TENNESSEE MEDICAL **ASSOCIATION ANNUAL REPORT 2021**



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My heartfelt thanks to each of you for serving our patients during this Covid-19, pandemic which brought unprecedented challenges to you and your practices. Federal and state executive orders were issued, laws and regulations relaxed, and new medico-legal

concerns quickly emerged. The change has been so rapid that even the content of this message may be out of date by the time it is read!

Please know that our TMA has stood with you by helping to advocate for you and guide you through unchartered waters. From our advocacy work on Capitol Hill, to our physician leadership training, to our efforts on important public health issues, our TMA remains the single voice representing all physicians, in all medical specialties, in all types of practice settings, in all areas of our state.

Looking back at 2021, we see another increase in membership as one important measurable. These numbers indicate that organized medicine is still very much relevant for Tennessee doctors.

Today, physicians face issues that require skills and knowledge they were probably not taught in medical school or residency. Our TMA's leadership training programs can fill these gaps by training young physicians to become leaders on their healthcare teams, in their profession and in their communities. Growing numbers of physicians have embraced the value of professional development outside their clinical areas of practice. An added benefit has been the contribution these leaders have made to their local medical societies, TMA committees and membership recruitment.

Year after year, we ask our advocacy team to sustain our medical liability reforms and to fend off scope of practice changes that could pose unnecessary risks for doctors and patients. At our TMA's urging, the Coalition for Collaborative Care (CCC), a group of a

dozen organizations including TMA, have organized to oppose nurse independent practice in Tennessee and to promote physician-led collaborative healthcare delivery models.

New laws and regulations affect how we deliver care to patients. Despite these and many other changes happening around us, our TMA is a uniquely effective change agent, driving good healthcare policies and fiercely protecting our patients and our profession. We are also continually changing within our TMA to enhance our member programs and services and to deliver a stronger value proposition to physicians who live and work in Tennessee.

Our Board of Trustees showed foresight when it approved a graduated membership dues schedule, paving the way to increases in membership while welcoming new voices and diverse perspectives into our organization.

Success is measured not only by membership numbers and advocacy "wins," but also by having more members engage in our TMA programs and services. Along these lines, a renewed emphasis was placed on growing our TMA's grassroots network and making it available to hundreds of participating physicians. We will continue to rely upon our members' active participation to help shape the future of our profession.

Totally dependent on your membership and support, our TMA remains the largest, most influential and most successful advocacy organization for physicians in Tennessee.

When the opportunity arises, please encourage physician friends to join our TMA and work with us for the improved health of our patients and the betterment of our profession!

RONALD H. KIRKLAND, MD

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TMA PRESIDENT 2021-2022

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Operations During Covid-19

For TMA, 2020 and 2021 were anything but business as usual. The world was besieged by a coronavirus beginning in February 2020, and everything changed overnight for all involved. The last two years have been a tale of upheaval, change, fear, opportunity, loss, gain and extreme emotion among our members, staff, the health care system, markets and more.

As an organization, TMA went fully remote in March, and anything scheduled for "in-person" was cancelled or switched to virtual. The association walked a tightrope between pushing for what was medically right in the public and not getting our hand slammed in the door at the governor's office.

We have worn masks, then put them away, only to pull them back out again months later. We have socially distanced. Eventually, a number of vaccines were produced in record time to help the nation get a handle on the pandemic, but then up to a third of people in Tennessee claimed they would not get the shot. We have weathered variants, multiple infection waves and doomsday-like predictions.

Despite all the unwelcomed interuptions we all encountered, TMA fared well. Membership actually increased. The association was able to pivot, like

so many others, by going virtual instead of hosting functions we are accustomed to conducting in person. We kept committees and boards on track. We wrapped two extremely successful sessions on Capitol Hill. The pandemic taught TMA that technology is vital in continuing to meet the needs of our audiences. However, technology cannot totally supplant human connection or personal interactions.

If the pandemic did only one thing, it showed us all how fragile and precious our health truly is, both as individuals and as an association. The virus might have given society some pause to think about good health, hygiene, prevention, and overall better personal care and precaution. A lot of those issues tie into this association's main mission.

The last few years have been consumed with overwhelming issues facing both physicians and patients alike—such as our lengthy battle with opioid usage—along with an unprecedented pandemic that altered our course of direction. TMA will continue to improve technological means to better engage with members, but overall aim to get back to the business of connecting with our people to improve medicine in the state.

Coronavirus Resource Center



When the Coronavirus outbreak began, information was constantly changing and updating as we

learned more about the virus. TMA created a resource page to assist our members in finding the most current and accurate information on the pandemic.

On this page from March 2020 to Sept. 2021, TMA President Kevin Smith, MD, helped gather information on a weekly basis from the Tennessee Department of Health to produced news updates featuring the most current data on confirmed Covid-19 cases across the

state. TMA also utilized weekly data to create colorcoded maps that highlighted positive Covid-19 cases across the state, broken down by county.

Other resources on this page included a legal analysis and interpretation of Governor Bill Lee's executive orders along with other TMA resources: a "Prescription Against Covid-19" campaign, a vaccine education course, and the availability of Covid-19 Antibody Rapid Test Kits to members through a partnership with 11:11 COVID Project. It also hosted direct links to informational Covid-19 pages from the Tennessee Department of Health, the Center for Disease Control and the American Medical Association websites. To check out the page and information, visit our site at tnmed.org/coronavirus.

"Facts Over Fear" Vaccine Education Course



TMA developed one of the first CME courses in the country to address questions about the brandnew coronavirus

vaccines, and made it available free of charge to all healthcare professionals. "Facts Over Fear: Preparing for the Covid-19 Vaccines Across Tennessee" was a comprehensive training course designed to help physicians and front-line workers in the next phase

of the pandemic: administering the vaccines. The course, in partnership with Tennessee's Department of Health, sought to put healthcare professionals in a confident position to administer and discuss the vaccines with patients, particularly those who might be "vaccine-hesitant."

The Blue Cross Blue Shield of Tennessee Foundation provided a supportive education grant to help fund this project, allowing physicians and other healthcare workers across the state to take the 1.5 hour ACCMEcredited course at no charge.

"Prescription Against Covid-19" Campaign

As the pandemic continued to impact patients across Tennessee, TMA created a campaign to address ways in which members, prospetive members and patients alike could stay healthy and safe from the virus. The multipart, multimedia campaign launched in Nov. 2020 to help spread a message of caution into the new year.

The campaign kicked off with a 30-second video that was produced and co-branded by the AMA. The video outlined the initial steps of the "Prescription Against Covid-19."

TMA drew attention to the Prescription with a statewide media release, priority presence on tnmed.org/coronavirus, social media posts, Member News and our bi-weekly member newsletter. A dozen Tennessee media outlets dedicated time and space to showcase the message on air, in print, online and via other consumer platforms. Among them: Fox17 Nashville, WBIR Knoxville, The Chattanoogan, Nashville Medical News, the Upper Cumberland Business Journal and more.













Membership

The past two years brought considerable change in the world of health care. From the Covid-19 pandemic to changes in federal health care laws, physicians around the state faced an ever-changing set of rules and policy proposals that directly affected their everyday lives and the lives of their patients. Amid this change, the Tennessee Medical Association served as a strong, engaging voice to ensure the needs of physicians and patients were heard on Capitol Hill and understood among the public at large.

While Covid-19 presented challenges, it also brought opportunity for the medical community to come together through organized medicine. In order to keep our members updated, we developed a resource page on our website designed to be one place our members could go to navigate the fastchanging issues regarding Covid-19 in Tennessee.

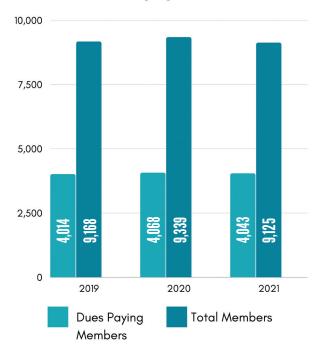
The pandemic forced TMA to get creative in the way we engaged with our members. We began holding All Member Virtual meetings with experts presenting on topics, such as Balance Billing and the effect of the Delta variant in Tennessee.

Many of our members and member practices faced financial challenges during the pandemic, which also affected membership. Our Board of Trustees voted to implement a sliding dues discount; a tiered threeyear offering for new members and former members who had not been TMA members for five years or longer. TMA president Dr. Ron Kirkland visited large medical groups across the state to share information on the advocacy work that TMA performs on their

behalf, membership benefits, and the new discount option. As a result, several new all-in member groups joined the association. We look forward to working with them for years to come.

Serving more than 9,500 members, TMA remains committed to its mission of providing safe, quality and effective healthcare for all Tennesseans. We would like to thank all of our members for your continued support of organized medicine.

Total Members Compared to Dues Paying Members



Membership Marketing



For this new marketing piece, TMA worked together with its component medical societies to create a new membership brochure highlighting the best of organized medicine.

We focused on the unique ability of

membership can assemble physicians from all areas of the state, all specialties and all demographics to serve as the stewards of good medicine, underscoring four main categories that encapsulate TMA membership: voice, leadership, community and well-being. We thank you for your continued support, and hope to grow our organization in the coming year.







The 186th House of Delegates Meeting

The Tennessee Medical Association assembled Saturday, May 22 for the official annual meeting of the 186th House of Delegates, the first in-person annual meeting in nearly two years due to ongoing postponements and uncertainties caused by COVID-19.

"How wonderful for us to gather again for the good of our TMA, the only organization in our state which effectively advocates for all Tennessee physicians and our patients," said Ron Kirkland, MD, of Jackson, who was officially installed as TMA president for 2021-2022.

In the end, 127 credentialed delegates outlasted the Covid-19 pandemic and its impact on the traditional business meeting to navigate dozens of business issues with efficiency and relative patience. Business of the House included transitioning the TMA Board of Trustees to new leadership for the coming year:

- James Cates, MD, a Cookeville family medicine physician became Chair of the TMA Board of Trustees.
- Lee Berkenstock, MD, an emergency and family medicine physician in Memphis, began his term as the Vice Chair.
- Landon Combs, MD, a pediatrician in Gray, entered as Secretary/Treasurer.

Members also elected two members in good standing to lead the House of Delegates through 2021-2022 business:

- John McCarley, MD, a nephrology specialist in Chattanooga, became Speaker of the TMA House of Delegates.
- George "Trey" Lee, III, MD, a neurologist with subspecialization in neurophysiology was elected Vice Speaker.

In other business, Kevin Smith, MD, of Nashville, transitioned to Immediate Past President and Edward Capparelli, MD, of Jacksboro, to become President-Elect.

Warren McPherson, MD, of Murfreesboro and Don Franklin, MD, of Chattanooga received Outstanding Physician Awards, and the Nashville Academy of Medicine gained special recognition for its Bicentennial Anniversary.

Some of the resolutions adopted with unanimous consent included:

- Resolution No. 01-20: Hospitals Charging for Physician Applications
- Resolution No. 04-20: Defining What Constitutes Proper Use of the Terms "Residency" and "Fellowship" When Referring to Specialty Training
- Resolution No. 05-20: Ending Rise in Maternal Mortality Rates by Extending Coverage to 12 Months Postpartum
- Resolution No. 15-21: Mental Health Screening







Legislative Dinners

TMA's 2019 strategic plan identified the organization's advocacy efforts—influencing laws, rules and regulations, and business practices, governing medicine in Tennessee—as its top core focus area.

In 2021, efforts were undertaken to link the legislative side of medicine to our members' day-to-day clinical experience through legislative receptions held across the state in Chattanooga, Clarksville, Franklin, Jackson, Kingsport, Knoxville, Memphis, Murfreesboro and Nashville. TMA works with its local chapters on an annual basis to hold town hall opportunities for members to meet with their elected representatives and discuss issues of importance to physicians and their patients.

Healthcare legislation recently considered or enacted is discussed, and TMA's advocacy team outlines its legislative priorities and summarizes recent activity in an effort to bridge the divide between the legislative side of medicine and the experience of our clinicians operating in the trenches. TMA government affairs staff provides background information on legislative activity and outlines TMA's top legislative priorities.

Component Medical Society Collaboration

In 2018, physician leaders from the Chattanooga-Hamilton County Medical Society, Knoxville Academy of Medicine, Memphis Medical Society and Nashville Academy of Medicine wrote to express interest in working together with TMA to improve the shared physician member experience.

A renewed focus was placed on areas of common interest: group and hospital outreach, membership communication, regional outreach, legislative issues, continuing medical education, physician services and sponsorships.

These and other critical issues were addressed by each organization in 2021 in consultation with TMA's Board of Trustees. In addition to meetings and discussions with the Board, TMA and its component medical societies engaged in an effort to improve member relations, increase membership in each organization, and improve communication between component medical societies and TMA.

As these meetings have continued, the staffs have focused on making improvements to the working relationships. Specific examples include consensus building around TMA's new member discount program, increased collaboration regarding membership marketing, grassroots communication and partnership between TMA legislative staff and component medical society staffs.

The leaders of the respective entities committed to creating a new working document, approved by the TMA Board, outlining the working relationship to advance TMA's strategic plan. Each organization committed to serving as the dynamic, collaborative, and resilient advocacy organizations Tennessee physicians deserve.



All Member Virtual Meetings

With the start of the pandemic came the cancelation of live activities—large events, small gatherings and one-on-one meetings—and TMA staff realized there was a void for our members to connect. TMA created the concept of hosting bi-monthly virtual meetings for members with its All Member Virtual meetings.

These meetings were designed to serve as town hall-style event, focusing on current issues and topics with guest experts leading discussions that would keep members informed during uncertain times. The meetings occur bi-monthly on the third Thursday of the month.

We have received positive feedback from this initiative, and we have continued hosting All Member Virtual meetings into 2022. Some of the most popular topics over the past few years have included:

- Scope of Practice
- Prior Authorization
- Balance Billing
- Covid-19 Vaccines
- Medical Cannabis

To learn more, visit thmed.org/all-member-virtual.

All-In Groups for 2021

A special thanks to our friends with the Chattanooga-Hamilton County Medical Society, Knoxville Academy of Medicine, Memphis Medical Society, Nashville

Academy of Medicine and all component medical societies for their work to recruit and retain physician members of the TMA and their local medical societies.

Abercrombie Radiological Consultants

Adams Patterson Gynecology & Obstetrics

Allergy and Asthma Affiliates

American Anesthesiologists of Knoxville

Anesthesia Medical Group (PhyMed Management, LLC)

Anesthesiology Consultant Exchange

Arthritis Associates

Ascension Medical Group Saint Thomas Breast Surgery - Midtown

Associated Orthopedics of Kingsport

Associates in Diagnostic Radiology

Associates in Oncology & Hematology

Ballad CVA Heart Institute

Beacon Health Alliance

Blount Memorial Physicians Group

BMG Family Physicians Foundation

Bristol Anesthesia Services

Campbell Clinic Orthopaedics

Center for Sports Medicine

& Orthopaedics

Chattanooga Allergy Clinic

Chattanooga Center for Women

Chattanooga Ear, Nose

& Throat Associates

Chattanooga Emergency Medicine

Chattanooga Eye Institute

Chattanooga Heart Institute

Chattanooga Neurology Associates

Chattanooga Skin & Cancer Clinic

CHI Memorial Health Partners

Christ Community Health

Clinica Medicos

Complete Eye Care

Consolidated Medical Practices of Memphis, PLLC

Consultants in Pain Management

Cookeville Pediatric Associates

Cookeville Regional Medical Center

Cumberland Center for Healthcare Innovation

Dermatology Associates of Kingsport

Dermatology Associates of Knoxville

Dermatopathology Partners

Diagnostic Cardiology Group

Diagnostic Pathology Services

Dickson Medical Associates

Drs. Davenport and

Davenport – Elizabethton

Ear, Nose and Throat Group, Inc.

Ear, Nose & Throat Consultants of

East Tennessee

Ear Nose and Throat Associates, PC

East Memphis Neonatology

East Memphis Orthopedic Group

East Ridge Eye Center

East Tennessee Spine and Ortho

of Morristown

East Tennessee Vascular

Center, Morristown

Erlanger Primary Care - Cleveland

Erlanger Primary Care - Soddy Daisy

Eye Specialists of Chattanooga

Eye Specialty Group

Eye Surgery Center of Knoxville

Fenyves and Fry

Fertility Center

Galen Medical Group

Gastroenterology Associates

of Kingsport

Gastro One

Germantown Wellness and

Preventative Medicine

Goodlettsville Pediatrics, PC

Greater Knoxville Ear, Nose & Throat

Hamilton Eye Institute

Hayes Hand Center

Heritage Medical Associates

Inpatient Physicians of the Mid-South

Jefferson Family Physicians

John Lawson Surgical Group

Kentucky Lake Urology Clinic

Knox County Regional

Forensic Center

Knoxville Dermatology

Knoxville Pediatric Associates, PC

Lakeway Dermatology Associates

LifeCircle Women's Healthcare, PC

Livingston Regional Hospital

Martin, Lee and Page OBGYN

Maury Regional Medical Group

McDonald Murrmann Women's Clinic

Medical Anesthesia Group

Memphis Dermatology Clinic

Memphis Pathology Group

Memphis Surgery Associates

Methodist Healthcare

Methodist LeBonheur Pediatrics

Mid-South Ear, Nose & Throat

Mid-South Imaging & Therapeutics

Mid-South Retina Associates, LLC

Mid-South Surgical Associates

Middle Tennessee

Surgical Specialists

Morristown Heart Consultants

Morristown Regional Eye Center Mountain Empire Eye Physicians Mountain Empire Neurological Associates

Mountain Region Family Medicine Murfreesboro Anesthesia Group Nashville Fertility Center

Nashville Oncology Associates Nashville Surgical Associates

OrthoSouth

Outpatient Cytopathology Center Pain and Spine Consultants

Pain Consultants of East Tennessee

Pain Medicine Associates
Parkridge Bone and Joint

PathGroup

Pediatric Anesthesiologists, PA

Pediatric Associates of Davidson County

Plastic Surgery Center of Nashville, PLLC

Plastic Surgery Group of Memphis

Premier Medical Group

Premier Surgical Associates, PLLC

Primary Care Associates, Talbott

Psychiatric Associates of Kingsport

Refined Looks

Rheumatology and Dermatology

Associates, PC

Rheumatology Consultants, PLLC

Scenic City Rheumatology

Semmes-Murphey Clinic

Shea Clinic

Shell Cosmetic Surgery Center

Siskin Spine and Rehab Specialists

Southeastern Retina Associates,

PC - Knoxville

Southeastern Spine Brain Joint

Southern Oncology Inc.

Specialists in Pain Management

Specialty Surgeons, PC

State of Franklin Healthcare

Associates, PLLC

Summit Medical Group Healthcare Services

Surgical Associates of Cleveland

Surgical Associates of Kingsport

Susong Dermatology

Sycamore Shoals Primary Care

Takoma Medical Associates

Tennessee Cancer Specialists

Tennessee Interventional & Imaging Associates

Tennessee Oncology

Tennessee Orthopaedic Alliance

Tennessee Reproductive Medicine

Tennessee Urology (Oak Ridge)

The Allergy, Asthma & Sinus Center

The Colorectal Center

The ID Group

The Skin Wellness Center

The Surgical Clinic

The Urology Group, PC

Tranquility Sleep Specialists, PLC

Tri-Cities Skin and Cancer

University Anesthesiologists

University Cardiology

University General Surgeons

University Gynecologic Oncology

University Heart Surgeons

University Oncology

& Hematology Associates

University Surgical Associates

Urology Associates, PC

Vascular Institute of Chattanooga

Vigilance Anesthesia – Elizabethton

VIP MidSouth

Vista Radiology

VRF Eye Specialty Group

Wellmont CVA

Wesley and Klippenstein, PC

Wesley Neurology Clinic

West Cancer Center

West Tennessee Bone and Joint

Williamson Medical Center

Women's Center of Greeneville

Womens Group of Franklin

Women's Health Specialists

Corporate Sponsors

We want to thank all of our sponsors who supported our association over the last year.





















Government Affairs

During the 112th Tennessee General Assembly, TMA spent much of the 2021 legislative session dealing with pandemic-related bills, matched against the lobbying team's limited abilities to attend hearings and meet in person with legislators due to protocols and precautions.

Overall, TMA reviewed 1,654 bills, tracked 351 bills, amended 18 bills, defeated 13 bills and passed four bills. Below were the top priorities.

GRADUATE MEDICAL EDUCATION FUNDING (PC587)

Approximately \$5.5 million was placed in the state budget to fund 130 new residency spots for family practice, general pediatrics, med-peds and psychiatry in medically underserved areas and distressed rural counties of Tennessee. Funding was included in the appropriations bill, which passed both the House and Senate and was signed by the Governor.

Background: The Centers for Medicare and Medicaid Services (CMS) ruled in 2020 that Tennessee must scratch its longstanding funding formula for graduate medical education slots through TennCare. It placed millions of dollars and all of Tennessee's residency programs at risk.

SCOPE OF PRACTICE (SB0671 | HB1080)

This new law preserved PA-physician collaboration and created a semi-autonomous licensing board for

physician assistants. All rules regarding physician collaboration remain in effect and will continue to be overseen by the medical board. The bill as amended was signed by the governor.

Background: TMA opposed this bill as originally drafted because it would have eliminated the requirement for physician assistants to formally collaborate with physicians. TMA is a leader in efforts to preserve Tennessee physicians' ability to supervise patient care and oppose unsafe scope of practice expansion by midlevel healthcare providers. Because of our leadership, advanced practice registered nurses and physician assistants have failed to change state laws to achieve collaborative practice in Tennessee. We joined a coalition of medical specialty societies and other healthcare organizations promoting physician-led, team-based healthcare delivery teams as the best model for patient safety and quality of care.

BALANCE BILLING (SB0001 | HB0002)

The House planned a summer study of this issue to determine the effects of the federal balance billing law. The Senate postponed the bill until 2022.

Background: This bill would have ensured a balance billing solution for the state-regulated health insurance market in state law. TMA leads a coalition of hospital-based physician specialty organizations working to protect patients from narrow networks created by health insurance companies.

Legislative Report Card



TMA produced its annual Legislative Report Card, which is available at tnmed.org/legislative for all members to review.

In this document, you

will receive an indepth summary and background information on our three legislative priorities from 2021 along with other bills upon which TMA focused on.

It also features a summary of other healthcare public chapters, including the date they became effective. We also listed several healthcare issues we predict will be relevant for the 2022 session, and contact information for TMA's advocacy team.

Court Rules APRNs & PAs Have Duty to Furnish Records

The TMA legal department filed an amicus curiae brief in the case of *Patel v. Board of Medical Examiners* in support of a physician who was disciplined by the licensing board because his APRN failed to give him two medical charts to review and sign off on as the collaborating physician when controlled drugs were prescribed. TMA took the position that the Tennessee Board of Medical Examiners (BME) should not have imposed strict liability on the supervising physician; the responsibility was on the APRN to furnish the chart for review.

A Davidson County Chancery Court ruling clarified that it is the responsibility of APRNs and PAs that collaborate with physicians to furnish medical records to the collaborating physician for patient visits triggering required medical record review and sign off by the collaborating physician.

The case arose after a physician appealed licensure disciplinary action by the BME. The physician was reprimanded and assessed civil penalties based on a finding by the BME of four instances where two patients' medical charts were not reviewed by the collaborating physician within 10 days of visits when controlled drugs were prescribed. BME rules require that 100 percent of charts must be signed off on by the collaborating physician if a controlled drug prescription is issued by their collaborating APRN or PA.

At the hearing of the case, the physician defended by arguing that his APRN, with whom he collaborated remotely, failed to make him aware that the medical records needed to be reviewed or furnish him with the charts. The BME essentially held the collaborating physician to a strict liability standard, finding the physician in violation even though the panel hearing the case could not articulate what the doctor could have done differently to receive the charts for review. There was uncontroverted evidence that the collaborating physician had protocols and instructions regarding chart reviews, but they were not followed by the APRN.

The chart review violations were reversed by the Chancellor on appeal, as was a \$500 civil penalty assessed against the doctor. The parties had 60 days in which to appeal the case to the Court of Appeals. TMA filed an amicus curiae brief in the case in support of the physician, arguing that collaborating APRNs and PAs have a duty to timely furnish charts requiring 100 percent review. Otherwise, physicians would be reluctant to collaborate with mid-level providers if chart review protocols were not followed. In a situation like this one, where collaboration was remote, the doctor would not know the patient received a controlled drug unless the APRN made the physician aware and furnished the chart.

As it stands pending any appeal, this is a very positive result for Tennessee physicians. The decision clarified a point of law never addressed previously by the BME in rule. No more will physicians be held strictly liable for the failure of their collaborating mid-levels to furnish charts to their collaborating physician of patients the mid-levels treat that trigger mandatory chart review by the collaborating physician. Without strict liability in this regard, physicians will have less liability risk for collaborating with mid-level providers, and will be more willing to serve in collaborative roles without this threat of discipline.

TMA Legal Resources

TMA members may contact the in-house legal department for legal research, guidance and resources.

Members also have full access to TMA's members-only online Law Guide with over one hundred medico-legal and practice management topics. Other resources available to members include:

- Opioid Prescribing Resource Center
- Treatment of Minors Guide
- Balance Billing
- Employment Contract Checklist
- APRN & PA Collaborating Physician Toolkit
- No Surprises Act Guide

Visit **tnmed.org/legal** to access these resources.

Our legal team advocates in court, represents medicine before state and federal regulatory boards and committees, offers legal and health care regulatory compliance guidance, reviews hospital medical staff bylaws, and more.

Members may submit questions by phone or email. Our legal team will only respond to issues submitted by TMA members but cannot have an attorney-client relationships with members or provide them legal advice or representation.

Covid-19 Liability Legislation

During a 2020 Special Session called by Tennessee Governor Bill Lee, the Tennessee General Assembly enacted the "Tennessee Covid-19 Recovery Act." The purpose of the legislation was to provide liability protections for health care providers, schools, and businesses from lawsuits arising from the Covid-19 pandemic. It went into effect on Aug.17, 2020 and automatically terminates on July 1, 2022.

The law provides protection for, among others, physicians; licensed health care workers; health care facilities licensed by the state; medical practices and

other medical or health care settings no matter how corporately organized; employees and contractors; medical schools; and medical residents, interns, and fellows, and their training programs. It also provides protection for businesses and non-profit organizations no matter how organized, and "public institutions of higher education." The law does not affect workers' compensation cases.

The specifics of this law are detailed in our Law Guide topic, Covid Liability Protection, found on our website at tnmed.org/lawguide.

No Surprises Act: Federal Balance Billing Legislation

Congress passed the No Surprises Act (NSA) in December 2020 as part of the Consolidated Appropriations Act. It went into effect on Jan. 1, 2022 and applies to all insurance plans (including ERISA plans) except for Medicare, Medicaid, and TRICARE. These three plans already prohibit balance billing of patients by a healthcare provider.

The NSA prohibits balance billing for the following:

- Emergency Services at an Out-Of-Network Facility
- Non-Emergency Services from a Non-Participating Provider at a Participating Facility
- Air Ambulance Services

The first rule to provide detail on the implementation of the NSA was published in the Federal Register on July 13, 2021. This rule has been codified in the Code of Federal Regulations at 45 C.F.R. § 149.10 to § 149.450.

A second rule was published in the Federal Register on Sept. 30, 2021, and it addresses independent dispute resolution, good faith estimates, and health plan decision appeals.

TMA's legal department wrote a series of articles explaining this law, and they are available at tnmed. org/no-surprises-act.

Graduate Medical Education Funding

Graduate Medical Education (GME) is the lifeblood of medicine in Tennessee. The Centers for Medicare & Medicaid Services (CMS) ruled last summer that Tennessee must scratch its longstanding formula to fund graduate medical education slots through TennCare. That funding is in jeopardy, placing all of Tennessee's residency programs at risk.

- TennCare has indicated that Tennessee will not lose GME funding, even though there will be changes to the GME funding formula and to distribution.
- TMA is requesting that the funding and number of residencies in Tennessee stay the same or increase.
- TMA is advocating for a seat at the table as the residency program funding structure is reworked.

- TMA is asking that the funding for recently created residency slots be directed to underserved areas and rural hospitals.
- Tennessee is already an exporter of medical students, meaning there are not enough residency slots for the medical students who want to train in our state.
- Studies show that physicians tend to stay and practice in the same state in which they complete their residency. Preserving the existing slots will ensure Tennessee citizens have adequate physicians to care for citizens in the future.
- Preserving the existing slots will also ensure that there is an adequate supply of physicians to treat TennCare enrollees.

Coalition for Collaborative Care



The member organizations of the Coalition for Collaborative Care (CCC) voted to renew the

lobbyist contract with Molly Pratt in July 2021 for the 2022 legislative session. Pratt and TMA's lobbyist met with Lt. Governor Randy McNally (R-Oak Ridge) and House Speaker Cameron Sexton (R-Crossville) to express concerns over the Covid-19 emergency executive order which temporarily suspended statutory requirements of collaboration between a physician and mid-level provider.

The CCC met with Governor Lee's legislative liaison concerning the temporary policy and confirmed the rule was a one-time, emergency step that the administration had no plans to re-issue or make permanent.

Over the summer, the Tennessee Board of Dentistry promulgated rules to create a new dental specialty for "Dental Anesthesiologists." CCC member Tennessee Society of Anesthesiologists (TSA) led an aggressive effort in both the regulatory and legislative arenas to stop this confusing and illegal rule but efforts to stop it were unsuccessful.

As scope of practice incursions have become a perennial issue at the legislature, the CCC once again fought to defeat and amend harmful practice expansions by mid-level providers. The Tennessee Nurses Association's introduced legislation in the 2021 session to establish independent practice for nurse practitioners. After almost failing to receive a second in committee, the bill was postponed until 2022 because of a clear lack of votes.

The Coalition was also successful in negotiating with physician assistants seeking independent practice by amending their legislation to create a semi-autonomous licensing board which conducts routine licensing. As amended, the Board of Medical Examiners will retain statutory authority to approve all rules on scope of practice and collaboration in addition to maintaining disciplinary authority involving controlled drug prescribing.

CCC member Timothy Bell, MD, is an osteopathic family physician who believes that the coalition helps protect physicians' rights to practice medicine in the state of Tennessee. "By joining the Coalition we are able to make a significant contribution to protecting all physician's rights to practice medicine commensurate with their level of training," he said.

TMA Medical and Pharmaceutical Council

In 2019, TMA's Board of Trustees approved the establishment of a medical and pharmaceutical council aimed at serving as a networking opportunity to reenergize the relationship between physicians and the pharmaceutical industry in Tennessee.

The council enables TMA to discuss issues that may cause concern, resistance or friction between prescribers and producers. It also provides TMA with a platform to propose solutions to common problems inherent in the country's health care system.

The council serves as a focus group enabling TMA to provide strategic advocacy and regulatory initiatives surrounding lowering the cost of medical care for

patients, preventing barriers to patient medical care and improving relations in Tennessee between manufacturers and physicians.

TMA Vice President of Government Affairs Julie Griffin and Assistant Director of Government Affairs John Carr spent the second half of 2021 reengaging council members. Meetings were held with Merck and Pfizer as members of the council, along with Gilead and CSL Behring as prospective members. CSL declined the invitation to join the council in 2022.

TMA anticipates dialogue and activities with the council surrounding areas of common interest continuing into the future.

Grassroots

In the 2020-2021 fiscal year, IMPACT raised more than \$77,000 in individual donations and \$56,000 in corporate contributions. IMPACT received donations from medical students, residents, spouses, and physicians representing over 40 different specialties. The average contribution was \$327, and the single largest contribution was \$3,000.

In consultation with TMA lobbyists, the IMPACT committee approved \$189,300 in donations to over 60 pro-medicine campaigns including individual, caucus, and leadership PACs. In the 2020 election cycle, IMPACT had a 97% victory rate, winning 52 of 54 races.

In October 2021, the IMPACT committee voted to rebrand IMPACT to TMA PAC—to better align our political action with the trusted TMA brand. Under one



name our action will be louder, more powerfuland more effective. As TMA continues to defend gains in tort reform, combat scope of practice expansion, ease regulatory burdens and fight for fair reimbursement, our strides must not only impact medicine, but move medicine forward. Visit tnmed.org/grassroots to learn how you, too, can become a member.

2020-2021 Corporate Donors

Association of University Radiologists
The Jackson Clinic PAC

2020-2021 Sustaining Members | \$300+

Alvin Meyer, MD
Amy Suppinger, MD
Annette Kyzer, MD
Barton Chase, MD
Ben Mahan, MD

Cara Hennings, MD

Catherine Womack, MD

Catherine Chang

Charles Fulk, MD

Charles Leonard, MD

Clyde Smith, MD

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Glenn Davis, MD

Harry Burck, MD

James Haynes, MD

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John Johnson, MD

John Stanton, MD

John Boldt, MD

Katherine Grizzell, MD

Keith Loven, MD

Keith Lovelady, MD

Kristen McFarland, MD

Landon Combs, MD

Larry Gurley, MD

Michael Miller, MD

Michael Gold, MD

Michael Levitt, MD

Michelle Cochran, MD

Natalie Dickson, MD

Patrick O'Brien, MD

Patrick Andre, MD

Randal Dabbs, MD

Richard Hall, MD

Sean White, MD

2020-2021 Advocate Members | \$500+

Amy Hawes, MD Bryan Merrick, MD Charles White, MD

Christopher Thacker, MD

Daniel Box, MD

David Gerkin, MD Edward McIntire, MD Hall Reynolds, MD James Fleming, MD Joseph Rupard, MD Laura Sprabery, MD Michael Bearb, MD Scott Keith, MD Stephen Jackson, MD

2020-2021 Capitol Hill Club Members | \$1,000+

Adrian Rodriguez, MD

Adele Lewis, MD Bart Bradley, MD

Brian Daley, MD

Carmen Powell

Cathy Chapman, MD

Charles Gober, MD

Chase Toth

Elizabeth Connor

George Woodbury, MD

George Lee, MD

James Cates, MD

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Jeffery Ollis, MD

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John Blake, MD

Joseph Armstrong, MD

Joseph Huffstutter, MD

Joshua Hicks, MD

Keith Anderson, MD

Ken Kozawa, MD

Kevin Smith. MD

Lee Berkenstock, MD

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Melanie Blake, MD

Michael McAdoo, MD

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Newton Allen, MD

Nita Shumaker, MD

Pamela Murray, MD

Patrick McFarland, MD

Perry Rothrock, MD

Rodney Lewis, MD

Ronald Kirkland, MD

Russ Miller

Shauna Lorenzo-Rivero, MD

Subhi Ali, MD

Tracey Doering, MD

Wiley Robinson, MD

William Williams, MD

William Law, Jr., MD

Yasmine Ali, MD

Doctors' Virtual Day on the Hill



TMA's annual policy briefing and lobby day in Nashville connects physicians directly with lawmakers so they can advocate for their patients and discuss

major issues affecting the medical profession in Tennessee.

The General Assembly opted against large, in-person

group lobbying events in 2021 due to the Covid-19 pandemic. So TMA visited lawmakers virtually via Zoom video conferencing with small group breakout discussions. Our typical all-day event shrunk to a dynamic 60 minutes of discussions between TMA members and their elected representatives.

While the online format was new, the overall concept and inner workings remained the same. Invitations were extended to all 133 legislators, and over 300 physicians attended online to address healthcare-related issues.

The 2022 event is scheduled to take place on March 23 in Nashville. Visit tnmed.org/events for more information on these and other 2022 activities.

Insurance Issues

TMA's Insurance Issues committee met quarterly to discuss systemic insurance-related issues. The charge of the committee is to monitor and address all insurance issues, both government and commercial, affecting physicians, practices and patients in Tennessee. This includes reimbursement, regulation and policy changes, lawsuit settlements, contracting issues, networks, pay for performance, workers' compensation and more. The committee is led by Natalie Dickson, MD, president and chief strategy officer with Tennessee Oncology.

Some of the issues discussed this year included coverage and payment parity for telemedicine, balance billing, pharmacy benefit managers, step therapy, copay accumulators, credentialing, contracting and prior authorization. TMA was successful in passing legislation regarding telemedicine, PBMs and co-pay accumulators and continues to monitor insurance related bills.

Prior authorization is such a major insurance-related concern for physicians in Tennessee that TMA formed a prior authorization workgroup. Practices struggle conforming to payer prior authorization requirements. It is costly, time consuming and delays treatment in many cases. The purpose of the workgroup is an attempt to resolve prior authorization issues without bringing legislation. It is comprised of stakeholders such as physicians, payers, the state's assistant insurance commissioner, practice managers, and representatives from the AMA, AHIP and NMGMA.

In Jan. 2018, the American Medical Association and other national organizations representing pharmacists,

medical groups, hospitals and health plans signed a joint consensus statement that outlined five key areas for industry-wide improvements to prior authorization processes and patient-centered care; however, there has been no action to date. The five areas include Selective Application of Prior Authorization, Prior Authorization Program Review and Volume Adjustment, Transparency and Communication Regarding Prior Authorization, Continuity of Patient Care, and Automation to Improve Transparency and Efficiency. The workgroup has held monthly meetings since July 2020 and is using the AMA consensus statement as a foundation for discussions.

Tennessee's insurance commissioner, the executive director of the Tennessee Pharmacy Association, and TMA's vice president of government affairs have provided valuable input to the committee. We also had a demonstration of Evicore, a tool utilized by Cigna that uses artificial intelligence to process prior-authorization requests, was shared with the committee. Most procedural prior authorizations relate to high-tech imaging; however, there have been discussions regarding a pilot project to include certain surgical procedures.

Physicians are plagued with numerous administrative burdens. The Insurance Issues committee is one avenue where physicians can have their voice heard. TMA is constantly helping to alleviate those burdens and mitigate egregious policies that hinder patient care.

Tennessee Healthcare Symposium 2021



TMA's 2021 Tennessee Healthcare Symposium took place Nov. 2-4. This three-day virtual event was designed for healthcare professionals who focus on coding, billing, compliance and auditing.

The event featured three informational tracks over the three-day period: specialty coding, management and compliance, and coding and billing. The conferencelike environment included vendor booths, payer help

desks, and multiple industry expert speakers.

"We listened to participants' feedback from 2020 and were excited to offer a specialty coding track along with compliance and auditing sessions and payer panel discussions," said Karen Baird, TMA director of insurance affairs.

More than 100 healthcare professionals attended this year's event. Attendees engaged with speakers, payers and exhibitors via chat or video conference and earned up to 21.5 AAPC CEUs. For more information, visit tnmed.org/symposium.

Education

The TMA education department continued to work in conjunction with a coalition of state medical associations to provide physician education on Covidrelated issues. This collaboration began in March 2020 in response to the worldwide health pandemic. In addition, TMA produced programs focused on recapping prominent legislative issues from 2021 while previewing anticipated 2022 activity and highlighting key topics like telehealth and billing and coding concerns.

In 2021, TMA provided over 750 hours of continuing education to more than 2,500 Tennessee physicians and medical professionals. The TMA education department covets relevant and timely topics that keep Tennessee physicians informed on matters of importance to the medical community. It will continue to produce and develop education for physicians after receiving a four-year reaccreditation from the Accreditation Council for Continuing Medical Education (ACCME) which runs through 2024.

"Education is extremely important to our members; it is one of the TMA's most valued offerings," said Adrian Rodriguez, MD, TMA Board member and Education committee chair. "We are proud of the

ACCME's recognition of TMA as a premier provider of CME education."

The ACCME system employs a rigorous process for evaluating institutions' CME programs according to standards that reflect the values of the educator community and aim to accelerate learning, inspire change, and champion improvement in health care. TMA demonstrated compliance with 13 criterion and associated polices, including the CME Clinical Content validation policy. Accreditation criterion includes incorporation of educational needs into CME activities; design of educational activities and programs to change competence; performance or patient outcomes; use of appropriate educational formats; analysis of changes in learners achieved as a result of educational programs; and implementation of necessary changes in the overall program to meet the association's CME mission.

The ACCME reaccreditation will bolster opportunities for Tennessee physicians to maintain competence and learn about new and developing areas, which supports TMA's mission of elevating the standards of medical education.

New "Appropriate Prescribing" Course



The Tennessee Medical Association updated its proprietary, accredited online prescribing course to include a new video with current

information and revised course materials. Tennessee state law requires all physicians renewing a medical license in 2022 to have completed two hours of prescribing CME during the calendar years 2020 or 2021. The BME approves of this course.

The "Appropriate Prescribing in Tennessee: 2021-2022" course is accredited for a maximum of 2 AMA PRA Category 1 Credit(s)™ (Enduring), by the Accreditation Council for Continuing Medical

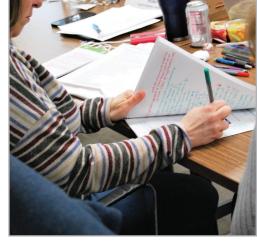
Education (ACCME) to provide continuing medical education. This program is for physicians and all others on a healthcare team who are licensed to prescribe medication for pain, and features Michael Baron, MD, MPH, DFASAM.

Michael Baron, MD, medical director of the Tennessee Medical Foundation, Dr. Baron is board certified in Anesthesiology, Psychiatry and Addiction Medicine, and has published original research showing that chronic opioid use increased chronic pain scores.

"Dr. Baron is one of the foremost authorities in Tennessee on appropriate prescribing and proper pain management," says Dennis Higdon, MD, chair of TMEF. "For years he has been an educator, and shared his knowledge with physicians on this important subject. In this new, comprehensive presentation he provides vital information every physician should know."







Ingram Institute: The 2021 Programs



The 2021 John Ingram Institute for Physician

Leadership programs wrapped at the end of July with a total of 34 new graduates.

"I have learned so much about myself both by going through the leadership lab and then the immersion workshop," said Cookeville emergency medicine physician Samantha McLerran, MD. "I can't wait to put the skills I have learned into practice, and see where I will be in a year or three years or even five years. The faith TMA places in us as physician leaders is inspiring and heartening to know that we can serve as positive changes in medicine."

The Institute offers two programs: the Leadership Lab and Leadership Immersion. The Lab is a multimonth program that helps physicians acquire the skills needed to become quality leaders in team care settings by undertaking a course project. The Immersion program gives physicians foundational training and skill development to excel in leadership positions within organized medicine, medical practices and healthcare organizations.

We would like to thank all graduates for their time and attention given over the past several months.

2021 LEADERSHIP LAB GRADUATES

Steve Alexander, MD Marc Bennett, MD Michelle Cochran, MD Michael E. Engle, MD Jeff Hamre, DO Neelima Katragunta, MD Dawn Linn, DO Nancy Lipsitz, MD Denise Milam, MD Nate Miller, MD

2021 LEADERSHIP IMMERSION CLASS GRADUATES

Laura Andreson, DO
Ty Babcock, MD
Amy Gordon Bono, MD
Allan Colyar, MD
Nancy B. Davis, MD
Michael E. Engel MD
Ghino Francois, MD
Jennifer Hamm, MD
Jeff Hamre, DO
Molly Hood, MD
Meri M. Johnson, MD
Neelima Katragunta, MD

Greg Laurence, MD
Geoffrey Lifferth, MD
Dawn Linn, DO
Samantha McLerran, MD
Jacqueline Denise Milam, MD
Pamela Murray, MD
Kanthi Narra, MD
Jeffery A. Ollis, MD
Eddie Reynolds, MD
Adrian Rodriguez, MD
Amy Suppinger, MD
Vanessa Thomas, MD

These programs are made possible thanks to a generous grant provided by The Physicians Foundation, which covers approximately 80 to 90 percent of the cost of these programs. To learn more about the Institute, visit tnmed.org/leadership.







Death Certification Course

TMA members were offered a death certification course thanks to collaboration between TMA and the Tennessee Department of Health. The training helps participants better understand best practices in death certification. It was originally conducted via a scheduled Zoom meeting, but warranted a recording thanks to high demand and positive feedback.

Led by Adele Lewis, MD, Tennessee chief medical examiner, and Amy Hawes, MD, deputy state medical examiner, it highlights the importance of accurately documenting cause of death on death certificates and how to best use medical judgment to determine accurate information.

The training was divided into two parts:

- Part 1: Medical Examiner Jurisdiction, Cause and Manner of Death, and Death Certification
- Part 2: Guidance for Certification of Disaster-Related Death

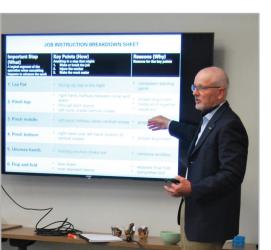
As of the end of 2021, over 500 people have take the course. It is available on **tnmed.org/education.**

Student Leadership Summit

The TMEF granted \$12,000 to the TMA John Ingram Institute for Physician Leadership to support the 2021 Medical Student Leadership Summit. Through this grant, TMA hosted an educational event for 19 medical student leaders. This event was open to all students who are enrolled within one of the five medical schools across the state of Tennessee. Over 30 applications were received and selected students expressed interest in student leadership involvement and improving overall leadership skills. All five medical schools were represented.

The Medical Student Leadership Summit was held on Nov. 6-7. During those two days, the group heard from six different speakers, including State Representative Bob Freeman; TMA Physician Leader Rodney Lewis, MD; Physician Leader Melissa Johnson, MD; Bliss Communications Owner Mimi Bliss; and members of the TMA staff.

Student feedback was very positive; they enjoyed hearing first-hand from experienced physicians, learning strategies for message delivery and useable skills for dealing with conflict.







TMEF Update

TMEF is a 501(c)3 organization. In 2021, it awarded 67 scholarships for a total of \$195,000 benefitting students from all five Tennessee medical schools. The organization also awarded a \$12,000 scholarship in support of the Medical Student Leadership Summit, and a \$15,000 grant to the Tennessee Medical Foundation for its programs providing monitoring, advocacy, and support, as well as educational work with medical students and residents.

TMA's John Ingram Institute for Physician Leadership is also under the TMEF umbrella. Donations to the JIIPL may be made through the TMEF. The organization will match donations dollar for dollar from individuals wishing to establish a named scholarship. From every dues-paying TMA member, \$10 goes to support the TMEF and its mission to fund education and medical student scholarships.

CEO: Subhi Ali, MD

Board Chair: Dennis Higdon, MD

Board Vice-Chair: Maysoon Ali, MD

Secretary/Treasurer: Keith

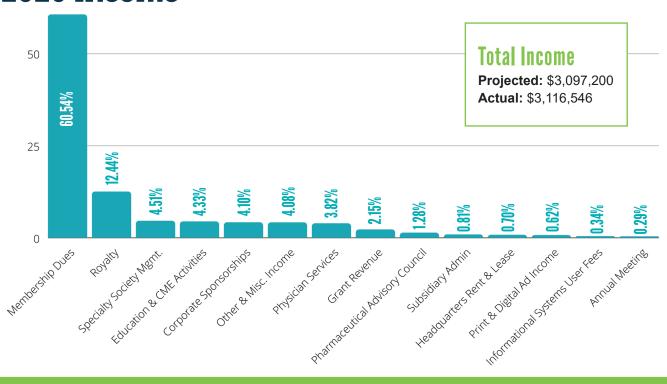
Lovelady, MD

Directors: Neal Beckford, MD; Melanie Blake, MD; John Ingram, III, MD; Mitchell Mutter, MD

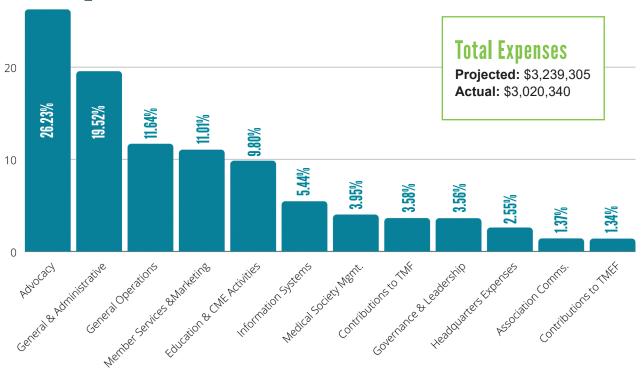
Special Advisors: Robert Bowers, MD; Sam Williams, III, MD

Financial Overview

2020 Income



2020 Expenses



Letter from the CEO



At the end of 2019. I sat to write this message for our annual report. I reflected on a tumultuous decade of ever burgeoning thirdparty influence into the practice of medicine, and the continuation and rapid increase of market consolidation of practices and payers.

I touched on the perennial issues on which we consistently engage and the need to prepare for the unknown. I had no inclination how totally disruptive that unknown would be over the next 24 months. Suffice it to say, I could expend the rest of this page on Covid-19 alone. Like so many other businesses and practices, TMA took its lumps, made critical operational adjustments, but most importantly kept its mission and vision intact.

None of us have experienced a true worldwide pandemic in our lifetimes, and I hope we are on the downside of this one.

Many say that business as "normal" is no longer, and we have all changed due to the pandemic. True. The work we do for members changes every year. The issues vary. The partners and the adversaries change constantly, but our vision of making Tennessee a great state for physicians to practice medicine by mitigating the obstacles to that goal remains at our core.

If there is one thing we learned in the last two years, it is when you remove physicians from decisions about the health of our people, you increase the complexity, cost and inefficiency of meeting the medical needs of patients.

We need physicians in leadership roles. That is why we have been very successful with our leadership training programs and are continuing to look for ways to expand our efforts and leverage our graduates.

We have to continue to engage physicians where they practice, reside and meet. The pandemic taught us all

very quickly that we must use available technology to meet the needs of our audiences. Its use is critical to the continuation of work, but technology cannot completely supplant human touch or personal interactions.

That collegiality, that coming together, that spirit of truly being in this together, and the notion that together we can do more, better and faster, is the very essence of a professional association. Yes, we can do the work by email and through websites. We can dialogue online over our phones and virtually attend to the business of the day. But as a medical society, we need that community and human interaction.

So, in 2022, we relish the prospect of getting back to our normal. We look forward to welcoming hundreds of you to our legislative Day on the Hill in March, to the debates of our delegates at our annual meeting in May, to educating more future leaders in our trainings, and to visiting our component medical society meetings across the state.

We will continue to improve our technological means to engage with our members where they are as a matter of convenience and efficiency for all, but I hope to see you very soon as we get our medical association back to the business of connecting our people to improve our state of medicine!

> **RUSS MILLER** TMA CEO

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