

Indiana Urologic Association POST-CONVENTION NEWS



MAY 2015

Message from the

PRESIDENT

Dear Members:

I would like to first congratulate Dr. Teresa Beam on putting together an excellent annual meeting on March 7, 2015, and thank her for her leadership in the of the Indiana Urologic Association over the past two years. I would also like to thank the speakers, corporate sponsors and IUA members who participated and attended, allowing this meeting to continue to be a collegial venue for urologists of Indiana to gather, learn from each other and improve care to the patients we serve.

For those who could not attend, the meeting started off with an update on Complementary and Alternative Medical (CAM) therapies in urology by Dr. Leonard Guyer. This was an extremely informative talk on some of the CAM therapies used by our patients daily. I have already incorporated mannose therapy with my recurrent UTI patients. Next, Dr. Rosalia Misseri updated the group on the emergence of transitional urology and the efforts underway to care for pediatric urologic patients as they transition into adults. The great advances in medicine and pediatric urology have created a growing population of patients requiring long-term urologic care, and she shared the challenges facing those who care for this population.

Dr. David Miller, as the NCS Visiting Professor, updated us on the continued progress and impact the Michigan Urological Surgery Improvement Collaborative (MUSIC) is having in Michigan. This collaborative was established by urologists practicing throughout the state of Michigan to improve the quality and cost efficiency of prostate cancer care. Established in 2011, this collaborative has already improved the cost efficiency of prostate cancer staging and decreased the rate of post-biopsy infections. The insurers of the region are funding this, but it is not impossible to imagine similar initiatives within our organization. Dr. Clint Cary is working with Dr. Miller to assess the utilization of post TURBT Mitomycin C in our region in hopes of improved utilization of Mitomycin C. This effort could be the first step toward a true Indiana Collaborative. Dr. Brad Orris then updated the group on the Health Policy issues that continue to impact our ability practice in the state of Indiana. We continue to have daily assaults to ability to practice urology, and he suggested our involvement was very important to protecting our interests.

Drs. Carpenter, DeRoo, Heinsimer, Wren and Zhang provided the group with interesting and informative case presentations. Dr. Ben Carpenter received the first prize but all the presenters should be congratulated for excellent presentations. Dr. Jason Gilleran updated the group on the current treatments on interstitial cystitis, and Dr. Jason Kovac updated the group on the controversies of testosterone replacement and cardiovascular health. These presentations were both informative and relevant to the daily practice of urology. The meeting concluded with a panel discussion of Global Medicine Activities by Drs. Kaefer, Ney and Thompson. It is great to hear about the impact our local colleagues are having in other parts of the world.

I would like to thank the organization for the opportunity to serve as your president and will work with the other board members to provide an annual meeting that is informative and relevant to Indiana's urologic community. I have been involved with the IUA since its resurrection in 2006 and look forward to increasing the involvement of urologists throughout the state. If anyone has any suggestions on how to make the 2016 Annual Meeting more meaningful or applicable to engage all members of the organization, please do not hesitate to let me know directly. I can be reached directly on my cell phone at (317) 679-5523 or by e-mail at thagardn@iupui.edu.

Hope to see you all at the 2016 Annual Meeting of the IUA!

Sincerely,
Thomas A. Gardner, MD
2015-2016 President, Indiana Urologic Association
Professor of Urology, Indiana University Medical Center



SECRETARY/TREASURER'S REPORT

I would like to extend sincere thanks to all those who attended the 2015 IUA Annual Meeting and spent time interacting with our industry sponsors. The financial viability of our organization depends on support from industry. They should be viewed as partners in our goal to develop a strong, active state association dedicated to promoting the clinical and practice interests of Indiana's urology providers.

Dues contributions are also an important part of maintaining a healthy membership. I encourage you to reach out to your colleagues and share with them the importance of maintaining a strong state urology society. Not only does the success of IUA bind us together as colleagues, it also serves as a vital vehicle for representation at the North Central Section and the AUA.

The IUA Board of Directors continues to monitor and evaluate our current financial position as well as future strategies and opportunities. We remain steadfast in maintaining a financially strong organization. Thank you for allowing me to serve as your secretary/treasurer.

Ronald S. Suh, MD
2015 – 2016 Secretary/Treasurer,
Indiana Urologic Association

MESSAGE FROM THE PRESIDENT OF THE IUA-NP-PA ASSOCIATION

I would like to thank all mid-level providers who participated in the 2015 Annual Meeting. Several topics vital to our current practice were covered. I would also like to encourage all mid-levels to support the IUA through membership and attending the annual meetings. The benefits to participation are numerous, including networking and educational opportunities. We hope to see you all next year.

Tracy Mullins FNP-BC, CUNP
2015 – 2016
President of the IUA/NP/PA Association

PRESENT ELECT REPORT

Dr. Teresa Beam should be congratulated for organizing a relevant and informative educational program at this year's Annual Meeting, held at The Indianapolis Marriott North. Additionally, our corporate sponsors should be acknowledged for making our Annual Meeting a financial success. This was a well-attended meeting, providing information for all levels of urologic practice. Dr. David Miller, our NCS visiting professor, discussed prostate cancer registries and increasing collaboration in urology. I served on the panel for global medicine health. Dr. Bradley Orris provided an update on the important health policy issues facing us now.

We also heard from many excellent presenters about developments in the practice of urology. Dr. Jason Kovac talked about the relationship between

testosterone and cardiovascular health, while Dr. Jason Gilleran updated us on interstitial cystitis/bladder pain syndrome. Dr. Rosalia Misseri talked about the growing field of transitional urology, as pediatric urology patients transition into adulthood. Dr. Leonard Guyer offered insights into the world of complementary and alternative medical therapies.

The involvement of both academic and community urologists from around the state, and perspectives ranging from local practice, to state and national health policy, to global medicine health, provided a great forum for discussion of both practice and policy concerns facing us all. I thank the organization for allowing me to serve as the president-elect and I look forward to next year's program.

Kenneth G. Ney, MD
2015 – 2016 President-Elect,
Indiana Urologic Association

MESSAGE FROM THE REPRESENTATIVE TO THE NCS BOARD OF DIRECTORS

Congratulations to Dr. Beam on her tenure as president of our society. Dr Beam once again delivered an outstanding, thoughtful program. She is a tremendous clinician, an experienced leader and we are fortunate to have her in an active role in our state and section.

Dr. Gardner ascends from president-elect to president. It was not long ago we were taking our boards together and we first met. I vividly remember him entertaining me with topics that seemed so advanced that my mind, filled with board answers, found it difficult to conceptualize. We now know those topics as Provenge, Aberaterone, Xtandi and Sutent. Dr. Gardner will be a great president, and I look forward to his program and assisting him as a past president.

The IUA weekend has always been a constant on my educational calendar. It is an opportunity to network with those who face the same burdens and challenges

we all face day to day. The educational programs are always worthy and the CME well worth the visit. The organization has grown annually from its birth in 2005. Please consider participating. You will not be disappointed.

I am honored to be the state's representative to the NCS Board of Directors. This is my second tenure as a board member. One thing is clear: the NCS is blessed with incredibly talented leaders and policy makers. This year's meeting will be lead by President Dr. McKenna. Dr. McKenna's program will be stimulating and relevant. The meeting will be held November 10 – November 14, 2015, at the beautiful Ritz-Carlton Amelia Island resort. In an era of tougher industry support guidelines, it becomes more important to support the out-of-section meetings. Please consider joining my family and me to make this year's meeting the highest attended out-of-section meeting in the long, illustrious history of the NCS.

Mark D. Dabagia, M.D. FACS
2015 – 2016 Indiana Representative to
the NCS Board of Directors



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GOVERNMENT RELATIONS & ADVOCACY UPDATE

Edited by: Ross E. Weber, AACU State Government Relations Manager

Ind. Health Commissioner: Revolution coming to health care

The future health care system will also rely on cost-benefit and comparative-effectiveness analysis. Providers will use interventions and medical practices that are proven to be most efficacious, cost-effective and justified in relation to the benefit received by the patient and society. How much and what care is appropriate given the age and medical condition of the patient, especially at the end of life? Is that expensive diagnostic test really necessary? Is that expensive procedure really needed, and could the condition be addressed with less costly medical management?

Some states pay doctors more to treat Medicaid patients

Fifteen states are betting they can convince more doctors to accept the growing number of patients covered by Medicaid with a simple incentive: more money. The Affordable Care Act gave states federal dollars to raise Medicaid reimbursement rates for primary care services — but only temporarily. The federal spigot ran dry on Jan. 1. Fearing that lowering the rates would exacerbate the shortage of primary care doctors willing to accept patients on Medicaid, the 15 states are dipping into their own coffers to continue to pay

Anthem's offer that hospitals can't refuse

Like Don Corleone in "The Godfather," Anthem Blue Cross and Blue Shield is making hospitals an offer they can't refuse. The Indianapolis-based health insurer has persuaded 63 hospitals to chop their prices for blood and tissue testing by a range of 50 percent to 80 percent as part of its "reference lab network."

That's 50-80 percent off the discounted price Anthem had already negotiated with the hospitals. Anthem will change its

Indiana Medical History Museum 'at risk'

Museums are places that house and preserve bits of the past, but the Indiana Medical History Museum is having trouble preserving itself.

The museum built in 1895 as the pathology department at Central State Hospital, Indianapolis' long-shuttered psychiatric hospital on the Far Westside. It ceased being a pathology lab in 1955 and later was converted

The expectations of patients may be left unmet. Surgical and interventional specialists may rail against policies and regulations that curtail their ability to perform expensive procedures. Providers who make the most now will have the most to lose in the future.

Hospitals will adjust to changing revenue streams. Conflicts among providers may arise; competing interests between providers and patients may develop as they realize that the rules have changed... The spending spree will be curtailed. This may truly qualify as culture shock.

(Indianapolis Star, April 22, 2015)

the doctors more...In Indiana, which is spending about \$40 million a year in state dollars to keep the higher reimbursement rate, an additional 335 doctors have started accepting Medicaid patients since the beginning of this year. So have more than 600 other medical providers, such as nurse practitioners and physician assistants...The states that are continuing the higher payments are turning to a variety of sources to finance them...Indiana will do it with an increase in the cigarette tax and an eventual increase in taxes on hospitals.

(Stateline, April 20, 2015)

web site in mid-May to promote the latest prices offered by the labs participating in its reference lab network. The facilities include all the blood testing locations operated by the Eskenazi Health and Indiana University Health hospital systems, as well as some locations operated by Franciscan St. Francis Health. Later this year, those prices will also start showing up in Castlight Health and other price transparency tools.

(Indianapolis Business Journal, April 10, 2015)

to a museum, a private nonprofit funded mostly by physicians and retired physicians.

The building is functional but in sad shape, and on Saturday it becomes the first museum to make the "10 Most Endangered" list released annually by Indiana Landmarks, the statewide preservation group.

(Indianapolis Star, April 23, 2015)

Radiologists follow FedEx with flat-rate prices. Is this the future of health care?

...I was especially intrigued by a new flat-rate pricing scheme introduced this year by Northwest Radiology Network. The Indianapolis-based practice of 50 radiologists shrunk the bevy of imaging procedures to just 12 categories, which you can read here. Northwest Radiology didn't make any distinction based on what part of the body it was scanning, just what kind of scanner used (X-ray, CT, MRI, ultrasound), whether it required contrast fluid and whether it required a set of two images. It then assigned a price to each one, somewhere in the midpoint of the prices it would normally be for the different body parts it would scan. The flat-rate prices are also in the mid-point of the prices Northwest Radiology has negotiated with health insurers.

(Indianapolis Business Journal, April 23, 2015)

Health insurance changes affecting free medical clinics

The KennyBurkett Clinic of LaGrange is closing because the founder says there's no longer enough need for free healthcare services within the community. That's because the Affordable Care Act and Healthy Indiana Plan, otherwise known as HIP 2.0, provide free and low-cost medical insurance to many across the state. However, the programs aren't helping many of the patients of Matthew 25, Fort Wayne's free medical clinic. Despite the Affordable Care Act, Matthew 25 served five percent more patients in 2014 and saw its biggest month this March.

(WANE, April 15, 2015)

Ind. State Medical Assn. tackles data theft

Two hard drives containing medical data on more than 39,000 insured individuals were stolen last month in what the Indiana State Medical Association calls "a random criminal act." Since the incident, the ISMA has worked closely with the Indianapolis Metropolitan Police Department, which is involved in an active investigation. The association has discovered at least one surveillance video that captured the theft. The ISMA says it's working with outside experts to analyze what it can do to prevent this type of crime from recurring.

(Associations Now, March 31, 2015)

HIGHLIGHTS TO THE BALANCE SHEET

Fund Balance

The IUA fund balance as of March 31, 2015 totaled \$66,000. IUA operates on a calendar period modified cash basis for accounting purposes. For the period end, IUA had a net income of \$21,378.

Liabilities

As of March 31, 2015, accrued expenses totaled \$3,097.

Assets

Cash held at Chase Bank-Checking

At period end March 31, 2015, cash held in the Chase Bank checking account totaled \$67,597.

Accounts Receivable

As of March 31, 2015, IUA has an accounts receivable balance of \$1,500.



9TH ANNUAL IU RESIDENTS COMPETITION WINNERS

At the 2015 IUA Annual Meeting, the winners of the 9th Annual IU Resident's Competition were announced and congratulated.



1ST PLACE WINNER \$300

Benjamin Carpenter, MD
"Stirred Not Shaken and On the Rocks"

2ND PLACE WINNER \$200

Mimi Zhang, MD
"Where There's Urine, There's Stone"

3RD PLACE WINNER \$100

Kevin Heinsimer, MD
"One Tough SOB (Stone of Burden)"



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MARK YOUR CALENDARS-

IT'S NEVER TOO EARLY TO START PLANNING...



NOV 10 - 14 2015

**89th Annual Meeting
of the North Central Section
of the AUA, Inc.**

The Ritz-Carlton Amelia Island | Amelia Island, FL
Find out more at www.ncsuaa.org



SATURDAY, FEB 27

2015

IUA 2016 Annual Meeting

Sheraton Indianapolis City Centre | Indianapolis, IN

THANK YOU
TO OUR 2015 INDUSTRY PROMOTIONAL PARTNERS

Gold Level



astellas

THANK YOU TO OUR 2015 EXHIBITORS

AbbVie	Edgepark Medical Supplies/UroMed
Allergan	Genomic Health
American Medical Systems	KARL STORZ
Astellas Pharma US	MDxHealth
Bayer HealthCare	Olympus America
BK Ultrasound	Retrophin
Boston Scientific	Sanofi Oncology
Coloplast	TOLMAR Pharmaceuticals
Cook Medical	



HIGHLIGHTS TO THE OPERATING SYSTEM

Operating Income/(Loss)

As of March 31, 2015, the period end net income is \$21,378.

Revenue

Revenue for the period totaled \$37,525.

Expenses

Period end expenses totaled \$16,147.

Membership

As of March 31, 2015, 72 members have paid their 2015 annual dues and 60 members remain unpaid.