

*“Not for ourselves do we labor”*

# Vermont Medical Society

## VERMONT ONCE AGAIN THE NATION'S HEALTHIEST STATE

For the second-consecutive year, the United Health Foundation named Vermont as the healthiest state in the nation.

See the article on page 14.



*“The fact that our state has been ranked as the healthiest state in the country for the second year in a row reaffirms the high quality of care Vermont’s physicians and other health professionals provide to their patients and the contributions each physician makes to the health of their communities”*

*John Brumsted, M.D.*

## 2008 Annual Report

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*[www.vtmd.org](http://www.vtmd.org)*



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**Dear Member of the Vermont Medical Society:**



Welcome to the Vermont Medical Society's (VMS) 2008 annual report, a comprehensive look at the many ways the organization's members, staff and partners worked together on behalf of physicians and their patients during the year.

I have been very proud to serve as president for the past year and am pleased to report that as an organization we made progress on several significant issues. Among these were strengthening VMS's political action committee – growing member participation resulted in an increase in legislators receiving contributions of more than 50 percent – a new member survey that encourages feedback from the state's physicians and helps steer VMS's public policy strategies, and an improved outreach effort that saw VMS leadership sharing face-to-face dialogue with medical staffs at many of the state's hospitals.

VMS was successful in the legislative arena as well, securing important victories for physicians and the health of their patients in many areas. Of particular note were:

- VMS's success in defeating \$2.8 million in cuts to Medicaid reimbursement to physicians proposed by Governor Douglas;
- Winning approval of legislation that addressed issues at the heart of the practitioner/insurer relationship, such as fair standards for provider contracts with insurers, timely workers' compensation payment, standards for payment and processing of claims and credentialing; and,
- Requiring Vermont health insurers to provide coverage for low-dose mammography screening for the presence of occult breast cancer in women.

And finally, the state's physicians can also take pride in Vermont being named the nation's healthiest state for the second year in a row.

Clearly, the care, passion and expertise you give to your patients on a daily basis plays a tremendous role in this achievement. On behalf of my fellow Vermonters, I thank you.



Sincerely,

S. Glen Neale, M.D.  
President, 2007-2008

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## VMS Leadership



**John Brumsted, M.D., President**

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Dr. Brumsted is the chief quality officer at Fletcher Allen Health Care (FAHC) in Burlington and the senior associate dean for clinical affairs at the University of Vermont College of Medicine (UVMCM).

Dr. Brumsted received his medical degree from Dartmouth Medical School in 1978. His internship was at Hartford Hospital in Hartford, Conn., and his residency was at the UVMCM Department of Obstetrics and Gynecology. He also did a fellowship in reproductive endocrinology at UVMCM.

He was the chief medical officer at FHMC from 1998 until 2005, and was FAHC's interim chief executive officer from 1997 to 1998. Dr. Brumsted has also served as the medical director of the Vermont Health Plan and Vermont Managed Care.



**Robert Tortolani, M.D., President-Elect**

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Dr. Tortolani is a family practice physician in Brattleboro who has been practicing since 1973. He earned his medical degree from the University of Rochester in 1967 and did his residency in family practice at the Medical Center Hospital of Vermont. He is board certified in family practice and geriatric medicine. He has been an instructor at the University of Vermont College of Medicine, the Dartmouth Medical School and the University of Massachusetts.



**Paula Duncan, M.D., Vice-President**

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Dr. Duncan is a Professor of Pediatrics at the University of Vermont College of Medicine, where she is the Youth Project Director for the Vermont Child Health Improvement Program and the Medical Director for UVM's Area Health Education Centers program.

Dr. Duncan received her bachelor of arts from Manhattanville College, her medical degree from Women's Medical College in Philadelphia, trained in pediatrics at Albany Medical Center and Stanford and did an adolescent medicine fellowship while a Robert Wood Johnson Clinical Scholar at Stanford.

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Nationally, Dr. Duncan is the chair of the American Academy of Pediatrics Bright Futures Implementation Advisory Committee and was one of the co-editors of the third edition of Bright Futures Guidelines for Preventive Services.



**Howard Schapiro, M.D., Secretary/Treasurer**

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Dr. Schapiro is an anesthesiologist at Fletcher Allen Health Care (FAHC) and the chairman of the Department of Anesthesiology at the University of Vermont College of Medicine (UVMCM). He received his bachelor of arts in biology and masters of science in natural sciences/epidemiology from the State University of New York at Buffalo and his medical degree at UVMCM.

An attending anesthesiologist at FAHC since 1986, Dr. Schapiro is currently a member of the hospital's strategic management, faculty practice finance, medical staff executive, and operating room steering committees.



**S. Glen Neale, M.D., Immediate Past President**

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Dr. Neale is an orthopaedic surgeon on the medical staff at Copley Hospital in Morrisville. He received his medical degree in 1985 from the University of Vermont College of Medicine, did his internship at the Maine Medical Center and his residency at the Medical Center Hospital of Vermont in Burlington.

Dr. Neale is on the board of councilors of the American Academy of Orthopaedic Surgeons and is a trained peer counselor for AAOS members involved in medical liability litigation.

**John Mazuzan, M.D., Treasurer Emeritus**



366 South Cove Rd., Burlington, VT 05401

After graduating from the University of Vermont College of Medicine (UVMCM) in 1954, Dr. Mazuzan did his internship at the Mary Fletcher Hospital in Burlington, and his residency at Massachusetts General Hospital. He returned to Burlington in August 1959 and practiced anesthesiology in Burlington area hospitals until retiring in 1996.

Dr. Mazuzan has served as the chairman of the UVMCM Department of Anesthesia and was a member of the Vermont Board of Medical Practice for eight years. A VMS member since 1961, he served as its treasurer from 2002 to 2008 and received the Distinguished Service Award in 1976 and the Founders Award in 1999.

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## VMS Staff



**Paul Harrington, Executive Vice President**

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Executive vice president Paul Harrington has worked at VMS since April 2002. Previously, Paul was the majority health policy director for the U.S. Senate Committee on Health, Education, Labor and Pensions under the chairmanship of Senator James M. Jeffords. He has also served as deputy commissioner of the Vermont Department of Labor and Industry, a board member of the Vermont Health Care Authority and as the chair of the Commerce Committee in the Vermont House of Representatives, where he served three terms.

In addition to his duties at VMS, Paul is the treasurer of Vermont Information Technology Leaders, Inc., serves on the AMA's State Technical Advisory Team and is on the executive committee of the Governor's Vermont Chronic Care Initiative. He also serves on the boards of the Vermont Program for Quality in Health Care and The Physicians' Foundation. Paul is a graduate of the University of Vermont.



**Madeleine Mongan, Deputy Executive Vice President**

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Deputy executive vice president Madeleine Mongan has been at VMS since January 1996. She works with the Vermont Legislature, state agencies and insurers on health care policy and provides education and technical assistance to Vermont physicians on legal issues. As an attorney, her practice addresses a range of health law issues including confidentiality, licensing, managed care, scope of practice, liability reform, public health, contracting, and fraud and abuse.

Madeleine is a member of the American Medical Association Advocacy Resource Center Advisory Board and American Health Lawyers Association, and represents Vermont physicians on the Medicaid Advisory Board, the Area Health Education Centers Advisory Board and the Vermont Health Resource Allocation Plan Board.



**Stephanie Winters, Operations Director**

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Operations director Stephanie Winters has worked at VMS since January 1998. In addition to her duties at VMS, Stephanie also serves as the executive director of the American Academy of Pediatrics Vermont Chapter, the Vermont Orthopaedic Society and the Vermont Ophthalmological Society.

Stephanie attended Champlain College in Burlington. Stephanie was born and raised in Central Vermont and lives in Williamstown with her husband Terry.

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**Colleen Magne, Business Manager**

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Business manager Colleen Magne has worked at VMS since September 2005. In addition to her duties as business manager, Colleen is also the program administrator for the Vermont Practitioner Health Program. Previously she was employed by Blue Cross and Blue Shield of Vermont for nearly 12 years. Her positions there included customer service, nongroup sales, account representative, and senior account representative.

Colleen lives in Middlesex with her husband David, 16-year-old son Nathan, and 23-year-old daughter Meghan. Colleen attended Trinity College of Vermont in Burlington. She enjoys living and working in the Montpelier area, as well as attending sporting events at Union 32 High School in East Montpelier.



**Justin Campfield, Communications Specialist**

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Communications specialist Justin Campfield joined VMS in January 2009 and brings to it more than a decade of communications and public affairs experience.

As a public relations executive in both agency and in-house settings, Justin has led communications programs for a wide array of clients, including two community hospitals. A graduate of Florida Southern College, Justin is an occasional contributor to *Healthcare Executive*, and in 2008 joined two Dartmouth Medical School professors in co-authoring a paper that was published by the *Journal of Healthcare Management*.

Justin lives with his wife Hillary and twin toddlers, Abby and Emma, in Norwich, Vermont.



**David Simmons, M.D., VPHP Medical Director**

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Dr. Simmons received his medical degree from the Tulane University School of Medicine in New Orleans, La., and performed both his internship and residency in internal medicine at the Tulane Affiliated Hospitals. From 1981 until 1996, Dr. Simmons was the medical director of Sunrise Community Health Center in Greeley, Colo. Since moving to Maine in 1996, he has practiced general internal medicine in the town of Calais.

In 2002, Dr. Simmons was named the clinical director of the Maine Medical Association's Physician Health Program. He remains in that position while also serving as the medical director of the Vermont Practitioner Health Program.

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## What We Advocated For In 2008

The Vermont Medical Society is the only organization advocating full-time on the behalf of Vermont’s physicians. VMS represents the interests of more than 1,800 physicians, residents and medical students before the state and federal governments. During 2008, VMS provided an effective voice for its member physicians on these issues:

### Health Care Reform

While the Legislature was not able to take major steps toward improving access to health care coverage due to a difficult fiscal climate, H. 887, the 2008 health care reform bill, included a number of VMS-supported efforts to address the relationship of health care practitioners and insurers, including:

**Fair Standards for Provider Contracts with Insurers; Restrictive Covenants and Timely Payment for Workers’ Compensation:** At the 2007 VMS Annual Meeting membership adopted a resolution directing VMS to work on legislation addressing a number of issues, including: retrospective audits of paid and approved claims, consistent claims processing standards using recognized CPT codes and modifiers, fair, uniform, and transparent contracting standards, and timely credentialing. Over summer and fall of that year, VMS worked with the Health Care Reform Commission to ensure that these issues were addressed in the Commission’s recommendations to the legislature for health policy changes and ultimately in the 2008 Health Care Reform bill.

**Retrospective Denial (Overpayment Recovery):** The final version of the bill limits retrospective denial of paid claims to a period of 12 months after payment of the claim. Insurers must provide 30 days notice to practitioners including an explanation of the reason for the proposed adjustment.

**Prior Authorization:** H. 887 requires health insurers to pay claims for health care services if a health care practitioner has received prior authorization from a health insurer. Health insurers are also required to provide practitioners with a current list of services and supplies requiring prior authorization and post that list on their Web sites.

**Claims Processing, Downcoding and Adherence to Coding Rules:** The bill also establishes standards for payment and processing of claims. Health insurers are required to accept and process claims consistent with the current version of the American Medical Association’s Current Procedural Terminology codes, the Centers for Medicare and Medicaid Services Health Care Common Procedure Coding System, and the

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National Correct Coding Initiative. This section also prohibits insurers from automatically reassigning or reducing the code level of evaluation and management codes billed for covered services (downcoding) and requires health insurers to publish the name of any commercially available claims-editing software that they use and any custom edits the insurer has added to the software product.

**Credentialing:** H. 887 also reduces the time that health insurers have to complete credentialing of participating physicians to no more than 60 days once their applications are complete.

**Studies and Reports – Fair Contracting, Restrictive Covenants, Workers’ Compensation Claim Processing:** H. 887 also includes three studies: fair contracting standards, restrictive covenants and workers’ compensation claims. At the request of the legislature, VMS agreed to convene the three studies, invite interested stakeholders, work with them to address the issues and report on the outcome of the studies to the legislature before next January.

**Academic Detailing:** The bill included \$100,000 in funding for the University of Vermont College of Medicine’s (UVMCM) Office of Primary Care’s academic detailing program, an independent, unbiased, evidence-based program that offers educational sessions to physician practices focused on particular classes of drugs.

**Tele-Psychiatry Pilot Project:** The bill also allocated \$100,000 to support child telepsychiatry pilot projects in community health centers that will link primary care practitioners with a consult team from the UVMCM Department of Psychiatry and will provide training and educational resources on mental health conditions for primary care practitioners.

### **Medicaid Reimbursement**

VMS was successful in working with both the House and the Senate appropriations committees in preventing implementation of Governor Douglas’ proposed \$2.8 million cut in Medicaid physician payments. VMS voiced its concern that the significant reduction in Medicaid reimbursement – on top of a previous 7.5-percent payment cut for the same procedures in 2005 – would push some physicians over the tipping point regarding their ability to treat Medicaid beneficiaries.

### **State Fiscal Year 2009 Appropriations Budget**

VMS actively supported numerous components of the SFY09 budget that were of importance to health care practitioners, including:

**Vermont Health IT Fund:** EHR Grants: Sections 7.004 and 7.005 of the SFY 2009 appropriations budget created a Vermont Health IT fund as a

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source of funding for medical health care information technology programs and initiatives. The fund will be used by the Vermont Information Technology Leaders (VITL) to promote and improve health care information technology.

**AHEC Base Funding:** The budget includes \$500,000 to support the work and infrastructure of the statewide area health education center (AHEC) network. The funds will be used to ensure an adequate and appropriate health care workforce, bring quality improvement programs to health care professionals and create partnerships across community-based health care services that improve health care access and integration.

**Loan Repayment:** The budget level funds loan repayment for health care providers and health care educators at the level of \$1,420,000. Allocations will be used as follows:

(A) \$700,000 to primary care physicians and health care professionals; (B) \$195,000 for dentists; (C) \$400,000 for nurses; (D) \$75,000 for nurse educators; and (E) \$50,000 for disciplines based on emerging health care needs and workforce shortages.

### **Blueprint: New Medical Home Pilot Programs and Expanded Immunization Registry**

In what could be a far-reaching catalyst for health system reform, the legislature passed VMS-supported S. 283, which requires health insurer participation and financing for Blueprint pilot projects that create and test “medical homes” and new physician payment methodologies.

Under the legislation, health insurers are required to participate in three integrated early implementation pilot projects designed to determine whether providing physician practices with the infrastructure and financial incentives to operate a PCMH leads to:

- o A sustained increase in practice adherence with nationally recognized standards for a PCMH;
- o An increase in the proportion of patients who receive guideline-based care for prevalent chronic conditions and health maintenance;
- o An increase in the proportion of patients who achieve improved control of their chronic health condition; and
- o A shift from episodic to preventive care.

S. 283 also includes language requiring reporting of immunizations of adults within one month after the health care provider has established an electronic health records (EHR) system and data interface pursuant to the e-health standards developed by the Vermont information technology leaders.

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### **Strengthening Regulation of Vermont’s Mental Health Parity Law**

VMS successfully advocated an amendment to the state’s existing laws that clarifies and enhances the authority of BISHCA to regulate mental health services provided by insurers and their subcontractors, known as carveouts. The underlying parity law, as modified by S. 114, prohibits a health insurance plan from establishing any rate, term, or condition that places a financially greater burden on an insured person for access to treatment for a mental health condition than for access to treatment for other health conditions. While S. 114 will not prohibit mental health carve-outs, it will require carveouts and insurers to comply with expanded rules to be developed by BISHCA.

### **Guardianship, Consent to End-of-Life Treatment**

A VMS-supported bill passed by the Senate and accepted by the conference committee creates two important exceptions that permit guardians to make decisions about DNR orders and decisions to withdraw or withhold life-sustaining treatment without prior probate court approval.

A guardian may consent to a DNR order without prior probate court approval if a physician certifies that the patient may experience cardiac arrest before court approval could be obtained. Similarly, with respect to decisions to withhold or withdraw life-sustaining treatment, the guardian may consent without prior probate court approval if the decision is needed before court approval could be obtained. If a guardian consents to a DNR order or to withholding or withdrawing life-sustaining treatment without prior approval, the guardian must notify the court by telephone of the decision the guardian made.

VMS thanks members Drs. Fran Brokaw, Ira Byock, Robert Macauley, Robert Orr and Harvey Reich, who took the time to explain to legislators the unintended consequences of requiring prior approval in all cases.

### **Limiting Prescribing Data Mining**

Last year VMS and the Office of the Attorney General worked together to pass Act 80, which limited data mining of pharmacy information and the sale to drug manufacturers identifiable information about drugs that physicians prescribe. The law was immediately challenged in federal court by the data miners and drug companies. Three VMS members and two staff were deposed as part of the discovery phase of the lawsuit and questioned about their support for Act 80.

In April of 2009, the Vermont U.S. District Court in Brattleboro upheld the law based on the finding that there is a substantial state interest in

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restricting the commercial activities prohibited by the law. In his opinion, District Court Judge Garvan Murtha affirmed VMS's opinion that tailored marketing using individual prescriber's data "is an intrusion into the way physicians practice medicine" and creates the "possibility that representatives could exert too much influence on prescription patterns."

### **Reducing Lead Hazards in Housing**

VMS, the American Academy of Pediatrics Vermont Chapter, Vermont Department of Health and the Vermont Attorney General's office together worked on language that strengthened Section 1755 of H. 863, a bill addressing the Creation and Preservation of Affordable Housing and Smart Growth Development. The group's contributions included language regarding the use of the immunization registry once it has lead incorporated into it and rulemaking for mandatory screening to kick in by January of 2011 if fewer than 85 percent of one-year olds and fewer than 75 percent of two-year olds are being screened.

### **VMS HELPS TO ENSURE THAT THE CATAMOUNT PHYSICIAN FEE SCHEDULE REFLECTS AN ANNUAL COST OF LIVING INCREASE**

Beginning in January of 2009, physicians are reimbursed at 116 percent of the 2006 Medicare fee schedule for Catamount Health by Blue Cross Blue Shield Vermont (BCBSVT) and MVP. This represents a 1.6-percent increase over 2008 and is based on CMS's Medicare Economic Index (MEI).

Last year, BCBSVT and MVP initially proposed a Catamount Health physician fee schedule of 110 percent of the 2006 Medicare fee schedule, but intervention by VMS led to it being raised to 114.33 percent.

After learning that BCBSVT and MVP were proposing a 110 percent fee schedule, VMS indicated to BISHCA that "the legislative intent of 8 V.S.A. § 4080f(f) was to provide for an annual increase in the health care professional fee schedule, based on MEI effective January 1, consistent with Medicare policy. This is not the update policy that MVP and BCBSVT are following and I request that your department direct MVP and BCBSVT to revise their fee schedules in a manner consistent with 8 V.S.A. § 4080f(f)."

Subsequently, BISHCA Deputy Commissioner Christine Oliver issued an order directing BCBSVT and MVP to revise their Catamount Health provider fee schedule in January 2008 to account for the 2007 and 2008 MEI.

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## **Advocacy Priorities for 2009**

As part of its extensive efforts to represent physicians before the Vermont General Assembly, executive branch and various state agencies, the Vermont Medical Society’s top priorities for 2009 are:

### **1) Grants and Gifts to Physicians**

To promote continued innovation and improvement in patient care, medicine must sustain ongoing, productive relationships with the pharmaceutical, biotechnology and medical device companies. However, industry support of professional education has raised concerns that threaten the integrity of medicine’s educational function.

In the past, VMS has supported legislation requiring pharmaceutical companies to disclose information about gifts and other payments associated with marketing pharmaceuticals, as well as legislation banning the practice of prescription data mining for marketing purposes by pharmaceutical companies.

VMS’s official policy as adopted by its members in October 2008 is as follows:

- o Any gifts accepted by physicians individually should entail a benefit to patients and should not be of substantial value;
- o Textbooks and modest meals are appropriate if they serve a genuine educational function. Other gifts and cash payments should not be accepted;
- o Subsidies from industry should not be accepted directly or indirectly to pay for the costs of travel, lodging or other personal expenses of physicians attending;
- o Any subsidy for conference attendance should be directed to the conference's sponsor who in turn can use the money to reduce the conference's registration fee;
- o Industry funding of technical training when new diagnostic or therapeutic devices and techniques are introduced is beneficial. However, once expertise in the use of previously new devices has developed within the professional community, continued industry involvement in educating practitioners is no longer warranted;
- o It is appropriate for faculty at conferences or consultants who provide genuine services to accept reasonable honoraria and to accept reimbursement for reasonable travel, lodging and meal expenses; and,

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- o VMS encourages physicians to disclose to patients any relationships with industry that create real or perceived conflicts of interest and to resolve these conflicts in the best interest of the patient.

During 2009, VMS will act upon the above policies by supporting the strengthening of Vermont’s law requiring pharmaceutical companies to disclose information about gifts and other payments associated with marketing pharmaceuticals by eliminating the “trade secrets” exemption.

Also, VMS will support legislation that bans many gifts outright and facilitate greater transparency with patients and the public in general.

### **2) Prescription Drug Abuse and Diversion & E-Prescribing of Controlled Substances**

Recent evidence shows that abuse of prescription drugs is on the rise in Vermont. The Vermont Office of the Medical Examiner reports that deaths resulting from the non-medical use of controlled substances and other prescription drugs have increased to about one per week and the Vermont Department of Public Safety is so concerned about the issue that it recently added a prescription drug investigator to the Vermont Drug Task Force.

In an effort to counter this trend, the Department of Health is developing the Vermont Prescription Monitoring System (VPMS), which will track all prescriptions of controlled substances in a confidential database. When the system becomes operational, physicians and pharmacists will be able to access the VPMS database to review records of their patients’ use of controlled substances, assist in early identification of patients at risk for substance use disorders and prevent “doctor shopping.”

VMS supports efforts to combat prescription drug abuse and recognizes the many benefits of e-prescribing, and as such will engage in the following activities:

- o Working with the Vermont Department of Health, VBMP, the Vermont Department of Public Safety and others to assist in educating health care practitioners about the risk of abuse and diversion of controlled substances;
- o Assisting in efforts to educate physicians about appropriate methods and tools that address the risk of abuse and diversion of controlled substances, without jeopardizing high quality care for patients, consistent with VBMP’s Policy for the Use of Controlled Substances for the Treatment of Pain;

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- o Continue working with the Department of Health on the implementation VPMS;
- o Promoting the use of electronic prescriptions for all drugs, provided that the standards and requirements for electronic prescriptions do not increase clerical burdens for physician practices, and provided that safeguards are included to address abuse and diversion of prescription drugs.

### **3) Legislative Action to Repeal Medicare SGR Payment Formula**

The Sustainable Growth Rate, or SGR, is a major component of Medicare’s current formula for determining annual updates to physician reimbursements for services. In VMS’s opinion, the continued use of SGR will dramatically cut physician reimbursement rates during a time in which it expects practice costs to rise and the number of Medicare beneficiaries to increase.

If the Medicare physician payment update system is not reformed, Medicare payment rates will be cut by more than 21 percent in 2010. Considering that the Medicare program’s own estimates predict that medical practice costs will increase by 41 percent from 2001 to 2015, physicians clearly cannot continue to be threatened with yearly payment cuts.

In order to help prevent these reimbursement cuts from taking place, VMS will:

- o Work with other state and national organizations representing physicians to urge Congress to repeal the Sustainable Growth Rate formula for physician payments by the end of 2009; and,
- o Collaborate with AMA and other state and national organizations representing physicians to urge Congress to enact a long-term solution to replace SGR with an updated system that reflects increases in physician practice costs, including support for physician efforts to invest in health information technology and quality measurement.

### **4) Efforts to Minimize Cost Burden to Patients**

The economic difficulties currently faced by many Vermonters have seriously limited the ability of many to travel to work, medical appointments and other important activities. Hit especially hard are Vermont’s elder residents, who are often on fixed incomes and are

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particularly vulnerable to unexpected increases in their expenses. In many cases, the financial crisis is forcing Vermonters to choose between eating well and/or heating their homes, and seeking treatment for illness or paying for all aspects of their medical treatment, including very high cost of medications.

Since delays in medical treatment and failure to take necessary medications result in more severe and costly illness, VMS has urged physicians and their staff to ask at-risk patients if they are eating well and heating their homes. VMS is also coordinating with local, state, and federal organizations (such as the Vermont Food and Fuel Partnership, Vermont 211, Agency of Human Services and the Area Health Education Centers) to provide practices with information for their patients regarding heating oil assistance, public transportation and other available resources.

In the future, VMS will work with lawmakers, agencies and payers to increase the options available to health care practitioners for treating patients, including but not limited to use of telephone consultations and email communications as a means of reducing the cost of travel where appropriate, recognizing that payers should reimburse practitioners for their work.

### **5) Responsibility for Health Care in the Ideal System**

A member survey conducted by VMS identified five inter-related issues of concern to physicians that will drive many of VMS's legislative and policy efforts in 2009. They are:

- o Urge the General Assembly and the Administration to make the issues related to recruitment and retention of physicians a high legislative priority;
- o Support the concept that basic healthcare would be available to all individuals as part of the social contract;
- o Support a simplified payer system to pay directly for services, in which paperwork and administrative issues are minimized, under-reimbursement by Medicaid is addressed;
- o Encourage individuals to take greater responsibility for their personal behaviors and choices to the extent they are able; and,
- o Emphasize that while Vermont physicians are dedicated to the profession of medicine and the care of their patients, the present system of financing impedes physicians from being able to adequately provide for the health care needs of all Vermonters.

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## VERMONT ONCE AGAIN THE NATION’S HEALTHIEST STATE

For the second-consecutive year, the United Health Foundation (UHF) named Vermont as the healthiest state in the nation.

UHF’s 2008 rankings were based on key health factors such as levels of obesity, number of uninsured people and the persistence of risky health behaviors, particularly tobacco use. The report also measured a number of determinates and health outcomes that physicians play a major role in, such as the adequacy of prenatal care, the number of preventable hospitalizations, reduced rates of infant mortality and cardiovascular and cancer deaths.

“The fact that our state has been ranked as the healthiest state in the country for the second year in a row reaffirms the high quality of care Vermont’s physicians and other health professionals provide to their patients and the contributions each physician makes to the health of their communities,” said VMS President John Brumsted, M.D.

Vermont’s ranking has steadily increased from 16th in 1990 to its current No. 1 ranking. Vermont ranks among the top-ten states on 14 of the 22 measures used to determine rankings. The state’s strengths include a low percentage of children in poverty, a lower prevalence of obesity, a higher rate of high school graduation and better access to primary care.

Two areas noted in the report that Vermont can be particularly proud of, according to Health Commissioner Wendy Davis, MD, are the decrease in the prevalence of smoking by 43 percent since 1990 and a 37-percent decrease in the infant mortality rate .

“Vermont’s approach to health care is focused on prevention and we will work hard to continue to provide communities, businesses and individuals with the most effective programs and healthier living opportunities,” said Dr. Davis.

Vermont’s challenges include a high prevalence of binge drinking and moderate immunization coverage. Speaking at VMS’s annual meeting in October, Dr. Davis addressed the downturn in immunizations and indicated that increasing the rate of immunizations is a key objective of the Vermont Department of Health.

To view the entire report, go to: [www.americashealthrankings.org](http://www.americashealthrankings.org)

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## VMS Membership Benefits

Physician members of the VMS enjoy a broad array of benefits that help them practice medicine more effectively and run their practices more efficiently. These include communications, insurance and practice management assistance.

### COMMUNICATIONS

#### **Weekly E-mail News**

**Updates:** VMS members receive via e-mail the weekly VMS News Scan,

a concise digest of health care news in Vermont and the nation. Each news item includes a direct link to the original source on the Internet so that readers can readily access the full details.



**Legislative Bulletins:** During the legislative session and as needed throughout the year, VMS members receive frequent updates on the progress of bills at the Statehouse and policies in the rulemaking process. Members are often alerted when they should take appropriate action.

**The Green Mountain Physician Newsletter:** Six times a year, the VMS publishes *The Green Mountain Physician*, a member newsletter that contains in-depth original articles about issues concerning physicians.

### INSURANCE BENEFITS



**Group Health Insurance:** VMS offers its members several choices for health insurance options, including five traditional comprehensive plans, three Vermont Freedom plans, two high-deductible health plans offered in conjunction with a Health Savings Account, and over 65 retirement plans. For more information concerning health insurance options, call Colleen Magne at 800-640-8767.

**Group Dental Plan:** VMS members and their employees can participate in the Northeast Delta Dental Benefit Program.

**Disability and Life Insurance:** Hackett, Valine and MacDonald provides disability and life insurance for VMS members and their employees at discounted rates.

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**Auto., Homeowner, Tenant, Umbrella, Condo and Boat Insurance:**

Hackett, Valine and MacDonald provides all of the above insurances for VMS members and their employees at discounted rates.

**PRACTICE MANAGEMENT**

**Coding Assistance:** VMS members have access to The Coding Center, a program that assists physicians with coding and reimbursement problems. VMS members can call a toll-free coding hotline, or arrange for on-site education sessions. The Coding Center also offers coding certification courses.

**Guide to Health Care Law:** VMS co-sponsored the Vermont Guide to Health Care Law. The guide, which covers practice issues, business issues, and regulation of health professionals, is available on the VMS Web site.

**Technical Support:** The VMS staff is available to offer technical assistance to members on a range of non-clinical issues. Staff members regularly field inquiries regarding practice issues such as medical records, fraud and abuse, workers' compensation, debt collection, scope of practice for allied health professionals, payor administrative requirements, HIPAA, and the Medicaid Preferred Drug List (PDL). An attorney on staff is available to provide technical assistance on legal issues to members and, for a small fee, to review insurer contracts for suggestions on how to make them more favorable for physicians.

**Continuing Medical Education:** Members can request that VMS document their fulfillment of continuing medical education requirements. VMS provides several CME programs during its annual meeting.

**An attorney on the VMS staff is available to provide technical assistance on legal issues to members and, for a small fee, to review insurer contracts for suggestions on how to make them more favorable for physicians.**

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## Medical Mutual of Maine and the ProMutual Group Make Donations to VPHP

The Vermont Practitioner Health Program (VPHP) has received a \$6,000 donation from Medical Mutual Insurance Company of Maine and a \$6,500 donation from the ProMutual Group.



*VPHP Medical Director David Simmons, M.D. (left) and Medical Mutual President and CEO Terrance J. Sheehan, M.D.*

"One of the most fundamental tenets of our mission is to support the medical communities of Northern New England and the Vermont Practitioner Health Program clearly falls within the realm of that charge as it benefits both physicians and their patients. We're proud to include the VPHP among the initiatives we support through either

financial or hands-on contributions," said Terrance J. Sheehan, M.D., Medical Mutual's president and CEO.

ProMutual Vice President Maureen Mondor said that ProMutual Group supports the Vermont Practitioner Health Program because "impaired, depressed, and emotionally overwrought physicians represent a significant risk to their patients. If left undiagnosed and untreated, they may deliver substandard care to their patients and compromise public safety. We believe that physician health programs have shown that many of these talented, skilled professionals can be successfully treated and restored to practice."



*VPHP Medical Director David Simmons, M.D. (right) and Thomas Lavoie, senior marketing representative for the ProMutual Group.*

"The Vermont Medical Society and the Vermont Practitioner Health Program thank Medical Mutual and the ProMutual Group for these generous donations," said David Simmons, M.D., medical director of VPHP. "These contributions will help the VPHP reach more practitioners and further the program's mission of protecting the public by early identification, treatment and rehabilitation of individual providers."

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## Peer Support

To support physicians in practice and medical students in their education, VMS manages several programs and contributes to worthwhile programs by other organizations:

### **Vermont Practitioner Health Program**

VMS operates the Vermont Practitioner Health Program, a confidential service for licensed physicians, podiatrists, and physician assistants to address the disease of substance abuse, including alcoholism. The program is designed to help identify, refer to treatment, guide, and monitor the recovery of practitioners with substance use disorders. Because of its important work, the program has received donations from two insurance companies (see previous page). David Simmons, M.D., who specializes in addiction medicine, oversees the program with a committee of trained practitioners who provide support to their colleagues affected by substance abuse illness.

### **Vermont Medical Society Education and Research Foundation**

The VMS sponsors a nonprofit charitable organization that supports educational and research activities in the field of health. The foundation, in collaboration with the Chittenden County Medical Society, awards the annual Dr. Mildred Reardon \$10,000 scholarship to a deserving third-year medical student at the University of Vermont College of Medicine. The intent of such grants is to provide an incentive for candidates to pursue a career in medicine and to provide motivation for graduates to practice in Vermont. All contributions to the foundation are tax deductible.

### **Vermont Medical Society Political Action Committee**

The VMS PAC makes financial contributions to candidates for the Vermont General Assembly who have demonstrated that they understand the challenges physicians face caring for Vermont's citizens. During the 2008 election cycle, VMS PAC contributed to 46 candidates – representing both partisan and geographic diversity – to thank them for their work in improving health care for Vermonters.

### **County and Specialty Society Chapter Support**

VMS offers administrative and policy support for county and specialty society chapters. Staff provide logistical support for planning meetings, including mailing reminders, booking locations, and helping arrange speakers, and attend county society meetings as requested to

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review policy and legal issues of interest to physicians. Staff also provide support for specialty societies -- including the Vermont Psychiatric Association, the Vermont Orthopaedic Society, the Vermont chapter of the American College of Physicians, the Vermont chapter of the American Academy of Pediatrics, and the Vermont Ophthalmological Society -- working with them to reach their policy and advocacy goals..

**Support for Other Events and Organizations:**

In 2008, the VMS provided financial and/or logistical support to the following:

*AHEC Geriatrics Conference  
Central VT Home Health & Hospice  
Vermont Ethics Network  
VT Assoc. for Mental Health  
Prevent Child Abuse Vermont  
Vermont State Nurses Association  
AHEC Recruitment Day*

## **E**ducation and **O**utreach

In 2008, your membership dues allowed VMS to bring educational programs to physicians and other health care professionals around Vermont.

VMS collaborated with the Vermont Departments of Health and Public Safety to plan and present a series of grand rounds on prescription drug abuse to hospital medical staffs at Springfield, Rutland, Brattleboro, Central Vermont, and Gifford hospitals. The sessions addressed clinical, legal and law enforcement issues related to prescription drug abuse and diversion. More hospitals are scheduled for 2009.

VMS collaborated with CMS to present two sessions on the 2009 Physicians Quality Reporting Initiative (PQRI) on Vermont Interactive Television. VMS also provided legislative updates to the Vermont Medical Group Managers Association and to the Medical Mutual of Maine Insurance Company agents meeting.

VMS held a series of seminars on the Physician Quality Reporting Initiative over Vermont Interactive Television and educational sessions on the new Vermont Advance Directive Registry. There was also a conference call on the use of advance directives for patients with mental illness.

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## How to Become a VMS Member

When you consider all the advocacy, member benefits, peer support services, and education and outreach that VMS provides, membership is an investment with a guaranteed return.

### THERE ARE FIVE MEMBERSHIP CATEGORIES:

**ACTIVE** members are practicing doctors of medicine or osteopathy with a Vermont license.

**AFFILIATE** members are physicians who work outside of Vermont, but live in Vermont or have a Vermont license.

**RESIDENTS** and **STUDENT** members are medical students or physicians in residency programs.

**ASSOCIATE** members are physicians who have moved out of state, retirees with a Vermont license, or former members not currently in practice and not Vermont licensed.

**LIFE** members are retired because of incapacity or disability with 10 or more years as a VMS member, or more than 70 years old with at least 10 years of VMS membership.

New active members receive a 50-percent discount for their first year of membership, and a 25-percent discount for their second year of membership.

A VMS member with a physician spouse receives a 25-percent discount on the second membership. The VMS offers a 10-percent discount if all members of a large group practice join the VMS.

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**2009 VMS MEMBER DUES ARE:**

*(County dues are not included in the below price)*

REGULAR MEMBERS	\$525.00
ASSOCIATE MEMBERS	\$100.00
AFFILIATE MEMBERS	\$200.00
LIFE MEMBERS, RESIDENTS & STUDENT	\$0.00

**To request an application  
please contact Stephanie Winters at  
800-640-8767 or [swinters@vtmd.org](mailto:swinters@vtmd.org)**

**VMS EFFORTS LEAD TO  
REDIRECTED BCBSVT'S PRIMARY CARE PHYSICIAN  
QUALITY TRANSPARENCY AND PROFILING INITIATIVE**

During the fall, VMS heard from many physicians that BCBSVT's primary care physician profiling initiative contained major methodological flaws in its use of claims information. While VMS is a strong supporter of quality improvement and transparency initiatives, it believes they must be based on accurate information and that correcting the information must not create an additional administrative burden on Vermont's physicians.

VMS took a strong position in opposition to the BCBSVT physician profiling effort and it recommended that BISHCA Commissioner Paulette J. Thabault deny the quality measures for BCBSVT's primary care physician profiling initiative application due to their reliance on inaccurate claims information.

In late December, VMS was contacted by BCBSVT and the company indicated that it was going to end its current physician profiling effort under the Price and Quality Transparency Rule. BCBSVT instead said it would rely on the physician-directed NCQA physician recognition certification to satisfy the Rule's Physician Quality Information requirement (see <http://www.ncqa.org/tabid/58/Default.aspx>).

VMS wishes to express its deep appreciation to the many physicians who wrote letters to BCBSVT and to Commissioner Thabault. The correspondence was clear and compelling and the letters made a difference.

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## VMS Annual Meeting

The 195th Annual Meeting of the Vermont Medical Society was held on Saturday, Oct. 25 at the Topnotch Resort in Stowe. The meeting was co-sponsored by the University of Vermont College of Medicine.

Welcoming remarks were given by Glen Neale, M.D., president of VMS, and Dr. Frederick Morin, dean of the University of Vermont College of Medicine.

A CME panel presentation entitled “Disclosure Following Unanticipated Outcomes: Communications Strategies” was given by Nancy Brandow. A second CME session, “Osteoarthritis Update: 2008 Medical and Surgical Advances” was given by David Halsey, M.D. A CME panel presentation entitled “Chronic Pain and Controlled Substances: Local and Creative Solutions” concluded the CME portion of the meeting. Panel participants were: Todd Mandell, M.D., Brian A. Erickson, M.D., Edward Haak, D.O., and, Jeffery A. Cradall, D.D.S.

During lunch attendees were treated to a presentation by Vermont Department of Health Commissioner Wendy Davis, M.D., entitled “Vision for the Vermont Department of Health.”

The VMS Annual Membership Meeting began later that afternoon when it was called to order by moderator John Murray, M.D. After the introduction of distinguished guests and medical students in attendance, a memorial was held for departed members. Elections were then held for life members and 50-year members.

Robert Tortolani, M.D., was elected president-elect of VMS, Paula Duncan, M.D., was elected vice president and Howard Schapiro, M.D., was elected secretary/treasurer.

Five resolutions were discussed and approved by members (*see Advocacy Priorities for 2009 on page 14 for more details*). They were:

- o Grants and Gifts to Physicians;
- o Efforts to Minimize Cost Burden to Patients;
- o Prescription Drug Abuse and Diversion & E-Prescribing of Controlled Substances;
- o Legislative Action to Repeal Medicare SGR Payment Formula; &
- o Responsibility for Health Care in the Ideal System.

Following the adoption of resolutions, Dr. Neale addressed the members as the outgoing president of VMS and presented a briefcase to incoming

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president John Brumsted, M.D. There was an exchange of medallions and pins and Dr. Brumsted gave Dr. Neale a chair with the VMS seal as thanks for his year of service. Dr. Brumsted then addressed the membership as the new president.

In the evening, VMS’s annual awards banquet was held, with Dr. Brumsted providing opening remarks and introducing distinguished guests. Following the bestowing of numerous awards (see below), U.S. Senator Bernie Sanders provided remarks regarding how the crisis in American health care is one of coverage and access. New Hampshire Medical Society President Oglesby Young, M.D., concluded the banquet program by delivering the keynote address, “Let Us Not Lose the Soul of Medicine.”

**VMS honored seven outstanding individuals:**



**DISTINGUISHED SERVICE AWARD**

Michael Scollins, M.D. *(with Mimi Reardon, M.D., center and John Brumsted, M.D., left)*



**PHYSICIAN OF THE YEAR AWARD**

John Elliott, M.D. *(Posthumously) Accepting on his behalf , Matthew Elliott, 2nd from left, John Brumsted, M.D., to his right, Tim Thompson, M.D. far right & Tom Ziobrowski, M.D., far left)*



**PHYSICIAN AWARD FOR COMMUNITY SERVICE**

Harry Chen, M.D. *(with Rep. Lucy Lerich., right and John Brumsted, M.D., center)*



**CITIZEN OF THE YEAR AWARD**

Sharon Moffatt, RN, BSN, MSN *(with Glen Neale, M.D., right, and John Brumsted, M.D., left)*



**FOUNDERS AWARD**

Roger Mann, M.D.



**DR. MILDRED REARDON SCHOLARSHIP**

The annual Scholarship was presented this year to two medical students, Elizabeth Rosy Hill, *left*, and Aaron Shams Helminski, *right*. *(with Mimi Reardon, M.D.)*

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## **Corporate Affiliate Program**

The Vermont Medical Society constantly works to enhance its Corporate Affiliate Program, which is designed to help members practice medicine more effectively and run their practices more efficiently. Through the program, VMS members can receive discounted rates from the following companies:

**Barb McHenry**

*Mortgages*  
(802) 846-0029

**MBA HealthGroup**

*Healthcare consulting, medical billing,  
revenue cycle management, and electronic medical records*  
(802) 383-4699

**New England Senior Insurance**

*Long term care insurance*  
(802) 655-1706

**Pastore Financial Group, LLC**

*Financial planning*  
(802) 863-1248

**Signature Properties of Vermont**

*Real estate transactions*  
(802) 872-8881

**Symquest Group, Inc**

*Technology*  
(802) 658-9812

**To learn more about these companies  
and the services they provide, visit the corporate  
affiliate section of the VMS Web site - [www.vtmd.org](http://www.vtmd.org).**

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## Treasurers Report for 2008 & Budget for 2009



At the annual meeting on Oct. 25, 2008, the VMS Council approved the following budget for operation of the Society for the calendar year 2009. This budget assumes a modest decrease in our income over calendar year 2008, as VMS is no longer providing administrative support to the Vermont Psychiatric Association. Included in the operating expenses is the capitol purchase of a new computer server.

In 2008, VMS was able to apply about \$12,000 toward our contingency fund. With our 2009 budget we will continue to work toward our goal of having enough money in this fund to sustain the Society for one year in case of unforeseen difficulty, especially important in light of the nation's current economic situation.

If you would like a detailed copy of the 2009 budget or 2008 financial statements, please contact Colleen Magne, VMS's business manager.

*Howard Schapiro, M.D.*  
Secretary/Treasurer

### VMS PROPOSED BUDGET SUMMARY 2009

Total Income	\$683,000
Expenses:	
Total Operating Expenses	128,650
Total Payroll Expenses	423,400
Total VPHP Expenses	82,800
Total Property Expenses	24,350
Total Other Expenses	18,000
Total Expenses	\$ 677,200
<b><u>Net Projected Revenue over Expenses</u></b>	<b><u>\$ 5,800</u></b>

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## VMS Structural Overview

VMS has been providing services to Vermont physicians for more than 200 years. Along with providing assistance, information and lobbying services on legislative and regulatory matters, VMS offers its members a host of personal and professional services.

### TOTAL VMS MEMBERSHIP IN 2008 WAS: 2074

Active: 955

Associate: 41

Affiliate: 143

Life: 184

Resident: 279

Student: 470

Honorary: 2

### MISSION STATEMENT

The mission of the VMS is to serve the public by facilitating and enhancing physicians' individual and collective commitments, capabilities, and efforts to improve the quality of life for the people of Vermont through the provision of accessible and appropriate health care services.

Our purposes are these:

- To encourage and aid the progress and development of the sciences of medicine and surgery, and to encourage research in those areas;
- To promote the public health;
- To encourage cooperation among physicians in medicine and surgery, to elevate the standards of professional skill, care, and judgment;
- To promote and follow ethical standards of conduct to benefit patients, individual physicians, other health professionals, and society as a whole; and
- To advance the general social and intellectual welfare of its members.

### ORGANIZATIONAL FRAMEWORK

The individual physician member is the base of all authority in VMS. The decisions of our members ultimately determine the nature, direction and goals of its activities.

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#### **GOVERNANCE**

Each member has an equal voice at the annual meeting and special membership meetings. These meetings are VMS’s definitive governing authority. In the intervals between member meetings, the VMS Council conducts the Society’s affairs. The Council meets to discuss the policy, governance, operations, and finances of VMS. The Council’s membership includes VMS officers and representatives of the county medical societies, the Vermont chapters of specialty societies, the Vermont Department of Health, and the University of Vermont College of Medicine.

#### **2008 VMS Council Meetings were held:**

Wednesday, February 13:	Vermont Interactive Television
Saturday, April 5, 2008:	Best Western, Waterbury, VT
Thursday, June 5, 2008:	Vermont Interactive Television
Thursday, Sept. 4, 2008:	Vermont Interactive Television
Sunday, October 26:	Topnotch, Stowe, VT

#### **2009 VMS Council Meetings are scheduled for:**

Monday, February 2, 2009, 7:00 - 8:30 p.m. VIT  
Saturday, April 4, 2009, 10:00 – noon, Best Western, Waterbury, VT  
Thursday, June 4, 2009, 7:00 - 8:30 p.m., VIT  
Thursday, September 3, 2009, 7:15 - 8:45 p.m., VIT  
Sunday, Oct. 4, 9:00 - 11:30 a.m., Basin Harbor Club, Vergennes, VT

*Sites reserved are Bennington, Brattleboro, Lyndon, Middlebury, Montpelier, Newport, Rutland, Springfield, St. Albans, Waterbury, WRJ, Williston*

#### **Council meetings are open to all VMS members.**

Officers elected at the Annual Meeting represent member physicians. The Executive Committee is comprised of the president, the immediate past president, the vice president, the secretary, and the treasurer. The Executive Committee meets regularly and reports to the VMS Council.

The Executive Committee also reviews the operating budget of the organization and reports to the Council on VMS’s finances. An annual outside audit or review is conducted and is available upon request to all members.

The Investment Committee oversees the reserve and special funds of VMS in concert with an outside financial advisor.

#### **COMMITTEES**

Members are strongly encouraged to get involved by serving on committees. Participation enables members to have an impact on VMS programs and policy.

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The following committees are comprised of officers of VMS, as determined by its bylaws.

Executive Committee

Finance Committee

Nominating Committee

Personnel Committee

Pension Committee

The following committees are standing committees and boards established by the society's bylaws. Members of these committees are proposed by the Council and elected by the membership at the Annual Meeting.

Judicial Board

Board on Ethics

Committee on Grievances

Committee on Investments

Jurisprudence Committee

Committee on Medical Benevolence

Committee on Medical Economics and Insurance

Other committees are formed by the Council on an ad hoc basis. The members of these committees are appointed by the president of the VMS with approval of the Council. They include:

Committee on Awards

Bylaws Revision Committee

Ethics Committee

School Health Committee

Vermont Practitioner Health Program Committee

**PHYSICIANS POLICY COUNCIL**

The Physicians Policy Council (PPC) was organized by VMS in 1994 to act as a “provider bargaining group” for Vermont physicians. PPC is authorized by Vermont law to negotiate with state government agencies such as the Office of Vermont Health Access and the Department of Labor on all matters related to reimbursement, quality and health care regulation for Vermont physicians.

The PPC is organized by physician specialty. Each specialty society or organization in Vermont that is recognized by the VMS Council has a seat on this important negotiating body.

The recognized specialties are as follows: Anesthesiology, Dermatology, Emergency Medicine, Family Practice, Internal Medicine, Medical Education, Neurology/Neurosurgery, Obstetrics & Gynecology, Oncology, Ophthalmology, Orthopedics, Otolaryngology, Pathology, Pediatrics, Psychiatry, Radiology, Surgery, Thoracic Surgery, Urology

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## History of the Vermont Medical Society

For nearly 200 years, VMS has contributed to the health and well being of Vermonters by facilitating and enhancing the capabilities of the state’s caring, community-minded physicians.

Incorporated by an act of the state legislature on Nov. 6, 1813, VMS traces its roots to October of 1784, while Vermont was still a republic. It was then that seventeen dedicated physicians from Rutland and Bennington counties were recognized as the First Medical Society of Vermont by the republic’s general assembly.

The Second Medical Society of Vermont came into being in Windham County in 1794, and was followed by Chittenden County’s Third Medical Society of Vermont in 1803. When VMS was incorporated in 1813, physicians from each county were authorized to form county associations, which in turn elected three delegates to represent the counties in VMS.

Early VMS members played a critical role in regulating the practice of medicine and formulating the education required to become a physician. In 1825 and 1826 VMS petitioned societies in other New England states and New York to substantially increase requirements for admission to medical schools, impose a minimum course of study and enact uniform standards for licensure. These petitions ultimately led to a national medical convention being held in New York City in 1846, which in turn led to the formation of the American Medical Society.

Other notable aspects of VMS’s history include the 1874 election of the first female VMS member, an 1876 act passed by the legislature required practicing physicians to obtain a certificate from either a county society or VMS itself, and involvement in the establishment of the currently existing State Board of Medical Practice in 1976.

*Editor’s note: The above historical record draws heavily upon previous VMS history research performed by Drs. Lester Wallman and A. Bradley Soule.*



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## VMS Council

### EXECUTIVE COMMITTEE

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#### **Paula Duncan, M.D.**

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#### **S. Glen Neale, M.D.**

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## VMS Council

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*“Not for ourselves do we labor”*

**Ophthalmology**

Phil Aitken, M.D.  
56 c Timber Lane  
South Burlington, VT 05403  
652-0717/paitken876@aol.com

**Orthopedics**

S. Glen Neale, M.D.  
Mansfield Orthopaedics  
Suite 8 530 Washington Hwy.  
Morrisville, VT 05661  
888-8405/gneale@pshift.com

**Otolaryngology**

David Charnock, M.D.  
69 Allen Street, Suite 4  
Rutland, VT 05701  
775-3314/midvtent@aol.com

**Pediatrics**

Kim Aakre, M.D.  
PO Box 165  
Hartland, VT 05048  
436-1619/kaakre@vermontel.net

**Alternate**

Joseph Nasca, M.D.  
PO Box 2049  
Georgia, VT 05468  
527-2237/nasca@comcast.net

**Psychiatry**

Jonathan Weker, M.D.  
PO Box 10  
Montpelier, Vermont 05601  
223-2266/jweker@verizon.net

**Surgery**

Victor Pisanelli, M.D.  
241 Stratton Road  
Rutland, Vermont 05701  
vicpisanelli@comcast.net

**Thoracic Surgery**

Bruce Leavitt, M.D.

FAHC, Fletcher 454  
111 Colchester Ave  
Burlington, VT 05401  
847-4044  
bruce.leavitt@vtmednet.org

**Urology**

Ernest Bove, M.D.  
PO Box 666  
Rutland, VT 05701  
775-6006/midvt@together.net

**COUNTY COUNCILORS**

**Addison**

Alexander MacDonald, Jr., M.D.  
6 Park Place  
Bristol, VT 05443  
453-3345

**Alternate**

Robert LaFiandra, M.D.  
116 Porter Drive  
Middlebury, VT 05753  
388-7445

**Bennington**

Keith Michl, M.D.  
PO Box 1431  
Manchester Ctr., VT 05255  
362-9031/michl@sover.net

**Caledonia**

Lloyd Thompson, M.D.  
195 Industrial Parkway  
Lyndonville, VT 05851  
748-9501  
tim.thompson@hitchcock.org

**Chittenden**

James K. O'Brien, M.D.  
18 Mansion Street  
Winooski, VT 05404  
655-3000  
james.o'brien@vtmednet.org

*“Not for ourselves do we labor”*

## VMS Council

### **Franklin/Grand Isle**

Teig Marco, M.D.  
1199 Main Street  
Fairfax, VT 05454  
849-2844/tmarco@nmcinc.org

### **Alternate**

Janice Gellis, M.D.  
3 Crest Road  
St. Albans, VT 05478  
527-1282  
jegellis@aol.com

### **Lamoille**

David Coddair, M.D.  
Morrisville Family Health Care  
607 Washington Highway  
Morrisville, VT 05661  
888-5639  
dcoddair@lamoillehealth.org

### **Orleans/Essex**

Nelson Haas, M.D.  
North Country Hospital Occupational  
Medicine Clinic  
1734 Crawford Farm Road  
Newport, VT 05855  
334-4191/nhaas@nchsi.org

### **Alternate**

Denise Niemira, M.D.  
5452 US Rte. 5  
Newport, VT 05855  
334-6140/deniem@together.net

### **Rutland**

William Krause, M.D.  
160 Allen Street  
Rutland, VT 05701  
747-3764/wkrause@rrmc.org

### **Washington/Orange**

Marilyn Hart, M.D.  
Mountainview Medical  
195 Hospital Loop Suite #3  
Berlin, VT 05602  
223-  
6196/marilyn.hart@hitchcock.org

### **Alternate**

Stephen Woodruff, M.D.  
89 Jalbert Road  
Barre, VT 05641  
371-5961

### **Windham**

Carolyn Taylor-Olson, M.D.  
19 Belmont Ave.  
Suite 204  
Brattleboro, VT 05301  
257-8044/oltayols@sover.net

### **Windsor**

John Leppman, M.D.  
18 Old Terrace  
Bellows Falls, VT 05101  
463-3941  
john.a.leppman@dartmouth.edu

## **MEDICAL STAFF**

### **REPRESENTATIVES**

#### **Porter Hospital**

C. Wade Cobb, M.D.  
115 Porter Drive  
Middlebury, Vermont 05753  
388-4757/jsclab@gmail.com

## **PHYSICIAN POLICY COUNCIL**

### **REPRESENTATIVE**

David Johnson, M.D.  
7360 Spear Street  
Shelburne, Vermont 05482  
847-2415  
david.l.johnson@vtmednet.org

*“Not for ourselves do we labor”*

## Past Presidents and Award Winners

### PAST PRESIDENTS

- 2008.....S. Glen Neale, M.D.  
2007.....David L. Johnson, M.D.  
2006.....Peter Dale, M.D.  
2005.....Harvey Reich, M.D.  
2004.....James K. O'Brien, M.D.  
2003.....Carolyn Taylor-Olson, M.D.  
(Acting Aug.-Oct.)  
2003.....Lloyd Thompson, M.D.  
2002.....Carolyn Taylor-Olson, M.D.  
2001.....Maureen K. Molloy, M.D., J.D.  
2000.....John T. Chard, M.D.  
1999.....David M. McKay, M.D.  
1998.....John J. Murray, M.D.  
1997.....Robert S. Block, M.D.  
1996.....David W. Butsch, M.D.  
1995.....J. Michael Schnell, M.D.  
1994.....Frederick Crowley, M.D.  
1993.....Edward Leib, M.D.  
1992.....Keith Michl, M.D.  
1991.....Richard Ryder, M.D.  
1990.....James E. Thomas, M.D.  
1989.....William H. Stouch, M.D.  
1988.....John A. Leppman, M.D.  
1987.....Mildred A. Reardon, M.D.  
1986.....Richard T. Burtis, M.D.  
1985.....Frederick C. Holmes, M.D.  
1984.....Robert LaFiandra, M.D.  
1983.....William B. Beach, Jr., M.D.  
1981-2.....Arthur S. Faris, M.D.  
1980.....John E. Mazuzan, M.D.  
1979.....William E. Allard, M.D.  
1978.....C. Peter Albright, M.D.  
1977.....J. Ward Stockpole, M.D.  
1976.....Hugh P. Hermann, M.D.  
1975.....Stanley L. Burns, M.D.  
1974.....Charles C. Cunningham, M.D.  
1973.....John C. Lantman, M.D.  
1972.....James A. Gray, M.D.  
1971.....Porter H. Dale, M.D.  
1970.....Harry Rowe, M.D.  
1969.....Dewees H. Brown, M.D.  
1968.....Richard E. Bouchard, M.D.  
1967.....Walter Buttrick, Jr., M.D.  
1966.....Roy V. Buttles, M.D.  
1965.....Ralph R. Jardine, M.D.  
1964.....Clifford Harwood, M.D.  
1963.....J. Bishop McGill, M.D.  
1962.....John R. Hogle, M.D.  
1961.....Roger W. Mann, M.D.  
1960.....Benjamin F. Clark, M.D.  
1959.....Fred Van Buskirk, M.D.  
1958.....Wayne Griffith, M.D.  
1957.....James P. Hammond, M.D.  
1956.....Philip H. Wheeler, M.D.  
1955.....W. Douglas Lindsay, M.D.  
1954.....Howard J. Farmer, M.D.  
1953.....Woodhull S. Hall, M.D.  
1952.....Paul K. French, M.D.  
1951.....Wilmer W. Angell, M.D.  
1950.....Elbridge E. Johnston, M.D.  
1949.....Hiram E. Upton, M.D.  
1948.....Roland E. McSweeney, M.D.  
1947.....Benjamin F. Cook, M.D.  
1946.....Frank C. Angell, M.D.  
1945.....Leon E. Sample, M.D.  
1944.....Frank J. Hurley, M.D.  
1943.....Charles H. Swift, M.D.  
1942.....Roland E. McSweeney, M.D.  
1941.....E.H. Buttles, M.D.  
1940.....A.M. Cram, M.D.  
1939.....C.F. Ball, M.D.  
1938.....E.A. Hyatt, M.D.  
1937.....F.C. Phelps, M.D.  
1936.....William G. Ricker, M.D.  
1935.....Lester W. Burbank, M.D.  
1934.....George G. Marshall, M.D.  
1933.....John H. Woodruff, M.D.  
1932.....Lyman Allen, M.D.  
1931.....E.J. Rogers, M.D.  
1930.....William K. Johnstone, M.D.  
1929.....George R. Anderson, M.D.  
1928.....Charles F. Dalton, M.D.  
1927.....Stanton S. Eddy, Sr., M.D.  
1926.....T.S. Brown, M.D.  
1925.....E.A. Tobin, M.D.  
1924.....E.A. Stanley, M.D.  
1923.....F.E. Farmer, M.D.  
1922.....J.A. Stevenson, M.D.  
1921.....F.A. Sears, M.D.  
1920.....S.W. Hammond, M.D.  
1919.....M.F. McGuire, M.D.  
**1918.....No meeting-  
Influenza Epidemic**

*“Not for ourselves do we labor”*

- 1917.....C.W. Bartlett, M.D.  
1916.....C.H. Beecher, M.D.  
1915.....Edward H. Ross, M.D.  
1914.....William W. Townsend, M.D.  
1913.....Albert L. Miner, M.D.  
1912.....Bingham H. Stone, M.D.  
1911.....Fred T. Kidder, M.D.  
1910.....Henry C. Tinkham, M.D.  
1909.....Walter L. Havens, M.D.  
1908.....Charles W. Peck, M.D.  
1907.....George H. Gorham, M.D.  
1906.....Donley C. Hawley, M.D.  
1905.....Myron L. Chandler, M.D.  
1904.....Patrick McSweeney, M.D.  
1903.....William N. Bryant, M.D.  
1902.....Edmund M. Pond, M.D.  
1901.....John B. Wheeler, M.D.  
1900.....William Huntington, M.D.  
1899.....Mark R. Crain, M.D.  
1898.....Shailer E. Lawton, M.D.  
1897.....Lyman Rogers, M.D.  
1896.....Frederick R. Stoddard, M.D.  
1895.....C.F. Branch, M.D.  
1894.....J. Hatch Linsley, M.D.  
1893.....Arthur B. Bisbee, M.D.  
1892.....H.R. Wilder, M.D.  
1891.....Charles S. Caverly, M.D.  
1890.....James N. Jenne, M.D.  
1889.....H.S. Brown, M.D.  
1888.....John M. Clarke, M.D.  
1887.....Edward R. Campbell, M.D.  
1886.....S. Brooks, M.D.  
1885.....D.G. Kemp, M.D.  
1884.....Joseph Draper, M.D.  
1883.....S.S. Clark, M.D.  
1882.....Leroy M. Bingham, M.D.  
1881.....O.W. Sherwin, M.D.  
1880.....J. Henry Jackson, M.D.  
1879.....S.W. Thayer, M.D.  
1878.....G.B. Bullard, M.D.  
1877.....C.M. Chandler, M.D.  
1876.....George Dunsmore, M.D.  
1875.....L.C. Butler, M.D.  
1874.....L.C. Butler, M.D.  
1873.....L.C. Butler, M.D.  
1872.....Henry D. Holton, M.D.  
1871.....Edward F. Upham, M.D.  
1870.....S. Putnam, M.D.  
1869.....Henry James, M.D.  
1868.....J.S. Richmond, M.D.  
1867.....C.P. Frost, M.D.  
1866.....E.D. Warner, M.D.  
1865.....William McCollom, M.D.  
1864.....O.F. Fassett, M.D.  
1863.....P.D. Bradford, M.D.  
1862.....J.N. Stiles, M.D.  
1861.....Adrean Woodward, M.D.  
1860.....B.F. Morgan, M.D.  
1859.....A.E. Knights, M.D.  
1858.....Charles L. Allen, M.D.  
1857.....H.F. Stevens, M.D.  
1856.....Walter Carpenter, M.D.  
1855.....Joseph Perkins, M.D.  
1854.....E.D. Warner, M.D.  
1853.....G.W. Thayer, Jr., M.D.  
1852.....B.W. Palmer, M.D.  
1851.....Middleton Goldsmith, M.D.  
1850.....Charles L. Allen, M.D.  
1849.....John L. Chandler, M.D.  
1848.....John L. Chandler, M.D.  
1847.....James Spaulding, M.D.  
1846.....James Spaulding, M.D.  
1845.....Horace Eaton, M.D.  
1844.....Anderson G. Dana, M.D.  
1843.....Anderson G. Dana, M.D.  
1842.....John Burrill, M.D.  
1841.....John Burrill, M.D.  
(No meeting until 1841)  
1829.....Josiah Shedd, M.D.  
1828.....Joseph A. Gallup, M.D.  
1827.....Joseph A. Gallup, M.D.  
1826.....Joseph A. Gallup, M.D.  
1825.....Joseph A. Gallup, M.D.  
1824.....Joseph A. Gallup, M.D.  
1823.....Joseph A. Gallup, M.D.  
1822.....Joseph A. Gallup, M.D.  
1821.....Joseph A. Gallup, M.D.  
1820.....Joseph A. Gallup, M.D.  
1819.....Joseph A. Gallup, M.D.  
1818.....Joseph A. Gallup, M.D.  
1817.....Ebenezer Huntington, M.D.  
1816.....Seelah Gridley, M.D.  
1815.....Seelah Gridley, M.D.  
1814.....Ezekiel Porter, M.D.

“Not for ourselves do we labor”

**PAST AWARD RECIPIENTS**

**CITIZEN OF THE YEAR AWARD** - *The recipient must be a non-physician resident of the state of Vermont who in the past and presently has made a significant contribution to the health of the people of Vermont.*

- 2008 . . . . Sharon Moffatt, R.N., BSN, MSN - Burlington
- 2007 . . . . Judith S. Shaw, R.N. - Burlington
- 2006 . . . . Sen. James P. Leddy - Burlington
- 2005 . . . . Sen. Richard Sears - Bennington
- 2004 . . . . Holly Miller - Burlington
- 2003 . . . . Thomas Perras, M.S. - Burlington
- 2002 . . . . June Elliott - St. Johnsbury
- 2001 . . . . Sen. Nancy Chard - Brattleboro
- 2000 . . . . Helen Riehle - Montpelier
- 1999 . . . . Cornelius Hogan - Plainfield
- 1998 . . . . Janet Stackpole - Burlington
- 1997 . . . . Karen Kitzmiller - Montpelier
- 1996 . . . . Margaret Martin - Middlebury
- 1995 . . . . No Award Given
- 1994 . . . . No Award Given
- 1993 . . . . Ann Seibert - Norwich
- 1992 . . . . Arthur Gibb - Middlebury
- 1991 . . . . Jean Mallary - Brookfield
- 1990 . . . . No Award Given
- 1989 . . . . Susan Spaulding - Montpelier

**DISTINGUISHED SERVICE AWARD** - *The Distinguished Service Award is the highest award the Society can bestow upon on of its members. It shall be awarded on the basis of meritorious service in the science and art of medicine and of outstanding contribution to the medical profession, its organizations, and the welfare of the public.*

- 2008 . . . . Michael Scollins, M.D. - So. Burlington
- 2007 . . . . John P. Fogarty, M.D. - Burlington
- 2006 . . . . John J. Murray, M.D. - Colchester
- 2005 . . . . J. Lorimer Holm, M.D. - Barre
- 2004 . . . . Jerold F. Lucey, M.D. - Burlington
- 2003 . . . . Jan K. Carney, M.D. - Charlotte
- 2002 . . . . Robert J. McKay, M.D. - Shelburne
- 2001 . . . . John Frymoyer, M.D. - Colchester
- 2000 . . . . No Award Given
- 1999 . . . . Richard T. Burtis, M.D. - Brattleboro
- 1998 . . . . Mildred Reardon, M.D. - Burlington
- 1997 . . . . J. Ward Stackpole, M.D. - S. Burlington
- 1996 . . . . Harry M. Rowe, M.D. - Wells River
- 1995 . . . . Roger W. Mann, M.D. - Jeffersonville
- 1994 . . . . Richard E. Bouchard, M.D. - Burlington
- 1993 . . . . Arthur & Elizabeth Faris, M.D. - Shaftsbury
- 1992 . . . . William Luginbuhl, M.D. - Vergennes
- 1991 . . . . Stanley L. Burns, M.D. - Burlington
- 1990 . . . . Charles Cunningham, M.D. - Springfield
- 1989 . . . . John H. Davis, M.D. - Burlington
- 1988 . . . . George Wolf, Jr., M.D. - Jericho

“Not for ourselves do we labor”

- 1987 . . . . . Paul Stanilonis, M.D. - Williston  
1986 . . . . . Roy V. Buttles, M.D. - Montpelier  
1985 . . . . . John Lantman, M.D. - Williston  
1984 . . . . . Frederic Guilmette, M.D. - Springfield  
1983 . . . . . Philip Wheeler, M.D. - Brattleboro  
1982 . . . . . John F. Bell, M.D. - S. Burlington  
1981 . . . . . Edward French, M.D. - Hyde Park  
1980 . . . . . Ernest V. Reynolds, M.D. - Barre  
1979 . . . . . R.M.P. Donaghy, M.D. - Burlington  
1978 . . . . . Ralph Jardine, M.D. - Lyndonville  
1977 . . . . . Woodhull Hall, M.D. - Bennington  
1976 . . . . . John E. Mazuzan, Jr., M.D. - Burlington  
1975 . . . . . Elbridge E. Johnston, M.D. - St. Johnsbury  
1974 . . . . . Robert W. Coon, M.D. - Burlington  
1973 . . . . . Robert B. Aiken, M.D. - Shelburne  
1972 . . . . . Chester A. Newhall, M.D. - Burlington  
1971 . . . . . A. Bradley Soule, M.D. - Burlington  
1970 . . . . . John C. Cunningham, M.D. - Burlington  
1969 . . . . . Albert G. Mackay, M.D. - Burlington  
1968 . . . . . John F. Daly, M.D. - Burlington  
1968 . . . . . Benjamin F. Cook, M.D. - Rutland  
1968 . . . . . Benjamin Clark, M.D. - St. Johnsbury  
1967 . . . . . Bertrand F. Andrews, M.D. - Middlebury  
1966 . . . . . John R. Hogel, M.D. - Brattleboro  
1965 . . . . . Ellsworth L. Amidon, M.D. - Burlington  
1964 . . . . . William McFarland, M.D. - Barre  
1963 . . . . . George A. Russell, M.D. - Arlington  
1962 . . . . . F. Russell Dickson, M.D. - Concord  
1961 . . . . . William Huntington, M.D. - Rochester  
1960 . . . . . Wilhelm Raab, M.D. - Burlington  
1959 . . . . . Albert C. Eastman, M.D. - Woodstock  
1958 . . . . . Stanton Eddy, Sr., M.D. - Middlebury  
1957 . . . . . Nathan R. Caldwell, M.D. - Brattleboro  
1956 . . . . . Charles E. Griffin, M.D. - Fair Haven  
1955 . . . . . Lyman Allen, M.D. - Burlington  
1954 . . . . . Aymer S.C. Hill, M.D. - Winooski  
1953 . . . . . Frank C. Angell, M.D. - Randolph  
1952 . . . . . John H. Woodruff, M.D. - Barre  
1951 . . . . . Ernest H. Buttles, M.D. - Burlington  
1950 . . . . . Frank J. Hurley, M.D. - Bennington  
1949 . . . . . Clarence Beecher, M.D. - Burlington  
1948 . . . . . Clarence F. Ball, M.D. - Rutland

**PHYSICIAN OF THE YEAR AWARD** - *The recipient must be a physician licensed in the state of Vermont who has: 1. Demonstrated outstanding performance in the quality of care given to his/her patients; 2. Demonstrated skillful and compassionate patient care; and 3. Demonstrated dedication to the welfare of his/her patients in accordance with accepted principles of good medical practice.*

- 2008 . . . . . John Elliott, M.D. - (Posthumously)  
2007 . . . . . No Award Given

“Not for ourselves do we labor”

2006 . . . . . Suzanne Parker, M.D. - Charlotte  
2005 . . . . . Allan Ramsay, M.D. - Burlington  
2004 . . . . . Joseph Haddock, M.D. - Williston  
2003 . . . . . Robert W. Backus, M.D. - Townshend  
2002 . . . . . Lewis C. Blowers, M.D. - Morrisville  
2001 . . . . . Don Swartz, M.D. - Burlington  
2000 . . . . . No Award Given  
1999 . . . . . No Award Given  
1998 . . . . . William A. Flood, M.D. - Bennington  
1997 . . . . . R. David Ellerson, M.D. - Montpelier  
1996 . . . . . Theodore Collier, M.D. - Middlebury  
1995 . . . . . Thomas A.E. Moseley, M.D. - Newport  
1994 . . . . . No Award Given  
1993 . . . . . Victor Pisanelli, Sr., M.D. - Rutland  
1993 . . . . . Ernest Tomasi, M.D. - Montpelier  
1992 . . . . . Deogracias Esguerra, M.D. - St. Albans  
1991 . . . . . William Pratt, M.D. - Rutland  
1990 . . . . . G. Richard Dundas, M.D. - Bennington  
1989 . . . . . No Award Given  
1988 . . . . . Eugene Bont, M.D. - Cavendish  
1987 . . . . . Louis J. Wainer, M.D. - Hinesburg

**PHYSICIAN AWARD FOR COMMUNITY SERVICE** - 1. *The recipient must be a physician licensed in the state of Vermont.* 2. *The recipient must be living. Awards are not presented posthumously.* 3. *The recipient has not been a previous recipient of the Award (formerly the A.H. Robins award and more recently, Wyerth-Ayerst Laboratories award).* 4. *The recipient has compiled an outstanding record of community service, which, apart from his/her specific identification as a physician, reflects well on the profession.*

2008 . . . . . Harry Chen, M.D. - Mendon  
2007 . . . . . Allan Ramsay, M.D. - Colchester  
2006 . . . . . No Award Given  
2005 . . . . . David Butsch, M.D. - Berlin  
2004 . . . . . Frederick Bagley, M.D. - Rutland  
2003 . . . . . Joan Madison, M.D. - Shelburne  
2002 . . . . . William Pratt, M.D. - Rutland  
2001 . . . . . Delight Wing, M.D. - Jericho  
2000 . . . . . John R. Carmola, M.D. - St. Albans  
1999 . . . . . John H. Elliott, M.D. - Lyndonville  
1998 . . . . . Edward Haak, D.O. - St. Albans  
1997 . . . . . Arthur Bergner, M.D. - Burlington  
1996 . . . . . William Hodgkin, M.D. - Hinesburg  
1995 . . . . . Joseph Hagan, Jr., M.D. - S. Burlington  
1994 . . . . . Alan Rubin, M.D. - Burlington  
1993 . . . . . Arnold Golodetz, M.D. - Burlington  
1992 . . . . . Henry Tulip, M.D. - St. Albans  
1991 . . . . . Arthur Wolk, M.D. - Rutland  
1990 . . . . . No Award Given  
1989 . . . . . J. Carleton Stickney, M.D. - Rutland  
1988 . . . . . E. Sherburne Lovell, M.D. - Springfield  
1987 . . . . . Howard Dean, M.D. - Shelburne  
1986 . . . . . Ronald Ferry, M.D. - Montpelier

*“Not for ourselves do we labor”*

- 1985. . . . No Award Given
- 1984. . . . William Brislin, M.D. - Rutland
- 1983. . . . Lester Wallman, M.D. - Burlington
- 1982. . . . Walter Rath, M.D. - St. Albans
- 1981. . . . Lester Judd, M.D. - Enosburg
- 1980. . . . Samuel Eppley, M.D. - Enosburg
- 1979. . . . J. Ward Stackpole, M.D. - S. Burlington
- 1978. . . . Frederick C. Holmes, M.D. - St. Albans
- 1977. . . . Philip G. Merriam, M.D. - Rutland
- 1976. . . . Arthur Gladstone, M.D. - Burlington
- 1975. . . . Dewees H. Brown, M.D. - Bristol
- 1974. . . . Julius H. Manes, M.D. - Bennington
- 1973. . . . John D. Boardman, M.D. - Burlington
- 1972. . . . Louis G. Thabault, M.D. - Winooski
- 1971. . . . Philip H. Wheeler, M.D. - Brattleboro
- 1970. . . . Rufus C. Morrow, M.D. - Burlington
- 1969. . . . Harry M. Rowe, M.D. - Wells River
- 1968. . . . H. Bernard Levine, M.D. - Burlington
- 1967. . . . Ray W. Collins, M.D. - Middlebury
- 1966. . . . Gordon B. Smith, M.D. - Rutland
- 1965. . . . Henry M. Farmer, M.D. - Burlington
- 1964. . . . Howard J. Farmer, M.D. - St. Johnsbury
- 1963. . . . Carlos G. Otis, M.D. - Townshend
- 1962. . . . Roger W. Mann, M.D. - Jeffersonville
- 1961. . . . Clifford B. Harwood, M.D. - Manchester
- 1960. . . . Benjamin Clark, M.D. - St. Johnsbury

**FOUNDERS' AWARD** - *The Vermont Medical Society Founders' Award is presented to an individual who has demonstrated outstanding leadership, vision and achievement in improving the health of Vermonters and all Americans. (In the event that no suitable candidate is nominated in a given year, the award need not be given.)*

- 2008. . . . Roger Mann, M.D. - Jeffersonville
- 2007. . . . John E. Wennberg, M.D. - Hanover, NH
- 2006. . . . No Award Given
- 2005. . . . No Award Given
- 2004. . . . Mildred Reardon, M.D. - Williston
- 2003. . . . John C. Lantman, M.D. (*Posthumously*)
- 2002. . . . Sen. James M. Jeffords - Shrewsbury
- 2001. . . . No Award Given
- 2000. . . . John Evans, PhD - Burlington
- 1999. . . . John E. Mazuzan, M.D. - Burlington
- 1998. . . . No Award Given
- 1997. . . . Hon. Howard Dean, M.D. - Shelburne

*“Not for ourselves do we labor”*

The Vermont Medical Society staff  
would like to thank its members for  
their continued support and involvement.

## 2009 Annual Meeting



**Saturday, October 3, 2009**

**Basin Harbor Club  
Vergennes, Vermont**

**!!! SAVE THE DATE !!!**

**Mark Your Calendar, Spend the Weekend  
and Bring the Whole Family!**

*IF YOUR SPECIALTY SOCIETY IS INTERESTED IN  
HAVING ITS MEETING IN CONJUNCTION WITH THE  
VMS MEETING CONTACT STEPHANIE AT 802-223-7898  
OR AT SWINTERS@VTMD.ORG*

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## Important Phone Numbers

### **CODING & BILLING INFORMATION**

#### **The Coding Center**

(888) 889-6597

#### **Medicare Carrier in VT - NHIC:**

Provider Inquiries

Routine Medicare Part B inquiries, claim status, Automated Audio Response Unite, and routine UPIN queries

(888) 248-6950

#### **Provider Services**

Medicare Part B policy information, limiting charge, and fee schedule queries

(888) 248-6950

#### **Provider Certification Unit**

Medicare Part B physician/provider enrollment queries

(888) 248-6950

#### **Electronic Data Interchange Support Services**

Electronic Data Interchange (EDI) is the process of transmitting Medicare Part B claims by electronic means. Healthcare providers and suppliers apply to NHIC Corp. EDI, to receive a submitter ID number and a password. Once enrolled in EDI, providers can bill directly to Medicare, using their own billing software, or allow a billing agency, clearinghouse, or vendor to send electronic claims on their behalf.

(877) 386-1056

### **PUBLIC AND PRIVATE INSURANCE**

Questions regarding state funded programs such as VHAP, Dr. Dynasaur, Medicaid, VHAP Pharmacy, VScript and VScript expanded: Health Access Member Services at (800) 250-8427

Questions regarding private health insurance of managed care plans - Department of Banking, Insurance, Securities & Health Care Administration (BISHCA)

(800) 631-7788



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## Important Phone Numbers

### **SPECIFIC PRIVATE INSURANCE CONCERNS**

#### **Blue Cross/Blue Shield of Vermont**

Member Services: (800) 247-2583, General: (802) 223-6131

#### **EDS Provider Services**

(800) 925-1706

#### **CIGNA Healthcare**

Members: (800) 244-6224, Healthcare Professionals: (800) 882-4462

#### **MVP Health Plan - Vermont**

Member Services: (888) MVP-MBRS, General: (800) 380-3530

### **HOSPITALS**

**Brattleboro Memorial Hospital:** (802) 257-0341

**Brattleboro Retreat Healthcare:** (802) 257-7785

**Central Vermont Medical Center:** (802) 371-4100

**Copley Hospital:** (802) 888-4231

**Dartmouth Hitchcock Medical Center:** (603) 650-5000

**Fletcher Allen Health Care:** (802) 847-0000

**Gifford Medical Center:** (802) 728-7000

**Grace Cottage Hospital:** (802) 365-7357

**Mt. Ascutney Hospital & Health Center:** (802) 674-6711

**North Country Hospital:** (802) 334-7331

**Northeastern Vermont Regional Hospital:** (802) 748-8141

**Northwestern Medical Center:** (802) 524-5911

**Porter Medical Center:** (802) 388-4701

**Rutland Regional Medical Center:** (802) 775-7111

**Southwestern Vermont Health Care:** (802) 442-6361

**Springfield Hospital:** (802) 885-2151

**Vermont State Hospital:** (802) 241-1000

**VA Medical & Regional Office Center:** (802) 295-9363

### **MISCELLANEOUS**

**Vermont Department of Health:** (802) 464-4343

**Vermont Board of Medical Practice:** (802) 657-4220, (800) 745-7371

**Centers for Disease Control and Prevention:** (800) 232-4636

**National Institutes of Health (NIH):** (301) 496-4000

**CMS Boston:** (617) 742-6830

**Health Care Ombudsman:** (800) 917-7787

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