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- Liz Powers, MD, FAAFP Named OAFP 2019 Family Doctor of the Year
- Highlights from 2019 OAFP Annual Family Medicine Weekend
- Counseling Vaccine Hesitant Patients
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About the cover:
Liz Powers, MD, FAAFP, surrounded by her family (left to right), Nic, Atticus, Liz and Malakai. They were able to celebrate with Liz as she was named the 2019 Oregon Family Doctor of the Year at the OAFP Spring Family Medicine Weekend.
It was the year 2000. The computers kept running and the world did not end as we know it. We had made it into the new millennium. As a third-year medical student that summer, I felt like there were so many possibilities for my medical career. In other words, I did not have a clue as to which specialty I was going into and this fact heavily weighed on me.

My first rotation was in obstetrics and gynecology and I loved the patients and had the honor of delivering a couple of babies. The experience was magical. Yet, I did not see a clear future in OB-GYN. At the community hospital where I rotated, many of the attendings practiced solo. While I deeply respected their around-the-clock commitment to patients and practice, I could not picture myself with that lifestyle.

So, onto the next rotation—general surgery. I’ve always loved working with my hands. My older brother is a general surgeon. Perhaps this would be it...until I got kicked out of an operating room by the attending for answering a rhetorical question. I was twisted at an awkward angle holding a retractor and could not see anything. Surgeon: “Chang, why do all medical students act like abused dogs?” Me: “Because we are.” I crossed surgery off the list.

Third year went by, rotation by rotation, and I was increasingly nervous that I would end up choosing a specialty by the process of elimination. Not exactly what I had hoped to do. But then halfway through the year, I walked into a family medicine clinic in a small town in Michigan and introduced myself to my preceptor, Dr. John O’Brien. He greeted me warmly, asked about my background, and I watched him deeply connect with every patient. I got to assist in some office-based procedures. We saw prenatal patients, kids, adults with chronic illnesses, and adults who were healthy. I loved the variety and the patients and most of all, I found my people. I found the attending who I wanted to emulate. Family medicine was it!

This is my story of how I chose family medicine, but it is not a singular story. In a recently published qualitative study, preceptors who practice full scope family medicine were the top influence as to why medical students choose our specialty. So, to those of you reading this who precept students and/or residents, thank you. Thank you for not just your service to your patients and community but for also teaching and inspiring the next generation of family physicians. We need you now more than ever and we need you to help recruit your colleagues to be preceptors.

We have a rising increase in student interest in family medicine. Per the Oregon Health Science University (OHSU) and Western University-COMP family medicine clerkship coordinators, they are in constant need of more preceptors. Results from the 2019 match shows year over year increase, for the last 10 years, in the number of students going into family medicine. Combining the National Resident Matching Program with the American Osteopathic Association, 4,152 students matched in family medicine in 2019 versus 4,040 in 2018. Locally, 15% of the OHSU class at matched in family medicine as did 27% of the class at Western University-COMP NW.

Our state needs more family medicine residency training spots and programs. We do not have enough residency spots in the state of Oregon for all the in-state medical students who go into our specialty. We are exporting our medical school graduates who matched in family medicine. We know that local training programs are a great investment. The Robert Graham Center research has shown that 56% of graduates of a program practice within 100 miles of where they trained. Currently, Oregon is a net importer of family physicians. We graduate fewer family medicine residents per year than the number of physicians retiring or leaving practice. We cannot rely on family physicians wanting to move to our state as a workforce planning strategy.

There is good news. CHI Mercy Roseburg is in the final stages of planning for their first class of residents in July 2020. Way to go, Roseburg! At the state GME Consortium, there are discussions regarding establishing residencies in Hermiston, Bend and Medford. Funding for GME continues to be a key barrier to establishing residencies so we also need to look for other sources of funding. This year the OHSU Family Medicine-Kaiser Permanente Northwest collaboration will graduate its first cohort of family medicine residents.
Kaiser Permanente Northwest funds a quarter of each class of OHSU family medicine residents through its community benefit program. This has been a successful public-private partnership and could serve as a model for future programs.

According to the Association of American Medical Colleges, by 2032, the US will have a shortage of 46,900 to 121,900 physicians, with 21,100 and 55,200 shortage in primary care. How can the Oregon Academy of Family Physicians help facilitate workforce planning? What can each individual family physician do to contribute? Please join us in this conversation to plan for our future. If you would like to start precepting students, please contact Dr. Katherine Fisher or Bre Gustafson.

If not now, when?
If not us, who?

References:


3. E. Blake Fagan, MD; Sean C. Finnegan, MS; Andrew W. Bazemore, MD, MPH; Claire B. Gibbons, PhD, MPH; And Stephen M. Petterson, PhD. “Migration After Family Medicine Residency: 56% of Graduates Practice Within 100 Miles of Training.” *Am Fam Physician*. 2013;88(10).

GREETINGS FROM THE OAFP

BETSY BOYD-FLYNN, OAFP EXECUTIVE DIRECTOR

One Year In

I marked my one-year anniversary at the OAFP on May 15, and what a year it’s been! Like so many transitions, it seemed to pass in a blur as the annual cycle of events unspooled. Taking time to reflect on it, however, I am overwhelmed with gratitude.

This organization is served by a cadre of dedicated volunteers who are giving their time and expertise to the operation of this amazing organization. This year we re-constituted the Commission on External Affairs to assist with our legislative agenda development, and that group has met bi-weekly since the session started. The Commission on Education worked to plan a Scientific Assembly that was well-received by the folks who joined us at Skamania in May, when more than 20 different speakers offered their expertise to the gathered attendees. The Nominating Committee met to consider and recommend a slate of qualified candidates for Board leadership, and an ad-hoc Bylaws Committee worked to make needed updates to our governance documents. Of course the Board of Directors has met throughout the year, as well, conducting strategic discussions around how the OAFP can continue to promote and support the work of family physicians, and offered support and counsel to members and organizations trying to address social determinants of health.

My role has taken me out of the office on numerous occasions: I’ve gotten the gift of visiting a clinic to see how the team in a medical home is trying to keep on improving the care they offer their members. I met with the directors of every family medicine residency program in Oregon to advance our work to support family medicine residency directors, including a road trip through Klamath Falls and Roseburg. This spring, I’ve had the honor of helping our members tell their stories to legislators and policy makers in Salem and even Washington DC, and seen the power of their stories to really move the folks to whom they are speaking.

The relationships I’ve begun building in this role are another gift. At every AAFP gathering I’ve attended, I have been welcomed into the community of other chapter executives, who have provided counsel and resources when I needed them, and who have offered their warmth and friendship besides.

Finally, I’ve had the support of an incredibly encouraging board, who has backed me up and given me space to make operational changes that are already paying off in improved efficiency in how the organization runs day-to-day.

Looking ahead to the coming year, the board will embark on a long-term planning process in conjunction with the October Board meeting. We will continue to work to support the family medicine residencies as they work to organize themselves to support faculty development, recruitment, and more. Louise and I will continue to work on internal processes and tools to better serve our members. We intend to launch an updated website and an online collaboration tool to support the work of the Board and Commissions, so stay tuned!

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*Ruth Chang, MD, MPH, FAAFP
*Robyn Liu, MD, MPH, FAAFP
*Dan Paulson, MD, MS

Bylaws Committee
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Commission on External Affairs
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*Anne Toledo, MD
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How I Learned Advocacy from the Oregon Delegation

As a first-time attendee of the AAFP Advocacy Summit, I was admittedly hesitant about our ability as physicians to promote primary care in such a tumultuous political environment. Feeling more helpless than hopeful, I tried to keep an open mind. Almost immediately, the underlying pessimism I felt was acknowledged and addressed by multiple speakers and attendees, highlighting the practicality and passion of a large group of family medicine physicians.

In an increasingly inequitable health care system, our voices are more important than ever. This message was echoed throughout each presentation. We learned that the research supports our own individual experiences as clinicians, that effective primary care improves patient outcomes and reduces overarching health care costs. There were well-informed talks on the various models for care and payments, on the media and healthcare, rural health disparities and innovations in graduate medical education.

I quickly recognized being a part of the Oregon delegation made me the luckiest. We were led and organized by Betsy Boyd-Flynn, OAFP Executive Director, with four past OAFP presidents, Evan Saulino, MD, PhD, Liz Powers, MD, FAAFP, Dan Paulson, MD, MS, and Robyn Liu, MD, MPH, FAAFP, along with treasurer Michael Goodwin, MD and resident board member Stuart Zeltzer, MD. These experienced advocates for Oregon and primary care were exactly who were needed to help with the Sisyphean task of informed legislating during a split congress.

We focused on concrete issues in our asks, with our own patient stories to highlight actual pertinence. These were not difficult to come up with when discussing the crippling financial stress we see in our patients with high deductible insurance plans. Drawing from our own community’s experiences, we highlighted the need for a well-trained, primary care workforce. More effective graduate medical education is possible by increasing rural training sites, adjusting rural-hosting policies for residents, as well as funding Teaching Health Centers for the actual length of a residency. The final ask was urging for the appropriation of funds to research firearm morbidity and mortality prevention, a necessary step to passing public health policy.

Seeing the drive and grit involved in lawmaking, as well as the genuine concern for these above asks, left me more optimistic than I have been in years. Attentive staff members, as well as elected officials, took time to listen to us during an obviously busy day on the hill. People were trying to get things done, in spite of all the noise.

As I continue to try to find my footing in my first year at a big-kid-post-residency job, this experience has helped solidify the value of the simple and thoughtful solutions family medicine provides to the bigger picture.
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After a Tough Legislative Session, Reassessing the Path Forward

Oregon made a significant leap forward in health care transformation when we stood up our patient centered primary care home model, known as PCPCH. A study of this model found that in the first three years of implementation, PCPCHs saved $240 million dollars relative to clinics that had not adopted the model. The researchers also found that the longer those practices were up and running, the greater the savings. Despite the evidence, payers have been slow to support and incentivize movement towards this model of care, and thus clinics have struggled to fully implement it. Clinic managers and practice owners report low reimbursement, a fee-for-service dominated payment structure, and a lack of alignment in payment models, quality metrics and utilization management systems create real systemic barriers to implementation.

This is why the legislature passed SB 934 in 2017, which said commercial insurers, CCOs and public employee benefits must spend a minimum of 12% of their total medical expenditures on primary care. Since then, payers have been required to report as “total medical expenditures” suddenly decreased significantly, primary care spending stayed static, but payers reported primary care spending as a percentage of total medical expenditures went up significantly.

Not only did the changes make our data misleading, it also made our data incomparable to national and international efforts to calculate primary care spending and the total cost of care; no other efforts to calculate primary care spending as a percentage of total medical expenditures exclude prescription drugs.

The OAFP tried to correct this situation with SB 765 during the 2019 legislative session. But after passing unanimously out of the Senate, the bill came under heavy fire from commercial insurers and CCOs, and died in the House.

Every legislative session, payers face a laundry list of bills that require them to cover new treatments or drugs, or take away utilization management strategies such as prior authorizations—all of which drive up costs, and thereby increase premiums. From the payer perspective, health care costs are out of control with unrestrained cost increases for hospital care and pharmaceuticals, and these bills exacerbate the problem.

Unfortunately, SB 765, which would have effectively mandated increased spending on primary care, fell in the same category for them. Despite paying lip service to the benefit and value of strong primary care, they refuse to take into account the mountain of evidence that shows high quality primary care saves money elsewhere in the system. Whether their refusal is an issue of actuarial science or will, is hard to know, but for the OAFP, it appears we need to find other paths to increase investment in primary care, and decrease the administrative burden associated with billing.

So, what can we do?

As I write this, we are going into the final weeks of session. Rep. Rachel Prusak (D-West Linn), a family nurse practitioner and member of the House Health Committee is working hard to stand up a committee sanctioned, and legislative analyst staffed, workgroup on universal access to primary care. Specifically, she is interested in discussing the advantages and disadvantages of a primary care trust, or single payment for primary care system. That workgroup could be effective in developing future policy or legislative recommendations in the future.

We can also double down our efforts in the primary care payment reform collaborative, a multi stakeholder group that has been working on payment reform for the last four years. The collaborative has been remarkably effective in identifying the
barriers to change from insurer and provider perspectives, and fostering communication and agreement on a path forward. Accountability and actual change have been more difficult to accomplish, and there is room for the OAFP and other provider groups to press harder for movement.

Lastly, the legislature has discussed what to do about the lack of access to behavioral health services in Oregon for years. Perhaps 2020 or 2021 will actually be the time when they implement some real policies to increase access. Integrated behavioral health is a core component of the PCPCH model, and one of the least disruptive locations to provide this type of care. If we can convince legislators that much of behavioral health is primary care, perhaps we can convince them to help us achieve the systemic change you and your patients so badly need.

Healdsburg District Hospital is seeking a full-time Primary Care Physician with a background in Family Practice or Internal Medicine. This position would be located at our Healdsburg Physician Group Clinic on the hospital’s campus located in the heart of Sonoma Wine Country. About an hour north of the Golden Gate Bridge, beautiful Healdsburg, California offers wonderful wineries, world-class dining, redwood forests and gorgeous countryside.

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I seem to find universal agreement that “politics” are a mess. Whatever your leaning, the divisiveness and rancor often repel those of us who thrive on healing and relationship building. Still, politics—or rather—political engagement is the only road to sound policy. Health care policy is rapidly evolving, both locally and nationally. It affects us as family physicians, and it especially affects our patients. You know this as well as I. From meaningful use requirements to E&M coding to prior authorizations and so on, the facilitators of and barriers to care are driven by policy. You already know that corporate interests are well represented in the legislature. If you are reading this, you likely also know that the OAFP represents your interests and those of your patients. The OAFP PAC amplifies your voice with contributions to state-wide candidates and initiatives. Our PAC targets support for lawmakers who are shaping the future of primary care in Oregon.

We are steeped in the broth of advocacy, though our training focuses most intensively on the micro level—fighting for individual patients. Please join me in devoting a small amount of your energy to macro-level advocacy. While there is no time commitment, joining the PAC (with any level of donation once per calendar year or on an ongoing basis) gives you even more voice in determining who our Academy supports for office. Please join me and many other family physicians around the state by becoming a member of the OAFP PAC. Your patients and your colleagues will thank you for it!

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PRIME Includes:

More Measures that Matter — through PRIME’s improved array of high-value primary care measures with demonstrated connection to improved outcomes and quality of life.

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Improved Health for Communities:
PRIME’s quality dashboard helps identify patients with quality gaps and helps practices see how they are doing compared to their peers.

The PHATE tool helps identify patients at risk due to social determinants and provides an in-clinic connection to resources in the patient’s community, while also illuminating areas where resources are needed. PHATE has the potential to help guide more personalized risk-assessment and access to patient resources.

Reduced Burden for Clinicians:
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Dr. Liz Powers, a family physician from Enterprise, was awarded the Oregon Academy of Family Physicians’ Family Doctor of the Year award on May 4 at Skamania Lodge in Stevenson, WA.

Dr. Powers was honored for her contributions to her practice, her local community, and her profession. She serves as a mentor to students and Family Medicine Residents at Winding Waters Clinic, where she completed part of her residency, and has remained. In addition, Dr. Powers is a clinical instructor for OHSU.

Dr. Powers has been a leader in Oregon’s efforts to transform primary care, leading her clinic to earn recognition as the first five-star Patient Centered Primary Care Home in Oregon. She has shared her experience as a rural family physician with policymakers across Oregon and across the country as lessons from Oregon’s experience with healthcare transformation have spread.

Her leadership roles in her career are many and reflect her influence across multiple sectors of health care. Of note, she served as President of the Oregon Academy of Family Physicians in 2014, and has continued working with Oregon policy makers to represent the voice of the rural clinician fighting for the health of her patients.

The Family Doctor of the Year is selected from among excellent family physicians across the state, each of whom has been nominated with support of colleagues, practice staff, and patients. For Dr. Powers, her colleagues were effusive in their praise; words such as: “passion, contagious enthusiasm, consummate professional, and indomitable force.” She has been described as being “dedicated, smart, engaged, compassionate, empathetic, and incredibly thoughtful and well spoken.” She is a “leader and model to her staff, other health professionals and medical students” and is a regional and national leader.

She takes an innovative, inspirational approach to all things medical and community related. She is truly a “shining star.” Dr. Powers is passionate about providing high-quality, comprehensive, patient-centered care.

Dr. Powers is also a wife, friend, and mother. She and her husband, Nic, are the proud parents of Malakai and Atticus. They can be seen volunteering at the local ski hill, playing music at an annual Fiddle Camp, cheering for their sons at soccer games and attending school choir performances.

Congratulations Liz!
Dr. Power’s family is happy to celebrate with her.

Who will it be next year?

2020 Family Doctor of the Year Nominations

Do you know someone who has the necessary qualities to be considered for the 2020 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 will discuss the process and timeline for your candidate. Next year’s Family Doctor of the Year will be announced at our Annual Spring Family Medicine Weekend which will be held in Portland from April 23 to 25. Nominations and all supporting materials must be submitted by February 15, 2020. Please contact Louise Merrigan. We look forward to hearing from you!
Highlights From Our Family Medicine Weekend

This year over 150 family physicians, residents, medical students, presenters, guests, and staff enjoyed a sunny warm weekend at Skamania Lodge in Stevenson, Washington for the 72nd Annual OAFP Family Medicine Weekend.

The conference began on Thursday, May 2, when ORPRN’s new Director, Nancy Elder, MD, MSPH, opened the program with a warm welcome. ORPRN staff ran a workshop focused on ORPRN studies and projects titled “Improving Health and Reducing Disparities.”

The third part of the program featured “Findings from Healthy Hearts Northwest.” During this plenary panel, discussions centered around ORPRN’s recent Healthy Hearts project; the session was well received and ORPRN and OAFP will work together on spreading the information from the study to more clinics across Oregon.

The Poster Session allowed attendees to get up and move about and enjoy light refreshments. This year Ashley Bryson, MD, a resident at the OHSU Cascades East Family Medicine Residency program was selected to receive free attendance to the meeting, compliments of the OAFP, and a $300 travel stipend award from the OAFP Foundation.

The winners of the Poster Session were Katie Murphy and Francisco (Frank) Peña for their entry “Evidence-Based Development of a Rural Community-Focused Wellness Program.”

The afternoon featured a networking and visioning session to discuss “Headaches and Heartburn: What Matters to You?” This session gave the attendees a chance to share, discuss, and help plan potential directions and research topics for ORPRN in the future. Dr. Elder and the ORPRN Steering Committee closed out the day with an Awards Ceremony.

As some ORPRN convocation attendees were heading home, many joined other OAFP members as they arrived for an informal welcome pizza party. This year’s party was held at the Columbia Gorge Interpretive Center. Guests enjoyed food, drinks, camaraderie and wonderful views of the Gorge. The party moved on to the Forest Fire Pit back at Skamania, where friends old and new gathered with their instruments and high-tech song books (iPads), and enjoyed a roaring fire, S’mores, hot cocoa, homemade wine, and songs.

Meanwhile, a large contingency of Family Medicine Champions and Exhibitors were setting up in the Exhibit Hall. Friday kicked off with a continental breakfast in the exhibit hall, where attendees mingled with exhibitors and perused (and bid!) on silent auction items for that night’s OAFP Foundation Auction.

The OAFP conference officially kicked off at 8:30 am with Welcomes and Introductions. We were fortunate to have AAFP’s Board Chair, Mike Munger, MD, FAAFP present on “AAFP: Building for Tomorrow Today.” Dr. Munger’s talk focused on AAFP advocacy efforts, initiatives to address the family physician workforce, and a discussion of how to support physician wellness.
Great to know how AAFP is impacting & influencing the national conversation.

Following his inspirational words, the program shifted to a panel including Glenn Rodriguez, MD, Evan Saulino, MD, PhD, Liz Powers, MD, FAAFP, and Gary Plant, MD, FAAFP. They spoke about “Value Based Payments, and Administrative Simplification in Plain Language.” The speakers used their own experience to demonstrate the complexity of the challenges facing the specialty as practices try to manage ever-more complex administrative arrangements, and connected what can seem like abstract policy to on-the-ground practice.

Wonderful to have such a breadth of perspective and experience - excellently delivered, nicely interactive

Next, Dr. Nellie Wirsing spoke to the assembled group to present “Reproductive Health Care: Conversations for Family Physicians and Their Patients.” While in some respects, Oregon is a leader in access to contraception and reproductive health care, the session offered attendees a refresher along with practical ways to bring these discussions into primary care visits.

Great presenter! Engaged & engaging. I’ll be more mindful about providing EC, & about asking men one key question.

At lunchtime, attendees gathered to collect boxed lunches in the Exhibit Hall. Attendees had ample time to talk to seventeen Exhibitors and five Family Medicine Champions, one of whom traveled all the way from Florida to exhibit. Our members were encouraged to play OAFP “Bingo” and gather stamps by visiting a majority of the exhibitors for a chance to win free registration in 2020. This year’s winner was Dr. Kelly Patterson of Klamath Falls.

It was such a beautiful day that many attendees decided to take a walk or eat lunch al fresco. The afternoon session was comprised of three small group sessions. Topics presented were: Reproductive Health Resources, Primary Care and Hormone Therapy for Transgender Individuals, Strategies for Integrating Lifestyle Medicine into Family Medicine, AHEC Scholars Panel, Lessons from the Relational Leadership Institute, Managing Addiction in Pregnancy, Tools to Support Melanoma Screening in Family Medicine, Practicing Medicine in Today’s Compliance Driven World, Creating a “Culture of Health” in Klamath Falls, Tools for Team-Building and Leading within Systems, and Interdisciplinary Management of Opioid Use Disorder in Primary Care Settings.

The innovative methods of solving local problems was impressive.

Good data and concepts. Wonderful implementation in a rural community.

Very well presented! Worthwhile and important concepts for building relationships at a local level

I so appreciate the introduction of conversation that was timely and relevant about payment methodologies. I appreciate interactive nature of plenary sessions.

After such an informative afternoon, attendees had a few minutes to take a break before heading to the Stevenson Ballroom for the Auction. (Please see the Foundation News for details).

continued on page 18
After the Congress, Senator Elizabeth Steiner Hayward, MD, FAAFP and OAFP Lobbyist, Sam Barber gave a Legislative Update to a packed room. They briefed attendees on the fast-changing legislative session in Salem, and OAFP’s efforts to further reinforce meaningful primary care investment among commercial and Medicaid health insurance plans through legislation.

“I really appreciate hearing directly from the legislators at these meetings. Please encourage attendance annually, it makes us feel heard, listened to, supported, and that our work matters!”

Dr. Bill Origer’s presentation on “New Drugs: The Good, the Bad and the Worthless” has always been a popular update at our conference. Once again, Dr. Origer delivered an informative lively speech and pulled no punches in his critique of areas where new drugs may not be worth the hype.

“helpful quick review of new medications, enjoyed very applicable info presented in interesting way”

The Celebration Lunch is one of the highlights of the weekend each year. This year’s well-attended luncheon did not...
disappoint. After Robyn Liu, MD, MPH, FAAFP made brief farewell remarks, incoming OAFP Board President Ruth Chan, MD, MPH, FAAFP, delivered an insightful speech (see p. 4 for a version of her remarks). Dr. LJ Fagnan announced Dr. Liz Powers as the OAFP Family Doctor of the Year. AAFP Board Chair, Michael Munger, MD, FAAFP, delivered brief remarks by way of an AAFP update, conferred three new fellows: Doug Eliason, DO, FAAFP, Rick Williams, MD, FAAFP, and Liz Powers, MD, FAAFP. He also installed the new officers and board members. Departing board members were thanked for their time and talent, including Katie Kolonic, DO, MPH, Kristen Dillon, MD, FAAFP, and Glenn Rodriguez, MD. Glenn ended over 20 years of board service through multiple roles.

After lunch, several members attended a KSA Study Hall on Health Behaviors. Those not in attendance, took advantage of the beautiful day and location. There were lawn games set up outside and a children’s room inside. Some checked out of their rooms and departed, saying goodbyes and looking forward to next year’s weekend when they will reunite as a group. The OAFP Board had its spring meeting over dinner, and as with the other evenings, the remaining musical doctors gathered for a sing-along/jam session outside by the public fire pit.

The weekend’s program ended with a free buprenorphine waiver training on Sunday morning. About a dozen physicians attended the four-hour session to take the steps to treat opiate addiction in their practices.

And now we are at the conclusion of our program. We thank all of you who attended, assisted and participated in this wonderful weekend. We have looked at all of the comments and evaluations and are confident that next year’s Family Medicine Weekend (April 23 – 25, 2020) will be better than ever.

Early Saturday, morning the attendees gathered to participate in the Congress of Members discussing and passing all or part of five important resolutions, and updates to OAFP Bylaws. A summary of the resolutions is listed below, and the updated bylaws are available on the OAFP website.

1) The OAFP delegates will introduce a resolution to the 2019 AAFP Congress of Delegates that AAFP will support the enforcement of current legislation as well as additional legislation that supports the ability of working mothers to breastfeed.

2) The OAFP will also introduce a resolution to the AAFP Congress that AAFP oppose legislation that targets family doctors who provide abortion services, and that AAFP issue a position paper against the practice of criminalizing physicians for providing abortion care.

3) The OAFP will begin including gender pronouns on all OAFP-sponsored event and conference registrations starting in 2020, with an opt-out option for individuals who do not wish to have gender pronouns included on their name badges. The OAFP delegates will introduce a resolution to the AAFP Congress encouraging the same.

4) The OAFP delegates will introduce a resolution at the 2019 AAFP Congress that AAFP will adjust its recommendations regarding children at AAFP meetings from “Out of consideration for others, please do not bring children to CME events” to “AAFP supports families. Please use your best judgment regarding bringing children to CME events,” and that AAFP will provide an on-site play area for children and their caregivers at AAFP FMX and COD, and that AAFP will consider providing on-site child care services at AAFP FMX and COD, and that AAFP will enhance efforts to accommodate breastfeeding parents at AAFP FMX and COD by providing a lactation lounge with basic services including privacy, running water, refrigerated milk storage, and opportunities to donate excess breast milk.

5) The OAFP Board will study the implications and possibilities of joining as a full institutional member organization within HCAO and make a recommendation to the Congress of Members at the 2020 Congress of members.
This is a busy time of year for many with graduations, conferences and fundraising events aplenty! The OAFP/Foundation took part in this celebratory season by holding its annual auction during the OAFP Spring Family Medicine Weekend at Skamania Lodge last month, honoring top-notch OHSU family medicine students with the Mary Gonzales Lundy Award and providing a first-time scholarship to a family medicine resident to present her research findings to her peers.

Auction 2019 Bloomin’ for Bids was a Bloomin’ Success -- $42,000 and counting!

Whether or not you have taken part in an OAFP/Foundation auction in the past, everyone who participated this year knew that the fundraising was off the charts. Can you imagine an apple pie selling for $2,900? Yes, Mary Lundy’s farewell pie making came to an end on that high note! Other members were able to purchase fine jewelry, delectable wine, incredible handmade items (our members are absolute artists!) and adventures near and far. A special thank you to Gary Plant, MD, our auctioneer, who gently coerced every last penny out of the crowd. With the support of the members and vendors listed below, the Foundation board is excited about the goals and programs that can be fulfilled to help continue to invest in the future of our family medicine students and residents.

Thank you to the following vendors, members and staff who contributed to the auction offerings: (OAFP members and staff in bold)

A-1 Beach Rentals
Katherine & David Abdun-Nur, MD
Aldrich Core Consulting
Al’s Garden & Home
Ashland Hills Hotel & Suites
Trish Banning, Hasson Realty
Banning’s Restaurant & Pie Shop
Paula Bednarek, MD
Best Western Plus Hood River Inn
Fran Biagioli, MD
Jason & Kristen Bradford, MD, MPH
Brenda Brischetto, MD & Evan Saulino, MD, PhD
Broadway Rose Theatre
Ruth Chang, MD, MPH, FAAFP
Jane Conley
Durant Vineyards & Olive Mill
Eastside Distilling
Embassy Suites Hotel Downtown Portland
Enchanted Forest
Lynn & Jeff Estuesta
Scott Fields, MD
Fifty/Fifty Bottles
Michael Goodwin, MD
Michael Grady, MD, CMD
Glowing Greens
Linda & Jack Griffin
Hair Method Studio
Tom Harvey, MD, FAAFP
Lee & Scott Havens
Justin Rodriguez & Joyce Hollander-Rodriguez, MD
Inn at Cannon Beach
Julie & Mark Johnson
Kimpton RiverPlace Hotel
Lange Estate Winery and Vineyards
Mary & Richard Lundy
Mark Lyon, MD
Maryhill Winery
Eva McCarthy, DO
Leon McCook, MD
Brian & Maria McCormick, MD
McMenamins Pubs & Breweries
Katie and Lance McQuillan, MDs
Andrea Mehigan
Mother’s Bistro & Bar
Mary F. Naftzger
Northwest Children’s Theatre
Nothing But Cakes Tualatin
Cheryl Ogburn
Peggy O’Neill
OMA
OMSI
Oregon Ballet Theatre
Oregon Decorative Rock
Oregon Shakespeare Festival
Oregon Symphony
Bill Origer, MD
Janet Patin, MD, FAAFP
Dan Paulson, MD, MS
Pendleton Round-Up
Ryan Petering, MD
Pittock Mansion
Gary Plant, MD, FAAFP
Portland Center Stage
Portland Children’s Museum
Portland Japanese Garden
Portland Opera
Portland Winterhawks
Bonnie & Peter Reagan, MDs
Becky & Scott Robertson
Glenn Rodriguez, MD
Rogue Valley Zipline Adventure
Miles Rudd, MD, FAAFP
Christine & Nick Rulli
Michael Saladik, MD, MPH
Britt Severson, MD
Skamania Lodge
Kim & Jeff Spathas, DMD
Springfield Family Physicians
Ron Stock, MD
Swan Island Dahlias
The Duck Store
The Partners Group
Bruce Thomson, MD
Rita & Tom Turek, MD
Marilou & George Waldmann, MD, FAAFP
Keith White, MD, FAAFP
Willamette Valley Vineyards
Wilsonville Family Fun Center
Jessica Weyler
Carol & Cliff Wesner
Kim Wilson
Three Family Medicine Students Honored as Lundy Award Winners

Every year the OAFP/Foundation board has the daunting task of choosing one outstanding fourth year OHSU medical student entering a Family Medicine residency to honor with the Mary Gonzales Lundy award. This year, the board, due to the outstanding pool of candidates, felt this prestigious award should be provided to three students: Deepthika Ennamuri, MD, Omar Fares, MD and Nick West.

Here’s some insight into each of our Lundy winners:

Deeptika Ennamiuri, MD
University of Washington Family Medicine Residency Program - Seattle, Washington

When asked why she chose to pursue a specialty in family medicine here’s what Deepthika had to say:

“Initially drawn to family medicine due to incredible mentors, the scope of practice, and the patient interactions. Through my continued experiences in primary care, I realized that family medicine is the only specialty that provides a uniquely holistic approach to patient care across all stages of life — a method that allows for a connection that transcends the classical physician-patient relationship.”

Deepthika’s response to winning the Lundy award:

“It is an incredible honor to receive the Lundy award. I’m incredibly grateful for the numerous role models who exemplify what it means to be a family physician. I hope to utilize what I’ve learned to honor Mrs. Lundy’s dedication to family medicine and make a positive difference in the lives of my future patients.”

Omar Fares, MD
OHSU Family Medicine Residency Program - Portland, Oregon

Why have you chosen to pursue a specialty in family medicine?

“My journey towards family medicine began early while observing my father. He was a Palestinian immigrant and primary physician in our underserved Detroit community. He cared for generations of disadvantaged families, many of whom were refugees. From then, I knew I loved building meaningful relationships and being a leader. Later during medical school, I fell in love with all rotations, thus making family medicine a natural choice that integrates my interests in health care, community, and social justice.”

Here’s what Omar’s had to say about winning the Lundy award:

“I am so grateful to be a recipient of the 2019 Lundy Award. My peers who have matched into family medicine are some of the most kind-hearted and driven people I know. Although I am still in disbelief to be named the recipient, I am humbled to have grown with this inspirational group.”

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I traveled roughly 30,000 miles as an Oregon Future Farmers of America (FFA) State Officer speaking and putting on leadership conferences. I want to serve the rural communities that have meant so much to my upbringing and who I am.”

**What Nick had to say about winning the Lundy award:**

“Receiving the Lundy Award is a true honor. With my wife and I expecting our first child this April the financial support from the Lundy Award means the world to us as we transition to a family of three. Furthermore, the Lundy Award is a reflection of family medicine’s commitment to cultivate and transform enthusiastic learners into committed family doctors. While my career in family medicine is in its infancy I am continually reminded of the legacy of those who have paved the way before me. I look forward to the day when I can help foster the next generation of family doctors.”

**Resident comes full circle in her family medicine career**

Ashley Bunnard, MD displayed her poster, “Insights into Absence: A Qualitative Study of Rural Patient Non-Attendance” while attending the OAFP Spring Family Medicine Weekend at Skamania last month. Dr. Bunnard was the winner of the OAFP/Foundation and OAFP sponsored poster presentation award where she received free conference registration and lodging to be able to present her findings. Dr. Bunnard explains how the idea for her poster began early on in her medical career.

“As a medical student, I had the good fortune to work with and learn from researchers such as Melinda Davis, PhD and Debbie Cohen, PhD who introduced me to qualitative research. While a visiting student in Klamath Falls, I noticed that patients for whom I had the most concern would not return for follow up and were frequent no-shows.”

“Mapping this as a project during my time as a Oregon Rural Scholars under the guidance of Robyn Liu, MD, MPH, FAAFP, I was able to make what would become significant inferences into the distribution of these patients along lines of poverty.”

“Subsequently, as an Oregon First student, with the help of Dwight Smith, MD, an OHSU faculty member for the OHSU Cascades East Residency Program and significant contributions from Kyle Chapman, PhD and Stephanie Machado, MPH from Oregon Institute of Technology, I was able to apply what I learned about qualitative research to a project investigating the psychosocial intricacies of the no-show phenomenon in Klamath Falls.”

“Now, as a third year resident in Klamath Falls, a place I have come to call home, the OAFP/Foundation and the OAFP so graciously awarded me the privilege of bringing this full circle in presenting my findings to the very individuals who played such a meaningful role in introducing me to academic research. I am exceedingly grateful to have been awarded the opportunity to reconnect with formative colleagues from medical school and the OAFP board, meet new colleagues and friends across the state, as well as learn invaluable skills I will carry forward into my practice as a new attending in just a few short months.”

**If you are interested in donating to the OAFP/Foundation, you can easily do so on the OAFP website or send a check to: OAFP/Foundation, 890 C Avenue, Lake Oswego, OR 97034.**
Thank you to our **Family Medicine Champions**. As a Pharma-Free organization, we appreciate your support and presence immensely. Your generosity helps us to provide high quality programming at our conference.

**AllCare Health** is led by Southern Oregon physicians/providers who have been working to improve their community’s health since 1994. Beyond providing Medicare Advantage and Oregon Health Plan coverage, they strive to support the independent practice of medicine.

**CareOregon** is a nonprofit community benefits company involved in health plan services, reforms and innovations since 1994. We currently serve more than 275,000 Oregon Health Plan/Medicaid and Medicare members. By listening to our members and exploring innovative solutions with our providers and communities, we help Oregonians prevent illness and live better lives. Every day, we strengthen our communities by making health care work for everyone.

**Kaiser Permanente**: For more than 70 years, our approach to health care has differed radically from that of our competitors. Treating illness is important - but it’s not enough. Good health means more than just not being sick. It also means leading your life with an overall sense of wellness and taking charge of your health so you feel empowered to get the most out of every stage of your life. That founding vision is still our guiding principle. Our service credo says it all: Our cause is health. Our passion is service. We’re here to make lives better. And because we serve people and communities around the country, we have the unique opportunity and privilege to make millions of lives better.

**Legacy Health System**: Whether we realize it, our legacy is something we create together every day. It’s the way we live our lives and what we teach the next generation. It’s what we do and why we do it. At Legacy Health, our legacy is doing what’s best for our patients, our people, our community and our world. Our fundamental responsibility is to improve the health of everyone and everything we touch -- to create a legacy that truly lives on. Ours is a legacy of health and community. Of respect and responsibility. Of quality and innovation. It’s the legacy we create every day at Legacy Health. Stop by our booth at the conference to talk about locations for openings.

**RxLive®** is dedicated to improving health and the delivery of healthcare by cost-effectively leveraging the value of clinical pharmacists as integrated members of the care team. Its mission is to deliver meaningful interactions between patients, pharmacists and healthcare providers through the power of cutting-edge technology such as telehealth and pharmacogenomics, coupled with rich knowledge to support clinical guidance and improved outcomes. www.rxlive.com; admin@rxlive.com

**Trillium Community Health Plan** serves approximately 95,000 Oregon Health Plan members through the CCO model, which began in 2012. Trillium was first awarded a contract with the state of Oregon to help manage care for the Oregon Health Plan in 1999, and is a recognized leader for outstanding coordination of care. Trillium partners with an extensive group of providers to improve care and access to services in Lane and Western Douglas Counties. Since 2012, Trillium has invested more than $12 million in new primary clinics.

Thank you to our **Exhibitors**. Your generosity and presence at our event, assists us in creating a conference experience that is valuable to our members.

**Alzheimer’s Association, Oregon Chapter**: The Alzheimer’s Association is the leading voluntary health organization in Alzheimer’s care, support and research. Our mission is to eliminate Alzheimer’s disease through the advancement of research; to provide and enhance care and support for all affected; and to reduce the risk of dementia through the promotion of brain health.

**Blue Arch Technology Services, LLC** is a managed computer services company providing outsourced Information Technology support and guidance to small and medium businesses. Serving family medical practices with cybersecurity, compliance and day to day technical support. Our service is dedicated to fast support, less downtime and peace of mind for our clients. We manage your information technology, you manage the patients.

**Boost Oregon** educates parents and the general public about the safety and benefit of children’s vaccines. Through community workshops, medical provider seminars, and parent-to-parent advocacy, we aim to give every Oregonian the best shot at a healthy life.

**California Academy of Family Physicians** is the only organization solely dedicated to advancing the specialty of family medicine in the state. Since 1948, CAFP has championed the cause of family physicians and their patients. CAFP is critically important to primary care, with a strong collective voice of more than 10,000 family physicians, family medicine residents and medical student members. CAFP is the largest primary care medical society in California and the largest chapter of the American Academy of Family Physicians.

**CODE** is a nonprofit 501(c)(3) dedicated to treating people whose health and quality of life are compromised by alcohol and drugs. We do so through

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patient-centered care, partnerships with other healthcare providers and community partners, and through advocacy for effective public policy. Our science-driven approach has been proven to help patients in their recovery. We treat all forms of addiction and offer detoxification, residential, and outpatient treatment services. We offer 15 programs across Multnomah, Washington, and Clackamas counties.

**Evergreen Family Medical** in Roseburg was born when a group of Doctors practicing separately understood their commitment to their patients and community was better served with a comprehensive system of care delivered by a cohesive team of health professionals. We evolved into an innovative advanced patient centered home where patients of any age and circumstance can be confident of compassionate care and proper guidance as they navigate our health care system. Patient focused care implies collaboration and shared decision-making between patients and families to design a care plan. This requires communication, continuity of care, finding common ground and respect.

**Lines for Life** is a regional non-profit dedicated to preventing substance abuse and suicide. We offer help and hope to individuals and communities, and promote mental health for all. Our work addresses a spectrum of needs that include intervention, prevention, and advocacy. We educate, train, and advocate to prevent issues of substance abuse, mental illness, and thoughts of suicide from reaching crisis levels. But when a crisis arises or support is needed, we are available 24/7/365 to intervene with personal help.

**Mosaic Medical** prides itself on being an innovative community health center system that pioneers unique and creative ways to provide patient access to health care. Since our founding in 2002 we have proudly served insured and uninsured patients regardless of age, ethnicity, or income.

**Northwest Permanente, P.C.** is a physician-led, multi-specialty group of over 1500 physicians, surgeons, and clinicians, caring for over 600,000 members in Oregon and Southwest Washington. Kaiser Permanente is one of the nation’s pre-eminent health care systems, a benchmark for comprehensive, integrated and high-quality care. Permanente Medicine empowers health care specialists in all fields to pursue their personal and professional goals, while providing patients with the highest quality care. We are dedicated to nurturing a complete work-life experience, and we place great value on team-based care and career satisfaction.

**OAFP Foundation**: Investing in future family physicians to serve our Oregon communities. Proceeds will go directly to mentorship, networking, education and scholarship programs and activities. Our goal is to raise funds from a variety of sources including generous contributions from our members, outside corporations and grants, and expand upon new opportunities for the next generation of family physicians – both medical students and Family Medicine Residents.

**At OHSU, The Office of Community Engagement and Support** (OCES) works to help position OHSU as the partner of choice in clinical affiliations through coordinated provision of talent and expertise aimed at enhancing clinical quality, outcomes, efficiency, affordability, and the practice environment. We partner with community organizations in and around the Portland Metro area, (Adventist/Tuality) along with rural affiliates (Mid-Columbia Medical Center located in The Dalles, and Columbia Memorial in Astoria) to provide exceptional healthcare services to all Oregonians.

The **Oregon Medical Association** is an organization of over 8,000 physicians, physician assistants, medical and PA students organized to serve and support physicians in their efforts to improve the health of Oregonians. For more information, visit www.theOMA.org.
Strawberry Wilderness Community Clinic provides a full range of medical services to Grant County. The clinic is situated on the second floor of Blue Mountain Hospital. Our practitioners provide a full range of care for the entire family, from obstetrics to geriatrics and everything in-between. We take a patient- and family-centered focus. Our staff strives to build relationships with each of our patients, dedicating the time needed to serve your health and wellness needs. We have access to specialists and top-of-the-line equipment so you’re getting great care close to home. Our clinic also provides urgent care and extended hours, preventive care, and rural care.

The Partners Group: We take care of those who take care of others. Your physicians care for their patients with an unwavering dedication to their long-term well-being. TPG’s Group Physicians Advisory Services will do the same for your physicians. The Partners Group is committed to serving the needs of the healthcare community. Collectively, our team of trusted advisors serves more than 20,000 physicians and over 200 clinics. Founded over 37 years ago, our history is strongly rooted in understanding and serving the unique needs of healthcare providers.

U.S. Army Health Care Recruiting: You can make a difference in the lives of soldiers and their families by becoming an officer on the U.S. Army health care team. Working alongside professionals at the top of their fields, you’ll have access to the most advanced resources. You’ll feel proud of your skills and even more proud of your service.

The generosity of our Lawn Games Sponsor provided hours of entertainment for our members and their families on a gloriously sunny Saturday afternoon. Thank you.

The Aldrich Core Consulting services are designed to bring knowledgeable and innovative solutions and a higher level of business acumen to private medical practices. Our services include practice management consulting and interim management services, strategic planning, human resources consulting, organizational development, payor contracting, and much more. Our consulting services team is designed with a strengths-based approach to drive results to your practice.

We would also like to thank OHSU School of Medicine for their support of our program.
Over the past two decades, the OHSU Department of Family Medicine (DFM) and the Japan Association for Development of Community Medicine (JADECOM; https://www.jadecom.or.jp/en/) have enjoyed a rich exchange of knowledge, culture, and ideas. This exchange program began in 1998 with the fortuitous meeting of Dr. Bob Taylor (former chair of OHSU DFM) and Dr. Takashi Yamada (vice chair of JADECOM) at a WONCA (World Organization of Family Doctors) gathering. JADECOM is the third-largest medical system in Japan, and operates 74 medical facilities across the country, including 33 primary care clinics. JADECOM also provides medical care to many patients in rural areas through partnerships with local governments.

Since that meeting almost 20 years ago, over 100 learners have participated in the exchange program, including faculty, residents, medical students, and nurse practitioners from both countries. They have traveled between Oregon and Japan and shared with each other insights for educating and creating the future workforce to provide care to our communities, as well as reinforcing the importance of community partnerships to this mission.

The relationship between these groups deepened in 2017 when JADECOM graciously established an endowment fund within the OHSU DFM. This endowment allowed for the establishment of a JADECOM Scholarship position, to which Dr. Daisuke Yamashita was appointed the inaugural Scholar; it also led to the creation of the JADECOM Research Fellowship. Dr. Takahiro Mochizuki was selected as the first JADECOM Research Fellow, and joined the OHSU DFM in this capacity during the fall of 2017.

-A Report from Dr. Mochizuki-

Hi, I’m Mochi (Takahiro Mochizuki). I’m a family physician in Japan and a research fellow in the OHSU Department of Family Medicine. My goal during the two-year JADECOM research fellowship is to establish a practice-based research network (PBRN) within the JADECOM clinics, and conduct research based in these primary care clinics. This work is important for JADECOM to support its missions of disseminating primary care in Japan.

Since I joined the department, I have learned basic research theory, including research ethics, budgeting, and study design, by attending research meetings and lectures. There are three other [post-doctoral] research fellows in the department, and I am part of their fellowship cohort.

I have also learned how to manage a PBRN by attending meetings at ORPRN (Oregon Rural Practice-based Research Network) and observing PERCs (Practice Enhancement Research Coordinators) scattered all over Oregon, who provide direct support for many research projects and answer questions from local clinics. Thanks to what I have learned at OHSU and ORPRN, I was able to establish the JADECOM-PBRN in the summer of 2018 and have registered it as an international PBRN with the Agency for Healthcare Research and Quality (AHRQ).

The following outlines JADECOM-PBRN’s mission, vision and values:

• **Mission** – To improve the quality of community health care, promote resident welfare, and contribute to community health through research on community health care in Japanese rural areas.

• **Vision** – To study the quality of medical care and establish a standard for Japanese primary care; To support a sustainable rural health care workforce through a research network.

• **Values** – Cooperative; Community-centered; Asks “why?” rather than making quality judgements (good/bad); Shares work and joy.

JADECOM-PBRN is currently embarking on its first study, focused on advance care planning (ACP), a topic chosen by the participating PBRN clinicians. ACP is not well-implemented in Japan, despite a need for it due to the increasing proportion of elderly citizens in the population. Next, JADECOM-PBRN plans to focus a study on the benzodiazepine epidemic in Japan. A high number of patients, including many older patients, take benzodiazepines for insomnia and/or anxiety. The study will examine the prevalence and impact of benzodiazepine use among the JADECOM-PBRN member clinics.
In addition to primary research, JADECOM-PBRN is also working to implement quality improvement (QI) projects in primary care clinics. QI in primary care clinics is not common because Japanese EHRs are not designed for data analysis, so JADECOM-PBRN is developing a system to utilize EHR data for QI.

There are many differences between the U.S. and Japan in the field of primary care. For example, Japan has fewer significant health disparities related to insurance, race, or language. There is no opioid epidemic because opioids for chronic pain are not covered by insurance. However, there are many similarities around workforce shortages in a rural areas, the importance of community-based long-term care for aging populations, and the promotion of quality improvement in primary care. In the future, I would like to continue collaborative research and QI projects through our friendly relationship.
Helping parents choose to vaccinate their children is one of the most important jobs of primary care providers. Here, I will discuss my basic approach to counseling vaccine hesitant parents, and how you can incorporate effective vaccine counseling into every visit, even if you only have a few minutes.

**Take a motivational interviewing approach to vaccine counseling**

Your goal should be to remove the fear and confusion surrounding vaccines. Don’t try to pressure families into vaccinating, and avoid using guilt or fear tactics. Parents often choose not to vaccinate out of “decision paralysis”, which is only worsened by fear-based messaging.

**Ask about vaccines early and often, and listen to parents without interrupting to make sure they feel heard**

I ask parents from their first newborn visit what questions they have about their baby’s vaccines. This lets them know that I care about their child’s health and getting them vaccinated, and that I care about their concerns.

Some families will try to shut down the conversation with statements like, “we don’t vaccinate.” Press them to elaborate. Ask something like, “Tell me more about why you made that decision for your child?” Be attentive, maintain eye contact, and keep asking them to elaborate or clarify until you fully understand their concerns. Even if you don’t have time to discuss their specific concerns at that visit, the family will be more inclined to trust your advice if they feel like you’ve listened to them.

**Empathize**

Parents have their children’s best interests in mind, and making decisions about vaccinating can be terrifying for a parent who has been exposed to anti-vax propaganda. Let them know you understand their fears, and that you also want to keep their child as healthy as possible.

**Let vaccine-hesitant families know at every visit that you strongly recommend vaccinating their children according to the CDC schedule, because that is the safest, most well studied, and most important aspect of their child’s care, and that you are always happy to discuss any concerns or questions they have about vaccines**

This message alone is very powerful, often times more so than refuting specific arguments or providing mountains of data to families. If you have more time, I recommend making sure parents understand how vaccines work, and the fact that their safety and regulation is the dedicated job of hundreds of health professionals and vaccinologists around the country who often times have given up higher paying jobs with more prestige, autonomy, and respect (like ours), for the sake of public health.

**Take advantage of vaccine education resources**

There is an abundance of good vaccine information freely available for parents and providers to learn more about vaccines. Send patients to BoostOregon.org and encourage them to sign up for a free workshop to learn more about vaccines. Providers can also sign up for workshops through Boost Oregon to learn more about counseling vaccine hesitant parents. The CHOP vaccine education center at CHOP.edu/vaccines also has fantastic information about all aspects of vaccines.

Conversations about vaccines don’t have to be confrontational or time-consuming. With practice, vaccine counseling can become a routine part of your patient care, and you can help parents feel comfortable taking this important step in safeguarding their children’s health.

Boost Oregon is a parent-led community that educates Oregonians about the safety and benefits of childhood vaccinations.
The OHSU FMIG team has been busy so far in 2019!

FMIG student volunteers teamed up with Casey Eye Institute’s Community Outreach Team to support their mobile clinic with Compassion Southwest PDX on May 18th. FMIG students, under the guidance of Rita Lahlou, MD served by providing blood pressure and blood glucose screenings for patients as triage prior to their free vision screenings. It was a great opportunity to practice new skills and connect with the community. Together the team served 58 participants!

In May, four of the FMIG co-leads, Ryley Saedi-Kwon, Alexandra Kiesling, MPH, Anna Persmark, MPH and Erin Heath, attended part of the OAFP Annual Conference at Skamania Lodge. This was a great opportunity for the co-leads to network with family medicine physicians and older students on the path to Family Medicine. They had the opportunity to hear a legislative update from Senator Elizabeth Steiner Hayward, MD, FAAFP, as well as a critique of newly available drugs from Bill Origer, MD. Congratulations to Liz Powers, MD, FAAFP, the 2019 OAFP Family Doctor of the Year!

Our FMIG has been proud to host multiple workshops over the past few months with the help of many of OHSU’s own family physicians. In March, Samuel Crane, MD (Primary Care at Orenco Station) taught the basics of suturing to 12 eager students including many first years, second years, and even fourth years. Sean Robinson, MD (Gabriel Park Family Medicine) and Matthew Chan, MD (Family Medicine at Scappoose) gave hands-on demos into the art of point of care shoulder, wrist, and knee ultrasounds. In June we will also have the pleasure of hosting Amy Wiser, MD (OHSU South Waterfront Family Medicine) as she guides students through the intricacies of contraception and practice papaya IUD placement.

FMIG has also been hosting a “Ward Walk” each month with OHSU family medicine residents. These walks have given first and second year medical students an opportunity to, not only hone their skills in history taking, physical exams, and improving clinical thinking, but expose students to the inpatient side of family medicine. We look forward to many more walks and are grateful for the residents that dedicate their time to teaching.

Additionally, last year’s team hosted a series of talks for “Social Justice June”, and this year the tradition continues. FMIG is hosting a lunch talk for each week of June. Participants will learn about rural addiction care, clinic-based organizing, health insurance, and a social justice and health equity discussion group comprised of family medicine residents and providers. The aim is to explore ways to engage in social justice through family medicine, and to think about health equity within and beyond the clinical encounter.

As always the OHSU FMIG leads welcome any advice, assistance, or ideas for how to make 2019 FMIG’s best year yet. Please email Rachel Faino if you have resources, ideas, or are willing to volunteer for lunchtime talks, workshops, or mentorship with medical students.
MEMBERS IN THE NEWS

Carol Blenning, MD was honored in May with an induction into the Gold Humanism Honor Society. Members of the GHHS are “exemplars of compassionate care and who serve as role models, mentors, and leaders in medicine.”

Anthony Cheng, MD, assistant professor of family medicine, has been named one of OHSU School of Medicine’s Diversity Navigators. Dr. Cheng will be joined in this inaugural program by Dr. Spight. Both will support MD students who self-identify as belonging to a diverse or underrepresented group through individual and group sessions, and mentoring. “Supporting these students, who naturally interact with so much of our institution, will create opportunities to bring our OHSU community together in ways that help us see our diversity, honor our unique contributions and unite around our shared missions of training the health care workforce for the future, providing excellent patient care, and advancing science,” said Dr. Cheng. The goals of the diversity navigators include addressing isolation and disparities affecting student health and well-being, ensuring equitable opportunities for students, and advancing a culture that demonstrates and advocates respect for all.

Jennifer DeVoe, MD, FAAFP, DPhil, has been appointed to the National Heart, Lung, and Blood Advisory Council (NHLBAC). Eighteen individuals are chosen by the Secretary of Health and Human Services to serve on the council. The role of the NHLBAC is to provide direction and advice around scientific research and its implications to public health. The council provides its findings, recommendations, and advice to the HHS Secretary, the Assistant Secretary, the Director of the NIH and the Director of the NHLBI.

Joe Skariah, DO, MPH is the new Director of OHSU’s Portland Family Medicine Residency Program. Dr. Skariah’s predecessor, Roger Garvin, MD, FAAFP served as the program’s director for 11 years. Dr. Garvin will continue in the department as the Director of Family Medicine Graduate Medical Education Outreach and Expansion. “I think we have the premiere residency program in the country,” said Dr. Skariah, “so when the opportunity came to lead the program, I wanted to jump right in!”

John Heintzman, MD, MPH was honored with OHSU School of Medicine’s Early Career Achievement Award. Dr. Heintzman has made significant career contributions to improving health and social welfare in his community. He has been able to accomplish this within 15 years of graduation.

Robyn Liu, MD, MPH, FAAFP has been awarded the ROSE award for her exemplary patient care and commitment. Dr. Liu is a faculty member at OHSU where she teaches in the Department of Family Medicine. Her compassion, support, and advocacy helped a family in a time of immense grief.

Christina Milano, MD was named OHSU’s 2019 Faculty Excellence in Education Award winner. Dr. Milano was commended for her outstanding leadership, teaching, and commitment to OHSU’s educational programs.

Brian Park, MD, MPH was one of eight national winners of the Trust Practice Challenge. Dr. Park’s winning work with the Relational Leadership Institute is improving the way that health care teams, patients, physicians, and large health organizations interact with one another. By relying on emotional intelligence to engage with others, trust and psychological safety are cultivated amongst participants.

If you know of a member who has been in the news, please contact Louise Merrigan so that she is able to share the news with other Oregon Academy of Family Physicians members.
Londyn’s family discovered hope at St. Jude.

When Londyn was found to have blood cancer, she was referred to St. Jude, where doctors take on the toughest cases with confidence. “St. Jude takes a lot of the worry away,” said her dad. “The things that St. Jude does are unbelievable.” The discoveries made at St. Jude are shared freely, so every child saved here means doctors and scientists worldwide can use that knowledge to save thousands more children.

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