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## MESSAGE FROM THE PRESIDENT

By Sherry Clarke



Hello. I am Sherry Clarke, your 2006-2007 Wisconsin Medical Society Alliance President. My role as President-Elect was quite brief as I became President at the end of August 2006, when Ken Strmiska, our

President at that time, notified the Board of his planned career change and move to Washington DC. Congrats to Ken, we will miss him and his expertise. I thought you might like to know who I am and a little about me. And I'm not the only one you'll get to know in this issue of SCAN. In this and future issues, we will introduce our county Presidents.

I live in Menasha, Wisconsin and am married to Dr. Gerald Clarke, an ophthalmologist. We have four boys. The older two boys have graduated and are out in the workforce while the younger two are in college. One son attends the UW-

Madison and the youngest has just left the home to attend Marquette University. Yes, we are empty-nesters.

My work at Thedacare Health Systems as a nurse in the past 10 years (I won't go back to the beginning of my career, as it would too long and boring!) has taken me from the role of Clinical Quality Consultant for Disease Management and Prevention to my current title of Care Manager at Theda Clark Hospital on a part-time basis. I have an interest in the pay-for-performance measures and quality measures the federal government and state are hoping to implement for reimbursement to physicians and have been watching them closely. This is what I have worked on for over six years working in the Quality Department, and I definitely have some opinions as to what works and what doesn't. (I'll stop there, since that isn't the focus of this piece, but let me know if you're interested in hearing more!)

My passion for music and dancing has given me the opportunity to work a second "hobby-job" as I call it, for CAP Productions creating and teach-

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## AMA ALLIANCE HEALTH PROMOTION AWARD AND GRANT OPPORTUNITIES

By Carol Harding

Looking for extra funding for your health promotion project? The AMA Alliance is once again offering the Health Promotion Policy Grant (HPPG) program for state and county Alliances. Alliances may receive grant awards ranging from \$100 to \$500. Each Alliance is limited to one grant award per calendar year. All applications must be submitted electronically two weeks before a scheduled event.

Also, the opportunity for recognition for your efforts exists with the AMA Alliance Health Awareness Promotion (HAP) Awards. HAP recognizes excellence in the health promotion programs and projects of county Alliances, and resident physician spouse/medical student spouse groups throughout the nation. All entries for the HAP Awards must be postmarked or submitted by March 1, 2007. Winners will be announced at the AMAA Annual Meeting Prestige Awards Gala Dinner in June.

If your Alliance would like more information on the HPPG program or HAP award, visit the AMA Alliance Web site at [www.amaalliance.org](http://www.amaalliance.org).

The State and County Alliance Network (SCAN) is the official publication of the Wisconsin Medical Society Alliance. Articles submitted should be typed and are subject to editorial review and changes. For more information, contact Kathy at the Alliance office:

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Madison, WI 53701  
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## ALLIANCE MEETING SCHEDULE

### 2006-2007

**October 20, 2006**

11 a.m. – 2 p.m. Madison  
(conference call if unable to attend)

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**November 28, 2006**

11 a.m.  
Conference Call

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**December**

No Meeting

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**Jan. 11, 2007**

11 a.m. – 2 p.m.  
Appleton

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**February 8, 2007**

11 a.m.  
Conference Call

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**March 2-4, 2007**

Northeast Central States  
Regional Meeting Omaha, NE

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**March 20, 2007**

11 a.m.  
Milwaukee

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**April 27, 2007**

10 a.m. – 2 p.m.  
Annual Meeting  
Madison Club, Madison

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**June 24-27, 2007**

AMAA Annual Meeting  
Chicago

## FUTURE CHALLENGES REQUIRE RENEWED EFFORT —

### A MESSAGE FROM WISMEDPAC

By Sherry Clarke, Legislative Chair

As we vigilantly protect the physician's right to work in a stable liability environment, we must constantly be on the watch for future Wisconsin Supreme Court decisions. We need to examine how the new noneconomic damage cap figure affects the state's liability climate, and react quickly if we see destabilization. The Medicaid program is under tremendous cost pressure in both Madison and Washington, DC. The national Medicare reimbursement formula continues to penalize Wisconsin physicians. And we must always keep the patient's best interests in mind and ensure that only those with medical degrees practice medicine.

With all this on our immediate agenda, physicians and spouses must ensure they have their voices heard through **grassroots efforts** and **political contributions** to physician-friendly candidates. Trial lawyers will do whatever they can to build more business for themselves—physicians can't just be silent and expect all will be well.

#### Your Support is Essential

Politics and government often dramatically affect the practice of medicine, and we need your participation in WISMedPAC/WISMedDIRECT to strengthen medicine's voice.

Your participation in the political process and your personal contribution to the Society's political giving affiliates will help make the voice of medicine loud and clear in Madison. Working together we can make a difference!

Your participation is especially important right now, as the 2007 membership year for WISMedPAC may prove to be one of the most critical in decades! This past legislative session we were able to accomplish what many thought was impossible: enact a new cap on noneconomic damages in medical liability cases. This was a **huge victory** for health care access in Wisconsin. Personal injury lawyers, however, are gearing up full-bore to undo this win AND

change the makeup of the State Supreme Court next spring. We must continue to fight if we are to maintain stability in the medical liability insurance market, and that will require the financial and vocal support of physicians.

There are other challenges ahead. The Medicaid program is under tremendous cost pressure in both Madison and Washington, DC. The national Medicare reimbursement formula continues to penalize Wisconsin physicians. We are always vigilantly protecting the patient's right to have medicine provided by those with medical degrees. If we want our state and federal policymakers to listen to our concerns, physicians and the Alliance **must stand ready to be active participants**, providing our experience, expertise, and our financial support.

#### Join the fight!

Help preserve the ability to provide quality medicine and preserve a physician's control of medical decisions by participating in the following ways:

1. Enlist with WISMedPAC or WISMedDIRECT; become a member and get involved. You can also contribute on-line at the Society's secure e-commerce site: [www.wisconsinmedicalsociety.org/health\\_policy/wismedpac.cfm](http://www.wisconsinmedicalsociety.org/health_policy/wismedpac.cfm).
2. Talk to your patients, peers and co-workers about public policy issues related to health care.
3. Urge your friends and patients to vote for pro-patient care candidates.
4. Form a personal relationship with your elected officials, become a member of our Key Contact Program and volunteer to advise your state and federal representatives on health care issues.

If you have questions please contact Government Relations toll free at 866.442.3800.

## UNIFIED DUES: THE RATIONALE

Currently the Wisconsin Medical Society Alliance offers the option of choosing county, state, and national membership when paying dues. Most counties maintain in their bylaws that in order to be a member of the county, members must also be a state member. When paying dues, the question “What’s in it for me if I pay for the national and state dues?” sometimes isn’t transparent to county members. Particularly if, as a county member, you haven’t been aware of the state or national membership benefits either through a meeting, newsletters, or materials that you may have been using without knowing where those resources originated.

Wisconsin is considering becoming a Federated Dues state (dues that are all-inclusive of the three levels of membership: county, state and national) in the upcoming year. This article is an introduction to the idea of federated dues. We hope it will create discussion that will be brought to the state board as they make their decision regarding the 2007 dues year. Dianne Fenyk, President-Elect of the AMA Alliance, from Minnesota offers the following to explain the rationale behind Federated dues.

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### Unified Membership Rationale:

The AMA Alliance is the largest, most important organization that represents the family of medicine in the United States. It consists of a nationwide network of groups whose mission is to partner with physicians to build healthy communities and support the family of medicine.

A national organization provides focus and objectives for all its components and a base for operations.

ALL State and County Alliances—whether or not their members belong to the AMA Alliance—benefit from unified membership because AMA Alliance dues make all of these resources possible:

- Every time they order SAVE materials,
- Every time they use leadership tools like those found on Listserv,
- Every time they have a member of the Speaker’s Bureau attend a meeting,
- Every time a county leader attends LDC,
- Every time a medical student receives AMA Foundation financial assistance.
- Every time grassroots advocacy network is utilized through the AMA.

By supporting and joining the ENTIRE Alliance (county, state and national), you connect the family of medicine and form a stronger organization with a national presence. Your membership shows your support! Encourage all of your members to belong to all three levels of the Alliance so our collective voice and message can be as strong as possible.

### THINK of the Alliance as a business offering support and resources...

**National** level serves as the manufacturer and produces materials and resources for state and county Alliances.

The **State** level acts as the manufacturer’s representative, marketing National’s services and also serving as a coordinator for the county.

The **County** level is the customer who uses the materials in programs and projects at the grassroots level.

This structure creates links between county, state and national. These links unify all Alliances’ efforts in health promotion, legislation advocacy, fund-raising for the AMA Foundation and membership development. All parts are working toward common goals for the maximum impact.

Dianne Fenyk,  
President Elect—AMA Alliance

**AMA Alliance dues are currently \$40 year. What your \$40 dues can do...**

### The AMAA can purchase:

- 149 AMA children’s workbooks
- 724 “Hands are Not for Hitting” placemats
- 831 “I Can Handle Bullies” bookmarks

### or you can purchase:

- 11½ People magazines
- 13 medium lattes
- not quite 12 bags of Chips Ahoy cookies



Wisconsin  
Medical Society  
Alliance

Annual  
Meeting

Friday  
April 27, 2007

The Madison Club  
Madison

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## A TEEN HEALTH CONNECTION FOR THE STATE ALLIANCE

By Chris Iglar

It has been said that health projects are the heart and soul of the medical alliance. That is how we, as physician spouses, use our organization to promote healthy lifestyles in our communities. Our state organization has not sponsored a specific health project for a number of years and we are ready to remedy that! For the past two years we have considered a variety of projects with the intention of making a multi-year commitment. Teen health is the broad topic we selected.

Now comes the challenging part! We need to narrow our focus and decide what part of adolescent health we want to address: underage drinking, smoking, bullying, risky sexual behaviors, etc. We also need to design the project. This is no small task, considering that we have a small state membership base.

One of the things we will be looking at as a state board is kicking off the program with a professionally produced public service announcement that we can market to local television stations within Wisconsin. This would be something that a small county alliance or an at-large member could take to a local station.

We will also be drawing on resources from our national organization, the American Medical Association Alliance. They have some programs in the works that we can use as part of our state project.

Your contacts and ideas are also needed and welcome! Please feel free to e-mail Chris Iglar, [cniquist@aol.com](mailto:cniquist@aol.com), or Carol Harding, [CJH3241@aol.com](mailto:CJH3241@aol.com), with your suggestions.

## LEGISLATIVE UPDATE NOVEMBER 2006

By Sherry Clarke, Legislative Chair

Congress closed its fall session and headed home for the elections without reversing the beginning Medicare payment cuts totalling over 40 percent scheduled to occur over the next nine years. Unless the lame duck session in November addresses the cuts, the initial cut of 5.1 percent reimbursement for services by physicians will occur January 1, 2007. The government estimates the cost of providing care will increase by about 20 percent during the next nine years of those cuts.

According to a statement from Cecil B. Wilson, MD, AMA Chair, "Eighty senators and 265 representatives have called on congressional leaders to stop the cut before Congress adjourns, but legislation has not been enacted. It is critical that Congress return during the lame duck session this fall to stop the Medicare cuts and tie payments to increases in practice costs to preserve seniors' access to health care.

"A national AMA survey found that 45 percent of physicians will be forced to limit the number of new Medicare patients they accept into their practice when the cut begins January 1. Physicians cannot continue on the current path of being paid less than the increased cost of providing care without serious consequences for patients.

"In addition to the 5.1 percent cut triggered by the physician payment formula, many physicians will face additional cuts from other policy

changes taking effect January 1. Nearly half of physicians are facing cuts totaling 6 to 20 percent. This makes stopping the cuts triggered by the Medicare physician payment formula even more critical.

"We hope Congress will immediately take up this issue when they return to Washington in the November lame-duck session. The AMA will continue to strenuously advocate for physician payment based on practice costs and will continue to advocate for sound quality improvement initiatives. Congress needs to act promptly on its return to preserve seniors' access to care."

What can we do? As members of the family of medicine, contact your members of congress, well as Senators Kohl and Feingold, and let them know that you are concerned. Be thoughtful, respectful and make it personal. For example: "I have been a member of the family of medicine for 15 years. I am concerned about the future of health care for our seniors. I would like you to act now to change the reimbursement of physicians through Medicare by changing the current formula (SGR) and eliminating the cuts scheduled in January."

Contacting your legislators is easy by using the following methods:

By phone: utilize the AMA Grassroots Hotline 800.833.6354 and urge them to take action to stop the cuts in November.

By e-mail: log into the AMA Web site [www.ama-assn.org](http://www.ama-assn.org), and contact your members of Congress using the AMA Grassroots Center [capwiz.com/ama/home/](http://capwiz.com/ama/home/).

## FROM THE WISCONSIN MEDICAL SOCIETY FOUNDATION

"It's a slight departure from our past five years, but I think the evening will be memorable."

That is how Reneé Reback, Executive Director of the Wisconsin Medical Society Foundation described plans for the Foundation's 2007 fundraising event, which will include a presentation by Stephen Dubner, co-author of the international bestseller *Freakonomics*, on Thursday, April 26 at the Monona Terrace and Convention Center.

"It's always important to keep fundraising events fresh. After investigating the feedback Mr. Dubner received from other organizations, I know the audience will leave looking at the world in a slightly different way," Reback said.

The evening event will include a silent auction and raffle and will once again help kick off the Wisconsin Medical Society Annual Meeting, which will begin Friday, April 27. Proceeds will be directed toward Foundation initiatives including the scholarship and grants programs.



## GREATER MILWAUKEE MEDICAL SOCIETY ALLIANCE PRESIDENT

By Delphine Taft



I am Delphine Taft, the current president of the Greater Milwaukee Medical Society Alliance. Our first president took office in 1932 and I am honored to be the latest in the long line of physician spouses dedicated to health. I

have been married to Tom, who is an Infectious Disease Specialist, for 30 amazing years. He has shown incredible patience dodging the landmines of a predominantly female household for the past 21 years. We are the proud parents of two girls. The oldest is a senior at UW-Madison and the youngest a freshman at UW-Oshkosh.

I attended Marquette University right after high school but took a 13-year break before completing my undergraduate degree from Mount Mary College, graduating on my 36th birthday. I did this while working full time for Wausau

Insurance as a human resource specialist. My youngest child was born with special needs and I left my position after 14 years to become a full time advocate in her life. I tried to work part time as a human resource consultant for about two years but the job kept spilling over to full time. Currently I am an empty nester and fill my time with various volunteer activities ranging from middle school science fair judge to docent at fundraising open houses. Our 6-month-old golden retriever sometimes needs to attend puppy daycare in order to accommodate my community jobs, and I have discovered the old familiar guilt I had when dropping my daughters off at day care when I worked for pay. I am beginning to pursue jobs in the human resource area but my puppy is curtailing the amount of hours I am willing to devote to a professional job.

I am an avid movie buff and love to garden. We have gone on so many family Disney vacations that I am sure the mouse could build a new attraction with our contributions. I am fortunate to have five siblings and many nieces and nephews, and feel very old when their children refer to me as Great Aunt Delphine. My mother will celebrate her 82nd birthday this New Year's Eve and lives with my 88-year-old stepfather in their own home. I am a cancer survivor and feel blessed to be alive and healthy.

## LA CROSSE MEDICAL SOCIETY ALLIANCE PRESIDENT

By Maria Runde

Born and raised in Philadelphia, PA, I'm just a big-city girl still trying to adjust to life in a smaller and more rural community. After six years of living in La Crosse, I have come to appreciate the wholesomeness, slower pace and relative safety that Midwest living affords, but I still yearn for better restaurants and shorter distances to "the bigger cities" for cultural events and such.

I have a bachelor's degree in biology from Villanova University and a master's in Medical Genetics from UW-Madison. I worked as a genetics counselor for nine years before embarking on my next career as mom of two. My sons are now aged 6 and 8, and while both of them were born in Pennsylvania, they consider themselves Wisconsinites.



As for me, I don't know if that name will ever stick! I met my husband while I was in graduate school and he was in medical school. We happened to be renting side-by-side townhouses in Madison, so I guess that means I married the boy next door. We lived out East for seven years while he finished his medical training and took a position in private practice. When that didn't work out, we moved here (to be closer to his family – yet they live on the other side of the state!). I enjoy scrapbooking, ballroom dancing and good food.

## The President's Message

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ing the choreography for follies shows in the Midwest a few times a year. We go into a town that hires our production company to help direct and produce a show in three weeks from the first "meet the director night" to the final performance. Groups that hire us range from community foundations to medical auxiliaries to employer groups, many of whom use the production as a fundraiser. The last show I worked on cleared over \$60,000 in three shows for their special cause! The cast consists of community people who want to be part of the event. Very few have special experience or training, which makes the work so rewarding and enjoyable.

Speaking of dance, both Jerry and I take ballroom and salsa lessons. Living in Appleton, we have very few venues to dance salsa—my favorite dance—so if we have an opportunity to dance in another city, we make sure we get in a "Salsa Night" by looking on-line to find out where the salsa places are so my husband and I can get our "fix." Our sons think we are crazy, but they like hip-hop and heavy metal, so I don't think they should judge us.

As for my Alliance background, I am a member of the Winnebago County Medical Society Alliance and have served as its president for three years. I am on the Board of Directors for the county Alliance and attend the county medical society meetings as a representative for the county Alliance. I also serve as state legislative chair, am a WisMedPAC board member, and of course was president-elect and am now your state president. While I participate and fully support health promotions projects in the Alliance, my hot button is advocacy and legislative issues when it comes to partnering with the Medical Society.

I hope I will have the chance to meet most of you while I am in office. Please feel free to contact me if you have any concerns or would like me visit your area. My e-mail address is [princessdi@new.rr.com](mailto:princessdi@new.rr.com). I look forward to working with and for you.

# SCREEN OUT PROGRAM

By Carol Harding

## Youth Tobacco Use Statistics: 3900 young people try cigarettes each day.

Research shows that approximately 50 percent of youth who start smoking in their adolescent years will continue to smoke for the next 15-20 years. Smoking remains the leading cause of preventable death, and cigarettes are still the cause of one in five American deaths.

The AMA Alliance has partnered with the AMA and Smoke Free Movies in a nationwide campaign entitled: "Screen Out," an action program developed to remove smoking from movies that are marketed toward youth. The goal is to stop the portrayal of smoking as glamorous in movies and television. Of all the factors influencing teens to start smoking, exposure to on-screen smoking proves to be the most powerful. On-screen smoking recruits 50 percent of all teen smokers.

The "Screen Out" program offers a multi-functional teaching guide for parents that

- Educates parents to reduce their kids' attendance at movies that promote smoking.

- Teaches parents how to express their views to the media corporations that own the studios.
- Teaches parents how to engage civic organizations, school boards and other similar groups to get involved in this program at the institutional level in order to convince the media companies there is a public demand to stop promoting smoking in movies.

The "Screen Out" campaign proposes four basic solutions.

1. Rate new movies that feature smoking "R."
2. Certify no payoff, requiring producers to certify on screen that no one on production received anything of value in consideration for using or displaying tobacco.
3. Require strong anti-smoking ads before any movie with tobacco use, regardless of its rating.
4. Stop identifying tobacco brands in movies.

To obtain a copy of the "Screen Out Kit: A Parent's Guide to Smoking, Movies, and Children's Health," and learn more about how your group can implement the program, go to the AMA Alliance Web site at [amaalliance.org](http://amaalliance.org).

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