

2019 OF ISMOS The Newsletter of the Massachusetts Medical Society Alliance

REFLECTIONS FROM 2017 TO 2019

Over the years, I have been amazed by work done by the previous presidents and many of our members. This group is unique from any other. There is a heartfelt compassion and inner drive to support the principles of our Medical Society, yet there is also a distinct individuality and focus under each of the Alliance's presidents.



MMSA President Sandra Delgado, BSN, MHA

I've watched in awe at times and only hope that I have maintained the high level of caring and planning that could only come from the heart.

The MMS Alliance has excelled in areas of support and advocacy in promoting good health and will continue to do so in the future.

It has been a great honor and privilege to be your Alliance president. I would like to thank all my fellow Alliance members for their support. This organization is truly the sum of its members.

I wish all my best to our incoming president, Sophia Bogdasarian. — Sandra Delgado, BSN, MHA



Annual Meeting 2019



contents	
Reflections from 2017 to 2019	1
A Vision for the Future of the MMS Alliance	3
MMS Alliance President Sophia Bogdasarian	3
2019–2020 Massachusetts Medical Society	4
Alliance Strategic Leadership Council	
The Massachusetts Medical Society Alliance (MMSA)	5
A Vision Of A Longstanding MMS Alliance Member Perspective	5
A New Vision of a New MMS Alliance	6
Member Perspective	
Northeast Regional Meeting 2018	7
Making a Difference	8
Massachusetts Medical Society and	10
Alliance Charitable Foundation	
Focusing on Social Determinants to Improve Health	11
Events	13
Health Promotions	15
Physician Burnout Is No Longer a Secret. Now What?	16
Anti-Tobacco Poster Contest	19
Massachusetts Attends the	20
2019 AMA Alliance Annual Meeting	
2019 MMS Alliance Annual Meeting	21
Massachusetts Medical Society	23
Alliance Past Presidents	

This issue of *Prisms* is dedicated to Sandra Delgado, our immediate past president. The MMSA is grateful to Sandra for her past two years of devoted leadership.

I would like to thank Jill Cricones for her invaluable organizational skills.

— Sandra Delgado, BSN, MHA

Prisms is a publication of the Massachusetts Medical Society Alliance (MMSA), an organization of medical students, residents, physicians and their spouses or domestic partners, and friends committed to advancing the health and well-being of the medical family. In conjunction with the Massachusetts Medical Society (MMS), the Alliance educates and promotes good health among the citizens of the Commonwealth of Massachusetts.

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MASSACHUSETTS MEDICAL SOCIETY ALLIANCE

A VISION FOR THE FUTURE OF THE MMS ALLIANCE

Message from the 2019–2020 MMS President

As a proud member of the Alliance, I'm so pleased to be here with you.

I'll begin by congratulating you all on another outstanding year of service to our communities near and far.



Maryanne C. Bombaugh, MD, MSc, MBA, FACOG

Congratulations also for your continued engagement and leadership of a dedicated and difference-making membership. Your group has done some incredible work throughout the year, and each of you should feel proud.

In thinking about all this group has accomplished, I'm particularly impressed by all who have benefitted from your generosity and creativity.

From sending medical books to medical libraries across the world, to helping the homeless right here in Boston through sock collecting at our Interim Meeting, your caring has made a difference.

As a physician who is especially passionate about the social determinants of health and in working toward breaking barriers that block access to care, I know exactly how important socks — something many are fortunate enough to take for granted — can mean to a patient from an underserved population.

Feet that are unprotected against weather are susceptible to a wide range of illness and the giving you inspired will help to prevent these individuals from contracting things like skin infections and frostbite. It's a gesture that addresses an immediate threat to their health, and I am so grateful for your efforts and your kindness.

I want to again thank you on behalf of the Medical Society and physicians for electing to focus on physician burnout at the Northeast Regional Conference last October, and for inviting Dr. Alain Chaoui to share his thoughts.

As you're aware, physician burnout is an issue that has garnered considerable and appropriate attention from the

Medical Society, especially during the last year. I think it was so important to discuss the effects of physician burnout not only on doctors but also on their loved ones. I'm thankful for your ability to organize and convene a conference of such magnitude and importance.

On both a personal and organizational level, I want to thank you for baking Thanksgiving pies for the New England Center for Homeless Veterans. As a veteran, I can assure you that simple gestures of thanks and recognition are always appreciated and uplifting.

I'm looking forward to working with all of you in the coming year and to welcoming aboard your new president, Sophia Bogdasarian. Congratulations, Sophia! I also look forward to working with your Leadership Council and all members of the Alliance.

On behalf of the Massachusetts Medical Society, I want to thank you for all that you do and for the class, graciousness, and impact that surrounds everything you do. Thank you very much for the opportunity to speak with you. — *Maryanne C. Bombaugh, MD, MSc, MBA, FACOG*

MMS ALLIANCE PRESIDENT SOPHIA BOGDASARIAN

Vision for 2019 and 2020

As all of the presidents before me know, it is a great honor and privilege to have been elected president of our Alliance, but it is also a challenging task! I have great shoes to fill looking back at the many powerful women who have come before me. With every-



Sophia X. Bogdasarian, RN

one's help, I hope to fill those shoes with enthusiasm and important accomplishments.

One of my most favorite offerings of the Alliance is the opportunity to educate our members regarding the important health issues of the day. I am particularly interested in the social determinants of health and wellbeing, not only for the citizens of the Commonwealth of Massachusetts, but also for our physicians and their families. I believe that the Alliance is particularly well positioned to assist in the health and well-being of the physician family, especially by providing social interaction that encourages camaraderie and support of one another. Our networking opportunities fill this purpose well, and I intend to encourage many social events to help in this manner.

We will also continue our health promotions and education of our citizens via many venues. I would like to increase our sock drive this holiday season to include new underwear and professional clothing that women and men could wear during job interviews.

We will continue to support Food is Medicine both legislatively and educationally.

I am particularly interested in making sure that we don't become desensitized to gun violence. We are fortunate in our state to have the most comprehensive gun laws in the country, but we can still do more. At our September quarterly meeting, our first speaker will focus on gun violence.

We will work to educate the public about the dangers of vaping, and we hope to bring this knowledge to schools throughout the Commonwealth. We won't forget the narcotics addiction problem.

Finally, I also hope to increase our membership of younger members and of male members. Demographics show that half of our members should be male. I hope to find ways to provide opportunities for our male partners to feel welcomed and valued. For both men and women, our Alliance needs to be a place where people believe they make a difference in their world and their lives.

These next two years will be an exciting time for our Alliance. We can be proud to be an important part of health advocacy locally and nationally.

Yes, these are challenging times, but we are well-positioned to participate in a meaningful way.

— Sophia X. Bogdasarian

2019–2020 MASSACHUSETTS MEDICAL SOCIETY ALLIANCE STRATEGIC LEADERSHIP COUNCIL

The MMSA is composed of its district alliances and focuses on three major areas of focus: Health Promotion, Legislation, and Charitable. The SLC (Strategic Leadership Council) is the initial decision-making and oversight body of the MMSA. Consisting of the elected officers, past state presidents, the standing committee chairs, and presidents of active districts, it meets monthly to administer all programs and special events of the MMSA. The SLC oversees the standing committees' activities (Administration, Communications, and Membership), prioritizes initiatives, and coordinates activities with the MMS.

The SLC formulates the direction of the MMSA for the coming years, including how the MMSA will work with the MMS to support outreach activities and further the objectives of both organizations. In addition to the long-range planning, the responsibilities of the SLC are leadership development, membership recruitment and retention, and planning interim and annual meetings.



MASSACHUSETTS MEDICAL SOCIETY ALLIANCE STRATEGIC LEADERSHIP COUNCIL

Sophia Bogdasarian, RN, President Bonnie Dunlap, President-elect Julianne Hirsh, Secretary/Treasurer Sandra Delgado, Immediate Past President Ulku Akyurek, MD, MBA, Past State President Mary Kay Albert, Past State President Elisa Chan, Co-chair of Membership Paula J. Madison, Co-chair of Membership Sandra Celona, Co-chair of Administration Mariette Young, Co-chair of Administration Gerrilu Bruun, Co-chair of Communications Gail Gordon Sanchez, Co-chair of Communications Margaret Igne, President, Boston North District Elisa Chan, Paula Madison, Usha Upadhyay, Maureen Zacharia, **Worcester Central District Board of Directors** Nancy Ghareeb, Historian

THE MASSACHUSETTS MEDICAL SOCIETY ALLIANCE (MMSA)

The MMSA brings physician families together. What can we do for you?

NETWORKING — We offer support for physician families by recognizing needs, sharing common experiences and interests, and providing educational and social networking events. Our members understand medicine, medical issues, and the physician family at all



stages of the medical practice from training years through retirement.

HEALTH PROMOTIONS — Our volunteers work to promote healthy communities. The MMSA is actively engaged in campaigns to stop smoking, vaping, fight obesity, increase fitness, and prevent the spread of disease through our handwashing campaign. Alliance members support injury prevention awareness through helmet safety.



LEADERSHIP DEVELOPMENT —

There are opportunities to maximize your personal development in your professional and personal life with training, webinars, leadership conferences, mentoring, and more.



PHYSICIAN FAMILY SUPPORT —

Support for the physician family and shared concerns for the health of our communities unite our members. Your membership impacts the health of America and the future of medicine.



MEMBER PUBLICATIONS — Members receive Prisms, featuring Alliance events, community initiatives, the quarterly electronic newsletter Alliance News in Brief, and more.



LEGISLATION — The MMSA increases awareness of legislative issues affecting health care through frequent online updates and alerts, advocacy training, and educational workshops.



A VISION OF A **LONGSTANDING MMS ALLIANCE MEMBER PERSPECTIVE**

Which presidential accomplishments are you most proud of?

I was privileged and blessed with incredible mentors and an astounding MMS staff during my presidential years (1996-1998). Former MMSA presidents set the bar very high regarding leadership and programing. In trying to emulate what my fellow Alliance presidents achieved, I embarked on the lesser-known topic of elder abuse, at the time not totally understood. This is when that astounding MMS staff helped me to invite the Commonwealth's brightest to speak and discuss in two risk-management courses offered to the MMS membership the issues

of elder abuse (one in Waltham, the other in western

MA). A reference handbook was created addressing

the issues for all medical professionals. In addition, the



Mariette Young

Alliance produced a caregiver questionnaire that would help physicians recognize and address caregiver stress.

Prisms, our Alliance magazine, was produced and sent out to the Alliance membership every two months.

The Alliance participated in many health fairs and we launched the "Hug Me, I Buckle Up" campaign and health promotions that included eating disorders, nutrition, and compulsive gambling.

During my presidency, the Alliance celebrated their 50th anniversary. A "50 Years of Volunteerism" booklet was printed with the help of many Alliance memberships highlighting the many health care issues that the Alliance has addressed in their 50-year history. My husband, a former White House physician, helped secure the presence of his good friend, Dr. Connie Mariano (former White House physician to President Clinton), as our keynote speaker at our celebratory luncheon at the Country Club of Brookline.

As I initially stated, my presidential accomplishments could not have been achieved without the help of my fellow Alliance members, the MMS staff, and my

wonderful and amazing assistant, Jennifer Day, who I am privileged to call a friend. Without her I would not have been able to be so proud of my presidency.

What was one of the biggest challenges you faced?

I think all organizations are challenged with increasing and maintaining their membership. I was blessed with a membership that was truly committed to the ideals of the Alliance. Trying to keep the Alliance reliant to the medical issues of the day, including legislation and education, continue to be a challenge.

What do you hope to see in the Alliance's future?

We have always had an incredible relationship with the MMS — the envy of many state alliances — as well as the American Medical Association Alliance. The Alliance must continue their focus on not just sustaining this relationship but to strengthen our commitment to the MMS and to show that we can be contributing partners.

I hope we can use health fairs in schools to get the word out regarding the vital medical issues of the day. We can be that educational arm once again. I also hope that we again become more involved in legislation that is important to the MMS.

How has your experience as Alliance president shaped you?

For one thing, I no longer fear public speaking! I also learned that there is no "i" in "team." Accomplishments, large or small, are the result of the workings of many hands. I had many ideas when I became president, and I learned by listening to the experienced and knowledgeable members of the MMS staff, anything was possible.

How do you see the effects of your membership working in life today?

The friendships that I have made over many years being a member of this wonderful organization have shown me what is necessary to maintain relationships. I have become a good listener (it takes practice and self-control) because I realize that my fellow members are incredibly intelligent and articulate. I have tried to apply what I have learned through my membership in my present and future associations with family and my volunteer activities. — *Mariette Young, Past State Alliance President,* 1996–1998

A NEW VISION OF A NEW MMS ALLIANCE MEMBER PERSPECTIVE

How were you introduced to the MMS Alliance?

I had known about the existence of the MMS Alliance for a few years, but I did not know what they did or who



Gail Gordon

was involved, nor did I have the time to volunteer anywhere as I worked full time. After retiring last June from Riverside Community Care, I had more time to devote to something meaningful and became more curious about the Alliance. I went to a meeting where the speakers from the South Middlesex Opportunity Council talked about healthy nutrition and ways to help the community. That was it — I joined.

What are you most excited about as a new member of the Alliance?

As a new member of the Alliance, I am excited to be on the Committee on Nutrition and Physical Activity. This is something I am passionate about. I hope to work with other Alliance members on many projects to bring valuable information to the community that will have a positive outcome for children and adults.

What are you looking forward to contributing to the Alliance?

I am looking forward to working with other Alliance members on many projects and cultivating new friendships. I hope to use my creative ideas and skills, and my knowledge as a psychotherapist and life coach to contribute where needed.

Why did you think it was important to join the MMS Alliance?

The Alliance has been a valuable source to physician families for support and to the community for health-related issues for decades. The Alliance is a good fit for me as I like connecting people with services and bringing information to others to maintain health and well-being.

What do you envision for the future of the MMS Alliance?

My hope for the future of the MMS Alliance is to maintain membership and increase this membership to involve younger families and more men who are spouses of physicians. Therefore, events that will entice this demographic to join. — Gail Gordon, Co-chair of Communications

NORTHEAST REGIONAL MEETING 2018

Recognizing Burnout in the Medical Profession: Intervention and Prevention

The Massachusetts Medical Society Alliance hosted the 2018 Northeast Regional Meeting on October 18–20 at MMS and MMSA Headquarters.

Our featured educational program was done in collaboration with the Massachusetts Medical Society. We addressed the crisis of burnout and steps that can be taken to improve the well-being of health care professionals and their families.

We heard from experts about the political landscape of medicine at the federal and state level, and we also had the opportunity to learn about special national and state alliance initiatives. On the last morning, we enjoyed breakfast and had roundtable discussions and wrap up. The Alliance members enjoyed a tour of the Louisa May Alcott home, followed by high tea at the historic Concord Inn. Throughout the three days there was ample time for networking with colleagues and enjoying the history that Massachusetts has to offer.



Alain Chaoui, MD, FAAFP; Arabella Simpkin, MD, MMSc; and Amy Vinson, MD, FAAP



Alliance members enjoyed a tour of the Louisa May Alcott home.



MMS Alliance, AMA Alliance, and Northeast Alliance Leadership

MAKING A DIFFERENCE

Boston North District

The MMS Alliance Boston District is very proud to report our projects and achievements during 2017–2019. We would like to thank our state president, Sandra Delgado, for being supportive of our projects and social activities.

Our mission continues to be working with the MMS advocating against domestic violence and homelessness and for healthy nutrition and equality. We also continue to assist the MMS in advocating for legislative policies.

We will continue to think locally and globally. Our projects include working with the following organizations:

- New England Shelter for Homeless Veterans
- Friends of Boston's Homeless Shelter
- The Russel Museum of Medicine
- Boston Public Market
- Thanksgiving Pie Baking and Decorating Pies for New England Center for the Homeless Veterans

Chef Vanessa LaBranche, Project Bread

The district attended the following:

- Many programs at the Paul S. Russell, MD Museum at MGH Hospital
- Annual Food is Medicine symposium at Harvard Law School
- Race, Racism and Mental Health conference
- Fresh, Fast and Delicious for Less with Project Bread

We celebrated Valentine's day with our little friends from the Shriner's Hospital in Boston and at the MGH for Children. The district donated close to 50 new shirts, t-shirts, and sweaters for the newborns and young children. They were very thankful for being remembered by the MMS Alliance.

In March of 2019, the Boston District Alliance assisted with the opening of a new medical library in Recife, Brazil. The event marks a great partnership with the MMSA and the Medical School in Recife. Medical Libraries in Africa, a project that started in 2005 with members Beatrice Igne Bianchi and Jonathan Igne Bianchi, continues to go strong and make a difference in the lives of medical students in developing countries.



Catherine Lew, Margaret Igne, and Chef Vanessa LaBranche

Worcester District Alliance

In 2017, Worcester District members were pleased to elect Elisa Chan as their president. Elisa brought many new young ideas to the district, which were appreciated and successful.

The district participated and held the following events:

- Nursing Scholarship Award
- ► Movie at the Shrewsbury Public Library Fed Up in recognition of National Food Day
- Participation in the baking for the Holiday Boutique held at Interim Meeting
- Significant Spouses Dinner of the Orthopedics Department at UMASS Medical in Worcester
- Holiday brunches and member events were held; unwrapped toys were collected for donation to local shelters and contributions made to Abby's House
- Opioid crisis program was held at Worcester Technical High School and was open to the community and Worcester high school and middle school students and parents
- Comedy night for Worcester District Medical Society and Alliance members
- Meetings, presentations, and book club discussions were held throughout the year
- Two CPR certification classes were provided for our district members
- Retirement tribute to Worcester District Society friend Joyce Cariglia

For Heart Month in February 2019, Paula Madison hosted a WDMSA Women's Heart Health American Heart Association presentation: "Symptoms in Women Vs Men." The guest speaker was Debra D. McGovern, DNP, RN, BCPPCNP, director of Nursing and Health Services, Worcester Public Schools.



Worcester District Alliance CPR Training



Worcester District Alliance Members



Worcester District Medical Society Holiday Gathering

MASSACHUSETTS MEDICAL SOCIETY AND ALLIANCE CHARITABLE FOUNDATION

The Massachusetts Medical Society and Alliance Charitable Foundation has awarded grants to healthfocused organizations across the state.

The awards, totaling \$281,278 and benefitting 25 organizations in 2019, bring the total amount of grants made by the foundation to nearly \$4.2 million since 2000.

- Just Roots, Greenfield
- Lovin' Spoonfuls, Hampden County
- South Middlesex Opportunity Council, Framingham
- Our Neighbors' Table, Amesbury
- Farm and Community Collaborative, Lakeville
- MetroWest Free Medical Program, Sudbury
- Interfaith Social Services, Quincy
- The Fatherhood Project at Mass General Hospital, Boston
- ► South End Community Health Center, Boston
- Amherst Survival Center, Amherst
- Saint Anne's Free Medical Program, Shrewsbury
- Father Bill's and MainSpring, Brockton
- Sharewood Project, Malden
- Outreach Van Project, Greater Boston

Additional grant recipients include Beyond Soccer (Lawrence), Black Ministerial Alliance of Greater Boston, Boston Health Care for the Homeless, Community Health Programs (Great Barrington), the Family Van, Asian Women for Health, Codman Square Health Center, Found in Translation, Transition House, and the Philippine Medical Association of New England. More information on the MMS and Alliance Charitable Foundation may be found at www.mmsfoundation.org.

The Foundation is a supporting organization of the Massachusetts Medical Society, the statewide association of physicians, and the MMS Alliance, the organization of physicians' spouses, physicians, medical students, partners, and friends committed to advancing the health and well-being of the family of medicine. The Foundation's mission is to support the charitable and educational activities of the Society and Alliance and address issues affecting the health, benefit, and welfare of the community.



Sharewood Project, Malden



Dr. Richard Ma with Patient
MetroWest Free Medical Program, Sudbury, MA



Volunteers from the Outreach Van Project, Greater Boston

FOCUSING ON SOCIAL DETERMINANTS TO IMPROVE HEALTH

Sofia has poorly controlled diabetes and asthma, obesity, osteoarthritis, and dependency on opioids. At 45 years old, she's on multiple medications. She is intelligent and industrious, but her life circumstances have limited her academic, employment, and financial opportunities and led to serious health issues. Growing up, she had limited access to nutritious food, physical activity, and school enrichment programs.

This anecdote opens a new book, *Well*, by Sandro Galea, MD, MPH, DrPH, dean of the Boston University School of Public Health. The book looks at the factors that make us healthy — or not. "Our health is not defined by things like seeing doctors or taking medicines or getting in our 5,000 steps a day," writes Dr. Galea. "Rather, it's defined by the full spectrum of our life circumstances, from the families we come from to the neighborhoods where we live to the people we see and the choices we make."

These life circumstances that influence health, or social determinants of health (SDOH), have become a focus of discussions about health care outcomes and costs in Massachusetts and across the nation. Social determinants, defined by the World Health Organization as "the circumstances in which people are born, grow up, live, work and age, and the systems put in place to deal with illness," refer to factors such as the availability of healthful foods, safe and affordable housing, access to education and job opportunities, transportation options, social support, and exposure to crime, poverty, and discrimination.



How SDOH Affect Health

Social determinants are responsible for 80–90 percent of modifiable contributors to health outcomes, with medical care claiming only 10–20 percent. For example, lack of stable housing contributes to higher rates of tuberculosis, hypertension, asthma, diabetes, and HIV/AIDS, and more frequent hospitalizations. Children who are food insecure are more likely to have impaired brain development, more hospitalizations, iron-deficiency anemia, and behavioral disorders.

Patients across the Commonwealth

Physicians see the effects of these nonmedical factors every day. According to the 2018 Survey of America's Physicians, almost 90 percent of physicians say that "some," "many," or "all" of their patients are affected by a social condition that presents a serious impediment to their health. "Social determinants of health affect all persons regardless of type of insurance coverage," said MMS President Maryanne C. Bombaugh, MD, MSc, MBA, FACOG. Payers are increasingly exploring how to address SDOH as a way to control skyrocketing health care costs. MassHealth is at the forefront of this effort.

The AMA and United Healthcare recently announced a collaboration to standardize data collection of social determinants of health to help address individuals' unique needs. They're supporting the creation of 23 new ICD-10 codes to capture, among other things, patients' access to nutritious food, adequate and safe housing, and transportation as well as their ability to pay for medications and utilities. The codes would trigger referrals to social service organizations and other community resources.

The Physician's Role

But is assessing patients' SDOH really the physician's role? Many physicians find themselves already overburdened, unable to spend as much time with patients as they would like and lacking the resources to identify, let alone address, these social challenges. In reality, many physicians are already trying to address SDOH with patients, finding alternate solutions, for example, when patients cannot afford their medications or have no transportation to fill a prescription.



Resources are ramping up across the state to support patients. Boston Medical Center has committed \$6.5 million to initiatives to help patients find and maintain affordable housing. Physician organizations like Atrius Health employ care facilitators and community health workers to link patients to social services. Hospitals, the state, and community organizations are providing web- and app-based tools to help patients and providers find community resources to address nonmedical needs.

Advocating for Social Policy Solutions

However, these health care system-based tools don't solve the larger problems. In a January *Health Affairs* blog, Brian Castrucci of the de Beaumont Foundation and John Auerbach of Trust for America's Health wrote that while "health providers' efforts to meet individuals' nonmedical needs are praiseworthy and potentially life-saving," policy changes that get at the root causes are needed. "Health care navigators and similar enhancements to health care can't actually change the availability of resources in the community. They can't raise the minimum wage, increase the availability of paid sick leave, or improve the quality of our educational system. These are the systemic changes that are necessary to truly address the root causes of poor health."

Physicians can play an important role in helping to effect systemic change, according to Dr. Bombaugh. "I view advocacy as a form of patient care. These social determinants have a profound effect on health, so addressing them is in our lane. We have a voice, we can influence decisions, we can make change happen through advocacy. We can offer the medical expertise regarding the effects of these social determinants of health."

She added, "How do we accomplish the most we can? We do that by taking a holistic view of what it means to have health, to have well-being. Clinical care is important, but if we want to truly impact the health and well-being of patients, we need to consider everything that may be affecting them." — Robyn Alie, Manager, MMS Policy and Public Health

EVENTS

















EVENTS

















EVENTS









HEALTH PROMOTIONS

MMS Alliance Health Promotion Activities 2018–2019 Annual Report

- Hand-washing materials with "Soapy" (targeting grades pre-K to 3) continue to visit schools throughout the Commonwealth.
- We participate in health fairs throughout the year. Many have been school-based and covered the entire age spectrum up through grade 12.
- ➤ Thousands of health promotion and injury prevention educational materials are distributed. Sports injury prevention and substance abuse information are most frequently chosen. Buckle Up reminder keychains and pencils are always in high demand.
- by the Massachusetts Medical Society and Alliance culminated in the publication of the 2019 calendar. The winners were honored at the Statehouse and thousands of calendars were distributed to schools and physicians' offices statewide. More than 3,000 children in grades 1–6 submitted entries from across the state.



PHYSICIAN BURNOUT IS NO LONGER A SECRET. NOW WHAT?

Just four months ago, A Crisis in Health Care: A Call to Action on Physician Burnout, was released. A collaborative effort of the MMS, the Massachusetts Health and Hospital Association, the Harvard T.H. Chan School of Public Health, and the Harvard Global Health Institute, the white paper was met with a flurry of media attention. In the first month, the Medical Society received more than 10,000 hits to its website and more than 1,700 tweets about the paper. The Harvard School of Public Health's website received more than 1,400 hits. The report was front page news in general interest publications and trade journals, including the Boston Globe and Medscape, and people spent anywhere from 10 to 27 minutes reading the paper online — a very long time, by internet standards. The report's reach extended as far as Canada, where Le Journal de Montréal reported on it in French. The message was clear and resonant: physician burnout is a public health crisis.

Next Steps

The Medical Society will continue to raise awareness about physician burnout and the report's recommendations. Moving forward, the MMS is committed to engaging key stakeholders and making them aware of their



responsibility in this crisis, as well as encouraging them to make the necessary changes outlined in the report.

These key stakeholders and their responsibilities are as follows:

Health plans, insurers, and the National Committee for Quality Assurance must streamline or reduce prior authorization (PA) and measurement requirements. Countless studies have shown that PA is taking time away from patient care and adding significant administrative costs to the system. Alternatives to the PA process are real-time approvals and/or "gold card" systems by which providers with high rates of approval are exempt from PA requirements. Furthermore, these stakeholders must reduce the number of measurement requirements that do not directly improve patient care.

State and federal agencies must reduce and/or eliminate physician documentation and measurement requirements that do not directly serve the goals of patient care. On the national level, EHRs should qualify as "certified" only if they can easily extract quality measures and allow for interoperability, usability, and Application Programming Interfaces.

Medical schools and residency programs must actively support self-care and counseling services for trainees, provide adequate staffing during off-hours, and designate mentors who are positive role models for students and trainees.

EHR vendors must collaborate with physicians in the development of systems and implement stronger usability measures, meet quality measure certification standards, and ensure interoperability.

Hospitals, health systems, and provider organizations must take the issue of clinician burnout seriously and address cultural issues that lead to burnout. Clinical workflows should be assessed and improved and EHR systems should be streamlined. Hiring and fully supporting the work of a physician executive leader focused on wellness, such as a chief wellness officer or the equivalent, is one important first step.

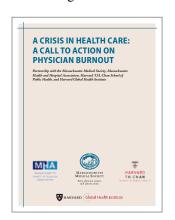
The Board of Registration in Medicine must adopt the Federation of State Medical Boards' recommendations to help reduce the stigma associated with seeking help for burnout and its consequences.

MMS Advocacy

The Medical Society has been busy advocating for these recommendations in several arenas. The Society's efforts include the following:

- ➤ The MMS has communicated the recommendations about EHRs and prior authorization to the Office of the National Coordinator of Health Information Technology (ONC), which is developing a strategy to reduce the burden of health care information technology and EHRs. The ONC seems to be listening.
- The MMS signed on to a national letter urging the Centers for Medicare and Medicaid Services to include language about prior authorization in its written guidance specifically that PA causes care delays and negatively affects patients.
- The MMS met with the state's Quality Alignment Task Force, which is charged with reducing the number of metrics for accountable care organizations (ACOs). The Society called on the task force to decrease the number of quality measures and to align measures uniformly across plans and payment models for local and national payers and government agencies. Choose measures that matter to patients and physicians and can be extracted without inordinate administrative work.

Soon, the MMS is planning to meet with and provide recommendations to other stakeholders, including the state's Health Policy Commission, that are tackling the issue of costly administrative burdens that don't add value. The MMS will continue to leverage the report to seek changes to the health care system.



Burnout among the nation's physicians has become so pervasive that a new paper published today by the Harvard T.H. Chan School of Public Health, the Harvard Global Health Institute, the Massachusetts Medical Society and Massachusetts Health and Hospital Association has

deemed the condition a public health crisis.

The paper includes directives aimed toward curbing the prevalence of burnout among physicians and



other care providers, including the appointment of an executive-level chief wellness officer at every major health care organization, proactive mental health treatment and support for caregivers experiencing burnout, and improvements to the efficiency of electronic health records.

In a 2018 survey conducted by Merritt-Hawkins, 78 percent of physicians surveyed said they experience some symptoms of professional burnout. Burnout is a syndrome involving one or more of emotional exhaustion, depersonalization and diminished sense of personal accomplishment. Physicians experiencing burnout are more likely than their peers to reduce their work hours or exit their profession.

"The issue of burnout is something we take incredibly seriously because physician wellbeing is linked to providing quality care and favorable outcomes for our patients," said Dr. Chaoui, a practicing family physician and president of the Massachusetts Medical Society. "We need our health care institutions to recognize burnout at the highest level, and to take active steps to survey physicians for burnout and then identify and implement solutions. We need to take better care of our doctors and all caregivers so that they can continue to take the best care of us."

"The growth in poorly designed digital health records and quality metrics has required that physicians spend more and more time on tasks that don't directly benefit patients, contributing to a growing epidemic of physician burnout," said Dr. Jha, a VA physician and Harvard faculty member. "There is simply no way to achieve the goal of improving healthcare while those on the front lines — our physicians — are experiencing an epidemic of burnout due to the conflicting demands of their work. We need to identify and share innovative best practices to support doctors in fulfilling their mission to care for patients."

"Massachusetts hospitals place a high and unwavering priority on the safety and wellbeing of patients and everyone who works in or visits their facilities," said Dr. Defossez, MHA's Vice President for Clinical Integration, a practicing radiologist and a co-author on the new report. "In particular, we recognize the need to further empower health care providers and support their emotional, physical, social and intellectual health. This report and its recommendations offer an important advance toward ensuring that physicians are able to bring their best selves to their lifesaving work. We see it as a component of our broader efforts to improve the health care workplace for every single employee, from nurses

and direct care workers to lab technicians and administrative personnel."

By 2025, the U.S. Department of Health and Human Services predicts that there will be a nationwide shortage of nearly 90,000 physicians, many driven away from medicine or out of practice because of the effects of burnout. Further complicating matters is the cost an employer must incur to recruit and replace a physician, estimated at between \$500,000-\$1,000.000.

The paper's authors include Ashish K. Jha, MD, MPH, director of the Harvard Global Health Institute and K.T. Li professor of global health at Harvard T.H. Chan School of Public Health; Alain A. Chaoui, MD, FAAFP, president, Massachusetts Medical Society; Andrew R. Iliff, MA, JD, program manager, Harvard Global Health Institute; Steven Defossez, MD, EMHL, vice president, clinical integration, Massachusetts Health and Hospital Association; Maryanne C. Bombaugh, MD, MSc, MBA, president-elect, Massachusetts Medical Society and Yael R. Miller, MBA, director of practice solutions and medical economics, Massachusetts Medical Society.

— Yael Miller, Director, Practice Solutions and Medical Economics, Massachusetts Medical Society

ANTI-TOBACCO POSTER CONTEST

The Massachusetts Medical Society and the Massachusetts Medical Society Alliance extend thanks to all of the children, physicians, teachers, nurses, and parents

who participate in the Anti-Tobacco Poster Contest. Students with top submissions are honored at a State House event.



Back Row (L to R): MMS Committee on Student Health Sports Medicine Chair Michael Guidi, DO, Jacqulynn Thoms, Caroline Shen, MMS Alliance President Sandra Delgado, Andrea Urbano, Becky Zheng, Melody Tang, and MMS President Alain Chaoui, MD.

Front Row (L to R): Shreya Deshmukh, Ranie Kem Sieu, Colette Ma, Zafina Sheikh, and Hadley Stuart.





Established in 1922, the AMA Alliance is the largest organization representing the physician family. Its nation-wide network encompasses all stages of the physician family lifestyle from the training years to retirement. We are the volunteer voice for the physician family!

With over 90 years of history, we have changed from a female-driven social and advocacy group to a diverse membership organization that includes spouses, partners, and physicians of the physician family. The AMA Alliance is proud of its history and is committed to honoring its past by building on the core principles in which it was founded: to focus on the care and support of those who live within the physician family.

As an affiliate of the American Medical Association, the Alliance is the most valuable organization for today's significant challenges to the physician family in the current medical environment. We support our members by providing resources to help each individual or couple as they negotiate the ups and downs of this unique lifestyle. Our goal is to unite and empower our members. The result is an engaged organization helping each other and the communities in which we live.

To learn more about the AMA Alliance visit www.amaalliance.org.

MASSACHUSETTS ATTENDS THE 2019 AMA ALLIANCE ANNUAL MEETING

Bonnie Dunlap and Gail Gordon Sanchez represented the Massachusetts Alliance at the 97th Anniversary of the AMA Alliance held in Chicago, June 8–11, 2019.

The keynote speaker on the first day was Dr. Donna Van Natten. She gave an engaging and interactive talk entitled "Body Language and Leadership: Understanding How We Communicate." Using humor and member participation she showed the power of body language, nonverbal communication, facial expressions, gestures, and even what you wear.

Throughout the annual meeting, we had the opportunity to network and get to know Alliance members from other states.

On the final day, another amazing speaker, Barbara Traulein, PhD, gave her presentation on "Develop Change Intelligence to Lead to Organizational Change." She called this "CQ" and shared her strategies and tactics of leadership qualities: Hand, Heart, and Head.

There were four other presenters during our conference. In addition, several awards were given to those retiring and stepping down from their leadership roles. Before our departure, the installation ceremony was held for the new AMA Alliance president, Mary Beth Ellison, by the 2018–2019 AMA past president, Barbara McAneny, MD.







2019 MMS ALLIANCE ANNUAL MEETING

The 71st Annual Meeting of the Massachusetts Medical Society Alliance was held on May 4, 2019, at the Seaport Hotel, Boston. Sandra Delgado, president, officially called the Annual Meeting to order at 10:00 a.m. Following the official order of business, committee and district Alliance reports were given. In her 2018–2019 president's report, Sandra highlighted three main statewide projects — physician burnout, handwashing, and opioids.

MMS President Dr. Maryanne Bombaugh joined us during the luncheon to welcome the Alliance members and share an overview of her plans as president of the Massachusetts Medical Society and the Alliance.

Lara McElderry was the guest speaker at the Alliance Annual Meeting. Lara is the founder and podcast host of *Married To Doctors*. Her show is an interview-based weekly podcast. Spouses of physicians share their stories and experts share advice as Lara leads a discussion asking personal and hard questions that explore the joys and challenges of being married to a doctor. Lara is also a member of the Greene County Medical Society Alliance, Springfield, Missouri, and serves on the National Membership Board.













Dear Alliance Members,

The 2019–2020 membership year for the Massachusetts Medical Society Alliance (MMSA) has begun and as your new president, I invite you to join us once again.

The greater the number, the stronger is our voice. Because of you, we are able to support the physician family and continue to be involved in our communities in impactful ways. Working in conjunction with the Massachusetts Medical Society our voice is heard. Through our ongoing commitment to the MMS and Alliance Charitable Foundation, we raise funds to support volunteer initiatives to improve the health of Massachusetts.

You, as an Alliance member, have many opportunities for networking, education, and forming friendships.

Thank you for your continued support. Please take a moment to **renew your** membership today and remain part of this vital organization. You can renew online at www.mmsalliance.org or by mail.

I look forward to connecting with you.

Sincerely,

Sophia X. Bogdasarian, RN President

For more information, call the Alliance office at (800) 322-2302, ext. 7372, or by email at alliance@mms.org. You can also visit our website: www.mmsalliance.org.



MASSACHUSETTS MEDICAL SOCIETY ALLIANCE PAST STATE PRESIDENTS

Harriet Johnson — 1948-49 Elizabeth Ayers — 1949–50 Hester Root — 1950-51 Abigail Lebrecht — 1951-52 Kathryn McCabe — 1952–53 Frances Ward — 1953-54 Marie Campbell — 1954-55 Florence Angley — 1955–56 Elizabeth Cheney — 1956–57 Ethel Chatigny — 1957-58 Mary Wheeler — 1958-59 Elizabeth Ross — 1959-60 Katherine Hines — 1960-61 Mary Morrin — 1961–62 Rose S. Rappeport — 1962–63 Alberta Holden — 1963-64 Ruth Michelson — 1964–65 Margaret Butts — 1965–66

Evelyn Fierman — 1966–67 Margaret Dias — 1967-68 Marise Zellman — 1968–69 Claire Bagenstose — 1969–70 Gretchen Kraus — 1971–72 Mary Terzian Killelea — 1972-73 Peggy LaVigne — 1973–75 Catherine G. Matzilevich — 1975–77 Ann Bouras — 1977–79 Jane T. Condon — 1979-80 Dorothea S. Rodkey — 1980–82 Claire B. Gordon — 1982-83 Vi Meeker — 1983-85 Anna A. Ferguson — 1985–86 Sharyn Dingman — 1986–87 Patricia L. Boyd — 1987–88

Veronica A. Gregg — 1988–90

Sandra Celona — 1990–92

Mary Firth Corcoran — 1992—84
Jeanne K. Gaz — 1994—96
Mariette A. Young — 1996—98
Bonnie B. Lavoie — 1998—99
Gerrilu H. Bruun — 1999—2000
Beverly A. George — 2000—01
Nancy B. Ghareeb — 2001—03
Vanessa P. Kenealy — 2003—05
Margaret Igne Bianchi — 2005—07
Mary Kay Albert — 2007—09
Marie-Christine Reti — 2009—11
Gladys Chan — 2011—13
Paula J. Madison — 2013—15
Ulku Akyurek, MD, MBA — 2015—17
Sandra Delgado, BSN, MHA — 2017—19

MMS ALLIANCE DUES

Join us and let your voice be heard

Every member has the opportunity to learn about current health issues when serving as a liaison to an MMS committee. Every member may attend MMS educational programs at free or reduced rates. Check out the MMS Alliance website and Facebook page for regular updates and the latest posts sharing information about our district and state events and posts on health issues. The AMA Alliance has posted links to all of the county and state websites on the AMA Alliance webpage.

JOIN TODAY!

FOR MORE INFORMATION VISIT WWW.MMSALLIANCE.ORG OR FIND US ON FACEBOOK



\$100 annually — Physician/Physician Spouse or Partner (includes national, state, and district dues)

\$35 annually — Physician/Physician Spouse or Partner (includes state and district dues)

\$10 annually — Residents/Fellow/Medical Student/Spouse or Partner (includes state and district dues)

\$25 annually — Residents/Fellow/Spouse or Partner (includes national, state, and district dues)

\$35 annually — Friend of the Alliance (includes state and district dues)



www.mmsalliance.org