Osteopathic Physician

Ohio General Assembly Review & Preview



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BUCKEYE OSTEOPATHIC PHYSICIAN MAGAZINE

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YOU power political action

By Matt Harney, MBA

are many ways the OOA benefits its members. Strategic partnerships with entities that provide discounts for critical products and services such as professional liability insurance, financial advising, legal services, PPE, and workers' comp insurance (among many other offerings) are essential member benefits. One benefit most often connected to the OOA—as is often the case for many state associations—is legislative and agency engagement on bills that impact the osteopathic family and patients. Another tool in our toolkit that relates to this work is our PAC, the Ohio Osteopathic Political Action Committee (OOPAC).

OOPAC is the OOA's political arm and is made up of five osteopathic physicians from across Ohio. OOPAC is a volunteer, nonpartisan group of DOs interested in promoting good government. Generally, OOPAC funds seek to support elected officials and candidates who are committed to protecting patient care by ensuring physicians serve as the leader in a team approach to wellness. More directly, these funds are typically directed to legislative leaders, PACs for the four caucuses (House Democratic, House Republican, Senate Democratic, and Senate Republican), and members of the Health Committees for both chambers. Other circumstances may extend those considerations. OOPAC contributions are typically given to elected officials at events and can allow another avenue for osteopathic values to be conveyed to policymakers. OOPAC's primary goal is to help shape health care policy by educating legislators about health care issues and explaining how proposed legislation will affect patients and communities.

It is important to note, OOPAC funds are entirely separate from your OOA dues, so the two never mix.



OOPAC funds are derived from the generous donations of our members. While we raise funds throughout the year, we have an OOPAC Challenge that heats up especially this time of year. In this challenge, our ten district academies face off against each other to achieve fundraising supremacycalculated in the aggregate but also per capita by district.

Another initiative OOPAC has undertaken the last couple election cycles is the candidate questionnaires. Last fall, OOPAC issued questionnaires to state legislative candidates for the Ohio House of Representatives and the Ohio Senate to assess their positions on health-related issues. The questionnaires covered topics such as scope of practice issues, Medicaid provider rates, pandemic response, immunizations, and support for OU-HCOM among other items. In reality, the questions are phrased to educate the candidate about osteopathic medicine while also gauging their response. We received nearly 50 responses from both legislative incumbents and challengers and posted the completed submissions on our website as a voter resource. We'll continue this process during election years moving forward.

I hope this message reminds you of the OOA's multifaceted work on your behalf. A strong OOPAC helps open doors and strengthen the osteopathic voice at the Ohio Statehouse. Your personal contribution is truly what powers broader collective political action on behalf of the osteopathic profession. I hope you'll contribute today! You can find out more and contribute online through our OOPAC page found under the "Advocacy" section of our website.



FOR OHIO'S 133RD GENERAL ASSEMBLY & PREVIEW FOR THE 134TH GENERAL ASSEMBLY

By Matt Harney, MBA

he OOA had a successful 133rd General Assembly advocating for the osteopathic profession and their patients. Legislative work continued throughout the pandemic, including a very enthusiastic lame duck session. Despite more than a dozen legislators having testing positive for COVID-19 and without a mandatory mask policy in the statehouse, both chambers maintained active schedules hearing bills in committee and on the floor even in November and December. The Centers for Disease Control and Prevention states that COVID-19 spreads mainly from person to person through respiratory droplets and that masks are a simple barrier to help prevent these droplets from reaching others.

The OOA tracked just over 100 bills of impact to the health care community. The OOA did not take a position on every bill, often taking the role of an interested party. As you might guess, a majority of the bills we engaged were referred to the House Health Committee or the Senate Health, Human Services, and Medicaid Committee. Others might be referred to the Labor & Commerce Committee in the House or Senate Transportation, Commerce & Workforce Committee. Aging & Long-Term Care as well as Insurance committees, among others, were additional landing spots for bills of interest.

The Ohio statehouse was not immune from 2020's global disruption. The statehouse was rocked in late July by the news that Speaker of the House Larry Householder had been arrested along with four others

in connection to a \$61 million federal public corruption racketeering conspiracy. It is thought to be the largest money laundering scheme ever in the state. In the days and weeks that followed, several House Republicans jockeyed for the top spot in the chamber, ultimately electing Rep. Bob Cupp (R-Lima) to the position. Cupp had extensive state experience, previously serving 16 years in the Ohio Senate and a term on the Ohio Supreme Court.

As summer turned to fall, questionnaires were issued by our political action committee—the Ohio Osteopathic Political Action Committee (OOPAC)—to state legislative candidates. Dozens were returned and posted on our OOA website. The questionnaires not only gauged the positions of candidates but served the dual purpose of educating (or reeducating) individuals on issues of vital importance to the osteopathic profession. Since legislators weigh in on everything from the state budget, energy, education, agriculture, banking, insurance, health care, and everything in between; it's important to take every opportunity to educate and share information about the osteopathic profession with incumbents and candidates alike.

The last lame duck session of the 133rd General Assembly adjourned on December 22, 2020. Bills not passed by the legislature effectively die and must be authored anew in next general assembly for consideration.

This is a summary of the most noteworthy bills: \rightarrow

HB 11 Prenatal care and tobacco cessation initiatives

HB 11 requires state employee health care benefit plans, the Medicaid program, and Medicaid managed care organizations to cover certain tobacco cessation medications and services. It also requires the Ohio Department of Health (ODH) to establish a grant program for the provision of group-based prenatal health care services to pregnant Medicaid recipients residing in areas with high preterm birth rates—with an appropriation of \$5 million in FY 2021.

OOA position: Interested party

Status: Signed by Gov. DeWine 6/19/2020; effective after 90

days

HB 12 Children's Behavioral Health Prevention Network Stakeholder Group

HB 12 establishes the Ohio Children's Behavioral Health Prevention Network Stakeholder Group to coordinate and plan for a comprehensive learning network to support young children in their social, emotional, and behavioral development and to reduce behavioral health disparities among young children. The bill requires the Stakeholder Group to submit recommendations to the Governor and General Assembly.

OOA position: Interested party

Status: Signed by Gov. DeWine 12/18/19

HB 210 Health screenings

Requires licensed preschool programs and child day-care centers to screen prospective employees for tuberculosis. The bill also prohibits a program or center from employing a person infected with active tuberculosis until he or she submits evidence of having completed treatment and being free of the disease. It allows disclosure of information about public assistance recipients to public health authorities, provided certain conditions are met.

OOA position: Interested party

Status: Signed 1/8/21; effective after 90 days

HB 224 CRNA scope of practice

Regarding the practice of certified registered nurse anesthetists. Allows CRNAs to order drugs, tests and intravenous fluids if the facility has a policy creating that authority, however, supervising physicians can opt out of that authority if the physician believes it's in the best interest of the patient.

OOA position: Opposed to initial version, neutral on final (signed) version.

Status: Passed House; Heard in Senate Health, Human Services, and Medicaid Committee. Ultimately absorbed into COVID-19 related bill, HB 197. Signed into law 3/27/20.

HB 388 Surprise billing/out-of-network care

The bill seeks to protect patients by requiring a health plan issuer to reimburse an out-of-network provider for unanticipated out-of-network care when the care is provided to a person at an in-network facility and the services would be covered if provided by an in-network provider. Under the bill, "unanticipated outof-network care" means health care services, including clinical laboratory services, that are provided under a health benefit plan and that are provided by an out-of-network provider when either of the following applies:

- The covered person did not have the ability to request such services from an in-network provider.
- The services provided were emergency services. The bill also requires an insurer to reimburse:
 - An out-of-network provider for unanticipated out-ofnetwork care provided at an in-network facility;
 - An out-of-network provider or emergency facility for emergency services provided at an out-ofnetwork emergency facility;
 - An out-of-network ambulance for emergency services provided in an out-of-network ambulance;
 - An out-of-network provider or facility for clinical laboratory services provided in connection with unanticipated out-of-network care or emergency services.
- Prohibits a provider, facility, emergency facility, or ambulance from balance billing a patient for unanticipated or emergency care as described above when that care is provided in Ohio.
- Provides that a covered person's cost-sharing responsibility for the services described above cannot be greater than if the services were provided in network.
- Establishes the default reimbursement rate as the greatest of the in-network rate, the out-of-network rate, or the Medicare rate and establishes procedures by which payees (providers, facilities, emergency facilities, and ambulances) may seek to negotiate the reimbursement in lieu of the default reimbursement rate.
- Permits certain payees to seek arbitration if negotiation is unsuccessful, establishes criteria to be eligible for arbitration, and establishes procedures for the conduct of the arbitration.
- Requires the Superintendent of Insurance to select an arbitration entity to conduct arbitrations under the bill using specified criteria.
- Requires a provider to disclose certain information to patients regarding the cost of out- of-network services that are not unanticipated out-of-network care or emergency services.

OOA position: Proponent

Status: Signed by Gov. DeWine 1/8/21; effective after 90 days →

HB 412 Establishes the Rare Disease Advisory Council

The bill would create the Rare Disease Advisory Council. This bill received unanimous votes in both the House and Senate establish a rare disease council made up of 25 members. Three members of the Council must be public members who are living with a rare disease. In addition, awareness of rare disease would be expected to increase within the state due to the bill requiring periodic reports detailing incidence of specific rare diseases within Ohio.

OOA position: Proponent

Status: Signed by Gov. DeWine 12/21/20; effective after 90 days

HB 606 Civil immunity

HB 606 grants qualified civil immunity for health care and emergency services provided during a government-declared disaster or emergency and for exposure to or transmission or contraction of certain coronaviruses.

The bill grants immunity from tort liability and professional discipline for such services provided as a result of and in response to a disaster or emergency that results in injury, death, or loss allegedly resulting from (1) actions or omissions related to those services, (2) decisions related to those services, and (3) compliance with an executive order or director's order. The bill grants immunity from tort liability and professional discipline for injury, death, or loss allegedly resulting because a health care provider was unable to treat a person due to an executive or director's order or a local health order issued in relation to a public health emergency.

The bill excludes from immunity in tort actions conduct that constitutes a reckless disregard of the consequences or intentional, willful, or wanton misconduct. It also excludes from immunity in professional disciplinary actions conduct that constitutes gross negligence.

OOA position: Proponent

Status: Signed by Gov. DeWine 9/14/2020; effective after 90

days

SB 24 Alzheimer's Disease Task Force

SB 24 establishes within the Ohio Department of Aging the Alzheimer's Disease and Related Dementias Task Force to make findings and recommendations on topics of concern pertaining to these conditions. The bill requires the 28-member Task Force to submit to the Governor and General Assembly a report detailing its findings and recommendations and specifies that the Task Force ceases to exist on the report's submission.

OOA position: Interested party

Status: Signed by Gov. DeWine 11/6/2019; effective after 90

days

SB 252 Drug treatment

SB 252 prohibits "fail first" coverage of drugs used to treat stage four advanced metastatic cancer.

OOA position: Proponent

Status: Signed by Gov. DeWine 12/21/2020; effective 3/20/2021

There were several bills monitored by the OOA that advanced through the legislative process to varying levels and we anticipate the subject matter will be re-authored in the 134th General Assembly. Bill numbers and briefs overviews of a few of those bills are here.

HB 61 Public records

HB 61 sought to include forensic mental health providers. mental health evaluation providers, regional psychiatric hospital employees among others as individuals whose residential and familial information is exempt from disclosure under the Public Records Law. The Senate added measures to the bill that would've mandated strict protocol for contact tracing as a part of future health orders. The House refused to concur to senate amendments. Conferees were named but no progress was made to negotiate a final version.

OOA position: Interested party

HB 177 APRN scope of practice expansion

HB 177 sought to provide for a "transition to practice" for APRNs to practice without a collaboration agreement after 2,000 hours of collaboration with a physician or APRN that had received the requisite 2,000 hours. Also, would allow for clearances by licensed health professionals of concussed student athletes.

OOA position: Opponent

HB 253 Revises Fireworks Law

The initial version allowed broad-based consumer use of fireworks. The substitute bill retained statewide prohibition on discharge and would've provides localities to legalize fireworks discharge on July 3, 4 or 5.

OOA position: Opposed to initial version, neutral on substitute.

HB 329 Sun lamp tanning

HB 329 sought to prohibit the provision of sun lamp tanning services to individuals in the age of 18.

OOA position: Proponent \rightarrow

SB 311 Health orders

SB 311 was one of many bills seeking to modify the law governing public health orders, quarantine, and isolation. The bill would limit the executive branch powers, specifically curtail Ohio Department of Health (ODH) authority to order guarantine and isolation; block ODH from issuing statewide quarantine orders for people who aren't ill or haven't been directly exposed to an infectious disease; and give the state legislature authority to

rescind state public health orders.

OOA position: Opponent

SCR 14 Racism

To declare racism a public health crisis and to ask the Governor to establish a working group to promote racial equity in Ohio.

OOA position: Proponent

Looking to the 134th General Assembly, the composition of each chamber will be largely similar. House Republicans extended their majority by a few seats. Republicans have 64 of the 99 seats. In the Senate, Republicans picked up one seat during the 2020 election and control 25 of the 33 seats.

The new Senate President Matt Huffman, who took his oath of office from home after having tested positive for COVID-19, unveiled a revised slate of committees, their chairs, and member assignments. There are now 16 standing committees for the chamber, an increase of two over the prior General Assembly. They are:

- Agriculture & Natural Resources
- Energy & Public Utilities
- Finance
- Financial Institutions & Technology
- Government Oversight & Reform
- Health
- Insurance
- **Judiciary**
- Local Government & Elections

- Primary & Secondary Education
- Rules & Reference
- Small Business & Economic Opportunity
- Transportation
- Veterans & Public Safety
- Ways & Means
- Workforce & Higher Education

Ohio's only osteopathic physician in the state legislature, Sen. Terry Johnson, DO, will serve as chair the Workforce & Higher Education Committee, vice-chair of the Veterans & Public Safety Committee, and a member of the Health Committee.

On the House side, Speaker Cupp announced 23 standing committees for the 134th General Assembly with a makeup being very similar to the previous cycle.

At the time this report is submitted, several bills have been introduced and committees have just begun hearings. Be sure to review OSTEOFACTS and the OOA website for the most up to date legislative information. As always, keep an eye on your inbox for legislative action alerts.

Ohio Senate Leadership

President Matt Huffman President Pro Tempore Jay Hottinger Majority Floor Leader Kirk Schuring Majority Whip Rob McColley Minority Leader Kenny Yuko Assistant Minority Leader Cecil Thomas Minority Whip Nickie Antonio Assistant Minority Whip Tina Maharath

Ohio House Leadership

Speaker Bob Cupp Speaker Pro Tempore Tim Ginter Majority Floor Leader Bill Seitz Assistant Majority Floor Leader Rick Carfagna Majority Whip Don Jones Assistant Majority Whip Cindy Abrams Minority Leader Emilia Sykes Assistant Minority Leader Kristin Boggs Minority Whip Paula Hicks-Hudson Assistant Minority Whip Richard Brown



OOA Joins New Campaign to Address State's Drug Pricing Process

n the midst of a global pandemic affecting millions of Ohioans, and as uncertainties related to health and fiscal issues persist, a growing number of patient and medical organizations—including the Ohio Osteopathic Association—have joined forces to share ideas to fix the drug pricing process. The PBM Accountability Project of Ohio, launched late in 2020, aims to improve understanding of the Pharmacy Benefit Managers' (PBMs) process for determining the cost of medicines and identify solutions to help redirect savings to patients, employee health plans, and state taxpayers.

OOA President Sandra L. Cook, DO, noted patients are most affected by the rising costs of prescription drugs. "We're joining forces with stakeholders statewide to identify meaningful solutions to ultimately help our patients," she said. "That includes looking at the supply chain and how PBM practices affect cost."

Matt Harney, OOA executive director, said PBMs were originally designed to reduce drug costs and make the purchase of medicines more convenient. "But today that model is broken and needs to be fixed," he said. "The complexity of the drug pricing system undermines the possibility for PBM competition based on price that would drive value and savings to Ohio purchasers and patients. Unfortunately we've seen all too many examples of how the PBM middlemen reap excess profits at the expense of—in recent cases—Ohio taxpayers."

In fact, a 2018 analysis of the state Medicaid prescription drug program found:

• The Ohio Department of Medicaid (ODM) paid spreads totaling \$224.8 million to PBMs for a one-year period. The fees or spreads retained by PBMs were \$6.6 million (or 1.1 percent) on \$617.6 million in specialty drugs and \$9.8 million (0.8 percent) on \$1.25



billion in brand-name drugs.

- PBMs were charging Ohioans 3 to 6 times the normal rate, costing taxpayers an extra \$150-\$186 million a year.
- The difference between what pharmacies are paid and what PBMs report back to the plans, commonly referred to as "spread," has been growing and hit its peak in the fourth quarter of 2017.
- An overwhelming portion of PBM spread is occurring on generic drugs.
- The spread totals were highest on specialty drugs, which are typically dispensed at PBM-owned pharmacies.

After the audit, Ohio legislators clamped down and directed ODM to make a shift in the program and select and contract with a single PBM (SPBM). ODM Director Maureen Corcoran said the switch would save the state \$150-\$200 million annually. Restructuring Ohio's PBM won't be complete for another year though Gainwell Technologies has been selected as the SPBM in a \$158 million contract.

Medicaid, funded jointly by the state and federal governments, covers about \$3.5 billion worth of prescription drugs a year in Ohio.

Concerns regarding PBMs are not new to OOA. At the 2019 House of Delegates, a resolution from the Akron-Canton District Academy noted physicians are frequently forced to prescribe formulary medications because the PBM will not allow prescribers to try an alternative medication. That year the OOA regularly provided links in OSTEOFACTS, the weekly newsletter, to information and in-depth articles, including an ongoing investigation by *The Columbus Dispatch* about how PBMs operate in Ohio.

Harney said the Accountability Project will work to further educate lawmakers and serve as a platform to address how prescription drug savings that PBMs achieve for health plans can go back to patients, pharmacists, and purchasers. "We encourage the new General Assembly to continue to look at this," he said. "Reforming the drug supply chain can help improve the bigger health care issues of access and affordability for patients."

Your Duty to Report

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ou know the actions are not right. But maybe it will get better, maybe your colleague will change. You don't want to risk ruining your business. But not reporting violations to the Medical Board puts you at risk of ruining your career. It is the mission of the State Medical Board of Ohio (SMBO) to protect the health and safety of Ohioans. Those health care professionals who hold a license from the Medical Board are obligated to follow the laws, rules and codes of ethics. Knowing a colleague is violating those regulations and not reporting to the Medical Board not only puts patients at risk but also puts your license to practice on the line. Mark Bechtel, MD, has seen many violations in his years serving on the Medical Board. Some of those cases involved licensees discounting the magnitude of their colleague putting a patient in harm's way.

"Turning a blind eye to substandard medical care, unethical practice, and sexual misconduct involving patient care from another provider can have very serious consequences," Bechtel said. "As a result of inaction and failure to report to the Medical Board, multiple patients can suffer long standing physical and emotional harm."

Duty to report goes beyond suspicion of child abuse, elder abuse and breaking the law. Ohio physicians and many other allied health care providers regulated by the State Medical Board of Ohio are obligated to also report violations of law, rule and codes of ethics to the Medical Board.

"It is your moral, ethical, and legal responsibility to report unethical and substandard care by a licensee to the medical board," stated Bechtel. "Patients need to be protected from sexual improprieties, abuse, and potentially harmful care."

While standards of care and scope of practice are specific to the type of health care you provide, all physicians should be familiar with three main sets of regulation.

- 1. Statute: Laws outlined in Ohio Revised Code (ORC)
- 2. Rule: Regulations created specifically by the State Medical Board of Ohio for

its licensees. These are found in Ohio Administrative Code (OAC). Chapter 4731 includes regulations for Doctors of Medicine, Doctors of Osteopathic Medicine, Doctors of Podiatric Medicine, Massage Therapists, Cosmetic Therapists, Anesthesiologist Assistants and Board operations.

3. Code of Ethics for your profession OOA President Sandra L. Cook, DO, said the American Osteopathic Association Code of Ethics applies to physicians and students throughout the continuum of their careers, from enrollment in osteopathic medical school through post graduate training and the practice of osteopathic medicine.

"At the core is the physician/patient relationship and the enduring commitment to safeguard the welfare of patients," she said. "As physicians, we have ethical and professional responsibilities to our patients, to society, to our professional organization, and to ourselves."

The Medical Board has taken steps to ensure licensees know the seriousness of the duty to report knowledge of misconduct. In November 2019, the board added a new section to ensure those applying for and renewing their licenses are aware of their responsibility. New and renewing applicants see the following language in eLicense:

I acknowledge my duty to report to the State Medical Board of Ohio when I believe that any individual licensed by the board has violated the board's laws or rules. Violations include but are not limited to sexual misconduct, practice below the minimal standards of care, and improper prescribing of controlled substances.

Licensees should not assume that by informing their supervisor their duty to report is fulfilled. Ohio law is clear when a licensee needs to report information to the Medical Board. Anyone, including licensees, can file a complaint with the Medical Board 24/7 through the confidential complaint hotline 1-833-333-SMBO or online at med.ohio.gov.



Student Update: CLEVELAND

The OOA works with many Ohio University Heritage College of Osteopathic Medicine (OU-HCOM) students, particularly Student Government Association (SGA) and Student Osteopathic Medical Association (SOMA) leadership. SGA presidents from each campus—Athens, Dublin, and Cleveland—are invited to OOA Board meetings and are allotted time on the agenda to report on campus activities. SOMA is an AOA affiliate and the nation's largest network of osteopathic medical students.

These student leaders volunteer their time, energy and effort. As medical students, they already have a lot on their plate. Yet, they still find time to commit to their community, peers, and profession.

Buckeye Osteopathic Physician invited student leaders from the Cleveland campus to submit a summary of their chapter. The last issue featured Athens leaders. We'll hear from Dublin campus leaders in a future issue.



ALEXANDER **HENDERSON**

The 2020-2021 academic year has been one for the record books. As a student in professional school, I can honestly say that this year presented several new challenges to, not only health care professionals, but to up-and-coming physicians who are still in training. Students have overcome a great deal of adversity and shown tremendous resilience to make it to this point. I would like to take this opportunity to congratulate all of the current students for their drive and commitment to excellence during these trying times. From the rising racial tensions amid ongoing social injustices in America to a global pandemic that has claimed the lives of more than 500,000+ Americans, I think I speak for everyone when I say how grateful I am to be alive and healthy in 2021. As we move forward, I would like to recognize our institution and several organizations for their hard work throughout these times.

The class of 2024 has been immersed in a completely virtual curriculum for the first time in the history of Ohio University's Heritage College of Osteopathic Medicine. This has presented first year students with unique challenges that the school is still working to help them overcome. I can only imagine how difficult it must be to get to know your classmates virtually. Our wonderful Wellness Committee, led by OMS-II Brennan Cull, has been doing their best to create environments for students to socialize and has been able to increase the morale of our students. Such events have included painting in the park, trivia night, and a Zoom cooking lesson from one of our faculty members, Patricia Lambert.

Our Student National Medical Association (SNMA) has also demonstrated great leadership on campus and have organized several professional and personal development events that have been available to members and non-members across all campuses. For example, SNMA members have served on panels for local organizations to help bridge the health gap in minority communities and also hosted other sessions on topics including tackling mental health. While it is difficult to highlight the work from all of our wonderful organizations,

I would like to recognize and commend all of our campus leaders on their hard work.

While this year has been particularly challenging, several faculty members have been working diligently to make it as least stressful as possible. Our Assistant Director of Learning Services JoAnna Cline has been a guiding light and I speak for all of the Cleveland campus when I say she is the absolute best. Assistant Director of Inclusion Ryan Clopton-Zymler has been such an asset in helping guide difficult conversations and always being available for students. Our campus Dean, Isaac Kirstein, DO, has shown great leadership during this time in guiding us throughout unchartered territory. Lastly, to the Environmental Services staff and security at Cleveland Clinic South Pointe Hospital, we would not be able to come to campus for the little time allowed if it were not for you. We are truly grateful for all that you do.

While my tenure as SGA president comes to a close, I want to say thank you to the OOA, and especially Matt Harney, for guiding us through this difficult year. I would also like to especially thank my SGA advisors, Betsy Kerns and Andrea Brunson, for their guidance and words of encouragement as we navigated unique and challenging discussions. I would also like to thank the other members of SGA for their dedication and commitment to helping students. This has been a difficult year full of heartbreak and life lessons for all of us. However, I am hopeful that OU-HCOM will be a much better place in 2021 and beyond because of these challenges. I look forward to working with the OOA in the future and thank you so much for the opportunity to serve. \rightarrow

Student Leaders

Student Government Association (SGA), Cleveland



OLIVERA PRICA

SOMA Cleveland partnered with Student American Academy of Osteopathy (SAAO) and the SOMA at the other OU-HCOM campuses in Athens and Dublin to plan a Virtual Talent Show. It will be a recorded event and donated to nursing homes in the Cleveland and Dublin areas. The Virtual Talent Show allow students to receive TOUCH hours—and win prizes.

TOUCH, Translating Osteopathic Understanding to Community Health, is a national volunteer initiative organized through the Council of Osteopathic Student Government Presidents. The mission is to encourage medical students to act on one of the basic tenets of the osteopathic philosophy: a commitment to improving the health of our communities through service.

Currently, we are having a hard time with student engagement, and I believe this is a common theme across all clubs at our campus. As a result, it's difficult to get feedback as well as attendance at certain virtual events.

We are planning to host a virtual talk with Cleveland Family Medicine club in the future and having a guest speaker.

As a club, the E-board meets every couple of weeks and we collaborate with other clubs on our campus.

Student Leaders

Student Osteopathic Medical Association (SOMA), Cleveland

Ohio Osteopathic Foundation Donors

The list below reflects giving for the period of December 1, 2019, to December 31, 2020. To make a contribution, go to OhioDO. org/OOF or mail your check to OOF, 53 W. Third Avenue, PO Box 8130, Columbus, Ohio 43201. For memorial donations, an acknowledgement of your gift is sent to the family of the deceased. No amounts are mentioned.

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Student White Coat Fund

Jane T. Balbo, DO John R. Balk, DO Charles V. Barrett, DO Heidi A. Beining, DO Barbara A. Bennett, DO John C. Biery, DO Robert A. Cain, DO Carl Denbow, PhD Ashley C. Fuentes, DO Miriam L. Garcellano, DO Jennifer L. Gwilym, DO Matt Harney Nicklaus J. Hess, DO Joseph R. Kershner, DO Beth A. Longenecker, DO Lili A. Lustig, DO Alan L. Meshekow, DO Charles D. Milligan, DO Thomas J. Mucci, DO Kristin L. Oaks, DO Luis L. Perez, DO John F. Ramey, DO Kelly L. Ramey, DO Alyssa Ritchie, DO Richard A. Scarnati, DO David L. Tolentino, DO Amy G. Tunanidas, DO Debra A. Turull, DO John F. Uslick, DO Charles G. Vonder Embse, DO Stevan A. Walkowski, DO Dr. Henry and Anne Marie Wehrum Dayton District Academy of Osteopathic Medicine

Ohio Osteopathic Political Action Committee Honor Roll

The following is based on contributions from April 20, 2019 to May 1, 2020. OOPAC supports candidates who have demonstrated beliefs in and the principles to which osteopathic medicine is dedicated. The primary goal is to help shape health care policy by educating legislators and explaining how proposed legislation affects patients and communities. A strong PAC helps to open doors and strengthen the osteopathic voice at the Ohio Statehouse. To make a contribution, go to www.OhioDO.org/OOPAC.

Governor's Circle (\$1,000 or more)

Cleanne Cass, DO, Dayton Roberta J. Guibord, DO, Perrysburg Eugene D. Pogorelec, DO, Massillon Geraldine N. Urse, DO, Columbus

Rotunda Club (\$500 to \$999)

Victor D. Angel, DO, Maineville William J. Burke, DO, New Albany Robert W. Hostoffer Jr., DO, Cleveland Jeffrey L. Hunter, DO, Columbus Mark Jeffries, DO, Dayton Robert S. Juhasz, DO, Concord Township John F. Ramey, DO, Sandusky Christine M. Samsa, DO, Milan Nathan P. Samsa, DO, Milan Henry L. Wehrum, DO, Columbus

Chairman's Club (\$250 to \$499)

David A. Bitonte, DO, Uniontown Anthony G. Chila, DO, Athens Nicholas G. Espinoza, DO, Perrysburg Nicklaus J. Hess, DO, Centerville Gregory Hill, DO, Copley Edward E. Hosbach II, DO, Coldwater Kristopher L. Lindbloom, DO, Sandusky Lili A. Lustig, DO, Shaker Heights Christopher T. Marazon, DO, Bidwell Paul A. Martin, DO, Beavercreek Ray J. Miller, DO, Perrysburg Thomas J. Mucci, DO, Poland Nicholas J. Pfleghaar, DO, Perrysburg Kelly L. Ramey, DO, Sandusky George Thomas, DO, Chagrin Falls John F. Uslick, DO, Canton

Patrons (Up to \$249)

David L. Bowman, DO, Butler Angela L. Brinkman, DO, Chardon David L. Brown, DO, Dover Ying H. Chen, DO, New Albany Jeffrey D. Cushman, DO, Xenia James M. Essad, DO, Canfield Melinda E. Ford, DO, Athens Sadie R. Garita, DO, Athens Sharon L. George, DO, Girard David D. Goldberg, DO, Dayton Paige S. Gutheil, DO, Hilliard Thomas H. Henderson, DO, Dayton Dana M. Kromer, DO, Dublin Gerald F. Lackey, DO, Chesterland Alan L. Meshekow, DO, Massillon Elizabeth L. Myer, DO, Youngstown Daniel J. Raub, DO, Aurora Edgar J. Rennoe, DO, Powell Jean S. Rettos, DO, Athens Marc D. Richards, DO, Chardon Judith A. Roulier, Sylvania Paul T. Scheatzle, DO, Canton Edward W. Schreck, DO, Westerville Sean Stiltner, DO, Piketon Richard F. Sulek, DO, Cincinnati Karla Volke-Wood, DO, Wooster Alex J. Vrable, DO, Canfield

Serving the Profession

Thank you to these OOA members who serve the profession by participating on national and state committees. By lending their expertise they are also ambassadors for osteopathic medicine and advocates for patients.

American Osteopathic Association Bureaus, Councils, and Committees

Ingrid S. Brown, DO Bureau of Osteopathic Specialists

Mark W. Day, DO Program and Trainee Review Council

Melinda E. Ford DO House of Delegates Committee on Credentials

Paul E. Gray II, DO Program and Trainee Review Council

Jennifer L. Gwilym DO COCA

Ann L. Habenicht, DO Bureau of Osteopathic Education

Matt Harney Bureau of Affiliate Relations

Jennifer J. Hauler, DO Board of Trustees, Committee on Awards, Ethics Review and Board Appeals Committee

Robert W. Hostoffer, Jr., DO Board of Trustees, Executive Committee, Finance Committee, AT Still Foundation and Research Institute, Bureau of Osteopathic Research and Public Health

Robert S. Juhasz, DO President's Advisory Council

Harika R. Kantamneni, DO Bureau of Membership

Isaac J. Kirstein, DO Bureau of Osteopathic Education

Beth A. Longenecker, DO Bureau of Osteopathic Education

Francesco T. Mangano, DO Program and Trainee Review Council

Chelsea A. Nickolson, DO Board of Trustees

Judith A. O'Connell, DO Council on Economic and Regulatory Affairs

George Thomas, DO President's Advisory Council, Bureau on Federal Health Programs

State of Ohio Boards and Committees

Michael E. Dietz, DO Ohio Department of Medicaid, Drug Utilization Review Board

Kindra C. Engle, DO State Medical Board of Ohio, Physician Assistant Policy Committee

Melinda E. Ford, DO Ohio Physicians Health Program Board

Jennifer L. Gwilym, DO Ohio Department of Medicaid, Pharmacy & Therapeutics Committee

Jeffrey L. Hunter, DO Ohio Physicians Health Program Board Ohio Attorney General, Criminal Justice and Mental Illness Task Force Psychiatry and Treatment Committee

Sherry L. Johnson, DO State Medical Board of Ohio

Paul A. Martin, DO CliniSync Board

Nathan P. Samsa, DO Ohio Department of Medicaid, Pharmacy & Therapeutics Committee

Paul T. Scheatzle, DO Ohio Bureau of Workers' Compensation, Health Care Quality Assurance and Advisory Committee

Shannon Campbell Trotter, DO Medical Quality Foundation Board



OSTEOPATHIC

Welcome New Members!

Ohio Osteopathic Association members pledge to serve as advocates for their patients and subscribe to the mission of maintaining the highest standards of ethical conduct in all phases of medicine and surgery. We applaud these physicians who, over the past year, have joined the OOA, the only statewide organization exclusively dedicated to representing osteopathic physicians.

Nathaniel A. Amor, DO

UMDNJ/SOM-2009 Neurological Surgery Muskingum County - Columbus District

Joseph M. Bannon, DO

LECOM-2015 Family Practice Belmont County - Marietta District

Sandra M. Berglund, DO

OUCOM-1990 Family Practice Cuyahoga County - Cleveland District

Rodolfo J. Canos, DO

OUCOM-2003

Surgery

Wood County - Northwest Ohio District

Reid C. Chambers, DO

MWU/CCOM-2013 Pediatric Orthopedics Franklin County - Columbus District

Anthony Corsino, DO

UMDNJ/SOM-1995 Radiology Summit County - Akron/Canton District

David de la Pena, DO

LECOM/Bradenton-2017 Internal Medicine Montgomery County - Dayton District

Katherine de la Pena, DO

LECOM/Bradenton-2017 Internal Medicine Montgomery County - Dayton District

Lauren Donatelli-Seyler, DO

LECOM-2005 Traumatic Surgery Cuyahoga County - Cleveland District

Alexandra S. Fitzgerald, DO

UNECOM-2015 Family Practice Athens County - Marietta District

Ann L. Habenicht, DO

MWU/CCOM-1982 Osteopathic Manipulative Medicine Greene County - Dayton District

Christopher M. Hauger, DO

VCOM-Carolinas-2016 Internal Medicine Lucas County - Northwest Ohio District

David M. Haves, DO

LMU-DCOM-2011 Family Practice Hamilton County - Cincinnati District

Gabriel J. Hays, DO

VCOM-2009 Pulmonary Diseases Montgomery County - Dayton District

Khurshid M. Iqbal, DO

NYCOM-2014 Internal Medicine Erie County - Sandusky District

James Mitchell Jones, DO

WVSOM-2013 Family Practice Lucas County - Northwest Ohio District

Alexandra M. McKenna, DO

OU-HCOM-2015 Family Practice Franklin County - Columbus District

Jennifer D. Otterbacher, DO

ACOM-2017 Family Practice Greene County - Dayton District

Abdul Malik Qavi, DO

WesternU/COMP-2013 Internal Medicine Summit County - Akron/Canton District

Wayne K. Robbins, DO

KCOM/ATSU-1987 Otolaryngology Franklin County - Columbus District

Debra A. Turull, DO

WesternU/COMP-1989 Obstetrics & Gynecology Wayne County - Akron/Canton District

Mallory A. Ucchino, DO

OU-HCOM-2016 Family Practice Mahoning County - Western Reserve District

Shan Shan Wu, DO

PCOM-2015 Allergy & Immunology Cuyahoga County - Cleveland District

Scott D. Yoho, DO

OUCOM-2011 Psychiatry Franklin County - Columbus District

Physician News

Charles D. Milligan, DO, was recently honored by Aultman Orrville Hospital for his nearly 40 years of service. As a family physician, Milligan delivered many babies at the hospital, spent countless hours mentoring new providers, and was instrumental in supporting the hospital's newborn care coverage—at times single-handedly supporting the program. To recognize his work, the hospital medical staff dedicated a room in his honor at the Family Birthing Center.

The recently retired Milligan served on the Orrville Hospital Foundation Board of Directors for a total of 15 years, with terms as treasurer, secretary, vice chair, and chair. He held many medical staff leadership positions over the years, including medical staff president and chair of the nursery division for many years.

Deaths in the Family

OOA Life Member Harold A. "Fergy" Ferguson, Sr, DO, age 91, of Eaton, died January 2, 2021, at home with his family by his side.

Ferguson practiced family medicine in his hometown for 35 years, serving his patients and the community with compassion and wisdom.

He earned his undergraduate degree at The Ohio State University and then went to Kirksville College of Osteopathic Medicine where he received his osteopathic medical degree in 1956. He interned at Grandview Hospital and following his internship opened a private family practice in Eaton in 1958. Recognizing the expanding medical needs of his community, he co-founded the Preble County Medical Center in 1965. Ferguson continued his practice there until his retirement in 1993. He also served as director of the Preble County Mental Health Board.

He was an avid golfer and a friend to all. Ferguson is survived by his wife of 48 years, Alice; three children including Harold Allen Ferguson, Jr., DO; and five grandchildren.

Memorial contributions may be sent to The Common Good of Preble County. Online condolences may be sent to the family by

visiting www.gsbfuneralhome.com.

OOA Life Member John "Jack" Loeding, Sr, DO, of Sugar Grove, died December 26, 2020. He was 85 years old.

Loeding was valedictorian of his Chicago College of Osteopathic Medicine Class of 1959. He pursed a career as a surgeon and had a 55-year career in the field.

In the 1970s, he had the privilege of saving Oscar, an injured bald eagle. The County Department of Natural Resources in Ironwood, Michigan, discovered Oscar limping across Highway US-2 and reached out to Loeding for medical assistance. Oscar had an inch-deep hole under the muscle of his left wing and another on his right wing that Loeding was able to clean and suture close; thus, saving Oscar's life.

He was preceded in death by his wife, Mary Ann, and is survived by three sons and five grandchildren.

The family asks that memorial contributions be made to an organization of your choice.

THANK YOU DOCTORS





For keeping Ohioans safe. For your service to patients. For being leaders in your community. For everything you do.

IN THE KNOW

Just the Facts

Do you receive OSTEOFACTS? It's the OOA newsletter emailed every Friday. If you aren't receiving it, there could be an issue with your email address. Contact Joanne Barnhart at the OOA office at jbarnhart@OhioDO.org or 614-299-2107.



@ Ohio Osteopathic Association



December 14, 2020

It's an exciting day for Ohio. It is the beginning of the end of the pandemic. Health care workers in Columbus and Cincinnati were among the first Ohioans to receive the COVID-19 vaccine this morning. Tomorrow, eight other Ohio hospitals will receive vaccine shipments.

#InThisTogetherOhio #StaySafeOhio #MaskPlus6



#ThisIsOurShot

Because physicians are among the most trusted voices when it comes to health information, you play an important role to combat vaccine hesitancy and misinformation. Leading by example is one way to help educate Ohioans about the COVID-19 vaccine. Post your vaccine selfies on social media with the hashtag #ThisIsOurShot or email them to cmarkino@OhioDO.org.





OhioOsteopathicAssn

@OhioDOs



Watch your distance

Wash your hands Mhen it's your turn, get the vaccine

#MasksOnOhio #MaskPlus6

#DoctorsOrders #InThisTogetherOhio

12:49 PM · Jan 27, 2021



@ OUHCOM



December 23, 2020

Today the Ohio University Heritage College of Osteopathic Medicine received the keys to Heritage Hall in Athens – a true gift to the future of medical education! This new facility will revolutionize teaching, learning and collaborating in 2021 and beyond, thanks to the Osteopathic Heritage Foundations and others who are helping to make this vision possible. #CareLeadsHere #FutureMedEdBuilding

Thank You for Being an OOA Member!

By paying your dues you keep the profession moving forward, promote the distinctive philosophy and practice of osteopathic medicine in Ohio, and improve health care for patients. Renew your membership online. www.OhioDO.org



In Memoriam

Honor a deceased physician by making a memorial contribution to the Ohio Osteopathic Foundation

Make your contribution at OhioDO.org/OOF

Proposed Amendments to OOA Constitution & Bylaws

These changes, as proposed by the OOA Board of Trustees, will be considered at the OOA House of Delegates in April 2021. This printing serves as the required notice to the membership.

Constitution

Article IV - Membership

The active membership in this association shall consist of members who are graduates of an accredited college of osteopathic medicine and who are lawfully licensed to practice in the state of Ohio unless they have voluntarily allowed their license to lapse due to retirement or disability. Persons may be elected to associate or honorary membership in this association, as provided in its bylaws. Any AOA or ACGME accredited hospital or college located in the state of Ohio shall be eligible to become an institutional member of this association.

Article VII - Officers

The elected officers of this association shall be regular members in good standing and shall be: a President, a President-Elect, a Vice President, a Treasurer, a Speaker of the House of Delegates, and a Vice Speaker of the House of Delegates. Non-elected officers shall include the Immediate Past President and an Executive Director. A President-Elect shall be elected annually by the House of Delegates to serve for one year. He/ she shall succeed to the office of President at the next annual election. The Vice President, Treasurer, Speaker and Vice Speaker of the House of Delegates shall be elected annually by the House of Delegates to serve for one year, or until successors are installed. An Executive Director shall be appointed by the Board of Trustees to serve for such term as the Board of Trustees shall define. The duties of these officers shall be those usual to such officers in their respective offices and such others as are defined by the bylaws. In the case of inability upon the part of the President to serve during the term of office for which he has been elected, the responsibility

of filling the office of President shall devolve upon the Board of Trustees.

Bylaws

Article II

Section 1 - Regular Member. An applicant for regular membership in this association shall be a graduate of a college of medicine or osteopathic medicine and licensed to practice in the state of Ohio. Application shall be made on a prescribed form and shall be accompanied by payment of the appropriate state and local district dues. The executive director shall send a copy of the new member's application and district dues to the appropriate district academy and publish the new member's name in the Buckeye Osteopathic Physician.

Section 1 (a) - Continuing Education. In order to maintain regular membership in this association a minimum of 100 50 credit hours of approved continuing medical education must be substantiated for each successive two-year period, commencing January 1, 1985. Rules of procedure, guidelines of approved educational categories and certification requirements will be the responsibility of the Education Committee with approval of the Board of Trustees.

Section 2 - Postgraduate Training Member. Osteopathic physicians in AOA or ACGME approved Ohio osteopathic postdoctoral training programs or allopathic physicians in programs with Osteopathic Recognition shall automatically be enrolled as members of this association for the duration of their training and shall receive benefits and privileges as defined in these bylaws or by the Board of Trustees.

Section 10 - Institutional Member. Any American Osteopathic Association-accredited healthcare facility, institution or college of osteopathic medicine located in the state of Ohio shall be eligible to become an institutional member of this association.

Buckeye Osteopathic Physician Ohio Osteopathic Association 53 West Third Avenue Columbus, Ohio 43201-0130 ELECTRONIC SERVICE REQUESTED

We're Celebrating! 122 years



On December 31, 1898, a small group of Ohio DOs formed the Ohio Osteopathic Association. What a way to bring in the new year!

A Distinguished Past...A Dynamic Future