-Large

Member-at-Large

Medical Student

Resident

Resident

Resident

Young Physician Representative

Young Physician Representative

Physician Assistant

OPLC/Board of Medicine

Lay Person

Physician Representative NH DHHS

Specialty Society Representatives:

NH Chapter American Acad.

of Addiction Medicine

NH Chapter of American College

of Physicians

NH Society of Anesthesiologists

NH Chapter of American College

of Cardiology

NH Chapter of Emergency Physicians

NH Society of Eye Physicians & Surgeons

NH Academy of Family Physicians

NH Academy of Family Physicians

NH General Surgery

NH College of Obstetricians

and Gynecologists

NH Orthopaedic Society

NH Osteopathic Association

NH Society of Pathologists

NH Pediatric Society

NH Psychiatric Society

NH Physical Medicine & Rehabilitation

NH Radiology Society

Maria T. Boylan, DO

Patrick A. Ho, MD, MPH

Eric Y. Loo, MD

Tessa Lafortune-Greenberg, MD

Danielle T. Albushies, MD

P. Travis Harker, MD, MPH

L. John Klunk, MD

Melissa Martinez-Adorno, DO

James P. Bartels, MD

Stephen G. M. Bishop, MD

Marie E. Ramas, MD

Eric A. Kropp, MD

Gary A. Sobelson, MD

Alan C. Hartford, MD

Richard E. Johnson, MD

Neil S. Meehan, DO

Mark R. Windt, MD

Seddon R. Savage, MD

Ernie Tao

Amy Lee, DO

George Letterio, MD

Victoria Jones, MD

Ross M. Bickford, MD

Terra C. Wilkins, MD

Linda L. Martino, PA-C

Marc L. Bertrand, MD

Lucy Hodder, JD

Jonathan R. Ballard, MD

Audrey M. Kern, MD

Lin A. Brown, MD

Robert J. Laflam, MD

open seat

Thomas J. Lydon, MD

Kimberly (Truax) Licciardi, MD

Angela Yerdon, DO

Xi Nuo Gao, MD

Lisa A. Patterson, MD

Oge Young, MD

Anthony Mollano, MD

Franklin R. Hubbell, DO

Shabnam Momtahan, MD

Francis B. Lim-Liberty, MD

John A. Hinck, MD

Xiaoli Dong, MD

Rebecca A. Zuurbier, MD



Maria Boylan, DO
NHMS President

Being a family practice doctor is an amazing privilege. It's an incredibly demanding job but I get the honor of caring for patients from the time they are born to the end of their days.

NHMS Welcomes 192nd President

NHMS Inauguration November 4, 2023

I am honored to be the 192nd president of the New Hampshire Medical Society. I've been on the NHMS council for seven years now. I didn't know what I was getting into when I first signed up for the role, but I showed up and was excited to have a seat at the table. I was so impressed with the breadth of incredibly smart and dedicated individuals. We have an amazing group of physicians representing the NHMS on the Council, whom I look up to and consider myself lucky to work closely with, helping to build policy and actively advocate for our patients, physicians, and our communities. We have an incredible staff- Jane, Catrina, Mary, Julie, Jen, and our new advocacy director, Ava, all of whom work so hard to keep the Medical Society afloat, and are dedicated to our mission, "to bring together physicians to advocate for the well-being of our patients, for our profession, and for the betterment of public health". I was recently asked why I joined NHMS and volunteer my time despite having such a busy workload. My answer is simple. This is the place where I can have the biggest impact on how I practice medicine outside my exam room.

Being a family practice doctor is an amazing privilege. It's an incredibly demanding job but I get the honor of caring for patients from the time they are born to the end of their days. I am honored to continuously care for entire families and multiple generations and watch as they grow, as well as help them through their most trying times. I chose family medicine because I enjoyed so many aspects of the varied specialties during my training and this was the one place where I could do it all and keep a long-lasting relationship with my patients. But the things I love the most about family medicine include practicing prenatal care, pediatrics and women's health, which is why this year, as president of NHMS, my platform will be centered around the Advancement and Protection of Reproductive Rights.

Reproductive care is in jeopardy and it's our job as physicians to stand up and protect this incredibly important aspect of health care. I have no doubt that every physician and medical provider in this room went into medicine because we believe in science. We believe in medicine. And we believe in putting our patients first by providing the necessary healthcare regardless of current political trends, agendas, or societal pressures. As long as I've been a member of NHMS, the society has chosen to always strongly oppose policies and legislative initiatives that seek to insert government into our provider-patient relationships or attempt to dictate how a physician practices medicine in New Hampshire. Lawmakers, often folks who are not health care providers, lacking the proper education, training, knowledge or experience, try to tell us what is right for our patients. At this time, most importantly, this includes rights to reproductive health care: access to safe abortion care, access to contraception, access to assisted reproduction, and ability to provide care that improves maternal health.

These should not be political issues, but they are. And they are rights that all physicians should strive to protect. In June of 2022, following the Dobbs v. Jackson Women's Health Organization decision, the Supreme Court overturned a half century precedent that women in this country have a right to abortion. This decision changed the landscape of reproductive healthcare across the country. Just a year prior, New Hampshire implemented the first modern-day abortion ban in the state's history which included criminal and civil penalties against providers- punishment of seven years in prison and \$10,000 in fines. Thankfully, a year later, as a result of coordinated and passionate advocacy efforts made by the medical community, along with NHMS at the forefront, state law was amended to include exceptions to the 24-week ban for rape, incest and fatal fetal anomalies. The criminalization of physicians, however, remains in

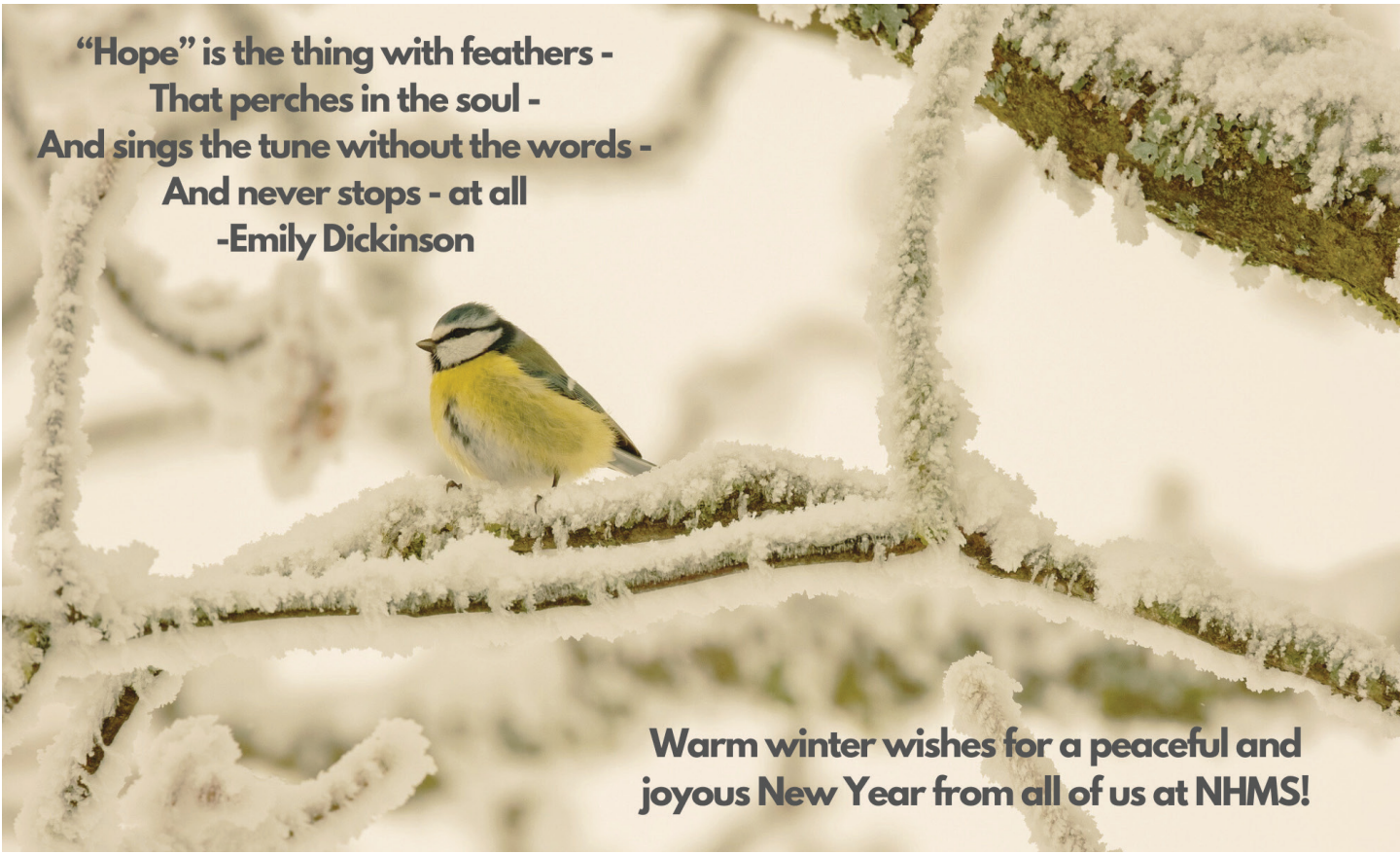
state law. The same physicians who live by the oath “do no harm” now have to constantly second guess themselves and their decisions in these complex situations that should be solely between the patient and their health care provider.

As physicians, it’s our job to protect our rights as medical providers, protect our patients, and educate our communities. Many of you are OBGYNs or family practitioners who do obstetrics. I know that you understand the issue of choice in reproductive health care decisions more than anyone else. You’ve had to make the hard decision to save the life of an expectant mother who’s in danger of dying of pre-eclampsia or tell a patient and their family that the baby they prayed so long for has a condition that’s not compatible with life and then have to counsel them on whether or not they should proceed with the pregnancy. You comprehend how complex, important, and life-altering reproductive choices are.

While I may not still deliver babies, I did during my residency and for a few years shortly after as an attending. In fact, I’ve delivered close to 200 babies, and it was something I loved doing more than anything and a responsibility I took extremely seriously. It brought me immeasurable joy but with such joy there was at times immeasurable heartbreak. I remember having to tell one of my patients that her testing came back positive for trisomy 18, a condition where in the majority of cases, the infant will die in utero or if not, hours or days after birth. She made the brave decision to continue to carry the pregnancy, and unfortunately that infant died during her third trimester. I delivered her baby knowing that mom would not be able to hear her baby cry, feel her baby’s warmth, or walk out of the hospital with a child. It was devastating. This patient was afforded the right to choose. Had this mother chosen the alternative- to terminate the pregnancy- that right should have been equally as protected, and she deserved the support and appropriate care from her doctors and health care team to allow for that.

This is just the beginning. We are facing bills in our state that will continue to challenge the right to abortion and reproductive care. We know as health care providers, as physicians, that restricting women’s access to safe and legal abortion services has irreparable health implications. Laws that restrict access to abortion do not result in fewer abortions, they instead compel women to risk their lives by seeking out delayed or unsafe abortion care. According to the World Health Organization, 23,000 women die from unsafe abortions each year and tens of thousands of women experience significant health complications from delayed or denied abortion care. More recent studies estimate that banning abortion in the US would lead to a 21% increase in the number of pregnancy-related deaths overall, 33% among black women, simply because staying pregnant is more dangerous than having an abortion. We can’t allow “back alley” abortions to become the only way for women to terminate a pregnancy, or further limit access to reproductive care by forcing our patients to seek

NHMS Welcomes 192nd President, cont. on page 18



**“Hope” is the thing with feathers -
That perches in the soul -
And sings the tune without the words -
And never stops - at all
-Emily Dickinson**

**Warm winter wishes for a peaceful and
joyous New Year from all of us at NHMS!**



Angela Yerdon McLeod, DO
(she/her)
NHMS Physician Health
Committee, Chair
Family Physician, Faculty
NH Dartmouth Family
Medicine Residency at
Concord Hospital

“My Story” is a
collection of
wellness success
stories from
New Hampshire
physicians.

My Story: “Honey”

I’m quite sure you have heard the saying, “You get more flies with honey than vinegar.” Our successes need to be reflected on, shared with others and continuously encouraged. It is all too easy for our professional brains to stick with the “vinegar” stories; the doubts, the should haves, could haves and these build up, patient after patient, through the day and through our careers. Meanwhile, for most of us, the positive sweet “honeys” slide right off and pass us by. In November 2019, just before anyone in the U.S. had heard of COVID-19, I was asked to lead a physician wellness committee. After initial hesitation, I now look back and realize it was one of the best decisions I have made in my career. Through continuous self-reflection, I began to see that my previous desire to change people, practices, and systems was not working well for me. Outwardly, I was professional in my approach. Inwardly, I was disappointed and even bitter, like vinegar. I saw myself as a victim and others and the system as the problem. Blame was easy. However, as the months and now years have passed, the more I have poured my heart into understanding the needs of all of us working in healthcare, I have been healing and become a little sweeter. And despite multiple system fractures since the devastation of COVID-19 and its aftereffects, I have been thriving and become a little sweeter still. **You can be a victim or open yourself to vulnerability. Being vulnerable allows a mindset shift, to look for and truly see the sweet spot.** It is not solely sugar coating it. It is the true honey that comes through at the end of the work. Through this work, collaborations grow like the flowers in a garden that need pollination to support the honey production. The more the flowers grow, the more honey we create. Working with others allows us to connect, share stories, grow empathy and create compassion for others, for our team and for ourselves.

I am grateful for each collaborative effort I have and continue to have the honor to participate in. At Concord Hospital, just to name a few, my healthcare wellness involvement includes virtual multi-disciplinary counselor connection groups, leadership rounding with a wellness on wheels (WOW) cart with snacks and conversation, a pilot program of trained peer responders for crisis intervention in inpatient units, mindfulness for sustainable medical career for Family Medicine residents and individual funds for providers’ personal wellness choices.

In 2021, I added the chair of the New Hampshire Medical Society (NHMS) Physician Wellness Committee to my pot of honey, and I have found another wonderful group of engaged leaders working to help all New Hampshire physicians be well while serving our patients and our community. Together, we have created a newly launched website full of resources for physicians to remain well, find help if burning out or support if needing crisis level care. Additionally, eight New Hampshire physicians are understanding their own role in their work and finding more joy through the NHMS sponsored Breakthrough Your Burnout pilot program with Penni Perri Coaching.

Healthcare is hard work. Healthcare needs an overhaul. Yet, our work is joyous work. I encourage you to look inward and ask yourself, “Am I the vinegar?” Look for sweet spots in your day. Look for ways to work with your colleagues to bring “honey” into your own life. It will be sweeter for



Photo credit: growforagecookferment.com

your colleagues, your patients and most importantly, for you.

Another little take home tidbit for you: **Oxymel**

Drinks made of honey and vinegar have existed for thousands of years. Also known as “oxymel,” the combination of honey with some kind of vinegar creates a syrup that’s usually added to water or another liquid and then drunk. Since ancient times people have used the mixture to prevent or improve many conditions: epilepsy, snake bites, asthma, colds, fevers, constipation, and tuberculosis just to name a few.

While some of these ideas have been disproven, today people all over the world continue to drink the mixture for the health benefits they hope to gain.

- WebMD Medically Reviewed by Christine Mikstas, RD, LD, on November 23, 2022

Please share your personal, practice, organization, or cultural successes in an upcoming edition of the NH Physician magazine or on the NHMS website. We will be stronger when we share our successes. ■

Physician Wellness Program

Burnout is defined by the WHO as a syndrome “resulting from chronic workplace stress which has not been managed successfully.” It is characterized by feelings of energy depletion or exhaustion, increased mental distance/negativity/cynicism regarding one’s job, and reduced professional efficacy. Physicians often experience depersonalization or lack of empathy for patients. Almost 63% of physicians report signs of burnout (AMA).

If you need immediate support:
NH 988 Suicide & Crisis Lifeline: Call 833-710-6477 or text 988
for free & confidential support 24/7

Get Help Now - NH PHP



Immediate Support and Suicide Prevention

NH Professional Health Program
 Federation of State Physician Health Programs (FSPHP)
 Connection to Professional Counseling

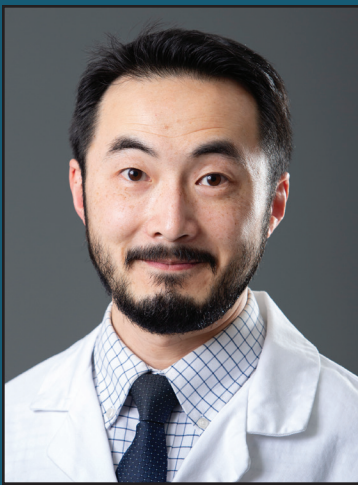
1:1 Coaching: Burnout Prevention Program

Cultural Awareness; Build collegiality, empathy, psychological safety, and physical health

NHMS Physician Wellness Committee guides New Hampshire Physicians on a path to deep satisfaction, cultivating integration between their personal and professional lives, through access to diverse options that effectively address stressors inherent in the culture of medicine to help them improve their value and success with their patients and community.

<https://www.nhms.org/help>

“Burnout is not the result of a deficiency in resiliency among physicians, and rather, it is due to the systems in which physicians work.” Christine Sinsky, MD, AMA VP of professional satisfaction.



Eric Loo, MD
Immediate Past President



Jane Tewksbury
NHMA COO and
Interim EVP

NHMS: A Year in Review

Dear NHMS membership,

I am writing this in the capacity of Immediate Past President and pen this article jointly with our COO & Interim EVP Jane Tewksbury. The year 2023 was an extremely eventful one for your New Hampshire Medical Society, and we will do our best to succinctly describe critical organizational updates.

Governance Reform

As many of you may recall, we were forced to dismiss our prior Executive Vice President in early 2023. While he did a lot of good work for the Society early on, over the last few years he attempted to expand the society's activities beyond his ability to handle well. He was not able to deliver on various obligations, made a variety of poor decisions, and wound up hiding or mischaracterizing information to the NHMS Council. Many of these problems were exacerbated due to the COVID pandemic, and the bulk of this came to light at the start of my presidency.

The better part of 2023 was taken to remedy the quantity of issues that needed to be addressed; including rebuilding relationships with Societal partner organizations, fixing regulatory compliance issues, and 'righting the ship' financially. We also used this year to pause and re-evaluate the path towards our mission and vision. A governance reform initiative was undertaken this summer with expert legal guidance from Hinckley Allen's Healthcare Practice Group. As a result, the NHMS bylaws and governance structure were significantly updated and accepted at this past Annual Scientific Conference. A few of the key highlights from the update include:

- **Creation of a board of directors for NHMS.** This body was created to better handle fiduciary oversight for the organization; including obedience of the Society's mission through provision of vision/strategic planning, along with stewardship of assets and administrative oversight. The NHMS council continues to exist as the principle advisory body for the Society through accurate reflection of the voice and will of the membership; developing policy and position stances for the Society.
- **Greater separation between NHMS and the Bowler-Bartlett Foundation (BBF).** It was determined that the BBF (a charitable 501(c)3 organization created by NHMS) needed greater independence from NHMS for all organizations to stay in regulatory compliance.
- **More equitable physician specialty representation at the NHMS Council.** The old bylaws stipulated that specialty representation could only be appointed through a State Specialty Society, but numerous medical specialties lack a functional in-state society. For specialties that lack an in-state society, NHMS members in good standing may directly apply to the council to serve as a representative for their specialty. The expected length of service is three (3) years and may be renewed indefinitely. The physician should be actively involved in their respective regional/national specialty society. Resident/Fellow council positions were also created.
- **Improving membership input into Societal policies.** All policies undergoing development or revision must now be made available for review and commentary by the NHMS membership. In addition, changes were made to help make calling for a referendum on extant NHMS policy realistically achievable. Online forums on the NHMS website for these activities will be developed in the near future.

The new bylaws will be made available to the membership online at www.nhms.org.

Physician Advocacy

NHMS welcomed Ava Hawkes to the staff as our new Director for Advocacy on September 18, 2023. She previously served as our State's Senate Minority Caucus Director, has extensive familiarity with the inner workings of the legislative process, relationships with our elected officials, and is highly skilled in analyzing and distilling nuanced policy initiatives, drafting legislation, and preparing policy briefs, among many other talents.

NHMS will remain engaged in leading discussions on physician reimbursement, workforce shortages, prior authorization reform, surprise medical billing, reproductive health, telehealth access, and the myriad of other issues that you face in your practices every day.

Mobile Van Project

NHMS has concluded its fiduciary role in the Northern New Hampshire Mobile Health Clinic. We are very pleased to report that the van supports community-based care in the north country. Staffed by clinical teams from Androscoggin Valley and Upper Connecticut Valley Hospitals, Littleton Regional Healthcare, and Weeks Medical Center, along with a community health coordinator, the mobile clinic offers immunizations, preventive care screenings, primary care medical services, nutrition education, smoking cessation programs, wi-fi and computer access for telehealth, and community connections for health and social services for behavioral health, substance use disorders, and other health concerns. More details along with the mobile health clinic calendar can be found at <https://www.nchcnh.org/Mobileclinic/>.

Expanding COVID-19 Vaccination Program

July kicked off year three of our contract with the NH Department of Health and Human Services to promote COVID-19 immunizations. Under the current expansion, funds are available to increase infrastructure and capacity to administer and reduce access barriers to vaccinations for COVID-19, RSV and flu. Since the start of the contract, NHMS has disbursed a total of \$1,343,682.67 to twelve subrecipient practices. The Healthy NH weekly e-newsletter is sent each Sunday, to about 5,000 health-care providers, community organizations, health departments, regional public health networks, local businesses and schools.

In October, NHMS launched the "Don't Miss This" wellness marketing campaign, in collaboration with Bi-State Primary Care Association and Foundation for Healthy Communities. Geared to adults 65+, children and families, and emphasizing those in rural areas, the campaign encourages NH residents to remain current on their COVID-19 and other vaccinations, seek and use

resources for accessing vaccinations, and check in on neighbors to ensure that they are healthy and safe. The campaign is designed to align with CDC protocols for vaccinations and adjust accordingly to any changes. Outreach includes a poster campaign and use of digital media outlets. Download materials at <https://nhstayswell.org/>

Relocating NHMS Headquarters

While the building at 7 North State Street has served us well for decades, old buildings require a lot of maintenance, and the space was much too large for the Society's current needs. In October, the NHMS Council made the difficult decision to sell. Steve Duprey of Capital Plaza LLC, and Warren Street Architects have been gracious enough to work with us to create a welcoming space that will better suit the needs of the NHMS membership and team. Mail will be forwarded during renovations. Please watch for a housewarming invite in early spring!

2023 Annual Scientific Conference

Finally, we want to thank all the NHMS member attendees and speakers at the 2023 NHMS Annual Scientific Conference. The program was a great success, and it would not have been possible without you! Fifty-year NHMS members included Drs. Ali Ata, Dennis Card, David Freedman, John Ketterer, Gary Kish, and George Newman. In memoriam, we also would like to remember Dr. Manoj H. Desai of Bedford, NH.

The past year turned out to be one of significant transition for our Society. Although I was not able to focus on my intended advocacy agenda, I am still immensely pleased to say that our Society is in a much better place foundationally now than where we were the same time last year. This is, of course, with great thanks to the indefatigable staff at NHMS. Thank you for having me as your 2023 NHMS President, and best wishes to you all for a wonderful 2024. I truly believe that our table has been set for a bountiful year to come. ■



2023 Annual Scientific Conference a HUGE success!



NHMS Staff Ava Hawkes, Catrina Watson, Julie Sawyer, and Jane Tewksbury – ready for customers!



Dr. Eric Loo – moderator extraordinaire!

Thank you to all of our sponsors & attendees!



Dr. Travis Harker inspires attendees!



Drs. Patrick Ho and Richard Lafleur - panel members for "Telemedicine: What's Changed and What to Expect"

**Save the date for next year: Nov. 15-17, 2024
at the Wentworth by the Sea!**



Congratulations to Drs. Gary Kish and Ali Ata for 50 years of NHMS membership!



Newly inaugurated president Dr. Maria Boylan (front left) joins NHMS past presidents. Back row, L. to R., Drs. John Klunk, Eric Kropp, Oge Young, Len Korn and Gary Sobelson. Front row, L. to R., Drs. Albee Budnitz, Georgia Tuttle and Eric Loo.



Ava Hawkes
NHMS Director of
Advocacy and Media
Relations

I am excited to join the NHMS team as the Society's new Director of Advocacy and Media Relations.

Advocacy Update

While I am certain that Mike Padmore's departure from NHMS in September was bittersweet, I am excited to join the NHMS team as the Society's new Director of Advocacy and Media Relations. Having worked in non-partisan and partisan capacities for the New Hampshire State Senate since 2018, my extensive familiarity with the inner workings of the Legislature will serve the Society well as we advocate on behalf of our hardworking physicians, the medical profession, and the betterment of public health in New Hampshire. By way of a quick introduction, I am from South Carolina and hold a bachelor's degree in political science, with a minor in security studies, from the University of New Hampshire. I am passionate about health equity and making connections in my community on the Seacoast (and here in Concord)! When not at work, you will likely find me on or near a beach, visiting friends, and encouraging the participation of young folks in democracy in the Granite State.

What We've Accomplished, and the Advocacy Work Ahead

Throughout the 2023 legislative session, the New Hampshire Medical Society engaged nearly **150 pieces of legislation** and coordinated the participation of *hundreds* of New Hampshire physicians and residents to testify on matters before the Legislature – and we look forward to building upon this advocacy work during the 2024 legislative session ahead!

While both House and Senate members are still finalizing bill language through early December for the upcoming legislative session, we anticipate that the Society will engage the following overarching policy areas (certainly not limited to):

- Reproductive health care
- Gender-affirming health care
- Vaccine and immunization policy
- Prior authorization reform
- Scope of practice expansion
- Health care workforce





NHMS' Delegate to AMA Visits Capitol Hill during AMA's Interim House of Delegates Meeting

This November, Dr. Travis Harker, the Society's AMA Delegate, visited Capitol Hill during the AMA's House of Delegates Interim Meeting and met with Congresswoman Annie Kuster (D-District 2). Dr. Harker and I met with the Congresswoman to discuss telehealth access in New Hampshire, the health care workforce shortage, substance use disorder treatment accessibility, investment by our membership in our state's residency programs, and thanked her for her support of HR 2474,

legislation seeking to address the desperate need for a fix to the Medicare fee schedule.¹

President Boylan's Inaugural Address and the Formation of the Reproductive Rights Coalition

During NHMS' Annual Scientific Conference in early November, our inaugural President, Dr. Maria Boylan, shared that the protection of reproductive health care access in New Hampshire will be the foundation of her presidency's platform and the Society's advocacy efforts will support this work. As such, President Boylan's first act as president created a **Reproductive Rights Coalition**. As members of this honorable organization, I urge you to reach out to express interest in joining this coalition or to recommend another member.

Stay in Touch and Get Involved – Your Voice Matters!

If you are interested in getting involved in the Society's advocacy work (joining the Legislative Committee, the Reproductive Rights Coalition, etc.) or if you have any questions, please do not hesitate to reach out to me at (603) 406-5270 or ava.hawkes@nhms.org. ■

¹ <https://www.congress.gov/bills/118/congress/house-bills/2474>



NH Osteopathic Association Winter Symposium January 19-21, 2024 North Conway Grand Hotel

Topics Include: OMT, Addiction, Harm Reduction, Major Depression, ADHD, Infection Care, Art in Medicine, Anesthesia Prep, Foot Pain, POCUS, End of Life Care, Urology and More!

Visit <https://www.nhosteopath.org/> for more information.

NHMS Welcomes New Members

Abdul Mueed Zafar, MD

Radiology, Lebanon, NH

Andrew R. Pachner, MD

Neurology, Lebanon, NH

W. Joseph Askin, MD

Family Medicine, Sleep Medicine
Calgary, Alberta

Erica Schissel, MD

Internal Medicine, Bedford, NH

Jeffrey Smith, MD

Physical Medicine and Rehabilitation,
Dover, NH

Sarah Chaoying Xu, MD

Ophthalmology, Bedford, NH

Yan Li, MD

Internal Medicine, Keene, NH

Julie S. Rose, MD

Anesthesiology, Exeter, NH

Andrea M. Bickford, DO

Family Medicine, Bow, NH

Mark R. Ferlan, DO

Internal Medicine, Bedford, NH

Alan R. Opsahl, MD

Cardiovascular Disease,
Internal Medicine, Keene, NH

Christopher Soufleris, MD

Emergency Medicine, Concord, NH

Brian Kwitkin, MD

General Surgery, Lexington, MA

Robert F. Cipolle, MD

Anesthesiology, Beverly, MA

Janice E. Gellis, MD

Anesthesiology, Grantham, NH

Maria I. Bascaran Ramirez, MD

Physical Medicine and Rehabilitation,
Stratham, NH

Michael Keating, MD

Emergency Medicine, Portsmouth, NH

Beverly Faulkner-Jones, MD

Anatomic Pathology,
Dermatopathology, Waltham, MA

Jo Ann Beltre, MD

Pediatrics, Brentwood, NH

Ross Mitchell Bickford, MD

Family Medicine, Bow, NH

Aleksandra C. Stark, MD

Neurology, Lebanon, NH

Stacie G. Deiner, MD

Anesthesiology, Lyme, NH

Heather L. Marks, MD

Internal Medicine, Bedford, NH

Eric M. Pound, MD

Internal Medicine, Manchester, NH

Xi Nuo Gao, MD

Family Medicine, Concord, NH

Brian T. Paul, MD

Psychiatry, Henniker, NH

Robert A. Catania, MD

General Surgery, Hollis, NH

Carly Polizotta, PA-C

Lebanon, NH

Eric B. Bland, MD

Psychiatry, Norwich, VT

Timothy Desmond Brown, MD

Orthopaedic Surgery, Boston, MA

FREE TO FOCUS ON KARLY.

With healthcare's constant complexities and distractions, it can be difficult to focus on patients. We can help, with proven medical professional liability insurance and so much more. So you are free to focus on delivering superior patient care.

- Medical Professional Liability Insurance
- Claims Analytics
- Risk Mitigation
- Medicare Contractual Risk Protection
- And more

COVERYS



FREE TO FOCUS™

Insurance products issued by ProSelect® Insurance Company (NE, NAIC 10638) and Preferred Professional Insurance Company® (NE, NAIC 36234).



Medical Records: Protecting Patient Confidentiality

Protecting Health Information in Your Practice

Healthcare organizations (and other “covered entities”) must institute practices to protect their patients’ health information from unauthorized disclosure. Specific requirements are outlined in the HIPAA privacy and security rules and enforced by the Department of Health and Human Services (HHS) Office of Civil Rights (OCR). Failure to comply with these requirements can result in significant civil and criminal penalties. Covered entities should conduct a risk analysis to identify the potential risks and vulnerabilities in their organization and make any necessary corrections.

To protect patients’ privacy, organizations should:

- Evaluate office space and work areas. Do they provide privacy for patients? Can conversations be overheard by others? Are computer screens visible to others?
- Develop policies and procedures to guide staff in the handling of protected health information (PHI).
- Provide staff with education on maintaining the privacy of PHI.

Minors

Under certain circumstances, minors can consent to their healthcare. (See our practice tip, *Minors and the Right to Consent to Health Care Treatment*¹.) Ensure that this protected health information is not released without the minor’s authorization and plan for when the minor reaches 18 years of age and is able to control access to all their health information. If a minor requests treatment and presents their parent’s insurance card, the minor should be informed that their parents will receive notice of the visit. The practice can offer the option to pay out of pocket for a visit, thus avoiding notification to their parents.

Requests for Records

Regulations allow for disclosure for treatment, payment or health care operations, and other purposes such as public health and safety and law enforcement. Other uses and disclosures of PHI, not permitted by law, require the patient’s written authorization. Organizations should use an Authorization to Release Protected Health Information².

Information regarding mental health and substance use disorders is subject to more stringent privacy protections. The patient has the option to restrict the release of

this information. The Authorization to Release Protected Health Information must specify whether the release of such information is permitted.

Breach Notification

HHS has specific requirements for notification of breaches, depending upon the type of information wrongfully disclosed and the number of patients affected. In addition, organizations must provide a notice to the Secretary of HHS. This is completed electronically on the HHS website (Submitting Notice of a Breach to the Secretary³).

It is important to note that monetary penalties imposed by OCR for non-compliance are largely influenced by the extent to which a covered entity can demonstrate attempted compliance and established policies, practices, and safeguards.

Resources:

HHS Guidance on Risk Analysis: <https://www.hhs.gov/hipaa/for-professionals/security/guidance/guidance-risk-analysis/index.html>

HHS Breach Notification: <https://www.hhs.gov/hipaa/for-professionals/breach-notification/index.html>

HHS.Gov HIPAA: <https://www.hhs.gov/hipaa/for-professionals/privacy/laws-regulations/index.html>

Medical Mutual Insurance Company of Maine’s “Practice Tips” are offered as reference information only and are not intended to establish practice standards or serve as legal advice. MMIC recommends you obtain a legal opinion from a qualified attorney for any specific application to your practice.

¹ <https://www.medicalmutual.com/risk/practice-tips>

² https://www.medicalmutual.com/assets/pdf/forms/authorization_release_phi.pdf

³ <https://www.hhs.gov/hipaa/for-professionals/breach-notification/breach-reporting/index.html>





By Peter A. Mason, MD
Medical Director,
Headrest Lebanon, NH

Members' Corner includes selections focusing on personal and professional issues impacting doctors in New Hampshire – a forum for sharing the “voices” of NHMS members. We also encourage “Letters to the Editor,” responding to articles published in prior editions. Please submit articles for our Members' Corner to mary.west@nhms.org

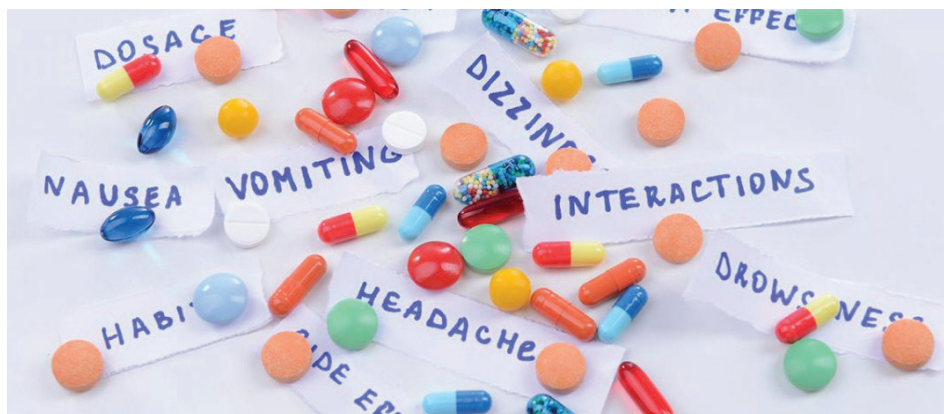
Members' Corner

The Perils of Polypharmacy

As the part-time medical director of a transitional living facility for individuals recovering from substance use disorders, I review the medical records, including medication regimens, of new residents, all of whom have been transferred from correctional institutions or facilities providing higher levels of care. With distressing frequency, I am confronted with extensive lists of medications I am expected to renew. Within this role several serious problems have become apparent.

First, and most importantly, there are often significant, sometimes quite dangerous, drug-drug interactions of which neither the client/resident, nor the previous prescribing clinician(s) are aware. A recent new admission arrived with prescriptions for 12 medications which, when entered in the Epocrates app, resulted in 60 interactions: 6 prompting an “Avoid or Use Alternative” warning, 34 “Monitor/Modify Treatment, and 20 “Caution Advised.” The interactions ranged from altering the blood levels and effectiveness of drugs and anticholinergic effects to very serious problems like cardiac arrhythmias, respiratory depression, profound CNS depression and lowered seizure threshold. Secondly, many of these individuals are so affected by these chemical cocktails they are often somnolent, with blunted affect, and have difficulty fully participating in therapeutic interventions which involve social interactions. It is not unusual for them to nod off during group sessions. Our program also involves work placement, and it is hard to imagine that they are able to optimally engage in their jobs and personal growth experiences. Thirdly, these individuals tend to be fiercely wedded to their drug regimens, adamantly resisting any suggested changes in doses or medications, many of which they have been taking for multiple years “without any problems.” They say the drugs have been prescribed by qualified clinicians who know what they are doing. In some instances, residents have left our facility because they cannot continue to obtain the medications they insist they need. Consequently, some of them may abandon therapy and return to previous substance misuse.

What is at the root of this problem? There are a number of contributing factors. These individuals all have lived chaotic lives. They may have lived in many different places, with multiple PCPs (if they have them), who never get to know them, don't have access to their previous medical records,



are pressed for time, and respond to plausible stories with symptom-targeted therapeutics; as primary care clinicians, we all want to relieve stress and suffering. Most of these people have experienced trauma: physical, emotional and/or sexual. They learned at any early age, often even in middle school, to use substances to ease their emotional and physical pain. Many have been on medication for so long they don't really know who they are at baseline. Detox centers, other treatment centers, and correctional facilities are short-staffed and need to promote a calm, non-confrontational environment. They have a low bar for prescribing psychotropics to treat symptoms of sleep disorders, anxiety, depression, and aberrant behavior. They lack the time and personnel to teach non-pharmacologic self-regulatory techniques. Additionally, we live in a society where people believe there is a drug to solve every problem. Sadly, there seem to be members of our own profession who endorse that philosophy.

What is to be done? There are no quick solutions, but there are some obvious actions to take. As clinicians, we must do diligence in prescribing psychotropics, particularly to this at-risk population. We need to check drug interactions, check the PDMP, obtain good histories about why medications were prescribed, communicate with other clinicians and medical facilities, and familiarize ourselves with other resources and practitioners who utilize effective non-medication strategies. In these ways, we can stop perpetuating the problem and can advance the healing. ■



New Hampshire
MEDICAL SOCIETY
ADVOCATING FOR PHYSICIANS & PUBLIC HEALTH SINCE 1791

STUDENT LOAN FORGIVENESS CONSULTATION

Explore your student loan options with an expert guide.

Confused about forgiveness, repayment, refinancing? Schedule a **free consultation** with one of our student loan specialists today and get a personalized plan to tackle your student loan debt.

NHMS members get a **\$50 discount** on a PSLF or IDR Membership.¹

Schedule your free 30-minute student loan consultation
laurelroad.com/NHMS



All credit products are subject to approval.
IMPORTANT INFORMATION: Please note that if you refinance qualifying federal student loans with Laurel Road, you may no longer be eligible for certain federal benefits or programs and waive your right to future benefits or programs offered on those loans. Examples of benefits or programs you may not receive include, but are not limited to, Public Service Loan Forgiveness, Income-driven Repayment plans, forbearance, or loan forgiveness. Please carefully consider your options when refinancing federal student loans and consult www.studentaid.gov for the most current information.
1. NHMS members get a \$50.00 discount on an annual program membership with GradFin ("Offer"). The discount will be applied on the current annual membership fee of \$249.00 and will automatically apply at checkout. This Offer is only available to current NHMS members, is non-transferable and cannot be applied to previous membership purchase(s). This Offer cannot be redeemed for cash or combined with other offers and is subject to cancellation at any time and without notice.
Laurel Road and GradFin are brands of KeyBank N.A. All products offered by KeyBank N.A. © 2023 KeyCorp® All Rights Reserved. Laurel Road is a federally registered service mark of KeyCorp. 3 Corporate Drive, 4th Floor, Shelton, CT 06484, USA. 112023CREQXXXX



In preparation for the move, NHMS past presidents were each gifted a chair with the NHMS seal. Dr. Eric Loo took the opportunity to pose with the NHMS packing crew. L. to R., Catrina Watson, Jane Tewksbury, Julie Sawyer, Joy Potter and Mary West.

NHMS Welcomes 192nd President, cont. from page 5

care out of state. We have to continue to fight for women to receive safe abortion care in New Hampshire.

These abortion bans will also create major consequences to the educational and economic status of the women and families who are affected. Forced birth will make it more difficult for those women to advance their education and their careers. This will continue to widen the gender gap in wages, increase job inequity, and continue the cycle of poverty in underserved communities. It is no secret that women who are better educated, have better access to reproductive health care, and are employed are in better positions to avoid mistimed and unwanted pregnancy. But the racial and equity gaps that exist are only going to be exaggerated and perpetuated by the lack of local, safe, and comprehensive reproductive health care.

In addition to surgical abortion access,

medical abortion access is also being threatened. Earlier this year, a judge in the northern district of Texas issued a preliminary ruling invalidating the FDA's 23-year approval of mifepristone. Mifepristone is a drug with decades of use that is proven safe and effective for early abortions up to 10 weeks. It is used in about 50% of patients as an alternative to surgical abortion. Since April, there have been ongoing appeals and decisions that have resulted in restricting access to this essential medication. In 2024, the Supreme Court will be asked to make final decisions on the limitation of prescribing mifepristone. Our patients are at risk of losing access to this medication- despite the science, despite the proven safety, and despite the necessity for safe abortion care. If they vote in favor of banning this medication, make no mistake, this precedent will bleed into other areas of medicine. If we don't stand up against it, the ruling will be a step-

pingstone to restricting or banning other medications or devices, like long-acting forms of contraception, or other lifesaving treatments outside of women's health. This cannot stand.

In addition, we are going to have to fight to preserve the right to prescribe contraception or plan B. Currently nine states have adopted restrictions on emergency contraception. Some privately owned hospitals or health care systems even locally do not allow providers to prescribe contraception or birth control unless it's for secondary reasons or treatment of disease. Pharmacists can refuse to dispense these medications due to personal or religious beliefs. So now on top of restricting access to abortion care, women are facing limited options to prevent pregnancy that allow for proper family planning.

And finally, a story I would like to leave you all with... During my residency, I had the opportunity to spend



“Here, we see the potential in every new day.”

-Robin S.

Benchmark: Welcome to an exceptional senior living experience.

Benchmark is the Northeast's leading senior living provider. We can help meet your patients' evolving needs with comprehensive, personalized care, healthcare coordination, transportation to appointments, on-site medical services, restaurant-style dining and engaging programs. Discover our six New Hampshire

Assisted Living, Mind & Memory Care and Respite Care communities with locations in:

Bedford | Concord | Nashua | Rye | Salem



To learn more, visit
BenchmarkWelcomeHome.com
or call 603.697.7068



Scan to learn more

time at the Equality Health Center in Concord. For those who don't know, this is a place where patients can receive unbiased access to affordable contraception care, gynecologic care, gender affirming care, and abortion. I drove by there the other day going to the NHMS office and was reminded of the many protesters that gather there on Fridays- the day in which the center provides abortion care. When I worked there as a resident, I remember being scared of them and their judgment of me. I remember being asked to go in through the side door and not to wear scrubs for fear of being identified as a healthcare provider. The day I went, I met an incredibly smart, compassionate, and brave family physician who performed the procedures. I spent a day with her that completely changed my life and my career.

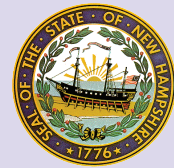
Hearing the stories of the women we saw, made me realize that the decisions these women were making were the hardest thing they've ever done. I met a woman who was in an abusive relationship, and her boyfriend would have beaten her and likely killed the baby or her if she didn't terminate the pregnancy. I met a mother with several other children who simply could not afford to provide financially for one more. Another patient suffered from substance abuse and was not in a place to get healthy enough to carry a pregnancy or have a baby that would likely suffer from neonatal abstinence syndrome.

The reason I remember that day so clearly though, is that it was the same day as the Sandy Hook shooting. A day where 26 people were senselessly murdered in an act of gun violence, 20 of which were young, innocent elementary school children. In between patients that day, we heard the news and watched live footage on our phones. We wiped our tears before moving on to the next patient. But I'll never forget what that doctor said to

me that day. She said, "Those people protesting out there think we're the evil ones."

This is why this issue is so important. We need to help educate our lawmakers that access to comprehensive and safe reproductive health care saves lives, helps patients make the best decisions for themselves and their families, and is better for our society and communities. There is no place for politics in our exam rooms or in our hospitals. The decision that is best for the patient lies between them and their doctor. Their doctor, who has gone through years of training, years of experience, believes in science, follows evidence-based care, and understands the complexities and circumstances surrounding that individual patient. This relationship we have is beyond anything else a lawmaker will ever have. And therefore, it's our duty to protect that.

My first act as NHMS president will be to initiate a reproductive rights coalition. If you or your professional colleagues are as passionate as I am about protecting reproductive rights here in New Hampshire, then I urge you as a member of the Society to reach out to me and our Director of Advocacy and join us in our efforts across the state. To be clear: reproductive care is health care. It's a basic human right and it's our right as doctors and health care providers to be able to practice safe reproductive care. As physicians, you can be involved in the legislative process- call your elected officials, testify on bills that seek to harm or protect reproductive health care, share your invaluable expertise. Getting involved in the NHMS' policy and advocacy opportunities is so important. Your experience matters. Your patients' stories matter. Do not forget why you became a doctor and a member of the NHMS: To bring together physicians to advocate for the well-being of our patients, for our profession, and for the betterment of public health. ■



WANTED

NH Licensed Physicians to perform consultative examinations in your office for the Social Security Disability program. Perform as many, or as few exams per week, or month as you like. Disability exam training is provided, as are free dictation services and secure web portal access to transact your reports. All exam scheduling is provided by the NH DDS. No billing is required and payment is processed upon receipt of the report. You are not rendering a disability determination but providing current medical evidence for disability claim adjudication. Please contact Anne.Prehemo@ssa.gov or call (603) 271-4138 for additional information.

OR

NH Licensed physicians specializing in Internal Medicine, Neurology, Orthopedic, General or Family practice interested in providing part-time or full-time staff medical consultant services for the NH Social Security Disability program in Concord. This position requires the successful completion of a federal background check and a minimum of 24 hours of on-site SSA disability program training per week, before a successful candidate can work remotely. There is no patient contact, so insurance is not a requirement. Please contact Anne.Prehemo@ssa.gov or call (603) 271-4138 for additional information.

New Hampshire
MEDICAL SOCIETY

ADVOCATING FOR PHYSICIANS & PUBLIC HEALTH SINCE 1791

7 North State Street
Concord, NH 03301
603 224 1909
603 226 2432 **fax**
nhmedicalsociety@nhms.org
www.nhms.org



Mission: *Our role as an organization in creating the world we envision.*

The mission of the New Hampshire Medical Society is to bring together physicians to advocate for the well-being of our patients, for our profession and for the betterment of the public health.

Vision: *The world we hope to create through our work together.*

The New Hampshire Medical Society envisions a State in which personal and public health are high priorities, all people have access to quality healthcare, and physicians experience deep satisfaction in the practice of medicine.

Printed on recycled stock using soy-based inks.

PRESORT STD
U.S. POSTAGE
PAID
CONCORD, NH
PERMIT #192



*The Bourget Family:
(l to r) Bob, Lori,
Robyn and Jill (on
video conference
from Florida)*

Because of genetic testing, they're all breast cancer survivors.

After two breast cancer diagnoses in the family, including Patty, the matriarch, Robyn, Lori, Jill and Bob Bourget all got genetic testing. Surprisingly, Bob—not Patty—turned out to be the carrier of the offending BRCA II gene. Sadly, Patty lost her battle in 2013.

Three more individual diagnoses later and the rest are all breast cancer survivors because of early detection and a prophylactic surgery.

Genetic testing saves lives.

If you have a patient with a family history of cancer, encourage them to visit [NewEnglandCancerSpecialists.org/High-Risk](https://www.newenglandcancerspecialists.org/High-Risk) or scan the QR code at right to learn more. It could very well save their life.



NEW ENGLAND
Cancer Specialists

 **Dana-Farber**
Cancer Institute
AFFILIATE MEMBER