

I want to welcome everyone to this inaugural dinner- my colleagues, honored guests, our state legislators, sponsors, and of course my family. I am honored to be inaugurated as the 194<sup>th</sup> president of the MCMS. Our county society is one of the oldest, starting in 1816, and is certainly one of the most active and vocal in the state.

Taking over the reigns as president from Dr. Ted Louie is going to be challenging. Dr. Louie has done an outstanding job as leader of our county society. This past year, in a recession and economic downturn, he has helped streamline the society; he reduced costs by being fiscally responsible. Despite these difficult times, membership has increased, dues have decreased while benefits of membership have increased as well. One benefit was a first ever monetary rebate of \$100. A twin membership program was instituted under the guidance of MSNJ. Under this, two physicians who pair up each pay 50% dues as long as each is a member in good standing. This year membership could cost only \$300 with the twins and rebates, versus \$825 just a year ago. Member and non-member physicians ask what do I get for my money? Is the Board being fiscally responsible? I think the answer to both questions is obvious. In addition to twin membership, in conjunction with MSNJ membership, there are discounts on Epocrates, Verizon Wireless, Brooks Brothers, and programs with other companies for such things as legal advice. In addition, as Dr. Louie has already mentioned, MCMS has staged successful semi-annual meetings for physicians, which include an EMR/EHR fair, coding course, hospital IT updates and information about CHIEP, a physician based organization to provide volume discounts to purchase EMR.

This past year has been a roller coaster year- not only professionally but also personally. I started my own practice last July. Those who have done so know about the ups and downs, the highs and lows, the curves and loops that you experience. At established practices, you have experienced this as well. As a profession, we have been riding a roller coaster, too. The biggest hill to challenge has been Medicare and the cuts we face due to SGR. Instead of a permanent fix, Congress has kicked the can down the road monthly. As of now the cuts are on hold until next Monday. The House has passed a bill for extending the reimbursement schedule through 2011, with a 1.1 percent raise this year. We are still waiting for the Senate to vote on this bill. In 2012, we physicians would then face a 33-37% cut in reimbursement. Payment levels already are equal to 2001. President Obama's health care reform bill has taken front seat to fixing the Medicare funding and reimbursement schedule. By not addressing several other important factors in the cost of healthcare, besides SGR, the Administration has failed us as physicians, as patients, and as constituents. With the population aging, the cost of and need for Medicare is going to rise. However, without addressing SGR and altering Medicare reimbursement, physicians will start to drop out of Medicare, limiting access to care for our elderly and disabled. We physicians are a small business- a multi-thousand dollar company. While we often give patients discounted or free care, businesses cannot run at a loss, unlike the government. We have payrolls to meet, bills to pay, families to feed. Treating patients at a loss is unsustainable. Increasing volume does not work either as this will lead to bigger losses, as well as poorer quality of care. In addition, by not addressing tort reform at all, the administration again failed our patients and us. Trying to control costs without controlling defensive medicine is akin to closing one barn door while the other is still

open. Lack of tort reform leads to practicing defensive medicine. Defensive medicine costs range in the \$50-60 billion per year. At a MCMS BOT meeting with one of the State senators, a poll was taken of the members, who represented a wide spectrum of medical and surgical specialties. Each was asked what percent of tests ordered was purely for protection- the answers ranged from 20-60%. Not only testing was mentioned but referrals to specialists as well.

Part of this failure is our own fault- we as a profession as whole, do not step up to the plate to defend ourselves. When the NJEA or CWA or another union/group fights an issue, the legislature knows that 100% of the members are being represented. We are lucky if 20-30% of physicians are members and a significantly smaller percent is active. This is where political action comes into play. MCMS and our parent organization MSNJ, are apolitical but we need bipartisan support. Our support to the legislators comes in many forms but the loudest and strongest is political donations. Our PAC, MedAC lead by Dr. John Poole, does a great job. If every member donated 50 cents or a \$1/day, we would have over \$100,000 from our county alone. Multiply this across the State, and we would have over \$2 million to advance our causes and issues affecting our profession.

Daily we are bombarded by challenges medically. We do not need additional ones from the outside interference of insurance companies and state regulation. Our county BOT regularly meets with local state legislators to advance our causes. Last year, the Board met with Senator Joseph Vitale regarding bill S-2471, a bill that would prohibit payment to physicians from any insurance company for 'never events,' as defined by CMS. In addition

to the CMS mentioned events, the bill expanded the number of complications that would not be reimbursed. We successfully lobbied for physician exclusion, and furthermore, two of our member, Drs. Ted Louie and N. 'Bonki' Rao testified in Trenton against this bill. We have met about many other bills, including scope of practice and assignment of benefits legislation. We have won some of the battles and have lost others, though we are never defeated. My current focus this year is to fight S-1742/1743. These two bills place an onerous responsibility on physicians with regard to OON benefits. Another bill, but to support, is A-1982, sponsored by one of our own, Assemblyman Dr. Herb Conaway. This bill will significantly alter medical malpractice laws and the ability to raise liability premiums. It doesn't have the 'C-word', caps on non-economic damages, but does have a multitude of beneficial changes. The committee is having a hearing this Thursday at 9AM to hear comments. Anyone who is available is encouraged to attend in a white coat to show support for this bill.

Our semi-annual meetings and inaugural dinner are always successful due to membership support, but we cannot do it alone. I want to thank the sponsors of the program, whom without, we could not hold such elegant events- Lerner Assoc, NJ Pure, RWJUH, Argent Insurance, IWP, Primed Consulting and Varbeco Wealth Management, and Nixon Uniform and Medical Wear. I encourage everyone to consider supporting the people who support us.

In closing, again, I am honored to be inaugurated to be the leader of one of the most active and youngest county societies, one that continues to grow. MCMS has many member benefits but a society is only a function of its membership, not the other way around. As JFK said, 'ask not what your

country can do for you, but what you can do for your country.” I know that I am preaching to the choir at this dinner; however, I challenge each physician to recruit ONE non-member this year. Just one. Also, I encourage you to become a member of MedAC, our PAC, at a dollar/day, Capital Club levels, or any amount that you are comfortable with. (john poole is here- I am sure Dr. Poole would be glad to accept a check right now).

I am available to everyone for any reason. I can be reached by email at [urodoc@longcall.com](mailto:urodoc@longcall.com). I set up a Twitter account to update the membership on important and newsworthy events. So sign up for an account and search for MCMSprez. Start receiving your tweets today.

Thank you.