

Family Physicians of Oregon

VOL XXII • NO 1 • Fall 2017

2017 OAFP Membership Directory

Blue Zones Project

2017 Legislative Session in Hindsight



OREGON ACADEMY OF
FAMILY PHYSICIANS

MAKING HEALTH PRIMARY

THE OFFICIAL MAGAZINE OF THE
OREGON ACADEMY OF FAMILY PHYSICIANS



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Family Physicians of Oregon

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About the cover:

OAFP member Bill Origer captured the cover shot during a lovely fall day at Black Butte Ranch. Dr. Origer's first camera was a secondhand Nikon he received as a high school graduation present in 1965. Taking photos has always been a personal passion of Dr. Origer's and he enjoys capturing the infinite beauty of our world.



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● GREETINGS FROM THE OAFP



KERRY GONZALES, OAFP EXECUTIVE DIRECTOR

The mission of the OAFP is to support family physicians in their pursuit of optimal health for the people of Oregon. We take that mission seriously and have developed CME, legislative and regulatory strategies, and community-based campaigns to fulfill our mission. Our goal is to have our members view their membership as valuable, even critical, to their success.

Almost 80% of the family physicians in Oregon belong to the OAFP. That equates to a strong and unified voice with legislators, regulators, payers and the public. The guiding principle for any decision our Academy makes is “Will this improve the health of our patients?”

Our emphasis over the past year has been

to improve payment to primary care. As you know by now, we were successful in doing that in this last legislative session. With the passage of SB 934, commercial payers, CCOs, PEBB and OEBC are required to invest 12% of their total medical expenditure in primary care infrastructure by the year 2023. Those increased expenditures must be in value-based payments. The bill also requires that payers extend these enhanced payments to all Patient-Centered Primary Care Homes clinics, including pediatric clinics, Rural Health Clinics and Federally Qualified Health Centers. This is important because the federal Comprehensive Primary Care Plus (CPC+) program, in which most major insurers in Oregon participate, excludes those clinics.

As we work with the system to improve the climate for primary care, we are aware that clinics, doctors and care teams will need more than just increased payments. With the passage of this legislation, we can now use our time and resources to address some of the other problems clinics face. These include streamlining and aligning metrics; simplified reporting requirements; refining the attribution process and developing payment models that support primary care behavioral health integration.

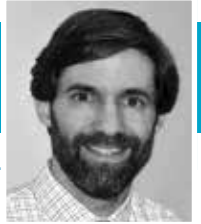
We know clinics will need technical assistance to be able to make the improvements required. There is a role for the OAFP in this and we are eager to help support our members. Please let us know what would be helpful for your clinic.

Sometimes it is hard to appreciate how far we have come in Oregon. All it takes is attending one national meeting where we hear what is going on around the country to realize that our incremental advances have accumulated into a major sea change that other states envy. There is a lot of interest among other state academies in our legislation, the payment reform collaborative, the PCPC program and our engagement with all parts of the health care system, including payers.

In addition to our legislative efforts, we have also been ramping up our CME opportunities. We provide discounted CME for our members highlighting the best practices for clinical care and for practice transformation. Our conferences provide workshops, small group sessions, panel discussions and peer to peer learning. In addition, our conferences provide a unique setting for networking and fellowship with family doctors from around the state, health care leaders in Oregon and beyond, and our future doctors -- students and residents.

The OAFP is blessed with an amazing board of directors who come from all across the state and represent a wide variety of practice types. They are all expected to represent not only themselves but to give voice to their colleagues. Please reach out to the OAFP or any of our board members to let us know what you need and how the OAFP's advocacy, educational and leadership programs can enhance your efforts.

I would like to thank each of you for your continued support of the OAFP. By continuing your membership, you confirm to us that your membership is valuable to you. To get the most out of your OAFP membership, please open our e-mails when they show up in your inbox (it isn't too often, I promise) and please contact us when you have a suggestion or concern. I look forward to hearing from you at 503-528-0961.



DAN PAULSON, MD

Success and Challenge

I find it interesting that success is often followed by a new challenge. I am getting used to this, however, as I think many of us in medicine are. We graduate from college and move on to the challenges of medical school. This is immediately followed by residency internship and its long hours of work. Finish residency and you are greeted by your first year in practice and another steep learning curve. For as much as I can see this pattern in my own professional life, I am also starting to see it being repeated in the lives of organizations such as my own clinic and the OAFP.

The OAFP had a major legislative success this year with the passing of Senate Bill 934, the Primary Care Payment Reform bill. While I think it is good for all of us to celebrate this success, I think that this has also set the stage for the next major challenge for the Academy.

Primary care has been and remains underfunded and undervalued, and it has long been an objective of the OAFP and AAFP to change this. Mostly we have been able to make tweaks around the edges of a poorly designed system but SB 934 has the potential to make a more substantial shift in our payment structure. Research has shown that a high functioning, high quality health care system typically spends 12-15 % (or more) of all health dollars on primary care. We know that primary care funding in Oregon and the United States falls well short of this. By requiring an increased percentage of health care dollars to be spent on primary care services, SB 934 could change this and subsequently result in improved health care in Oregon.

For those clinics that are farther along the path of transformation, our challenge will be to show that the changes we have made and additional services we offer really do result in higher quality care for our patients and lower costs for the payers.

The success of passing this bill actually starts back in the 2015 legislative session. That year the passing of SB 231 accomplished two things: 1) All major insurance carriers in the state are now required to report annually the percent of their spending on primary care. We now have more detailed information about the level of spending on primary care which ranges from 4% to 14 % with an average of 7-8% of all health care dollars being spent on primary care; and 2) SB 231 directed the Oregon Health Authority to convene a multi-stakeholder Primary Care Payment Reform Collaborative consisting of insurance carriers, medical groups, such as the OAFP, and patient advocates. This group met throughout 2016 to discuss the challenges facing primary care transformation. The OAFP was represented on this committee by **Glenn Rodriguez, MD** and **Elizabeth Powers, MD**. OAFP Executive Director **Kerry Gonzalez**, lobbyist Sam Barber and **Katie Kolonic, DO** also provided support. The efforts of the committee helped to create the trust and understanding between payers and primary care that enabled the passage of SB 934.

In 2017, SB 934 received unanimous support in both the house and the senate.

Passing a bill without dissent is difficult and much of the credit goes to our lobbyist Sam Barber. Sam was able to talk to health committee members together with OAFP representatives prior to committee votes to explain the purpose of the bill and answer the questions of legislators. This gave the bill crucial support prior to any legislative hearings. Credit also goes to **Senator Elizabeth Steiner Hayward, MD** as the bill's primary sponsor.

SB 934 requires that all major commercial insurance carriers increase their primary spend by 1% per year starting in 2018 until they reach a total of 12%. In addition, these additional funds are intended to come as enhanced or alternative payments such as Per Member Per Month (PMPM) case management fees and payments for meeting quality metrics. In this way, these funds are similar to the value-based payments that are available through the Comprehensive Primary Care Initiative (PCP+) but with one important distinction – the funds are available to all primary care clinics including Federally Qualified Health Centers (FQHCs), rural health clinics and pediatrics, all of which were excluded from CPC+.

This then lays out the next challenge for the OAFP. We have successfully mandated increased funding for primary care based on the premise that we could deliver higher quality health care as a result. This work is off to a good start in Oregon. The Patient-Centered Primary Care Home (PCPCH) program has been in place for over five years and has been a big success with over 600 clinics throughout the state that have attested to these standards. This work will continue as clinics can now strive to achieve four and five star status by meeting higher standards. We also have about 160 clinics participating in the CPC+ program, up from the original 65 clinics that participated in the first phase of this program. Both of these programs are spurring transformation in primary care throughout the state.

But even with these achievements, we still need to do more. For those clinics that have not yet embraced transformation, there will now be more financial incentives available to invest in clinic changes and

the additional staff needed to change. To assist with this, there is the Patient-Centered Primary Care Institute (<http://www.pccpi.org>) which offers resources and courses to help clinics in the transformation process. The OAFP also offers resources to members and intends to include sessions on transformation and value-based payment models at our Spring Assembly in Portland in April. The OAFP may also be able to connect clinics with other sources of information or other clinics in their area that have already participated in CPC+ or PCPCH.

For those clinics that are farther along the path of transformation, our challenge will be to show that the changes we have made and additional services we offer really do result in higher quality care for our patients and lower costs for the payers. Many of us have seen the benefits of integrating behavioral health in our clinics, making these services much more accessible to patients. We know the value of care management services for complex patients

and hospital discharge coordinators who can help reduce the rate of ER visits and re-hospitalizations. Diabetic care can be better coordinated when the diabetic educator is interacting with a family physician on a daily basis. We know intuitively that these ideas work to improve care for our patients, but do we have hard data to present to payers? SB 934 will help hold payers more accountable for investments in primary care but we also have to show that we are responsible stewards of these investments. Some of this needs to be outcomes based data that demonstrates that our patients and communities are healthier and that overall costs are lower.

This is the challenge for the OAFP over the next few years. We have won additional investment in primary care but we need to show that this investment really can improve the quality of the care that our communities receive. I believe that we can do this and in many ways we already are doing it.

● FROM THE HILL



JENNIFER DEVOE, MD, DPHIL, CHAIR OF OHSU FAMILY MEDICINE DEPARTMENT IN COLLABORATION WITH SONJA LIKUMAHUWA-ACKMAN, MID, MPH AND BRIAN PARK, MD, MPH

Starfield Summit II: Expanding Primary Care's Role in Achieving Health Equity

“In its most highly developed form, primary care is the point of entry into the health services system and the locus of responsibility for organizing care for patients and populations over time. There is a universally held belief that the substance of primary care is essentially simple. Nothing could be further from the truth.”

— Barbara Starfield, MD, MPH

Barbara Starfield (1932-2011), a physician and health services researcher, is internationally known for her work in advancing primary care, and her books are widely recognized as seminal works in the field.^{1,2} Dr. Starfield's work demonstrated that countries and areas with health systems with strong primary care foundations have improved population health outcomes, higher quality of care, and lower costs.^{3,4,5,6,7} At the turn of the century, Dr. Starfield's focus shifted towards health equity, with her research demonstrating that primary care-oriented countries demonstrated improved health inequities.^{8,9,10,11} She was the co-founder and first president of the International Society for Equity in Health (<http://www.iseqh.org/>), a scientific organization devoted to dissemination of knowledge about the determinants of inequity in health and ways to eliminate them.

In 2016, in an effort to honor and advance Dr. Starfield's legacy, several primary care organizations created the Starfield Summit (<http://www.starfieldsummit.com/>).¹² The Summit is an ongoing series of

meetings providing a unique opportunity for reflection and action amongst a diverse, interprofessional, international, cross-generational group of leaders in primary care. The Summit aims to galvanize its participants, generate important discussion for public consumption, and enable research and policy agenda-setting, supporting the primary care function as an essential catalyst in health system reform. Furthermore, the Summit embraces the principles of implementation science, a discipline promoting the integration of research into policy and practice.^{13,14}

OHSU's Department of Family Medicine was thrilled to co-sponsor and co-host the second Starfield Summit in Portland, Oregon on April 23-26, alongside OCHIN, Family Medicine for America's Health, the American Board of Family Medicine Foundation, the North American Primary Care Research Group, and the Pisacano Leadership Foundation. Nearly 200 national and international primary care experts convened to discuss the role of primary care in achieving health equity across three domains: social determinants of health in primary care, vulnerable populations, and economics and policy. The goals of Starfield II were to: (1) Bring together thought leaders, experts in primary care and health disparities, and other community members to create collaborative partnerships to eliminate health disparities; (2) Engage in strategic discussions and propose a future agenda for tangible ways in which we can bolster primary care education and research efforts to eliminate disparities and achieve equity; and (3) Serve as a catalyst for action and to create a coordinated network that taps into the strength of existing partnerships and creates new coalitions and collaborations as needed.

OHSU Family Medicine was honored to partner with several primary care organizations to plan, implement, and host the Starfield Summit. Several of our faculty, residents, and students served on teams that helped make this event successful, and we continue working on disseminating conference proceedings and developing future action

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plans to continue this important work that honors Barbara Starfield's legacy. Erika Cottrell, PhD, MPP; Sonja Likamahua-Ackman, MID, MPH; and **Jen DeVoe, MD, DPhil**, served on the Summit leadership team. Khaya Clark, PhD; Katie Dambrun, MPH; Melinda Davis, PhD; Brian Frank, MD; Leah Gordon, MPH; **Brigit Hatch, MD, MPH**; John Heintzman, MD, MPH; Carly Hood, MPA, MPH; Betty Izumi, PhD, MPH, RD; **Brian Park, MD, MPH**; and Lewis Raynor, PhD, MPH, MS, served on a stellar team who took detailed notes of all proceedings and reported back key messages during keynote sessions. The department also offered several scholarships for OHSU medical students and residents; we were delighted that approximately 60 students and residents attended the Summit.

The Summit emphasized numerous health equity "bright spots" from around the world. We were incredibly proud that participants highlighted many shining examples from Oregon. To give just a few examples: **Senator Elizabeth Steiner-Hayward, MD** spoke about the work of the Oregon Academy of Family Physicians, Oregon's coordinated care organizations, and other organizations collaborating in Oregon to reduce health disparities; Craig Hostetler spoke about the Oregon Primary Care Association's work on alternative payment methodologies and how to pay for equitable care; OCHIN's work on bringing social determinants data into the clinical setting was profiled; and the Multnomah County Equity Framework was used as an example of how an institution moves beyond social responsibility and toward social accountability in order to deliberately apply an equity lens to every decision.

Although bringing experts together can be inspiring and educational, it is vital for our communities to move from discussion and reflection, and towards action. OHSU Family Medicine has already been implementing the Starfield vision in several arenas. We are proud of our work in training and empowering the primary care workforce to act conscientiously and proactively to address health equity. Four examples of newly developed interprofessional programs, across various levels of workforce training, include:

- **Population Health Curriculum:** The OHSU Family Medicine residency provides an innovative population health curriculum for all fourth-year residents, training residents to become effective population health leaders through advocacy, community engagement, and community organizing. Over the past two years, residency classes have created community action opportunities addressing affordable housing and food insecurity. This successful program is now in its third year.
- **Health Equity Book Club:** Developed by Family Medicine residents in response to the need for public discourse about ongoing racial justice issues in the country, the book club has become a cross-generational space to discuss personal and professional experiences with the social determinants of equity. This program will be presented at an upcoming Behavioral Health Forum sponsored by the Society of Teachers of Family Medicine.

- **The Relational Leadership Institute (RLI):** This leadership learning collaborative brings together a diverse group of primary care health professionals from different stages of practice and training to cultivate critical relational leadership practices – including teaming, resilience, and change management – to advance their clinical innovation work. By emphasizing the "who" and the "why," as much as the "what" and the "how" of clinical change, the RLI aims to harness the power of narrative and relationships to advance equity. Developed by Primary Care Progress (<http://www.primarycareprogress.org>) and led by Department faculty and residents, the OHSU Department of Family Medicine will be sponsoring the next iteration of this program in the fall.
- **Medical Student Curriculum:** In response to rising demand and continued health inequities, the OHSU family medicine required medical student rotation now includes a transgender health workshop to enable all future physicians to have, and practice, a basic knowledge of LGBTQI health care, address the disparities, and ensure a welcoming environment for the future of health care. Additionally, a team of OHSU medical students created a course in structural competency, which re-orientes medical education from a strict clinical focus towards an inclusion of structural determinants that impact health, wellness, and the health care system itself. This course was implemented into the medical school curriculum in 2014 and continues to grow each year.

In addition to the educational examples highlighted here, we are fortunate that similarly innovative programs aimed at narrowing health inequities exist in the clinical and research arms of our Department, as well. Despite these efforts, significant work remains to narrow health inequities within our communities. This year's Summit was a potent reminder of the need to build on Dr. Starfield's legacy by embracing the critical role of primary care in achieving health equity. In light of the recent violent acts and discriminatory discourse occurring in Portland, Charlottesville, and other places around the world, it is vitally important that we recommit to supporting each other and seeking opportunities to speak up on behalf of equity and inclusion. We continue to be inspired by the pioneering work being done across Oregon and have renewed our passion to support, nurture, and expand on these efforts in the future.

Footnotes

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Blue Zones Project

Cause and Effect

In the summer issue of the *Family Physicians of Oregon*, members were introduced to the Blue Zones Project, an innovative, systematic, environmental approach to well-being that optimizes policy, urban design and social networks and in turn, significantly improves community health and lowers health care costs. (For more details on Blue Zones, check out author Dan Buettner’s TED talk on the Power 9 – www.presentationzen.com/presentationzen/2013/05/presentation-9.)

Klamath Falls was chosen as Oregon’s first Blue Zones demonstration community and Grants Pass, The Dalles and the Umpqua Region recently joined over 40 other Blue Zones Project communities across the country on their quest for better overall health.

To find out more about the “why?” of Blue Zones, *Family Physicians of Oregon* interviewed a number of people directly involved with the Klamath Falls project: Katherine Pope, RN, MPH, Program Director of Live Young Sky Lakes Wellness Center and one of the rallying forces behind Klamath Falls being chosen as a demonstration community; **Glenn Gailis, MD**, family physician working at Live Young SkyLakes Wellness Center and a stalwart proponent of Blue Zones; and Jessie DuBose, Blue Zones Project Community Program Manager.

Klamath Falls health providers knew what they were up against regarding the state of their community: according to 2014 public health data, Klamath County ranked 33rd out of 36 among Oregon counties in regards to overall health outcomes based on how long people live and how healthy people feel while alive. In addition, the county was ranked 23rd of 36 in overall health factors, which is based on health behaviors, clinical care, social and economic factors and the physical environment of the county.¹

In 2013, community health providers and SkyLakes Medical Center, led by Pope and the late Stephanie Van Dyke, MD, MPH, partnered with schools, local government, DHS, local providers, tribal leaders, their CCO, and the local newspaper among others to enhance the Healthy Klamath Coalition which was originally launched in 2011 and try and make a more positive dent in those statistics. They felt that transforming the health of their community could serve as a launching point for building momentum to be able to tackle broader social determinants of health facing the county.

In the fall of the following year, Pope and Van Dyke organized a group of community stakeholders to travel to Portland to learn about the Oregon Healthiest State initiative. Oregon Healthiest State and Cambia Health Foundation partnered with the Blue Zones Project to bring the program to Oregon communities. Pope and Van Dyke were hoping to be chosen as a demonstration community and knew the

decision would be based on both the need for improvement (a given) and the enthusiasm and community support for implementing the project (27 community members with matching t-shirts definitely made a statement that day!)



Twenty-seven community members with matching t-shirts attended the Oregon Healthiest State initiative launch and caught the attention of Blue Zone leaders.

In the spring of 2015, the Blue Zones Project team arrived in Klamath Falls to assess the interest, readiness and opportunities for success to undertake their community transformation initiative. And in July of 2015 Klamath Falls officially became a Blue Zones Project community. According to Gailis, “Without the groundwork from Dr. Van Dyke and Ms. Pope, Blue Zones would never have become a reality in Klamath Falls.”

As part of the initial readiness assessment in Klamath Falls, the Blue Zones team noted the following strengths and challenges:

<i>Strengths:</i>	<i>Challenges:</i>
• Community involvement	• Lack of safe routes to school for students to walk or bike
• World class sports and recreation facilities	• Short growing season for local produce
• Extensive trail systems	• High number of fast food restaurants
• Openness to work together to tackle problem	• Lack of trail connectivity
• Active farmers market and food banks	• Youth access to tobacco
• Engaged young professionals	• Lack of gardening and cooking skills
	• Reaching diverse or more rural citizens

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In addition, the local, boots-on-the-ground Blue Zones Project team worked with various leadership groups across community sectors to come up with a recommendation report that includes specific priorities, action items, and measure success of the projects. Listed below are some of the priority outcome goals for Klamath Falls:

- Improve well-being, as measured by the Gallup-Sharecare Well-Being Index
- Generate significant medical cost savings and productivity improvement
- Lowering the obesity rate
- Lowering smoking rates
- Increasing vegetable consumption
- Increasing daily physical activity levels

Jessie DuBose said her team works on promoting healthier policy, places and people. And not just in doctors' offices. "The places include restaurants, grocery stores, work sites, schools and faith-based organizations," DuBose said. "We have a pledge menu for each of those places to make it healthier."

Dr. Gailis understands that the community has a long way to go towards improving community health but is encouraged by the significant number of Klamath Falls citizens that are making an attempt to change. "We have a large number of walking groups, with friendly walking competitions; several workplaces now compete in walking and exercise groups; and the menu choices at Blue Zone approved restaurants as well as the Sky Lakes Medical Center cafeteria has changed dramatically. We have also seen individuals at the Wellness Center who have lost weight and been able to reduce or eliminate some medications." As a community, they have vowed not to give up on this endeavor.

According to Gailis, "In my 40 years as a physician in Klamath Falls, this effort (the Blue Zones Project and the Wellness Center) is the most exciting preventive health initiative I have ever seen. It is actually trying to do something about prevention and not just talking about the fact that we need to do something. It is really about making the healthy choice the easy choice and about mindful eating and exercise."

During the 36-month Phase I period, Blue Zones Project-Klamath Falls plans to impact more than 40 institutions and organizations, gain commitments to improve well-being from over 6,000 residents, and influence nearly two dozen community policies and projects optimizing the physical environment for better health. Once the community has met outlined goals and inspired lasting opportunities for people to live longer and better, Klamath Falls will become a Blue Zones Certified Community.



Dan Buettner explaining how implementing Blue Zone principles can change the health of communities.

In just 24 months, Blue Zones Project-Klamath Falls has already shown substantial success:

- Two approved worksites and schools, and 26 others actively implementing well-being efforts, impacting over 7,000 adults and kids daily.
- Over 3,000 people have signed a commitment to improve their well-being, implementing over 15,000 lifestyles changes.
- Six hundred plus people articulating their purpose and gifts, in total adding 4,375 years to the lives of Klamath Falls residents.
- Twenty-eight approved restaurants, grocery stores, corner stores, civic organizations and faith-based institutions adopting over 250 well-being improvements.
- Multiple plans and capital improvements to increase walkability, bike ability, safety and encourage natural movement throughout the day.
- Programs creating increased access to fruits and vegetables to those in poverty.
- Retail licensure enacted to curb youth smoking rates and 150 additional acres of smoke-free outdoor spaces added.

The goal is to become a Blue Zones Certified community by September of 2018. At that time Blue Zones Project will make a shift in their work model to focus on sustaining the community initiative and continuing the progress. This new model will likely include continued ability to work with organizations and individuals across the community, access to Blue Zones Project well-being tools and resources, and ongoing regularity of the community-specific oversample of the Gallup-Sharecare Well-being Index. This model will enable the community to continue to seek re-certification as a Blue Zones Certified Community every three years.

Email bluezonesprojectklamathfalls@sharecare.com to learn more about Blue Zones Project in Klamath Falls.

1 2014 County Health Rankings. Retrieved from www.countyhealthrankings.org

Life Altering Visit to Japan



BY BRIANNA MULLER, MS4, OAFP STUDENT DIRECTOR



Ryan Palmer, EdD and I on the roof at a Tokyo hospital. They have a rooftop garden for patients to tend to while they are in the hospital.

Last May I had the privilege of representing OHSU's Family Medicine Interest Group (FMIG) in Japan. Historically, Japan has not had a primary care infrastructure in the way that some other countries do. Patients go directly to specialists for care and doctors who work as generalists, in what we would consider primary care, are often retired specialists who have not completed a generalist residency.

However, over the last several years, there has been increasing momentum, seemingly grassroots, led by pioneering physicians and organizations such as JADEC (Japanese Association for the Development of Community Medicine), with whom OHSU Family Medicine partners on an International Residency Exchange Program, to promote the specialty of family medicine and highlight the role that it can play in an evolving health care landscape.

With a growing elderly population, Japan is grappling with how to make their health care system more sustainable; a robust primary care infrastructure seems to be one of the solutions. Several family medicine residencies have sprung up and the trainees and physicians truly are defining a relatively new specialty in Japan. There are some similarities to the U.S. in that many medical students have limited exposure to family medicine, especially given how new the specialty is. The

number informally cited to me by several physicians was that 2-3% of graduating medical students entered family Medical School. However, there are physicians, such as Dr. Yoshimura, who are working diligently to change this.

In an effort to encourage exposure to family medicine, Dr. Yoshimura and the students at the University of Miyazaki Medical School have created their own Family Medicine Interest Group. **Rita Aulie, MD**, now a resident in Klamath Falls, headed to Japan last year to help kickoff the Family Medicine Interest Group. This year, we returned to exchange ideas, share what we are doing at OHSU, and learn more about primary care in Japan. Dr. Yoshimura, a family physician, is exposing medical students to family medicine in unparalleled ways. Students there typically do not have any sort of clinical experience in the first few pre-clinical years. However, Dr. Yoshimura encourages medical students to shadow him during this time. He was one of the only physicians at the medical school who was doing this, and it was very well received.



Ryan Palmer, EdD and I at dinner our final night with Dr. Yoshimura.

In order to learn more about how OHSU exposes students to family medicine, Ryan Palmer, EdD, former Director of Curriculum Evaluation & Development in the OHSU Family Medicine Department, gave several presentations to various audiences, including a group at the annual conference of the Japanese Primary Care Association, about the pedagogical model designed by him and used by OHSU's FMIG. As a former FMIG co-leader, I shared the student experience of this model, reviewing the various types of events that we plan and execute and tactics that we find to be successful.

In addition to these formal presentations, we discussed family medicine and primary care over many wonderful meals with students, residents and attending family physicians. I was so inspired by the people I met, hearing about what drew them to primary care. Every day was more wonderful than the

previous; full of exploration, learning and rich discussion. We were shown such wonderful hospitality by Dr. Yoshimura and the rest of the JADECOM team; at times it left me speechless. I could not have asked for a more rewarding week. I was struck by the thoughtfulness of everyone we interacted with; at every meal, each person would stand up and say a few words. Sometimes it was why they chose primary care, other times it was what they had enjoyed from our shared meal and conversation. Regardless of the topic, I was so moved by how sincere and reflective everyone was.



At a home visit with Dr. Kirigaya.



Facilitating a problem-based learning session with medical students at the University of Miyazaki, which was different than their typical didactic work.

There are many memories that I will never forget from the trip. One of them occurred on an afternoon full of home visits with one of the physicians working in a small town in southern Japan. I sat silently in a nursing facility, witnessing a home visit between this family physician and a terminally ill elderly man. After the usual proceedings of a blood pressure check and cardiac auscultation, the elderly man began to speak at length. Words I did not understand swirled around in the air; I studied facial expressions in an attempt to comprehend the interaction unfolding in front of me, a sheepish smile creeping across the doctor's face as he shifted his gaze towards the floor. The nurse we were with leaned over to me and whispered, "He is expressing gratitude for the care that the doctor has provided him through his illness." At this point, interpretation was not necessary; the depth of this man's gratitude for the physician was palpable.

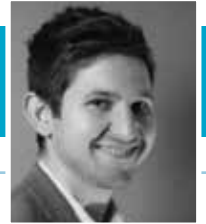
In this moment, I was reminded of the profound privilege that family physicians have as they accompany people through some of the biggest moments of their lives, including birth, death and everything in between. So many of the experiences we had demonstrated the universality of the tremendous gift that being a family physician is; we get to learn so much about what it means to be human from our patients. My experiences in Japan made me grateful that I am about to enter not just a career, but a vocation. I hope to continue to discuss the value of family medicine in a more reflective, intentional way with my American peers while also continuing to share these ideas with our close friends in Japan and am eager to watch this dedicated group of primary care physicians, residents and students revolutionize health care in Japan.

SAVE THE DATE

For more information, contact Kerry Gonzales at the
Oregon Academy of Family Physicians
www.oafp.org • (503) 528-0961 • Fax (503) 528-0996

71ST ANNUAL SPRING FAMILY MEDICINE WEEKEND & ORPRN CONVOCATION

Scientific Assembly & Congress, April 12 -14, 2018
OAFP/Foundation Auction, April 13
Embassy Suites Hotel Downtown Portland



SAM BARBER, OAFP LOBBYIST

2017 Session in Hindsight

Despite a large budget gap to start the 2017 legislative session—which included the threat of losing funding for Oregon’s Medicaid expansion population—lawmakers were ultimately able to turn lemons into lemonade. In addition to bills like SB 934, the primary care payment reform bill that promises to substantially increase the total investment in primary care, legislators were able to pass a handful of health care bills that could have a dramatic effect on primary care and public health in Oregon.

HB 2391 – The Provider Tax Bill

In order to pay for the Medicaid expansion population, legislators passed HB 2391. This bill generates revenue through a tax increase on hospitals and new taxes on commercial insurers and CCOs.

Hospitals agreed to the plan, even though the bill would extend and increase an existing tax on large hospitals’ revenues and add a new tax on small, rural hospitals.

Commercial insurance carriers, with the exception of Cambia, also supported the plan. Cambia believes the tax structure isn’t equitable since self-insured plans are exempted. Many of the states largest employers (such as Intel and Nike) are self-insured.

State Rep. Julie Parrish (R-West Linn) is leading an effort to refer one of these new taxes — a 1.5% tax on commercial

insurance plans — to voters as she argued the tax will be passed through to consumers, school districts and small businesses. If the necessary signatures are collected, the special election will take place January 23, 2018. If voters reject those taxes, legislators will have to determine how to fill that budget hole during the February 2018 short session.

Pat Allen, newly appointed acting director of the Oregon Health Authority and former director of the Department of Consumer and Business Services, says the tax on insurers will be partially offset by a new reinsurance plan for the individual market. Allen says, “The reinsurance plan is expected to reduce rates in the individual market by 4.9%. There is also a psychological benefit to reinsurance. The reinsurance plan will increase carrier confidence in the individual market, which enhances their willingness to participate in the market.” Carriers are expected to pass through the 1.5% insurance tax to small and large groups.

SB 754 – Tobacco 21

With the passage of SB 754, Oregon became the fifth state to increase the legal age to purchase tobacco and nicotine products from 18 to 21 years old. “I can’t think of another bill we’ve passed that will have as big an impact on people’s health in the state” says **Sen. Elizabeth Steiner Hayward, MD (D-NW**

Portland/Beaverton). Members may remember that we passed a resolution supporting this bill at the 2017 Congress of Members during the OAFP’s Annual Spring Family Medicine Weekend.

HB 3261 – Health Care Provider Incentives

The other major win for primary care this session was the passage of HB 3261 which develops a new system for workforce incentives and training programs. Currently, Oregon suffers from an inadequate health care workforce in rural and other underserved parts of the state. We need to take advantage of incentives to recruit, retain and train enough health care professionals to meet the needs throughout the state. The Oregon Health Policy Board’s Workforce Committee, in collaboration with OHSU’s Office of Rural Health, will make policy recommendations about workforce incentives and training programs to the legislature every two years.

“This system with new financial support from OHSU’s intergovernmental transfer will let us develop new residency programs,” says Steiner Hayward, referring to the agreement OHSU struck with the state. This agreement allows OHSU to provide a payment in lieu of taxes, equivalent to the hospital tax, which is more flexible in how it may be used. “We know that

we graduate more primary care providers than we have training slots in the state. We also know that the vast majority of people practice within 50-70 miles from where they trained. My hope is that 15 years from now we will have enough training slots that every primary care provider, general surgeon and obstetrician that wants to train in Oregon will be able to.”

At this time, incentive programs include loan repayment, loan forgiveness, insurance subsidies, the Scholars for a Healthy Oregon Initiative and the Rural Practitioner Tax Credit. At roughly \$14 million a biennium, the tax credit is by far the most expensive incentive program on the books and legislative support for the credit has weakened. Originally set to sunset at the end of 2017 by the Joint Tax Credits Committee, only a grassroots campaign and a full-court press by provider association lobbyists were able to save the credit in a scaled down version that capped recipients income at \$300k (with exceptions for general surgeons and OB providers) and established a 10-year lifetime limit beginning in 2018. While the legislature will continue to consider tax credits separately from the other incentive programs, the Workforce Committee will assess the effectiveness of the credit as well, and make recommendations to the legislature on how it might be better utilized for retention, or if there are other more cost effective incentives to retain providers in rural areas. As Steiner Hayward put it, “I think we need to look really hard at our existing programs including the credit, and that every person who receives the credit needs to be part of the solution. Does the \$5,000 (the tax credit varies from \$3,000 to \$5,000 depending on distance from large population centers) really do anything? Should it be more targeted?”

HB 3261 reflects the next step in addressing the shortages of health care providers in Oregon with a more flexible, efficient system of support that is sustainable over the long run.

STUDENTS SPEAK OUT!

Stories from OHSU students involved in the Family Medicine Interest Group (FMIG)

BY GREGGORY DALLAS, ROSE CHUONG, EMMA FELZIEN & BRETT LEWIS, CO-CHAIRS, OHSU FMIG

It has been a banner year for OHSU FMIG. In July, we were recognized by the American Academy of Family Physicians as an FMIG Program of Excellence. Our delegates to the AAFP National Conference for Residents and Students, held in Kansas City, were thrilled to accept the award and to connect with other FMIG members from around the country. We're proud of our work at OHSU and are happy to be part of an FMIG family that extends through clerkships and beyond. In particular, the AAFP highlighted our programs that emphasize early, meaningful and longitudinal exposures to family medicine, along with residency preparedness and career advising. OHSU FMIG was also recognized for our student-led initiatives, leadership opportunities and community outreach work.



OHSU FMIG members accept an FMIG Program of Excellence award at the 2017 AAFP National Conference.

We're fortunate to receive excellent support from the family medicine department here at OHSU. We owe big thanks to administrators Peggy O'Neill and Rachel Faino and faculty liaison **Rebecca Cantone, MD** who make so many of our events possible. Previous FMIG leaders and upperclassmen continue to feel well-supported by our administration throughout their medical careers.

Meanwhile, in Portland, we were busy with other activities, including a popular workshop about circumcision techniques led by **Ben Schneider, MD** and **Mustafa Alavi, MD**. Eighteen first- and second-year students practiced a variety of circumcision techniques and learned about the risks and benefits of each. Both doctors recommended the Gomco clamp and they taught step-by-step instructions for how to use the instruments and interact with patients during the procedure. Our practice models were baby pacifiers dressed in latex glove fingertips; they worked great! This hands-on experience brought us all one step closer to being "Family Medicine ready."



Dr. Alavi demonstrates proper technique with clasps and forceps.



Students simulate the circumcision technique with baby pacifiers and latex gloves.

In August, we also welcomed a new crop of medical students to OHSU, and to FMIG. Nearly 25% of the incoming class has indicated interest in family medicine. We're putting together a wide range of events for everyone from die-hard family med folks to students who are just curious. We'll kick off the school year by hosting an evening with OHSU and community physicians, follow up with an encouraging exploration of the financial realities for primary care providers, and then dive into hands-on workshops about everything from managing concussions to using food as medicine. We also look forward to partnering with the Latino Medical Students Association for a discussion about primary care for migrant populations. And, we'll be recruiting a new crew of FMIG leaders from the Med 2021 class to take the reins, as we move into our clinical training.



Welcoming new students to OHSU FMIG! We're looking forward to a great year.

Family Medicine + You: 2017 AAFP National Conference of Family Medicine Residents and Students

MARGO ROEMELING, MS4

Each year, medical students and residents from across the country gather in Kansas City, Missouri for a weekend full of learning, sight-seeing, delicious barbecue, and passion for family medicine. This year, I was fortunate enough to attend the conference alongside 15 of my incredible classmates, many of whom will be applying to family medicine residency this fall.

When planning our trip, we knew that splitting housing costs would be in our best interest especially with interview season looming. So upon our arrival to Kansas City on July 26th, nine of us packed into a beautiful, historic Kansas City home sitting on the border of Kansas and Missouri. We shared rooms, couches, stories, and many laughs; we even overcame the considerable challenge of having only one bathroom.

Our first day of the conference was full of interesting workshops with engaging speakers. My classmates and I were able to attend a variety of different sessions including clinical skills, storytelling and poetry, LGBTQ health, cultural competency, health policy, career planning, and research. With such a wide array of talks we were each able to cater our day towards our individual passions and interests.

The following day, we dedicated most of our time and energy to the main event: the exposition hall. The expo hall is an enormous room filled with rows and rows of residency booths organized by state. The booths are staffed by residents and faculty from the programs and are each decorated with photos and displays showcasing the awesome landscapes, activities, and people that make up their residency program. Once we got over our shock upon seeing the hundreds of residency booths, we split off to explore. The organization of the booths by region allowed us to efficiently visit programs we were interested in and find new ones as well. By the end of day two, our minds were filled with options and our pockets filled with pens, candy, and brochures.

To give ourselves a much-needed mental break, we set out to enjoy the nightlife that Kansas City had to offer. We were lucky enough to wander upon an 80's cover band playing in one of K.C.'s most popular downtown hotspots, the Power and Light District. We sang along to some of our favorite oldies with the great company of our OHSU residents then made our way home to get some rest for our last conference day.

On our final day in Kansas City, we made one last round through the expo hall getting

every bit of information possible before the booths came down. After saying our goodbyes to the wonderful staff and residents that we met over the weekend, we had only one more goal to achieve: locate and devour some original K.C. barbecue.

To get the best barbecue experience, we asked locals where we could find the most authentic food in town. The answer was nearly unanimous: Arthur Bryant's Barbecue. When we arrived, the line was nearly out the door. But the meat was well worth the wait. Once we had stuffed ourselves to our breaking point, we piled in one last cab and made our way to the airport for the journey home.

The AAFP National Conference was an incredible experience and gave me so many memories that I'll treasure for years to come. On behalf of all of the students who attended this year's conference, we are deeply grateful to the OAFP/Foundation, OHSU Family Medicine Department and staff, the OHSU Foundation, and all those who made this opportunity possible for us. I would encourage anyone who is interested in family medicine to attend the AAFP National Conference. The conference not only provides exceptional learning and meet-and-greet opportunities, but it shows you the true passion and power of family medicine.



Margo Roemeling and Jay Ruby attending their first National Conference.



Nate Andrews, Margo Roemeling, Peter Engdall, Emily Harvey and Alex Polston getting their fill of Kansas City barbecue!



Oregon family medicine faculty, residents and students enjoying the Kansas City cuisine.



OHSU Cascades East faculty and residents representing their residency program at the expo center.

Say Hello to our New Family Medicine Interns

Thirty-eight interns from around the country arrived in Portland, Milwaukie, Klamath Falls and Corvallis this summer to begin their family medicine residency training programs. Welcome to Oregon!

The residency program at OHSU - Portland is a four-year program, the Providence Oregon residency program is in its fifth year of offering a rural training program in Hood River, Samaritan Health Services is an osteopathic program and OHSU - Cascades East is in its third year of admitting students from the Oregon FIRST program.



Brittany Alloway, DO

Samaritan Health Services

Western University of Health Sciences College of Osteopathic Medicine of the Pacific-Northwest, Lebanon, OR

Dr. Alloway earned her BS degree in Biology at Oregon State University. The desire to form long-term relationships with her patients and the diversity of the specialty drew her to family medicine. She is interested in full-spectrum, outpatient family medicine with an emphasis on obstetrics and dermatology. When she is not at work you will find her volunteering in her children's classrooms and sports teams and spending time with her husband.



Rita Aulie, MD

OHSU - Cascades East

Oregon Health & Science University, Portland, OR

Dr. Aulie earned a degree in biochemistry at the University of Oregon. Her desire to fill the need for family doctors in rural Oregon began during her pre-med experiences where she observed inspiring doctor-patient relationships in Burns, John Day and Hood River. She spent her last year of medical school at Cascades East as an Oregon FIRST student and is looking forward to spending more time finding her niche in Klamath Falls. Outside of medicine, she enjoys sewing, singing, painting and gardening.



Cathleen Bruner, DO

Samaritan Health Services

A.T. Still University, Mesa, AZ

Dr. Bruner earned a BS in Biology at the University of Tampa. She's interested in practicing full-spectrum family medicine in a rural community with special interests in women's health and osteopathic manipulation. In her free time she enjoys reading, painting, drawing, camping and spending time with her husband and four children.



Carly Chambers, MD

Providence Hood River Rural Training Program

Oregon Health & Science University, Portland, OR

Dr. Chambers earned a degree in Neuroscience and worked as an EMT for three years while at Brigham Young University. She feels that a career in family medicine provides her the best opportunity to use and further develop her strengths of empathy and communication while offering opportunities to continue her teaching skills. She has lived in four countries, enjoys discovering other cultures, and speaks Italian and Spanish. She likes hiking the mountains in the Gorge, running both individually and competitively, skiing and trying new local restaurants.



Christina Choung, DO

Samaritan Health Services

Lake Erie College of Osteopathic Medicine, Erie, PA

Dr. Choung earned a BS in Psychobiology at UCLA.

She's interested in integrative medicine, sports medicine, chronic disease management and teaching.

Outside of medicine she enjoys yoga, strength training and traveling.



Joshua Cohen, MD

OHSU - Portland

University of Vermont Medical School, Burlington, VA

Dr. Cohen studied Kinesiology at McGill University.

Between college and medical school he worked as a caregiver and educator for adults with physical disabilities, where he developed skills in caregiving, teaching, communication and patience. He enjoyed all of his clinical rotations but always knew that he was too interested in the big picture to do anything other than family medicine. In his spare time he enjoys traveling and cooking with his wife, playing tennis, boxing, and drinking coffee.



Benjamin Colburn, MD

OHSU - Portland

University of California, San Francisco

Dr. Colburn trained in medical anthropology while an undergrad at Brown University. He has worked to address domestic and global health inequities for the past decade. His mission as a doctor is to create healthier, happier communities that celebrate diversity as an asset. His mission when he's not practicing medicine is to spend as much time creating art and being in nature as humanly possible.



Colleen Cooper, MD

OHSU - Portland

Wayne State University School of Medicine, Detroit, MI

Dr. Cooper earned a BS in Human Biology and a BA in Music from Michigan State University. Throughout her medical training in Detroit, she was drawn to family medicine by its comprehensive and compassionate patient care, and the commitment of the field to addressing health for underserved populations. Her experiences volunteering in local clinics, mentoring children through a fitness program, and teaching health topics in elementary schools solidified this connection between medicine and community. She is interested in full-spectrum family medicine and especially enjoys women's health and pediatrics. In her free-time she likes to run, do yoga, and play the oboe.



Olivia Danforth, MD

Samaritan Health Services
Rush Medical College of Rush University, Chicago, IL

Dr. Danforth earned a BS in Biology at Haverford College. Prior to medical school she volunteered as an HIV Test Counselor. The patient-centered, relationship-focused nature of this practice was instrumental in her eventual pursuit of family medicine. Her professional interests include full-spectrum outpatient care, LGBT and reproductive health and suicide prevention. Outside of work she enjoys cooking, yoga, bad movies and volunteering as a crisis line operator.



Di Deng, MD

OHSU – Portland
Geisel School of Medicine at Dartmouth, Hanover, NH

Dr. Deng graduated with a BA/MA in Biochemistry and Molecular Biology from Clark University. As a member of Dartmouth’s Rural Scholars Program, she went on service trips throughout the country and was amazed at the variety and depth of care provided by the local family physicians. She is interested in becoming a family physician with broad spectrum training that will allow her to practice wherever she lands and to provide care to whomever is in need.



Alexander Domingo, MD

OHSU - Portland
Yale School of Medicine, New Haven CT

Dr. Domingo studied psychology and environmental science at the University of Texas at Austin. His passion for bridging medicine and sustainability were evident in his pursuits throughout his undergrad and medical school career: caring for underprivileged patients in Yale’s student-run free clinic; rotations on the Chinle Navajo reservation and with Health in Harmony/ASRI in Borneo; work with environmental groups in Northern India and Ecuador; and leadership in a campus anti-tobacco campaign. He felt that family medicine was the field most in line with his passions for prevention, providing holistic medicine to people at all stages of life and caring for underprivileged patients at home and abroad.



Christopher Hagen, MD

OHSU - Cascades East
Virginia Commonwealth University School of Medicine, Richmond, VA

Dr. Hagen earned a dual degree in Biology and Hispanic Studies at St. John’s University in Minnesota. In between college graduation and the start of medical school, he did a year of service with AmeriCorps as a nursing assistant serving the homeless population in Washington, DC. This, along with rotations in family medicine and participation in rural practices, confirmed his desire to become a full scope family medicine physician. He and his new bride, Tricia, love everything to do with the outdoors and are excited to become involved in the Klamath Falls community.



Hanna Hartman, MD

OHSU - Cascades East
University of Utah School of Medicine, Salt Lake City, UT

Dr. Hartman received her BS in Nutrition Science and a BA in Spanish at Montana State University. Her experiences teaching prenatal classes for pregnant teenagers, working to advance health care for the Latino population and educating students about careers in medicine led her to pursue full-spectrum care in a rural setting. In her free time she plays ultimate frisbee, spike ball, hikes, skis, cooks and goes on walks with her St. Bernard.



Jenan Hilal, MD

OHSU - Portland
University of Louisville School of Medicine, Louisville, KY

Dr. Hilal graduated with a BS degree in Biology with Honors at the University of Kentucky. She enjoyed volunteering in her local community during college and medical school and feels like family medicine is the perfect environment for exploring a wide variety of interests. Dr. Hilal is interested in procedures, obstetrics and women’s health. In her spare time she enjoys reading, running, hiking and baking.



Rachel Jackson, MD

Providence Oregon
University of Washington School of Medicine, Seattle, WA

Dr. Jackson holds a BA from Evergreen State College and a BS from Portland State University. She was inspired to go into medicine through volunteering at a community health center in Portland and has a passion for underserved care and reducing health disparities. She enjoys cycling, hiking, camping and photography.



Hannah Jantzi, MD

OHSU - Cascades East
Wright State University Boonshoft School of Medicine, Dayton, OH

Dr. Jantzi completed her undergrad at Goshen College studying Environmental Science and Biology. During domestic and international clinical experiences, she discovered the importance of hard-working, community-focused medicine. Hannah has a passion for women’s health and the promotion of reproductive autonomy for women and families. She enjoys gardening, hiking, yoga and cooking.



Brittany Johnson, DO

Samaritan Health Services
Western University of Health Sciences, Pomona, CA

Dr. Johnson graduated with a double major in Biology and Business Administration-Management from San Diego State University. During medical school, she was the vice president of Western’s American Medical Women’s Association where she participated in free clinics around the area educating the community on various health topics. She’s interested in outpatient family medicine, including pediatrics and academic medicine. When not at work, she spends her time with her young son, husband and three dogs, and enjoys gardening, baking and traveling.

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Roheet Kakaday, MD

OHSU - Portland

Oregon Health & Science University, Portland, OR

Dr. Kakady graduated with a BS in Bioengineering at the University of California, San Diego. While in medical school, he volunteered in a leprosy colony in rural India where doctors practiced a holistic style of medicine; this inspired his interest in family medicine. He is interested in full-spectrum care, clinical informatics, and medical technology in primary care. Outside of work he enjoys traveling, writing, photography and culinary arts.



Edward Kim, MD

Providence Oregon

Medical College of Wisconsin, Milwaukee, WI

Dr. Kim received his undergraduate degree in Molecular, Cellular and Developmental Biology from the University of Washington. His involvement in nonprofit and student groups that advocated for equality and addressed health disparities helped him choose family medicine as a specialty. Though interested in all aspects of family medicine, Dr. Kim has a particular interest in sexual health, geriatrics and emergency medicine. He also wants to be a physician that provides for the local LGBTQ community. He enjoys photography, playing tennis, cooking and introducing friends to Korean food and craft beer.



Kate Kleaveland, MD

Providence Hood River Rural Training Program

Oregon Health & Science University, Portland, OR

Dr. Kleaveland received a degree in Biology from Southern Oregon University. Though she knew she wanted to be a rural family physician since beginning medical school, her desire was confirmed after spending a rural rotation in Madras where she was in the midst of the everyday joys and sorrows of being a family physician. Dr. Kleaveland was an OHSU Oregon Rural Scholar. She is committed to working with populations and people on the margins of society. She enjoys mountain biking, kayaking, playing the marimba and spending time with friends and her mom.



Jennifer Liu, DO

Samaritan Health Services

Des Moines University College of Osteopathic Medicine, Des Moines, IA

Dr. Liu earned a BA in Biology at St. Louis University. Her choice for specializing in family medicine grew out of her long-term involvement in music as she saw firsthand how spending quality time with people impacted their lives for the better. She's interested in outpatient, mental health, preventative medicine and nutrition. In her free time she enjoys yoga, hiking, running, reading and spending time with her family.



Kyleen Luhrs, MD

OHSU - Cascades East

University of Washington, Alaska WWAMI program, Seattle, WA

Dr. Luhrs earned undergrad degrees in Biology and Psychology at the University of Denver. While taking mind-body electives in medical school, she became interested in integrative medicine and a holistic approach to community health. She hopes to practice full-spectrum family medicine and wilderness medicine and provide a holistic approach to patient care in a rural setting. Her hobbies include anything to do with the outdoors, including mountain biking, kayaking, skiing and gardening.



Melissa McCoy, MD

OHSU - Portland

University of Minnesota Medical School, Minneapolis, MN

Dr. McCoy earned a BS in Biochemistry from the College of St. Scholastica. Serving as the Oreyma Fellow in Social Medicine and participating in leadership roles in the Social Medicine Consortium led her to choose to go into family medicine. She is interested in full-spectrum, global health, social medicine and addiction medicine. In her free time she likes to travel, surf, cycle and hike.



John Mitchell, MD

OHSU - Portland

University of Nebraska Medical Center, Omaha, NE

Dr. Mitchell earned his BS degree in Exercise/Sports Science from the University of Kansas. While working in a small, underserved clinic where he set up a wellness program, he became drawn to family medicine. He also received a Master's degree in Public Health and is interested in the relationship between primary care and public health. He enjoys cooking, hiking and traveling with his wife.



Lisa Pearson, MD

OHSU - Cascades East

Oregon Health & Science University, Portland, OR

Dr. Pearson studied Biology, Chemistry and Music at the University of Portland. During medical school, she found that she could unite her love of rural and wilderness life with family medicine and is thrilled to continue her training at Cascades East. In her free time she enjoys traveling, skiing, hiking, backpacking, cooking and spending time with her family and her dog, Pokey.



Matthew Peters, MD

OHSU - Cascades East

University of Washington School of Medicine WAAMI Program, Seattle, WA

Dr. Peters earned a BA in Sociology with minors in Biology and Chemistry at Pacific Lutheran University. During his first year of medical school, he helped found a free clinic and later became involved in organized medicine at the state and national level. His interests include addiction medicine, surgical obstetrics, outpatient procedures, and physician advocacy. Outside of medicine, he enjoys mountain biking, downhill skiing, running, hiking and spending time with his wife and puppy.



Katie Putnam, MD, MPH

OHSU - Portland

Oregon Health & Science University, Portland, OR

Dr. Putnam earned BS degrees in Biology and Psychology while attending Cal Poly San Luis Obispo. Between college and medical school she served as a research assistant at the National Institute of Health in DC. Her medical school experiences volunteering at a safety net and women's clinic inspired her to provide community and family-centric care while working to address population health needs through public health research. She enjoys exploring the outdoors, gardening, reading, traveling and spending time with her husband and two cats.



Megan Quinlan, MD

OHSU - Portland

University of Michigan Medical School, Ann Arbor, MI

Dr. Quinlan earned her BS degree at the University of Michigan. Her involvement in the UM student-run free clinic, and her understanding that an individual's health involves physical, mental, social and emotional health, led her to the field of family medicine. She's interested in full-spectrum care, women's health and academic medicine. Outside of work she enjoys running, reading, being with friends, and being active outdoors.



Thomas Raines-Morris, MD, MPH

OHSU - Cascades East
Tulane University School of Medicine, New Orleans, LA

Dr. Raines-Morris received a BS in Spanish at The College of the Holy Cross and his MPH in Community Health and Health Systems Management at Tulane University School of Public Health and Tropical Medicine. Working with migrant workers at the Virginia Garcia Memorial Health Center, STI/HIV testing, counseling in New Orleans, a medical mission trip to Haiti and being an AmeriCorps member working with adults with intellectual disabilities, all led him to choose family medicine. He is interested in geriatric, end-of-life care, public health, and working with the underserved and Spanish-speaking populations. Outside of work he likes spending time with his wife and young son and watching the Portland Timbers.



Christelle Serra Van Brunt, DO

Providence Oregon
Western University of Health Sciences, College of Osteopathic Medicine of the Pacific Northwest, Lebanon, OR

Dr. Serra Van Brunt completed undergraduate degrees in Business and Hotel Management from the Southern Cross University in Sydney, Australia and in Orthoptics from the Universite Paris VI. She's interested in hiking, traveling and gardening.



Daniel Slowey, MD

OHSU - Portland
University of Pittsburgh School of Medicine, Pittsburgh, PA

Dr. Slowey earned a BS in Mathematics from Allegheny College and his JD from Duke Law School. His experiences playing college baseball and working with community-based public health organizations in medical school drew him to the team-based, socially-focused, long-term approach of family medicine. He is interested in full-spectrum family care and public health and social advocacy. He enjoys hiking, biking, camping and snowboarding with his wife and two dogs.



Brianne Smith, DO

Samaritan Health Services
Lincoln Memorial University - DeBusk College of Osteopathic Medicine, Harrogate, TN

Dr. Smith received her BS in Neurobiology, Physiology and Behavior at UC Davis. While in medical school, she participated in the Social and Gender Equality club and realized that she could best serve people by engaging in primary and preventative care. She's interested in full-spectrum care, LGBT care and performing osteopathic manipulative treatments (OMT). In her spare time she enjoys traveling the world, roller derby, cats, and exploring the beautiful Oregon countryside.



Hylke Snieder, MD

Samaritan Health Services
Utrecht University Faculty of Medicine, The Netherlands

Dr. Snieder earned degrees in Integrative Physiology and Biochemistry at the University of Colorado. He is interested in pediatrics, evidence-based medicine, palliative care and building bridges of communication between providers in a patient's medical home. In his spare time Dr. Snieder enjoys playing ultimate Frisbee, coaching, reading, geocaching and doing and making crossword puzzles.



Alexandra Styke, DO

Samaritan Health Services
Midwestern University, Arizona College of Osteopathic Medicine, Glendale, AZ

Dr. Styke earned dual BS degrees in Spanish and Biopsychology, Cognition & Neuroscience at the University of Michigan. While in college and medical school she participated in several medical mission trips in Central America and fell in love with full-spectrum care. She's interested in full-spectrum care with an emphasis on pediatrics, women's health and underserved populations. In her free time she enjoys spending time with her family and pets, hiking, swimming and playing the piano.



Jeffrey Sun, DO

Providence Oregon
Western University of Health Sciences, College of Osteopathic Medicine of the Pacific-Northwest, Lebanon, OR

Dr. Sun attended the University of Washington where he earned his undergraduate degree in Biochemistry and Chemistry. His third year family rotation in Corvallis coupled with his long-term attendance at the Portland Asian Health Fair solidified his decision to pursue family medicine as a specialty. He looks forward to doing broad spectrum family medicine with a large population of Mandarin-speaking patients to help overcome the language barrier. In his free time he enjoys watching and playing basketball, hiking and walking his cocker spaniel, Kudo.



Roxanne Thomas, MD

Providence Oregon
University of Pittsburgh School of Medicine, Pittsburgh, PA

Dr. Thomas pursued environmental work prior to medicine, with degrees in Resource Economics and Policy from Duke University and Atmospheric Science and Environmental Sciences from McGill University. She's interested in practicing full-spectrum family medicine, with a special interest in women's health. She enjoys outdoor activities and has a passion for the conservation of our environment. She believes green spaces, clean air and water and biodiversity contribute to healthy families and communities, integrating family medicine values.



Jamie Viterna, DO

Providence Oregon
A.T. Still University of Osteopathic Medicine, Mesa, AZ

Dr. Viterna received her undergraduate degree at The Ohio State University, where she earned her BS in Biology. Her experience with volunteering in a free clinic prior to medical school and a rotation with a medical respite center for the homeless solidified her desires to bring medical care to those in need. She is interested in practicing full-spectrum family medicine, with a particular interest in helping the medically underserved in urban settings with the National Health Service Corps. In her spare time she enjoys hiking, camping, snowboarding, traveling, running and writing music.



Jemie Walrod, MD

Providence Oregon
McGill University, Montreal, Quebec, Canada

Dr. Walrod received her undergraduate degree in Biology from Colorado College. She spent a year working as a patient navigator for a transitions of care program at a rural family health center helping patients integrate back into their primary care clinic after a hospital stay. This experience helped solidify her commitment to family medicine. She is interested in sports medicine, women's health and pain and addictions. An outdoor person at heart, she enjoys hiking, skiing, snowboarding, biking or playing soccer. Indoors, she likes trying new vegetarian recipes and reading books.

MEMBERS IN THE NEWS

HONORS, AWARDS, & ACCOLADES



John Saultz, MD, has been selected for the AAFP's Thomas W. Johnson Award for Career Contributions to Family Medicine Education. The award was presented at the AAFP Congress of Delegates in San Antonio last month.

Established in 1973, the award is designed to "recognize persons who, in the opinion of

the AAFP Board of Directors, have made an outstanding contribution to education for family medicine in undergraduate, graduate and continuing education spheres." The award was named in honor of Dr. Thomas Johnson, a long-time AAFP member who actively served the Tennessee state chapter and national AAFP before serving as the director of the Division of Education.

Beginning with his role as Family Practice Residency Director at OHSU in the mid-1980's, Dr. Saultz continued his ascent into larger leadership positions, taking on more responsibility inside and outside the walls of OHSU including Residency Director and Vice Chairman, Chief of Clinical Services; Founding Medical Director for CareOregon; Assistant Vice President for Regional Education; Director of Primary Care Clinical Services; Director, Statewide Oregon Area Health Education; Bishop Fellow; Member of ACGME and Chair of Program Requirement Committee, member of Residency Review Committee; President of Association of Family Medicine Residency Directors; OAFP President; STFM President; member of Family Medicine for America's Health Steering Committee; *Family Medicine* editor; and OHSU Family Medicine Department Chair.

Dr. Saultz was pleased to be chosen as this year's honoree. "The Thomas W. Johnson Award is among the highest honors bestowed by

the American Academy of Family Physicians and recognized lifetime contributions to family medicine education. While I am proud to be a family physician, I grew up wanting to be a teacher, so an award recognizing achievement in education has special meaning for me and for my family. In all honesty, I do not think the award would have been possible without the help and support of the faculty and staff in the OHSU Family Medicine Department. As many of you know, our educational programs rely heavily on help from Oregon's practicing family physicians. So in many ways, the Johnson Award is a tribute to our department and to Oregon family medicine even though it is awarded to me. I want to thank all of the members of the OAFP for their friendship and support over the course of my career and I promise all of you that I'm not ready to stop working together anytime soon."

There hasn't been an area of family medicine education that Dr. Saultz has not participated in and led. From teaching medical students to mentoring family medicine faculty, he has demonstrated leadership and left an indelible mark on the specialty. Congratulations Dr. Saultz and thank you.

HAVE AN ITEM FOR "MEMBERS IN THE NEWS?"

Family Physicians of Oregon welcomes short announcements about OAFP members and their clinics. If you have undertaken a practice move, have been the recipient of an honor or award, or just plain have interesting information to share, by all means, let us know! Tell us about your news and we will be sure to print it. Photographs are welcomed. Send submissions to:

LYNN M. ESTUESTA
Oregon Academy of Family Physicians,
1717 NE 42nd St., Ste 2103, Portland, OR 97213

2018 Family Doctor of the Year Nominations

Do you know someone who has the necessary qualities to be considered for the 2018 Oregon Family Doctor of the Year Award? If you have someone you would like to nominate, please contact us at your earliest convenience so we can confirm that your nominee is an OAFP member. We can discuss with you the nomination categories (colleague, patient, community leader and friend) and the minimum number of nominations required in each category to provide a robust nomination packet. As the OAFP's Family Medicine Weekend is in April next year, we request that the nomination information be received by January 15, 2018. We look forward to hearing from you.

2017 MEMBERSHIP LISTING BY CITY & PCPCH RECOGNIZED CLINICS★

*Please note that this list is continuously being updated with physicians who are working in a state-certified PCPCH, please check the OAFP website for the most current listing.

ALBANY

Pamela Chapin, MD
 Kristina Corso, DO ★
 David Floyd, MD
 Brent Godek, MD ★
 Priscilla Latta, MD ★
 Emily Looney, MD
 Lance McQuillan, MD ★
 Kate McDonough, DO ★
 Rose Miller, MD ★
 Vitus Nwaele MBBS ★
 William Origer, MD ★
 Laura Ouellette, MD
 Michael Potter, MD ★
 Jeffrey Robinson, MD ★
 Scott Schindell, MD ★
 Douglas Thayer, MD ★
 John Ward, MD ★
 Patricia Wheeler, MD
 Flora Yao, MD ★

ASHLAND

David Candelaria, MD
 Dee Christlieb, MD
 David Jones, MD, FAAFP
 Lucinda Kolo-Kistler, MD
 Brandon Lynch, MD, MPH
 Lorraine McDonald, MD
 Howard Morningstar, MD
 Richard Morris, MD ★
 Linda Niehaus, MD, FAAFP ★
 Jani Rollins, MD
 Paul Rostykus, MD
 John Sager, MD ★
 Miriam Soriano, MD
 James Steinsiek, MD

ASTORIA

Scott Ashley, MD ★
 Thomas Duncan, MD
 Robert Hentz, MD
 Robbie Law, MD
 Tedd Levin, MD
 Katherine Merrill, MD
 Angela Naim, MD

AUMSVILLE

Scott Hadden, MD ★
 Tanie Hotan, MD ★

BAKER CITY

Trisha Adams Eckman, MD ★
 Neil Carroll, MD ★
 Nathan Defrees, MD ★
 Logan Fredericksen, DO ★
 William Irvine, MD ★
 Eric Lamb, MD ★
 David Richards, MD
 Jonathan Schott, MD ★
 J. Daniel Smithson, MD ★
 Lily Wittich, MD ★

BANDON

Megan Holland, MD
 Henry Holmes, MD
 Gail McClave, MD

BEAVERTON

Mihaela Beloiu, MD ★
 Cynthia Caraballo-Hunt, MD ★
 Nishanie Chalmers, MD ★
 Poonam Chhibber, MD ★
 Prasanna Chandran, MD ★
 Mary Jo Clarke, MD
 Danielle Desrochers, MD ★
 Anshu Dhingra, MD ★
 Jennifer Donohue, MD ★
 Hannah Edwards, MD ★
 Carolyn Goebel, MD ★
 Lucinda Griffith, MD
 Christian Hill, MD ★
 Benjamin Ip, MD ★
 Tori Jones, MD ★
 Monica Kim, MD
 Marcy Lake, DO ★
 Kenneth Ortiz, MD ★
 Cheryl Pierson, MD, FAAFP ★
 Randolph Pitts, MD, FAAFP ★
 Brett Rath, MD, FAAFP ★
 Michele Sequeira, MD ★
 Steven Simon, MD ★
 Gregory Smith, MD ★
 Jennifer Soyke, MD, FAAFP
 Samuel Suk, MD
 Anne Toledo, MD ★
 Jie Wang, MD ★

BEND

Raphael Allred, MD
 Jennifer Blechman, MD
 Jeffrey Boggess, MD, FAAFP ★
 Meghan Brecke, DO ★
 Bradley Burket, MD, DMD
 Tina Busby, MD ★
 Leslie Carey, MD
 Matthew Clausen, MD ★
 Ann Clemens, MD
 Audrey Davey, MD
 Matthew Davey, MD
 Nadine Dubrule, MD
 McKenzie Dean, DO ★
 Mark Gonsky, DO
 Delmar Greenleaf, MD
 Cheryl Hadley, MD
 William Holloway, MD, FAAFP
 James Horak, MD
 J. Randall Jacobs, MD, FAAFP
 Kristi Jackson, DO ★
 Paul Johnson, MD ★
 Stephen Knapp, MD
 Angela Larson, MD
 Peter Leavitt, MD ★
 Jessica LeBlanc, MD ★
 Charlotte Lin, MD ★

Alison Little Toledo, MD
 Kae Loverink, MD
 Jessica Mazaitis, MD ★
 Jimmy McCauley, MD ★
 Mary Meador, MD
 Jessica Morgan, MD ★
 Terrace Mucha, MD
 Breanna Percell, MD
 Janey Purvis, MD ★
 Dana Rhode, DO ★
 Matthew Rode, MD
 Robert Ross, MD, FAAFP
 Quinn Scallon, MD ★
 Patrick Simning, MD, FAAFP ★
 Edward Tarbet, MD ★
 John Teller, MD ★
 Katrina Terry, MD ★
 Mattie Towle, MD ★
 Lisa Uri, MD ★
 Ginger Vaughn, MD
 James Weeks, MD ★

BOARDMAN

Steven Maher, MD, FAAFP ★

BROOKINGS

Monique Schwartz, DO
 Mark Silver, MD ★

BROWNSVILLE

John Hickey, MD ★

BURNS

Tom Fitzpatrick, MD
 Kevin Johnston, MD, FAAFP ★
 Sarah Laiosa, DO ★
 Eva McCarthy, DO ★
 Larissa Thomas, MD ★
 Heidi Vanyo, MD ★

CANBY

Alexandra Bond, MD ★
 Deona Bridgeman, MD ★
 Janae Brill, MD, MPH ★
 Melissa Calhoun, DO ★
 Amanda Gay, MD
 Tom Lin, MD ★
 David Peter, MD ★
 Mario Seyer, DO ★

CAVE JUNCTION

Kori Hunt, MD ★

CENTRAL POINT

Elizabeth Banowitz, MD ★
 Chase Grames, DO ★
 Samuel Hirtle, DO ★
 Brandan Hull, MD ★
 Neil Olsen, MD ★

CLACKAMAS

Claire Andrews Gobble, MD
 Carla Bowman, MD ★
 Lisa Burton, MD, FAAFP ★
 Yee Chang, MD
 Daniel Constien, MD ★
 Juan Dela Cruz, MD ★
 Justin Diegel, DO ★
 Emma Fite-Wassilak, MD ★
 Dwight Hager, MD
 Alycia Jackson, MD ★
 Karin Jacobson, MD ★
 Yves Lefranc, MD ★
 Larry Moffett, DO, FAAFP
 Sharlene Murphy, DO ★
 Reynold Orchard, MD ★
 Karen Piper, MD, FAAFP
 Christopher Rae, MD ★
 Joanne Richardson Tollerton, MD
 Mindi Robinson, MD ★
 Loretta Scheler, MD
 Darbi Seely, MD
 Darla Stupey, DO ★
 Richard Varan, MD ★
 Benjamin Wachsmuth, MD ★
 Jan Weichsel, MD
 Ariane Wolf, MD ★
 Hsiao Chi Wu, MD, FAAFP ★

COOS BAY

Dallas Carter, MD ★
 Robert Gerber, MD
 Thomas McAndrew, MD ★
 Jonathon Park, MD ★
 Kent Sharman, MD ★

COQUILLE

Brock Millet, MD ★
 Mark Pasternak, MD

CORNELIUS

Kristin Burgher, MD ★
 Jennifer Mueller, MD ★
 Michael Schiferl, MD ★

CORVALLIS

Douglas Aukerman, MD, FAAFP ★
 Kristin Bradford, MD, MPH ★
 Margaret Carr, MD ★
 David Cassat, MD
 Janet Chang, DO
 Nicola Chikkalingaiah, MD
 Andrew Cornwell, MD ★
 Tavis Cowan, MD
 Kea Crandall, MD
 Aaron David, DO ★
 Shanilka de Soyza, MD
 John Edwards, MD, MPH, FAAFP ★
 Kevin Ewanchyna, MD
 Lydia Fusetti, MD
 Donald Gallup, MD ★
 Troy Garrett, MD ★

Bharat Gopal, MD, MPH, FAAFP ★
 Robert Hughes, DO ★
 Max Kaiser, DO
 Tien Le, DO
 Collin Lynn, MD ★
 Valerie Nelson, MD, MPH ★
 Mark Rampton, MD ★
 Elinor Tatham, MD
 Michael Watson, Jr., DO ★

COTTAGE GROVE

Albert Agomaa, MD
 Gerald Barker, MD
 Kimberly Cronin, MD
 Mary Gabriele, MD
 Marta Hantke, MD
 Jonathan Lazaro, MD
 Thea Petersen, MD

DALLAS

Stephen Chaffee, DO ★
 Christopher Edwardson, MD,
 FAAFP ★
 Tom Flaming, DO, FAAFP ★
 Steven LaTulippe, MD ★
 Gina Remington, MD

DAMASCUS

Beverly De La Bruere, MD
 Atarah Sidey, MD ★

DEPOE BAY

Jerry Flaming, DO, FAAFP ★

EAGLE POINT

Janice Lindstrom, MD, FAAFP ★
 Leonard Wilk, MD ★

ENTERPRISE

Kirsten Caine, MD
 Keith De Young, MD ★
 Renee Grandi, MD ★
 Annika Maly, MD ★
 Geoffrey Maly, MD ★
 Elizabeth Powers, MD ★

ESTACADA

Lynn Murphy, MD

EUGENE

Lindsay Alaishuski, MD ★
 Pamela Andresen, MD
 Rechelle Asirof, MD ★
 William Balsom, MD ★
 Lorne Bigley, MD, FAAFP ★
 Michael Boespflug, MD ★
 Gary Brandt, MD, FAAFP ★
 Richard Brunader, MD ★
 William Brus, MD ★
 Patricia Buchanan, MD ★
 Donna Byrne, MD
 Jill Chaplin, MD ★

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Wendy Choi, MD ★
Paul Curtin, MD ★
Rensie De Vera, MD ★
Loan Duong, DO ★
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Sylvia Emory, MD ★
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Thomas Ewing, MD
Michael Garfinkel, MD ★
Matthew Gramzow, MD ★
Galen Griffin, MD ★
Tracy Hardwick, MD ★
Bruce Harrow, MD, FAAFP
Allen Heaman, MD
John Holtzaple, MD ★
Theresa House, MD ★
Doyle Huey, MD ★
Douglas Jeffrey, MD
Brian Jones, MD ★
Matt Kaiser, MD ★
Naiman Khan, MD
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Jotham Lefford, MD ★
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Mark Lyon, MD ★
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Mark Mueller, MD ★
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Rachel Nosce, MD ★
Sean Orlino, MD ★
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Hang Pham, MD ★
Bonita Pollack, MD ★
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Elizabeth Quillin, MD
Wesley Ramoso, MD ★
Neema Reddy, MD ★
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Janjan Reforma, MD ★
Ronald Rennick, MD, FAAFP
Gulrukh Rizvi, MD ★
Abner Satterthwaite-Phillips, MD ★
Stephan Schepengerdes, MD ★
John Sharrer, MD ★
Jose Sioco III, MD ★
Vincent Siy, MD ★
Mollie Skov-Ortega, MD ★
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Michelle Taube, MD ★
Kerry Tedesco, DO ★
Ria Monica Valencia, MD ★
David Van Scoy, MD ★
Steven Yoder, MD, FAAFP ★

FAIRVIEW

Aoife O'Sullivan, MD

FLORENCE

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Timothy Friedman, DO
Peter Howison, MD ★
Amir-Mohammad Jalilian-Nosraty, MD ★
Cameron McCoin, MD ★
Paul Pearson, MD ★
Idalee Pia Posa, MD ★

FOREST GROVE

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Michael Flamm, DO
Timothy Gray, DO ★
Conley Lynch, MD ★

GOLD BEACH

Olixn Adams, DO

GRANDE RONDE

Randall Blome, MD ★

GRANTS PASS

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Nima Azarbeh, DO ★
Ramesis Baccolod, MD ★
Victoria Boisen, DO ★
Amy Brown, MD ★
Caroline Brown, MD ★
Randall Currier, MD
Jon Ermshar, MD ★
Donna Givens, MD ★
Dan Gleffe, MD ★
Barry Hamann, MD ★
Brian Hancock, MD
Jeremy Hitchcock, MD ★
Satnam Lali, MD ★
Shoshannah Levitt, MD ★
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Andrew Luther, MD ★
Mark Rondeau, MD ★
Tabitha Thrasher, DO ★
Richard Williams, MD ★
John Wilson, MD ★
Patrick Yeatsy, MD ★

GRESHAM

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Kevin Carpenter, MD ★
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May-Lynn Chu, DO ★
Marianne Clinton, MD ★
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Katherine Hogan, MD ★
Kelly Leaf, MD ★
Carmela Pajarillo, MD
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Kar-ye Wu, MD ★

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Kevin Grainger, MD ★
Mhairi McFarlane, MD ★
Monica Myklebust, MD ★
Bhavesh Rajani, MD ★
Rui Yang, MD

HEPPNER

Daniel Hambleton, MD ★
Russel Nichols, MD ★

HERMISTON

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Derek Earl, DO ★
Joseph Gifford, MD ★
Christopher Lundquist, MD
Marianne Macrander, MD ★
Amy Nguyen, MD ★
Joseph Oconer, MD
Jonas Oltman, DO ★
Stewart Swena, MD

HILLSBORO

Meenakshi Aggarwal, MD ★
Soledad Ayres, MD ★
Teresa Bair, DO ★
Robert Bettencourt, MD ★
Clarice Calopiz, MD ★
Geoffrey Carden, MD, FAAFP ★
Samuel Crane, MD, MPH ★
Linda Cruz, MD ★
William Cuff, DO ★
Stuart Currie, MD
Volodymyr Dovhyy, MD
Hyrum Durtschi, DO ★
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Hui-Ning Fung, MD ★
Eva Galvez, MD ★
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Cara Kawahara, MD ★
Carmen Kendall, MD ★
Hina Khan, MD ★
Suniti Kumar, MD ★
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Susan Kwon, MD
Winner Lee, DO
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Kristi Marchand, MD ★
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Natasa Petrac, MD ★
Michael Pinn, MD, FAAFP
Sreedevi Pitta, MD ★
Jordan Roth, MD ★

JOHN DAY

Zachary Bailey, MD ★
Raffaella Betza, MD ★
David Hall, MD ★
Emily Lieuallen, DO ★
Bennette Norton, III, MD

JOSEPH

Emily Sheahan, MD

JUNCTION CITY

Douglas Bailey, MD ★
Arthur Willey, MD ★
June Worthington, DO

KEIZER

Gerald Farnell, MD ★
Quentin Johnson, MD ★
Mark Margoles, MD
Karla Wottge, DO ★

Julia Rothgery, MD ★
Marc Rothgery, MD ★
Liza Samson, MD
Mathew Snodgrass, MD ★
Fayza Sohail, MD ★
Sara Thorson, MD ★
David Tovey, MD
Nicole Trajano, MD ★
Daniel Twombly, MD
Elizabeth Uno, MD ★
Priscilla Villarreal, MD ★
Yen Vo, MD
Nathan Way, MD, FAAFP ★
Terry Wrobel, DO, FAAFP ★

HOOD RIVER

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Peter Benziger, MD ★
James Brauer, MD ★
Nic Buser, MD ★
Brenda Colfelt, MD ★
Erica Didier, MD ★
Kristen Dillon, MD, FAAFP
Miriam Fauth, MD ★
Elizabeth Foster, MD ★
Anthony Gay, MD ★
Robert Gobbo, MD, FAAFP ★
Tyler Gray, MD ★
Michael Harris, MD ★
Erin Martin, DO
Maria McCormick, MD ★
Gregory Parker, MD ★
Glenn Patrizio, MD
Michael Pendleton, MD, FAAFP
James Pennington, MD ★
Frank Rinella, DO
Janet Sjoblom, MD ★
Natalie Speck, MD ★
Matt Sperry, MD ★
Laura Starrett, MD ★
Richard Starrett, MD ★
Sara Trask, MD

INDEPENDENCE

Mary Placek, MD ★
Keith White, MD, FAAFP ★

JOHN DAY

Zachary Bailey, MD ★
Raffaella Betza, MD ★
David Hall, MD ★
Emily Lieuallen, DO ★
Bennette Norton, III, MD

JOSEPH

Emily Sheahan, MD

JUNCTION CITY

Douglas Bailey, MD ★
Arthur Willey, MD ★
June Worthington, DO

KEIZER

Gerald Farnell, MD ★
Quentin Johnson, MD ★
Mark Margoles, MD
Karla Wottge, DO ★

KING CITY

Dat Tran, MD

KLAMATH FALLS

Carl Barbee, MD
Jerri Britsch, MD
Gregory Burnett, MD
Lindsey Burwell, MD
James Calvert, MD ★
Brandon Chase, MD ★
Lawrence Cohen, MD, FAAFP ★
Kristi Coleman, MD ★
David Dassoff, MD
Ralph Eccles, DO
Joyce Hollander-Rodriguez, MD ★
Adria Honda, MD ★
Robert Jackman, MD ★
Ann Kellogg, DO
Kathie Lang, MD, FAAFP
Randal Machado, MD, FAAFP
Jon McKellar, MD, FAAFP
Radu Moisa, MD ★
Holly Montjoy, MD ★
Flor Mounts, MD ★
Jaime Palmer, MD ★
Ian Panuncialman, MD
Kelly Patterson, MD ★
Carolyn Pierce, MD ★
Dwight Smith, MD, FAAFP ★
Karl Tieva, MD
Andrew Trent, MD
Brock Trejo, MD ★
Edward Trobaugh, MD ★
Wendy Warren, MD ★
Nellie Wirsing, MD

LA GRANDE

Betsy Anderson, MD ★
John Page, MD
John Schaefer, MD ★
Ellen Schoenfelder, MD ★
Debra Ann Studer, MD ★

LA PINE

Michael Allen, DO ★
Scott Black, MD ★
Laura Pennavaria, MD ★
Michael Rosenfield, MD, FAAFP ★

LAKE OSWEGO

Marion Darling, MD ★
Heidi Ferguson, MD ★
Ruth Fischer-Wright, MD ★
Sean Harper, MD ★
Bruce Holmes, MD, FAAFP
Paul Jones, MD, FAAFP
Raymond Larsen, MD
David Lee, MD ★
Darren Lewis, MD ★
Anne-Marie McCoy, MD ★
Kristina Rashid, MD ★
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Thomas Trinh, MD
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Brown, Laurence, MD, FAAFP
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Buck, Mylon, MD, FAAFP
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Bylund, Richard, MD
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Castanares, Tina, MD
Castillo, Norman, DO
Church, Linda, MD
Claridge, William, MD
Cote, Lise, MD, FAAFP

Crawford, Steven, MD, FAAFP
Cross, Steven, MD, FAAFP
Daniels, Dorin, MD, FAAFP
De Lane, Larry, MD, FAAFP
Dornfest, Franklyn, MD, FAAFP
Entena, Monchito, MD, FAAFP
Erpelding, Richard, MD
Euhus, Lowell, MD
Fergusson, Kent, MD
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Fleischli, Gerald, MD, FAAFP
Foster, David, MD, FAAFP
Gailis, Glenn, MD
George, Robert, MD
Gibson, Richard, MD
Gilligan, John, MD

Gilson, Ronald, MD
Glidden, Alden, MD, FAAFP
Grimwood, David, MD, FAAFP
Guyn, Thomas, MD, FAAFP
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Hakala, Robert, MD
Halpert, Scott, MD
Harvey, Thomas, MD, FAAFP
Heder, James, MD
Henderson, James, MD, FAAFP
Heppenstall, Heather, MD, FAAFP
Hilles, Alan, MD, FAAFP
Hoggard, John, MD, FAAFP
Holt, Anthony, MD, FAAFP
Hoskins, Wesley, MD, FAAFP
Howe, Roger, MD, FAAFP
Hudson, Michael, MD, FAAFP

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 Jackson, Lyle, MD
 Johnson, Bruce, MD, FAAFP
 Kadwell, Lynn, DO, FAAFP
 Kaye, Robert, Jr., MD, FAAFP
 Kemper, Carlos, MD, FAAFP
 Kenagy, Benjamin, MD, FAAFP
 Kenyon, C. Francis, MD
 Kern, Stanley, MD, FAAFP
 Klubert, David, MD, FAAFP
 Kochevar, Mark, MD, FAAFP
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 Kuehn, Richard, MD, FAAFP
 Lee, Myron, MD
 Linehan, Charles, MD, FAAFP
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 Little, Roy, MD
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 Maier, Kenneth, MD, FAAFP

Mann, James, MD, FAAFP
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 Mccarthy, Geoffrey, MD, FAAFP
 Mccomb, Gordon, MD, FAAFP
 McLean, Rickard, MD, FAAFP
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 Myers, Larry, MD, FAAFP
 Nelson, Thadeus, MD
 Nesse, Rolf, MD
 Nitzberg, Jerome, MD, FAAFP
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 Turvey, Douglas, MD
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 Van Veen, Thomas, MD, FAAFP
 Varner, Foy, MD, FAAFP
 Vore, John, MD
 Wagner, C. William, MD
 Wagner, David, MD, FAAFP
 Wagner, Robert, MD
 Waldmann, George, MD, FAAFP
 Watson, Andrew, MD
 Weaver, Orville, MD, FAAFP
 Wignall, William, MD
 Willey, Robert, MD, FAAFP
 Williams, Claire, MD
 Williams, David, MD
 Williams, Reginald, MD
 Wills, David, MD

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CE = Cascades East • OHSU = Oregon Health & Science University • PO = Providence Oregon

PHRRTT = Providence Hood River Rural Training Track • SHS = Samaritan Health Services

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 Erez, Aaron, DO SHS
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 Gonzales, Erin, MD CE

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