DAN PAULSON, MD
2017 Oregon Family Doctor of the Year

SB 934 – Enhanced payment for primary care – signed into law. See page 8 for details.
About the cover:
Dan Paulson, MD, surrounded by his family at the Sunriver Resort after he was named the 2017 Oregon Family Doctor of the Year at the OAFP’s Spring Family Medicine Weekend.

FAMILY PHYSICIANS OF OREGON
reaches more than 1,600 family physicians and their professional associates. Medical students and staff at Oregon Health Sciences University also receive the magazine. FAMILY PHYSICIANS OF OREGON assumes no responsibility for the loss or damage to contributed material. Any material accepted is subject to revision as necessary. Materials published in FAMILY PHYSICIANS OF OREGON remain the property of the journal. No material, or parts thereof, may be reproduced or used out of context without prior, specific approval.

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As I move into my second year as OAFP president, I find myself reflecting on things that have happened during the past year. It was a year that was full of changes in health care from the implementation of the Comprehensive Primary Care Plus (CPC+) in Oregon, to changes on the national political scene, to efforts to strengthen primary care in Oregon through Senate Bill 934. Through all of this, one of the recurring themes has been the issue of physician burnout and physician well-being. This was a topic at many of the meetings that I attended including our own OAFP Spring Assembly and the ORPRN convocation in April. It was a question that was posed to the candidates for president of the AAFP at last year’s Congress of Delegates. Physician and staff wellness has become recognized as the fourth leg of the triple aim and this idea often seems to be one of the unstated (or understated) goals of health care transformation.

I have heard many good ideas of things to do to prevent burnout and to care for your own well-being: take time for yourself, take time for your family, nurture a hobby outside of medicine, get regular exercise, recognize the contributions of your staff and take time to celebrate their success. While these are all good ideas and I am trying to do many of them, they just don’t seem to capture all of the feelings that I have on this topic. So, over the last year I have also spent time thinking about some of my own responses to this issue and about the other things that help me prevent burnout and bring joy to the practice of medicine. I would like to share three of these thoughts with you.

**First and foremost are my patients.** Take JB. JB has been my patient since my first week in Springfield, more than 15 years ago. Over time his diabetes has come under good control and his schizophrenia has stabilized, so now the biggest uncertainty about his office visits has become the question of which one of us will be first to comment on how much uglier the other one has become since his last visit. And then there is 90-year-old NA who will good naturedly chastise me if I am not wearing a tie when she comes in for her protime. And there is little PS, who when he was two- and three-years old would always give me a hug when he saw me, even if it was his mom’s or his sister’s appointment. He has not done this in several years now that he is in elementary school.
but it is still a warm memory for me. I am sure that all of us can identify some of the same kinds of patients with stories and connections that bind us to them. Family medicine is all about relationships and it is the relationships that I have built with patients through the years that sustain me and continue to be one of the richest rewards of medicine.

Second, is the team of wonderful staff who I work with each day. It is fun for me to celebrate with our nurse care manager when one of our diabetic patients has brought his A1C down from 12 to 6.7 and kept it there. It is rewarding to talk with our behavioral health specialist about the progress one of our shared patients has made in dealing with anxiety. And it is not a burden to get an afterhours call at home from one of our Physician Assistants who wants confirmation that he is prescribing an appropriate medication for a patient. The work that we do in family medicine is complex and demanding and it has become more obvious to me how important it is to be surrounded by others who can share the workload. It is good to work with a large and diverse team toward a shared goal of excellent patient care.

And third, it is all of you, my friends and colleagues in the OAFP. I've been going to OAFP meetings for over 10 years and am now starting my eighth year on the board of directors. I wouldn't be doing this without the inspiration and encouragement I get from hearing about all of the remarkable things that you are doing in your clinics and your communities. I am energized and restored by the common sense of purpose that I feel from you. Every year I leave our spring assembly feeling renewed and refreshed by your enthusiasm, by your commitment and your dedication to family medicine, and by your friendship. For this I give you my deep gratitude and heartfelt thanks.

For it is the shared values of OAFP members that helps renew my sense of purpose and gives me refreshed enthusiasm for the challenging and rewarding work that I do every day. I am able to take these things back to my patients and my staff so that I can continue my efforts to improve the health of my patients, my community, and my state.
Introduction

This episode of “From the Hill” will focus on the educational mission of the department. As the new Vice Chair of Education for the Department of Family Medicine I wish to emphasize the definition of “our faculty” includes more than just those physically on “The Hill.” Our “learning laboratories” represent a dispersed model with teachers and mentors spread into local and statewide communities. I was excited to meet and chat with many of our teachers at the 2017 Oregon Academy of Family Medicine meeting in Sunriver.

I heard repetitive supportive messages from our community of educators praising the value of hosting learners: “they bring joy to my daily routine... they keep us on our toes and provide fresh clinical perspectives... they share sage approaches of their other teachers... they prevent burn out by providing variety to the routine... and they create a legacy” (one practice is hiring one of their former students). I came away from the meeting with a rejuvenated sense of the importance of our work.

I like to say that our OHSU Family Medicine educational mission also has a triple-aim: to Recruit, Retain, and Support high-quality Family Medicine physicians. In order to achieve these aims OHSU will continue our strong presence with residents and students while also partnering with our community of educators, clinicians and researchers – locally, regionally and nationally. Below, we highlight some of our recent successes and outline educational plans for community, residencies, and students. If you have ideas on ways to expand our impact please reach out to me (Frances Biagioli, MD) so we can collaborate. Together, as a team, we have a greater potential to impact the primary care needs of the state.

Continuing Medical Education

Continuing education provides a foundation for service to Family Medicine across the state, as it probes our thinking on the Hill. Last November, Macaran Baird, MD, Chair of Family Medicine and Community Health at the University of Minnesota, joined us as our Laurel Case Visiting Professor. He challenged us on “Why Families Still Matter in Family Medicine,” and helped us ponder the difficulty of “Hitting the Quadruple Aim When the Social Determinants of Health Move the Target.”

Our annual Pennington Lectures, number 21 this year, takes a more clinical approach to professional development. Conferences and monthly Grand Rounds are recorded for future reference, and some material is broadcast concurrently to remote locations which can be viewed for approved AAFP CME hours. As the next academic year unfolds, we hope to further connect with our partners across the state, and either personally or electronically serve and grow with you in areas of greatest need. For a full list of our CME activities, as well as recordings of our past grand rounds lectures (which are AAFP CME eligible), visit www.ohsu.edu/fmcme.

OHSU Portland Family Medicine Residency

June 2016 brought the graduation of the first class to complete the OHSU Portland Family Medicine Residency’s four-year curriculum. This marked a major achievement of our residency. The move from a three-year model to a four-year model in 2012 allowed the Family Medicine Residency Program to offer residents a more comprehensive education by including training in improvement science, information management, population health, and the patient-centered primary care medical home model. In addition, residents have more opportunities in the four-year model to tailor their education to their professional goals through expanded elective opportunities and completion of a capstone project.
The introduction of the four-year curriculum also coincided with the expansion of the Family Medicine clinic sites to Kaiser Permanente in Beaverton and the opening of the Benson High School-based Health Center.

Over the past year the Portland Residency Program has been diligently working to revamp its curriculum across all four years. The new curriculum follows the Clinic-First model with the goal to better focus resident education on the important work and care that our ambulatory clinics provide. Starting this coming 2017/18 academic year, interns will begin their residency with a month-long clinical experience at their home clinic to provide better integration into their clinic teams. Rotation schedules for all classes will now follow a “2+2” general model of two weeks on outpatient rotations, followed by two weeks on inpatient rotations. This clinic-first approach improves patient access by providing residents a more consistent clinic presence while also providing a better educational balance between inpatient and outpatient experiences. Fine-tuning the implementation of the Clinic-First curriculum is a priority initiative for the coming year. With a four-year, Clinic-First curriculum and five clinic sites, the OHSU Portland Family Medicine Residency Program is better prepared than ever to train the next generation of primary care physicians.

Klamath Falls Family Medicine Residency

What a rough past year it has been for Cascades East Family Medicine Residency. We had a terrible bus crash involving many residents and faculty last summer, the death of one of our retired internist-hospitalists in the fall, and then the death in January of Stephanie Van Dyke, a 2012 graduate of the program. But we have emerged from these events with a renewed sense of resilience and community. The program continues to be proud that 60 percent of our graduates enter practice in communities of 25,000 or less.

Recent successes have included a resurgence of national presentations by our faculty, with one group even presenting on best practices and lessons learned for surviving a residency disaster. We have seen the growth of our Point-of-Care Ultrasound curriculum and our faculty will be presenting a workshop again this year at AAFP’s National Conference for Residents and Students in Kansas City, Missouri. Our Family Medicine center has had great transformations in its role as a Patient-Centered Medical Home; incorporating more team-based care, integrating behavioral health, and increasing access. We continue to embrace comprehensiveness in training our residents.

In the next year we look forward to increasing the numbers and types of students rotating through Klamath Falls with the OHSU Campus for Rural Health, and new long-term student housing will be available downtown this coming year. We are also in the planning stages of a new building that will house Cascades East’s clinical enterprise, Sky Lakes Medical Center’s primary care clinics and the Campus for Rural Health academic headquarters. Looking forward, we celebrate our 25th year as a residency program in 2019 and plan to host a CME weekend, reunion and celebration that summer. As soon as we have a date we will send details to the community.

Student Education

This past year, the Medical Student Education section has continued to build on our strong foundation as well as adding some exceptional core and elective experiences for our medical students. Rebecca Cantone, MD, has taken on the leadership of our core clinical rotations. In addition to the four-week core rotation (formerly known as the clerkship), we added an eight-week continuity core as well as twelve-week rural continuity rotations. This enables students to choose the practice focus that best meets their future interests in medicine. Under the direction of Sean Robinson, MD, we continue to develop two-, four-, and eight-week electives for students to further their interests and exposure to family medicine, including Native American health, maternity care, behavioral health, inpatient medicine, rural medicine, and various outpatient experiences. We have also partnered with the OHSU Klamath Falls faculty to develop a host of rural elective offerings.

Under the guidance of Robyn Liu, MD, FFAFP, the Oregon Rural Scholars Program (ORSP) continues to attract high-caliber students who are motivated to pursue careers in underserved, low-density regions. With the new School of Medicine curriculum, the ORSP has expanded from a 10-week rotation to 12 weeks, and in 2017 will begin offering experiences in multiple primary care disciplines, beginning with general surgery in La Grande. The future of the ORSP looks bright, as we work to collaborate with the PA and DNP programs for interprofessional, longitudinal experiences that will bolster the rural Oregon workforce for years to come.

Our Family Medicine Interest Group is going strong with suture workshops, clinical skill building, and guest speakers throughout the year. We thank all who have volunteered to host events and assist with workshops. Many of our local and statewide faculty have also agreed to longitudinally serve as a scholarly project mentors for students who have chosen to complete their required scholarly project in Family Medicine. Another area of high-recruiting impact is our work with the Rural Health Interest Group, Primary Care College, and Rural College. Leadership and events with these groups have resulted in rich Family Medicine experiences at OHSU and extend into local and rural communities.

This year OHSU matched 20 students into Family Medicine! In the case of raising a family physician, it not only takes a village, it takes a state. We are humbled by the generosity of our community, rural, and academic physicians and are grateful for their continued commitment to teaching and mentoring our students. Most who choose Family Medicine do so in their clinical years - after experiencing the variety of innovative practice styles in a clinical environment. In order to truly represent the variety innovative practice styles and recruit a higher number of students, we strive to expand the depth and reach of our FM offerings. Please contact Peggy O’Neill if you are interested in joining our teaching and mentoring team.
Primary Care Payment Reform Bill Signed into Law

Over the past eight years the OAFP has made steady progress in advocating for public policy to promote and advance primary care. We began by defining what we mean by excellent primary care and how that should be measured through the PCPCH program. After hundreds of primary care clinics embraced this model, we passed a law in 2015 requiring payers to report how much of the premium dollar they use to pay for primary care each year. The law also created a Payment Reform Collaborative, bringing all the stakeholders together to create solutions.

SB934, the Primary Care Payment Reform Bill, is the culmination of those efforts. With the Governor’s signature on SB 934, we have succeeded in passing legislation to substantially increase the total investment in primary care. As we all know, evidence shows that increased spending on primary care infrastructure results in better health outcomes for patients and savings in the form of reduced specialist referrals, emergency room visits, and hospitalizations. Unfortunately, traditional fee-for-service reimbursement fails to pay for many of the best practices necessary to achieve the best outcomes. Senate Bill 934 seeks to solve that problem by requiring that all commercial insurers, CCOs, and OEPP and PEBB spend 12% of their total medical expenditure on primary care by the year 2023. Those increased expenditures must include value based payments. Insurers not already at 12% must increase their primary care spend by 1% each year until they reach the 12% threshold. The Insurance Division will use the rate review process to monitor how insurers plan to make those additional primary care investments.

The bill also requires that payers extend these enhanced payments to all PCPCH 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.

The bill also extends the sunset on the Primary Care Payment Reform Collaborative. This collaborative will continue to work to increase and align investment in primary care without increasing costs to consumers or increasing the total cost of health care. Specifically, the Collaborative:

- will set up a system to provide technical assistance to both payers and providers via a centralized, sustainable, shared-funding model;
- work with the Health Plan Quality Metrics Committee so that everyone uses a limited number of standardized quality, utilization, and patient-experience metrics; and
- help payers develop payment models that support primary care behavioral health integration.

The bill, co-sponsored by Senator Elizabeth Steiner-Hayward and Representative Knute Buehler, passed out of the Senate and House unanimously. “Colleagues, SB 934 is a strong step forward in improving our health care system,” said Rep. Knute Buehler (R-Bend) on the House floor. The Governor signed it into law on June 28th.

With the infusion of more resources into primary care, it is now our shared responsibility to prove that we can do what we have promised. The payers will be held accountable and so will family physicians. The OAFP is committed to supporting our members with shared learning opportunities, best practice updates and CME to help us all fulfill our goal of better health for our patients and communities at an affordable cost.
Dan Paulson, MD
2017 Oregon Family Doctor of the Year

“Dr. Paulson has the heart, and the faith in people, needed to do the difficult work of primary care transformation.”

Dan Paulson, MD, had quite a day on April 22 while attending the 70th Annual OAFP Spring Family Medicine Weekend. First, he was sworn in for his second year as President of the OAFP (see article on page 27) and then minutes later he was named the 2017 Oregon Family Doctor of the Year. Dan’s wife, Linda, and their two daughters, Marika and Jennika, were on hand for the surprise announcement. Present and past Springfield Family Physicians staff were also in the audience, including Pat Ahlen, MD, Jane Conley, (Dan’s clinic manager), and Robyn Gilbertson, MD.

Upon receiving the award, Dr. Paulson stated, “It is a real honor to be recognized by my peers in the OAFP, people for whom I have great respect. This is also a tribute to all of the people I work with at Springfield Family Physicians, where we have worked hard to implement the goals of the Patient-Centered Primary Care Home.” Paulson also thanked his wife for encouraging him to go to medical school in the first place.

Dr. Paulson is currently a managing partner at Springfield Family Physicians where he has worked since 2001 focusing his practice on health maintenance and disease prevention. He is the medical director for his clinic’s Patient Centered Primary Care Home and the clinic is participating in the nationwide Comprehensive Primary Care Initiative. He serves on several committees for the Trillium Coordinated Care Organization including the Pharmacy and Therapeutics Committee and the Committee for Primary Care and Behavioral Health Integration. He is also the course director for family medicine at the Center for Medical Education and Research at PeaceHealth and a member of the Volunteers in Medicine Medical Advisory Board. He has been active in the implementation of the Patient-Centered Primary Care Home standards in Lane County and across the state. Dr. Paulson is a graduate of St. Olaf College in Northfield, Minnesota and holds both MD and MS degrees from the University of Wisconsin-Madison, where he also completed his family medicine residency. The Oregon Family Doctor of the Year Award recognizes physicians who provide compassionate, comprehensive family medicine on a continuing basis; are involved in community affairs; and who provide a credible role model professionally and personally to their community, other health professionals and residents and medical students. According to Liz Powers, MD, who presented Dr. Paulson with this award, and those who nominated him, Dan checks off all of these boxes and more:

“Dr. Paulson is one of those all-too-rare physicians who is doing exactly what a physician is meant to do; his goal is to improve the lives of his patients.”

“He is the most compassionate physician with whom I have ever worked.”

“He is a professional in every sense of the word and a fantastic role model to any new student or provider who trains with him.”

“Dr. Paulson participates in a variety of community-based and national organizations (TransforMed, TopMed, CPCi, Healthy Hearts Northwest, ORPRN, OAFP, OHA and Volunteers in Medicine) to help carry forth positive changes in health care. He also frequently speaks at local business groups regarding the importance of primary care in the community and is called on to speak at the Oregon legislature regarding primary care integration throughout the state.”

“He is a champion of team-based care.”

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.
The American Academy of Family Physicians sponsored the annual Family Medicine Advocacy Summit May 22-23, 2017 to bring the voices of America’s 129,000 family physicians directly to our Congressional Representatives and Senators. The two-day event began with education about AAFP advocacy priorities and current health policy controversies in Washington DC. On the second day, hundreds of family physicians set out across Capitol Hill to personally meet with Senators and Representatives from all 50 states. This year’s AAFP priorities were to ensure any health care legislation maintains health care coverage gains (8.9% is a historically low rate of uninsured Americans), to seek continued federal support for the teaching health centers as training sites for future family physicians and to increase Congressional knowledge about the importance of primary care through the Congressional Primary Care Caucus. The Oregon delegation emphasized the importance of investment in family medicine to drive necessary changes in our health care system in order to both improve the health of our communities and moderate the total cost of health care. We shared our experiences with the Oregon Patient-Centered Primary Care Home model of care and the recent Portland State study which demonstrated total cost of care savings for patients receiving care from PCPCH clinics.

The Oregon Academy of Family Physicians was fortunate to have a persuasive, articulate and enthusiastic team of OAFP leaders from each of Oregon’s Congressional districts. They also brought perspectives from a wide range of clinical practice settings. Meet the team:

Kristin Bendert, MD, Dan Paulson, MD, Liz Powers, MD, Glenn Rodriguez, MD, Evan Saulino, MD, PhD and Michael Goodwin, MD on the steps of the Capitol before attending a plethora of meetings with their legislators to discuss health care.
• **Kristin Bendert, MD**. Fourth year OHSU Family Medicine resident and winner of an AFMRD scholarship to attend the Advocacy Summit. Key contact for Representative Suzanne Bonamici, 1st Congressional District.

• **Liz Powers, MD**. OAFP Immediate Past President. CEO and family physician, Winding Waters Clinic, a FQHC in Enterprise, Oregon. Key contact for Representative Greg Walden, 2nd Congressional District.

• **Evan Saulino, MD, PhD**. OAFP Past President. Medical director of the Oregon Patient-Centered Primary Care Home program and family physician. Providence Medical Group – Southeast. Key contact for Senator Ron Wyden and Representative Earl Blumenauer, 3rd Congressional District.

• **Glenn Rodriguez, MD**. OAFP Past President. Recently retired as residency director, Providence Oregon Family Medicine Residency Program in Milwaukie, Oregon. Key contact for Senator Ron Wyden and Representative Earl Blumenauer, 3rd Congressional District.

• **Dan Paulson, MD**. OAFP President. Family physician, Springfield Family Physicians, Springfield, Oregon. Key contact for Representative Peter DeFazio, 4th Congressional District.

• **Michael Goodwin, MD**. OAFP Treasurer. Family physician, Providence Medical Group – Bridgeport Family Medicine, Tigard, Oregon. Key contact for Representative Kurt Schrader, 5th Congressional District.

The Oregon Congressional Delegation was uniformly welcoming. Conversations were frank and engaged. We were struck by the sense of uncertainty about national health care policy expressed by all in Congress. Both Oregon Senators (Democrats) and Representative Walden (Republican), expressed frustration about the secrecy surrounding the writing of health care legislation in the Senate. In these uncertain times, it is more important than ever that family physicians be engaged in political advocacy. Your ideas and questions are welcomed. OAFP leadership is available to discuss how to become involved. Together we must hold Congress accountable for policies that improve the health of our patients and communities.
Our pledge to our members during the annual conference is to provide a place to learn, connect and rejuvenate – and according to those in attendance, we did not disappoint.

The conference began on April 20 with a jam-packed ORPRN Convocation that provided thought-provoking panel discussions, research, and commentary on the state of community health and the health care team of the future by former Governor John Kitzhaber, MD; Bruce Goldberg, MD; Kurt Stange, MD, PhD, and Melinda Davis, PhD. Jen Devoe, MD, PhD, provided an update on OHSU’s Family Medicine Department and then all adjourned to the Great Hall for the Welcome Dinner. Everyone in attendance was treated to the musical talents of Nic and Liz Powers, MD, Gary Plant, MD, Ruth Chang, MD, Kristen Dillon, MD and her husband, Paul Blackburn. By the end of the evening, the group had everyone singing along – and dancing too! What a perfect way to kick off the 70th Annual Family Medicine Weekend.

The next morning started where we left off the night before – filled with high energy and a trio of nationally-known keynote speakers – Andrew Bazemore, MD, MPH, Director of the Robert Graham Center Policy Studies in Family Medicine and Primary Care; Kurt Stange, MD, PhD, Editor of Annals of Family Medicine; and Jen Devoe, MD, PhD, Chair of OHSU Family Medicine Department – who provided a thorough explanation of state and national policy and how it’s affecting Oregon family medicine.

“Well done. Good blend of data and opinion.”
“Loved the detail, focus on evidence and comparing national to Oregon.”
“Great content, engaging speakers, relevant topic.”

The learning continued with pediatrician Teri Pettersen, MD, discussing trauma-informed care and six diverse round table discussion groups were scheduled over the lunch hour.

After lunch, participants were able to choose from a variety of small group breakout sessions ranging from family physician burnout and media literacy to buprenorphine updates and neonatal abstinence. Both sun and warmth decided to cooperate at the end of the sessions, so our members were able to go bike riding, bird watching, or become budding artists in our craft room (that was cleverly moved outdoors to take advantage of the beautiful day.)

The evening concluded with a fun and successful OAFP/Foundation Auction and Dinner (see page 16 for more details).

Early Saturday morning the attendees were back at it discussing and passing four important resolutions:

1) Support raising the legal minimum age for purchasing tobacco products to 21;
2) Work with others to promote legislation in Oregon to label marijuana at the point of sale as unsafe for use in pregnancy;
3) Support and advocate for the approval of a tax on sugar-sweetened beverages in Oregon; and
4) Reach out to public health organizations to investigate potential partnership opportunities that would result in greater physician involvement or opportunity in community development endeavors.

Participants were happy to have Bill Origer, MD’s presentation on “New Drugs 2017: The Good, the Bad and the Worthless” as a mainstage lecture: “Always a useful summary; would love to see this again next year.” “Always love Dr. Origer’s talk and use most of his points...
“Lots of pearls useful in practice. Very practically oriented – most info per minute of any session.” “Worth the trip.”

Members then heard from our lobbyists Doug and Sam Barber, as well as from Sen. Elizabeth Steiner-Hayward, MD in a prerecorded message, during the Town Hall session and were pleased to be updated regarding the OAFP’s legislative stance: “Good to hear what is happening in the legislature and what the OAFP is working on.” “This is always one of my favorite sessions; it is helpful for understanding what is going on at the policy level in Oregon.” An optional Knowledge Self-Assessment Study Hall on Hypertension was presented in the afternoon with Josh Reagan, MD once again taking the lead. This is group learning at its finest according to those who take and pass the course: “Nice to get this done quickly in a group.” “Josh always does a great job; keeps it moving and interesting.”

The conference ended where it began – on a high note during the Celebration Luncheon where awards were presented, new board members were announced and the 2017 Family Doctor of the Year was revealed (see pages 10 and 29 - 31 for complete details.)

We look forward to seeing you next year at the Embassy Suites Hotel in Portland, April 12-14, 2018.

MANY THANKS

We wish to thank the following sponsors of the 70th Annual Spring Family Medicine Weekend. Their financial support helped the OAFP continue to offer vital academic information and training to our members. We want to highlight our three Family Medicine Champions who went above and beyond to sponsor our event:

AllCare Health

AllCare Health is a physician-led organization that’s making health care simpler and better for the people of Southern Oregon. They offer a wide range of quality health plans and services designed to meet the needs of our state’s diverse communities, while controlling costs for patients and taxpayers. With the foundational ideas of Care, Coverage and Compassion, they’re changing healthcare to work for you.

Originally founded in 1994 as Mid Rogue Independent Practice Association, Inc., they’ve recently combined their health plans and services under the new name AllCare Health, Inc. But while their name and look have changed, their quality care and coverage remain the same.

FamilyCare Health

For more than 30 years, FamilyCare Health has been providing patient-centered health care to Oregonians. FamilyCare Health is an Oregon Health Plan Coordinated Care Organization (CCO) and a Medicare Advantage plan serving approximately 120,000 members in Multnomah, Clackamas, Washington, Marion and Clatsop counties. FamilyCare Health was the first health plan in Oregon to integrate models of physical and mental health and the first CCO in the tri-county area certified by the Oregon Health Authority. For more information, visit http://www.familycareinc.org/.

Trillium Community Health Plan & Health Net of Oregon

Trillium Community Health Plan® is a Coordinated Care Organization (CCO) that improves the lives of Oregonians who receive health care coverage under the Oregon Health Plan, the state’s Medicaid program. Trillium provides health care benefits and connects members to a network of health care providers for medical, dental, behavioral and mental health services. They are committed to working together to improve the health Lane County one member at a time.

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Shriners Hospitals for Children – Portland
Yakima Valley Farm Workers Clinic
2017 OAFP/Foundation Auction is a record-breaker!

If you’ve never been to an OAFP/Foundation auction, here’s an insight into what took place during the 2017 auction and dinner: pies that brought in thousands of dollars; attendees clamoring for unique, hand-picked rhododendrons; member contributions of original artwork, jewelry, and woodwork on par with the pros; family medicine students in attendance for the first-time; and an unsurpassed mode of giving. This all led to a record-breaking event that brought in over $34,000 to support our future family physicians – both students and residents.

We appreciate each of the following donors of goods and services for their support. We are thankful to all who participated in the silent and oral auction on Friday, April 21. We wish to highlight two special donors, Springfield Family Physicians and Aldrich Healthcare Group, who sponsored the wine at the auction dinner.

Springfield Family Physicians has been a long-term supporter of the Oregon Academy of Family Physicians as well as its Foundation. Through the Foundation, the OAFP is helping to support the future of Family Medicine, helping to ensure we have quality physicians joining with us to do the work that you all know is important for the health of our communities. Providing financial support to students helps to defray the increasing costs of medical education, giving these students more flexibility in choosing a career pathway that will fulfill them. Certainly I am biased, but I see family medicine as the most fulfilling of the specialties. We take care of patients from cradle to grave, emphasizing the importance of the whole person, including their family connections. In this time of transformation, we are leading the charge to break down the barriers between physical health and mental health, as well as social needs. The Foundation serves a critical purpose in helping to achieve these goals and see that these young physicians understand what we are trying to accomplish. By giving to the Foundation, we acknowledge the good work they do and hope to enable that work to continue.

The Aldrich Healthcare Group is dedicated to bringing knowledgeable and innovative solutions to medical practice management. Our consulting and advisory services team is designed with a strengths-based approach to drive results to your practice. We exist to improve the lives of our clients, our people, and communities.

continued on page 18
Thank you to our OAFP members and staff who contributed to the offerings at this year’s auction (as highlighted in bold):

A-1 Beach Rentals
Katherine & David Abdun-Nur, MD
Aldrich Healthcare Group
Al’s Garden Center
Ashland Springs Hotel
Trish Banning, Hasson Realty
Banning’s Restaurant & Pie Shop
Scott & Heidi Beery, MD
Bob’s Red Mill
Carol & Ron Brady
Broadway Rose Theatre
Geoffrey Carden, MD
John Case, Classic Chauffer
Ruth Chang, MD, FAAFP
Coast Community Health Center
Jane Conley
Lynn & Jeff Estuesta
Scott Fields, MD
Glowing Greens
Grand Central Bowling
Tyler Bradley, Bradley Vineyards
Meg Hayes, MD
High Desert Museum
Justin Rodriguez and Joyce Hollander-Rodriguez, MD
Imperial River Company
Julie & Mark Johnson
Kevin Johnston, MD
Dino & Katie Kolonic, DO
Lakewood Theatre Company
Nancy & Dan Leedy, MD
Mary & Richard Lundy
Brian & Maria McCormick, MD
McMenamins Pubs & Breweries
Northwest Children’s Theatre
Cheryl Ogburn & Andy Clark
Oregon Shakespeare Festival
Oregon Zoo
Bill Origer, MD
Pendleton Whisky
Pittock Mansion
Gary Plant, MD
Portland Center Stage
RedTail Golf Center
RiverPlace Hotel
Becky & Scott Robertson
Salishan Spa & Golf Resort
Seattle Mariners
Suzanne & Chris Shepanek
Kim & Jeff Spathas, DMD
Springfield Family Physicians
Chris Stutes, Cornerstone Wealth Management
Sunriver Resort
Sussman Shank LLP
Tollen Farms
Wanderlust Tours
Keith White, MD
Wildlife Safari
Willamette Valley Vineyards
Ellen & Rick Wopat, MD
World Class Wines

Thank you to our members and staff who have donated cash to the Foundation:

PRESIDENT’S CLUB $1,000+
Paul Blackburn & Kristin Dillon, MD
Bruce Carlson, MD
Lynn & Jeff Estuesta
Alden Glidden, MD
Michael Goodwin, MD
Nic & Liz Powers, MD
Springfield Family Physicians
Ellen & Rick Wopat, MD

PATRON: $500-999
Aldrich Healthcare Group
Brenda Brischetto, MD & Evan Saulino, MD, PhD

BENEFACTOR: $250 – 499
Pat Ahlen, MD
Noah Estuesta
Jan & Howard Levine
Brian & Maria McCormick, MD
Gary Plant, MD
Holly & Miles Rudd, MD
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SPONSOR: $100 - $249
Heidi Beery, MD
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Michael Grady, MD
David Hall, MD
Nathalie Jacqmotte, MD
Rick Kincade, MD
Kathryn Kolonic, DO
Mary & Richard Lundy
Mark Lyon, MD
Leon McCook, MD
Anita and Robert Taylor, MD
Chris Traver, PeaceHealth Sacred Heart

FRIEND: $1 - $99
Shawn & Charles Engelberg
Lee & Scott Havens
Deb Hollister
Andrea & Denis Mehigan
There’s been a lot of buzz in the media lately regarding Blue Zones, those areas in the world where people tend to live the longest and are the healthiest. The excitement escalates however, when the commonalities of these people are turned into a program, dubbed the Blue Zones Project®, and two Oregon regions are chosen as Demonstration Communities.

Blue Zones, the catalyst behind National Geographic Fellow Dan Buettner’s New York Times bestseller, along with research and a global longevity study, has transformed into a program that helps entire communities live longer, healthier, happier lives.

Grants Pass, The Dalles, and the Umpqua region, including Roseburg, recently joined Blue Zones Project® – Klamath Falls -- Oregon’s first Demonstration Community -- in implementing a community-wide well-being improvement initiative to help make healthy choices easier for Oregonians. These communities were selected to participate in an expanded transformation effort, led by Oregon Healthiest State* with funding from the Cambia Health Foundation.

Blue Zones Project® encourages manageable improvements across environment, policy and social networks including worksites, schools, restaurants, grocery stores, government and faith-based organizations. The goal is to improve the quality of life for all involved, lowering the rates of obesity, smoking and chronic disease to create a community filled with healthier, happier residents.

In future issues of Family Physicians of Oregon, we will explore member physicians in these two regions to find out how they have implemented the theories and practices behind the Blue Zones Project®.

*Oregon Healthiest State (OHS) is a privately led, publicly supported partnership that engages and inspires Oregonians to create and sustain healthy environments that support healthy lifestyles. Three years ago, business and public leaders created OHS as an initiative to address Oregon’s most pressing health issues by identifying and scaling factors that support healthier communities.

Giving to the OAFP PAC is a Piece of Cake!

Attendees at this year’s OAFP Spring Family Medicine Weekend were in for a treat--whoever contributed to the Family Physicians of Oregon PAC helped the OAFP celebrate our 70th anniversary by putting a candle on the cake.

We raised almost $3,000 at the conference, and there’s still time to get a piece of the action. The funds obtained will be used to contribute to the campaigns of legislators who are instrumental in advancing our legislative agenda. This means we assist Senators and Representatives on both sides of the aisle who support investment in primary care and understand the importance of, and challenges associated with, recruitment and retention of the primary care workforce, especially in rural areas.

Have you heard about the Oregon Political Tax Credit? It couldn’t make giving easier. The State of Oregon gives a gift of $50.00 to those who file individually or $100 to married couples who file jointly. But it’s not a gift you can keep. You either pay it back in state taxes, or donate the money to a qualified political campaign or cause (like the Family Physicians of Oregon PAC). This tax credit is only available to single adults with incomes under $100,000 and joint filers with income under $200,000.

To put it another way: By donating $50 to a political campaign of your choice, you can reduce your taxes or increase your refund by that same $50 (assuming you pay at least $50 in taxes). That’s right: it’s a full 100% credit, not a deduction.

To donate to the PAC and help the OAFP speak on behalf of the 1,500+ Oregon family physicians we serve, simply go to our website – www.oafp.org – and look for the PAC donation information under “Advocacy.”
My Rural Scholars Experience

I grew up in Bend, Oregon and drove through Madras countless times on the way to Portland. It was always just another small town on the highway until I moved there and got to know the community during my rural family medicine rotation in the summer of 2016.

One of my favorite memories from my time in Madras comes from one of my inpatient weeks at the Madras Hospital. The physician was preparing for a care conference with the family of an elderly woman with decompensated congestive heart failure. Given this patient’s cardiac function and general health status it was felt that she could die within the year. The team was going to recommend transitioning to hospice care when they met with this patient and her seven adult children. Prior to the meeting, the hospital case manager was able to help the doctor prepare by describing the patient and her family. Because the family members had lived in Madras for many decades, our case manager was able to discuss their values and goals, and put our patient’s life into context. This allowed the physician a deeper understanding of the family’s concerns and she could relate with them on a more personal level during the family meeting. In the end, the family was very comforted and appreciative of the team’s sensitive and personalized care for their mother.

While in Madras, I felt a stronger sense of community values and interconnectedness than I have noticed in bigger towns where I have lived. During this time of political turmoil I reflect on my time in Madras as a period of comfort, safety and belonging within a community. Many people cannot imagine living in a rural place because of the lack of anonymity. While it can feel intrusive when people know so much about each other, it can also create a sense of interpersonal accountability to protect each other and the place. This was significant during the family meeting because we knew that not only would this woman’s seven children take care of her but the care team and her many friends and neighbors would also check on her regularly. Rural America maintains an older, increasingly rare model for living that relies on more interdependence and closeness.

I met the people of the town in clinic and then saw them at the grocery store, library, movie theater and county fair. This close contact stimulated a sense of duty to the community that really came into focus in clinic. Gary Plant, MD, and the other providers at Madras Medical Group deeply care about their patients and it is not just because they have an ethical responsibility as doctors to do no harm or because they are under pressure to meet quality standards, avoid making mistakes or protect their careers. Of course they still need to be concerned about these issues, but their concern stems from their intimate connection to their patients who they live alongside. Rural physicians likely experience
a different kind of dedication to their patients because these people are also their neighbors, friends, clinic staff, their children’s classmates or city officials. While the interconnectedness of rural townspeople can stimulate responsibility and civic duty, it can also cause people to hide personal strife.

While in Madras I noticed a snapshot of the health problems that exist in rural life on a national level. High paying jobs are generally clustered in large cities. The major economy in Madras is agricultural and I saw many of my patients suffering financially. I became more dedicated to advocating for a single payer health care system after hearing this common community narrative of difficulty paying home and medical bills. Seeing such significant financial distress first hand, strengthened my philosophy for medical system reform. It is difficult to passively watch exclusionary policies being enacted when you personally know individuals who could be harmed by the changes.

Another issue I noticed was the high incidence of substance abuse in this rural community. Patients were very reluctant to discuss addiction and the associated psychological impact in the office preferring to keep these stigmatized issues a secret. I saw my attendings working very hard to hold these conversations without much progress. I tried to contribute to their efforts by designing a screening, brief intervention and referral to treatment program to identify and support patients with alcohol use disorder. My goal was to destigmatize conversations about substance use and hopefully open the door for other difficult conversations. In an insular world with very little privacy, rural doctors’ offices should be a sanctuary that provides a confidential space for difficult, highly personal conversations between patient and provider.

Primary care is the backbone of a health care system that affordably provides high quality medical care to all people. We need more rural family medicine doctors because access to care is financially and geographically imbalanced in this country. Additionally, family medicine doctors fill many roles. I saw my attendings in Madras running a clinic, delivering babies, staffing the hospital and consulting at the nursing home. I saw them discuss stressors in peoples’ personal, financial, and public lives. And I saw them as integral, highly respected and influential members of the community.

I applied to the OHSU Rural Scholars Program because I wanted to experience a full spectrum medical practice. I did not expect to feel like a member of the community. Living and working in Madras has caused me to reassess my career goals philosophy of medicine and my views on the role a physician ought to fill in a community. I left Madras inspired because I experienced a medical practice that relies heavily on continuity, preventive care and relationships between patient and provider. I believe in family medicine not just because primary care is the foundation of our health care system, but because family medicine is a beautiful way of life.
2017 Annual Family Medicine Graduation Mentor Dinner

On April 29, the Department of Family Medicine and the Oregon Academy of Family Physicians hosted the annual Graduation Mentor Dinner at the RiverPlace Hotel in Portland. According to Rebecca Cantone, MD, Director of Family Medicine Advising, “this event continues to be a true celebration of the impact physicians have on our students. We welcomed physician mentors from throughout Oregon who had inspired students to practice family medicine. This heart-warming event showed countless stories of how students became inspired by their mentors and how mentors become re-energized and inspired by their students. Several OHSU and Community Faculty were recognized and the students showed clear excitement in being re-united with their family medicine mentor prior to leaving for residency.”

We know it takes a village to get through medical school, so during their fourth year, family medicine students are asked to choose a family physician who had a strong influence on why they chose family medicine as a specialty. Twenty graduating medical students chose one or two of the following physicians as the mentors they wished to thank:

David Abdun-Nur, MD; Fran Biagioli, MD; Elizabeth Blount, MD; Rebecca Cantone, MD; Ben Douglas, MD; Jessica Flynn, MD; Brian Frank, MD; Renee Grandi, MD; Sharon King, MD; Rio Lion, DO; Andrew Lum, MD; David McAnulty, MD; Christina Milano, MD; Kim Montee, MD; Liz Powers, MD; Joshua Reagan, MD; Bruin Rugge, MD; Ben Schneider, MD; David Silver, MD; Joe Skariah, DO, MPH; Johanna Warren, MD; and Daisuke Yamashita, MD.

In addition to honoring these special preceptors during the event, students who received the Lundy Award, the Robert B. Taylor Award and the Outstanding Clerkship Award were announced during the dinner. For more details regarding these recipients, go to pages 26 and 31.

Carly Chambers with her mentors, Rebecca Cantone, MD and Fran Biagioli, MD. Joshua Lum with his dad, Andrew Lum, MD, one of his mentors.

Peter Scott with his mentor, David McAnulty, MD. Bryan Wu with his mentor, Daisuke Yamashita, MD. Lisa Pearson with Ben Schneider, MD.
The OAFP/Foundation provides a scholarship every year to an OHSU graduating medical student who is entering a family medicine residency. This award, known as the Mary Gonzales Lundy Award, was established in 2000 to honor the retirement of Mary Gonzales Lundy who had served since 1979 as Executive Director of the OAFP.

The awardee is chosen by the OAFP/Foundation trustees on the basis of answers to a variety of essay questions that get to the heart of why this student sees herself or himself as a valuable addition to the specialty of family medicine.

This year the Foundation had the daunting task of choosing the 2017 recipient from 15 very qualified candidates who will all contribute greatly to our profession. We are happy to say that the Foundation was able to honor two students with the Lundy Award: Rita Aulie and Bryan Wu.

Kathryn Kolonic, DO, President of the OAFP/Foundation, presented the award to Rita Aulie during the OAFP Celebration Lunch in Sunriver, and Bryan Wu received his award at the Annual Graduation Mentor Dinner in Portland.

Rita graduated from the Robert D. Clark Honors College at the University of Oregon, with a BS in Biochemistry. Aulie’s path began early, as she tells us, “I grew up in Redmond and knew there was a shortage of family doctors. It was pretty clear to me that if rural family medicine doctors are what we need, then that is what I should do.”

Rita’s dedication to community service and leadership has been inherent throughout her time at OHSU: she was co-leader of the Family Medicine Interest Group (FMIG); the Rural Health Interest Group; and the Wilderness Medicine Interest Group. She was a medical student volunteer at the Southwest Portland Community Health Clinic and the Vancouver Heights Clinic. Somehow, she also found time to perform with the Jewish Community Orchestra for members of a local assisted living facility. She was the student liaison for the 2016 Japan Primary Care Conference in Tokyo, showing students how to start an FMIG program.

She also received the Foundation’s Laurel G. Case Award when she precepted with Kristen Dillon, MD, in Hood River and Andrew Janssen, MD, in John Day. As an Oregon First student, Rita has spent this past year at Cascades East Family Medicine Residency in Klamath Falls, where she will begin her residency this summer.

Whereas Rita knew she wanted to be a family physician early on, our second Lundy winner, Bryan Wu, took another path before settling on Family Medicine.

After graduating from the University of Chicago with a Bachelor of Arts in Economics with Honors, Bryan worked with Teach for America in the Bronx as a Biology Teacher and Science Department Chair for four years. During that time, he also attended Harvard University to receive his post-baccalaureate degree and Pace University for his Master of Science in Adolescent Education. Somehow, during this time period, he also worked as a study coordinator at the Albert Einstein College of Medicine in the Bronx where he conducted interviews as part of a smoking cessation program. When the time came for Bryan to begin medical school, he jumped in with the same vigor as he did as a teacher – he was selected as a medical student intern for Physicians for a National Health Program – organizing Portland area physicians in support of single-payer health care and chosen as one of three medical student members of the OHSU School of Medicine Admissions Committee. Bryan matched at the Valley Medical Center in Renton, Washington.

Congratulations to Rita and Bryan; we’ll be watching your careers flourish!

Please contact the OAFP/Foundation if you are interested in donating to the Lundy Fund.

Past Lundy Award Recipients

<table>
<thead>
<tr>
<th>Year</th>
<th>Name</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>2002</td>
<td>Marc Carey, MD, PhD</td>
<td>Providence Medical Group SE, Portland</td>
</tr>
<tr>
<td>2003</td>
<td>Eric North, MD</td>
<td>Hope Family Medicine, Silverton</td>
</tr>
<tr>
<td>2004</td>
<td>Jason Kuhl, MD</td>
<td>Providence Medical Group, Medford</td>
</tr>
<tr>
<td>2005</td>
<td>J. Ryan Marlin, MD</td>
<td>Delta Family Physicians, Delta, CO</td>
</tr>
<tr>
<td>2006</td>
<td>Stacia Munn, MD</td>
<td>St. Luke’s Capital City Family Medicine Clinic, Boise, ID</td>
</tr>
<tr>
<td>2007</td>
<td>David L. Hall, MD</td>
<td>Strawberry Wilderness Community Clinic, John Day</td>
</tr>
<tr>
<td>2008</td>
<td>Jennifer Holliday, MD, MPH</td>
<td>Family Medicine Health Center, Boise, ID</td>
</tr>
</tbody>
</table>
On April 22, during the annual Celebration Luncheon which was held in Sunriver, Dan Paulson, MD, was sworn in by AAFP Vice Speaker, Alan Schwartzstein, MD, FAAFP, to a second year as President of the OAFP.

Paulson states, “The OAFP knows that strong, comprehensive primary care is an essential element of high quality health care. We will continue to advocate for our members as they work to improve the health of their patients and their communities.”

Congratulations Dan; we look forward to working with you this upcoming year. (For more information on Dan Paulson, see page 10, 2017 Oregon Family Doctor of the Year article.)

Announcing a Special Opportunity from ABFM!

The ABFM has just announced that it is offering the PRIME Registry FREE to the first 2,000 board-certified family physicians who sign up! One major advantage of this offer is that you can also report for MIPS for free through PRIME—though physicians must sign up before July 31, 2017 to be ready to report for the 2017 MIPS performance period (the ABFM will continue to enroll Diplomates for free until the 2,000 slots are exhausted).

Even if you miss the MIPS advantage deadline, family physicians and their primary care colleagues and mid-level providers as well can benefit from PRIME. The PRIME Registry is currently helping nearly 3,000 primary care clinicians get data out of their EHRs to view any performance gaps and reduce reporting burden. In fact, more than 1,100 clinicians used PRIME to report for PQRS this year! Additionally, many have been able to use the PRIME registry to identify gaps in care at the individual patient level. PRIME is also supporting hundreds of family physicians in reporting data for several federal practice transformation demonstrations including TCPI and CPC Plus.

Already enrolled in the PRIME Registry? Great news! The ABFM is also offering three additional free years to any Family Medicine Diplomates who have already signed up. And after the initial three years, PRIME cost is only $295/Diplomate/year. For all other family physicians, primary care colleagues, and mid-level providers, the cost is only $360/clinician/year.

For more information or to take advantage of this offer, please email us at: prime@theabfm.org or call 888-995-5700.

www.oafp.org
Spring was a busy time for the OHSU Family Medicine Interest Group. Here’s a peek at what we’ve been up to, from two members of our FMIG student leadership team.

Starfield Health Equity Summit
Rose Chuong, Co-Chair, OHSU Family Medicine Interest Group

Nine FMIG members attended the Starfield Summit in Portland, April 22-25. The annual conference focuses on health equity and draws attendees from across the US. For me, it was a transformative and humbling experience. Everyone there seemed to be doing their best to provide patient-centered care and to raise awareness about systemic factors that impede that care. We discussed socioeconomic factors, racism, sexism, immigration status, implicit biases and more.

During small group sessions, we dug deeper. We shared our medical student perspective, alongside family medicine residents, program directors and CEOs of healthcare systems.

Because I was raised by immigrants and some of my closest friends are immigrants, I wanted to see how I could improve access to healthcare for that particular population, especially in the current political climate. The summit deepened both my passion for raising awareness about health disparities and also my commitment to working in the community. I also learned about how family medicine physicians fit into that role.

At a CareOregon session, we learned about Oregon’s leading role in efforts to organize healthcare around vulnerable populations. We heard stories from Duke University family medicine residents and were inspired to be leaders and create positive change by sharing our own narratives.

Overall, the weekend renewed my passion for medicine and gave me a new set of tools to tackle some of the complex factors that will affect my future patients’ health.

PNW MHCA Day of Service Mobile Health Fair
Emma Felzein, Co-Chair, OHSU Family Medicine Interest Group

On April 29, nearly 20 FMIG members spent the day at the Pacific Northwest Mobile Health Clinics Association (PNW MHCA) Day of Service Mobile Health Fair, serving uninsured patients at La Clinica de Buena Salud in North Portland.

OHSU’s Casey Eye Institute initiated this opportunity, in collaboration with ¡Salud! and Pacific University College of Optometry. Throughout the day, dozens of volunteers from a variety of organizations assisted over 70 patients, all of whom received no-cost eye exams and general primary care consultations.

My fellow FMIG members and I had the privilege of working particularly with ¡Salud!, an organization that provides healthcare for seasonal vineyard workers in Oregon. With ¡Salud!, we learned about the ins and outs of running a mobile clinic. We evaluated blood pressure and heart rate, measured height, weight and abdominal circumference, educated patients about their glucose and cholesterol levels, and made referrals as needed.

Most of our patients were Spanish-speaking, which was both challenging and rewarding for those of us with minimal Spanish language skills. I will never forget the look of instant forgiveness in our patients’ eyes as I stumbled my way through broken sentences. Not knowing much Spanish-- or medicine, for that matter-- I wasn’t able to communicate much, but whatever I did say was spoken with love.

The health fair was the perfect opportunity to remind me why I want to be a physician: I want to compassionately care for my community.

This was FMIG’s first partnership with the Pacific Northwest Mobile Health Clinics Association, but it certainly won’t be the last!
Ruth Chang, MD, MPH, FAAFP and Melissa Hemphill, MD, FAAFP, received the Degree of Fellow during the OAFP’s annual celebration in Sunriver in April. Drs. Chang and Hemphill received this distinction because of their service to family medicine in their community, by their advancement of health care and by their professional development through medical education and research.

Dr. Chang completed medical school and her masters of public health degree at the University of Michigan Medical School, her residency at OHSU, and joined Kaiser Permanente Gateway Medical Office, where she has practiced family medicine for the past 12 years. She has served in a variety of roles, including the director of operations for the west service area, director of diversity and inclusion, and currently as director of financial health for the medical group.

For more information on Dr. Hemphill, go to page 31.

continued on page 30
Robin Brown received the 2017 Outstanding Clerkship Student Award at the Graduation Mentor Dinner held in April. This award is given each year to a graduating senior who is going into Family Medicine and received honors on their Family Medicine Clerkship rotation. Robin will be entering her Family Medicine Residency at the University of Utah Affiliated Hospitals in Salt Lake City, Utah this summer.

Fourth year medical student, Rita Aulie received both the Robert B. Taylor, MD Award and the Mary Gonzales Lundy Award. The Taylor award honors Robert B. Taylor, MD, professor emeritus and former department chair, and is given to a graduating student who best exemplifies the qualities of the ideal family physician. Students are chosen based on scholarship, leadership and dedication to Family Medicine as a specialty over the course of their four years at OHSU. For more information regarding Aulie’s receiving the Lundy Award, please go to page 26.

Subra Seetharman, MD, is the 2017 recipient of the Lewis and Ruth Carpenter Teaching Award for Teaching Excellence in an Outpatient Setting. This award is given annually to a community physician who is actively engaged and committed to one-on-one teaching in an ambulatory setting. “I love the interactions with my students and there are always new ideas they share,” said Seetharman. Dr. Seetharman has worked at Northwest Primary Care – Milwaukie Clinic for nine years. He received his medical degree from the Stanley Medical College in India and completed his family medicine residency at OHSU.

Robert Wells, MD, FAAFP, received the Community Rural Preceptor Award from the OSHU School of Medicine during the school’s graduation ceremony. This award recognizes a physician that has demonstrated outstanding education of medical students in the rural setting.

Dr. Wells practices at Providence Medical Group – The Plaza in Portland. He earned his medical degree at OHSU and completed his residency in family practice at Kern Medical Center in Bakersfield, California. He has been a member of the OAFP for 35 years.

The AAFP recently bestowed the honor of “First Place – Large Chapters” to the Oregon Academy of Family Physicians for having the highest percent increase in active membership.

Interesting Business We Should All Know

Last month, David McAnulty, MD, of Northwest Primary Care, accepted his 200th medical student to mentor. He was surprised with a cake, a certificate and 200 thank you’s for his service. Thank you Dr. McAnulty to your dedication to supporting our future family physicians.
NEW BOARD MEMBERS ANNOUNCED

A new slate of officers was elected at the Annual Spring CME Weekend held in Sunriver in April. The officers are Daniel Paulson, MD, MS, Eugene, President; Robyn Liu, MD, MPH, FAAFP, Portland, President-Elect; Ruth Chang, MD, FAAFP, Portland, Vice President; David Abdun-Nur, MD, Grants Pass, Secretary; and Michael Goodwin, MD, Tigard, Treasurer.

Glenn Rodriguez, MD, Portland, and Evan Saulino, MD, PhD, Portland, are the delegates to the AAFP and Gary Plant, MD, FAAFP, Madras, and Liz Powers, MD, Enterprise, are alternate delegates to the AAFP.

Nathalie Jacqmotte, MD, Portland, is the Speaker of the Congress and Melissa Hemphill, MD, FAAFP, Portland, is the Vice Speaker of the Congress.

In addition, two new board members were elected to the existing board (which includes Heidi Beery, MD, Roseburg, OMA Trustee; Rick Kincade, MD, Eugene, Director; Jon Schott, MD, Baker City, Director; Kristen Dillon, MD, FAAFP, Hood River, Director; Melissa Paulissen, MD, Tillamook, Director): Kathryn Kolonic, DO, West Linn, Director and Jonathan Vinson, MD, Director.

Our student director is Brianna Muller and the resident directors are Justin Bruno, DO and Zach Nankee, DO, Samaritan Health Family Medicine Residency; Wes Baker, MD, OHSU Family Medicine Residency; and Dallas Swanson, MD and Dan Mosher, MD, Cascades East Family Medicine Residency. The resident directors for the Providence Hood River Rural Training Program, and the Providence Oregon Family Medicine Residency will be posted in the fall issue of the Family Physicians of Oregon.

Kathryn Kolonic, DO, received her Master’s in Public Health focusing in Health Education and Health Promotion from Portland State University. She then earned her medical degree from Touro University in Henderson, Nevada. She completed her residency in Family Medicine at the University of Nevada School Of Medicine in Las Vegas. She returned to Oregon, where she began practicing at Providence Medical Group - Canby for three years before becoming a partner at AIM Health in West Linn where she emphasizes shared decision making, health maintenance and preventive care with her patients.

Jonathan Vinson, MD, received his medical degree from Emory University School of Medicine in Atlanta and completed his residency in Family Medicine at Oregon Health & Sciences University. He serves in the Oregon National Guard as a flight surgeon and practices full-spectrum family medicine at Providence Medical Group-Lloyd in Portland, Oregon.

Zach Nankee, DO, is a second-year resident at Samaritan Health Family Medicine Residency. He earned his BS in Biochemistry from the University of Wisconsin-Madison and his medical degree from the Chicago College of Osteopathic Medicine.

Melissa Hemphill, MD, FAAFP, received her medical degree from the Oregon Health and Sciences University and completed her residency in family medicine at the Providence Oregon Family Medicine Residency Program. She recently completed her fellowship training from the Arizona Center for Integrative Medicine. She is on the faculty of the Providence Oregon Family Medicine Residency and practices family medicine at Providence Medical Group-SE in Portland, Oregon.

Dr. Schwartzstein introduces new OAFP board members to the Celebration Luncheon attendees.

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