2018 A N N U A L R E P O R T





The Tennessee Medical Association is a nonprofit advocacy organization dedicated to serving Tennessee physicians. We advocate for public policies, rules and regulations that promote healthcare safety and quality for all Tennesseans and improve the non-clinical aspects of practicing medicine.

Year in Review

If there were ever a year that proved the value of supporting your state medical association it was 2018.

As usual, TMA delivered a number of programs and services to member physicians —many of which are covered in this report —but the highlights of the year happened on Capitol Hill.

During her term, Dr. Nita Shumaker fervently carried the flag on opioids to expand on years of education and public policy work and help change prescribing habits across the state. And when the governor decided to press the nation's most restrictive and comprehensive prescribing laws, TMA pressed back to secure important protections for physicians and patients.

We capped a two-year effort to ease mandatory maintenance of board certification and allow hospital medical staffs to independently choose whether they require MOC for physicians' continuing education.

We made sure physicians retained our leadership role on healthcare delivery teams so Tennesseans have access to the safest, highestquality medical care.

And our multi-year, multi-faceted efforts representing physicians' concerns with the TennCare episodes of care payment model finally paid off when TMA persuaded the state to pause any new rollouts and commit to fixing the episodes already in place.

While all this was happening, the Board of Trustees undertook a strategic planning process and outlined a vision for TMA to ensure long-term relevance and sustainability by narrowing the focus on the core mission. We are still finalizing some details but wanted to give members a high-level overview in this report.

We are proud of what we accomplished together in the past year and even more excited about where we are headed in the years ahead under the new strategic plan.

Thank you for all you do to make TMA the largest, most influential and successful advocacy organization for doctors in Tennessee.

\$ Shundly

Nita W. Shumaker, MD

Matthew L. Mancini, MD



Nita W. Shumaker, MD TMA President 2017-2018



Matthew L. Mancini, MD TMA President 2018-2019



^{2017–2018} TMA Board of Trustees

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MORE THAN **1,300** NEW MEMBERS

joined TMA in 2018, including medical students and residents

Increased Visibility Leads to Membership Growth

TMA ended 2018 with a total of 9,666 members, the largest number on record in TMA history.

TMA continued mass outreach to physicians across the state, from independent practitioners to small and large groups, and used targeted marketing campaigns to educate nonmember physicians on key advocacy wins that directly benefited their medical specialties. Physician leaders and staff made new connections with decision makers at more hospitals and large groups, submitting more than a dozen membership proposals totaling nearly \$1 million in requested support.

Organic membership growth came as a result of physicians across the state leading efforts to rejuvenate local medical society activity and engagement, and communicate the value of TMA membership to their peers. TMA's advocacy team delivered legislative updates to groups of doctors at the county level, and nine county or regional medical societies hosted legislative dinners connecting physicians to their elected state representatives.

TMA was also more visible and active at hospital medical staff meetings and other events, educating physicians in the aftermath of Governor Haslam's new opioid laws and updating the medical community on TMA's efforts to pause the TennCare episodes of care payment model, defend appropriate scope of practice and other key issues.

TMA is the outlet that unites doctors from different practice environments and medical specialties and gives them the forum to work together for the greater good. Increasing membership is key to funding a strong voice for Tennessee's physicians and their patients.

tnmed.org/membership



I have been a TMA member since obtaining my license in 2006. Throughout my career, my professional interests and subsequent needs have changed but TMA has always been there for me to meet those needs. Running a business, staying compliant and practicing good medicine is hard — TMA lessens that burden by giving me the information I need."

> **Crystal Dyer, MD** *Family Medicine,* Morristown

Visit tnmed.org/wins

for a summary of TMA's most recent and notable achievements for Tennessee physicians, and share the link with colleagues to encourage them to join.



All-in Groups

as of December 31, 2018

- 1. Abercrombie Radiological Consultants
- 2. Adams Patterson Gynecology & Obstetrics
- 3. Allergy and Asthma Affiliates
- 4. Allergy Asthma and Sinus Center
- 5. Anesthesia Medical Group (PhyMed Management LLC)
- 6. Anesthesiology Consultant Exchange
- 7. Appalachian Neurological Clinic
- 8. Arthritis Associates
- 9. Associated Orthopedics of Kingsport
- 10. Associates in Diagnostic Radiology
- 11. Associates in Oncology & Hematology
- 12. Associates in Plastic Surgery
- 13. Beacon Health Alliance
- 14. Blount Memorial Physicians Group
- 15. Bristol Anesthesia Services
- 16. Campbell Clinic Orthopaedics
- 17. Center for Sports Medicine & Orthopaedics
- 18. Chattanooga Allergy Clinic
- 19. Chattanooga Center for Women
- 20. Chattanooga Ear Nose & Throat Associates
- 21. Chattanooga Emergency Medicine
- 22. Chattanooga Eye Institute
- 23. Chattanooga Heart Institute
- 24. Chattanooga Neurology Associates
- 25. Chattanooga Skin & Cancer Clinic
- 26. Chattanooga Women's Specialists
- 27. CHI Memorial Health Partners
- 28. Clinica Medicos

29. Cookeville Pediatric Associates

- 30. Consolidated Medical Practices of Memphis, PLLC
- 31. Consultants in Pain Management
- 32. Dermatology Associates of Kingsport
- 33. Dermatology Associates of Knoxville
- 34. Dermatopathology Partners
- 35. Diagnostic Cardiology Group
- 36. Diagnostic Pathology Services
- 37. Drs. Davenport and Davenport, Elizabethton

38. Ear Nose and Throat Associates PC

- 39. Ear Nose & Throat Consultants of East Tennessee
- 40. Ear, Nose and Throat Group, Inc.
- 41. East Memphis Orthopedic Group
- 42. East Ridge Eye Center

- 43. East Tennessee Spine and Ortho of Morristown
- 44. East Tennessee Vascular Center, Morristown
- 45. Erlanger Health System Physician Groups
- 46. Eye Specialty Group
- 47. Eye Surgery Center of Knoxville
- 48. Fenyves and Fry
- 49. Galen Medical Group
- 50. Gastroenterology Associates of Kingsport
- 51. Germantown Wellness and Preventative Medicine
- 52. Goodlettsville Pediatrics PC
- 53. Greater Knoxville Ear, Nose & Throat
- 54. Greeneville Orthopaedic Clinic
- 55. Greeneville Pediatric Clinic
- 56. Greeneville Surgical Associates
- 57. Hamblen Anesthesia
- 58. Hamblen Pediatric
- 59. Hamilton Eye Institute
- 60. Hanna Cancer Associates
- 61. Hayes Hand Center
- 62. Head and Neck Specialties
- 63. Heritage Medical Associates
- 64. Hughston Clinic Orthopaedics
- 65. Infectious Disease Physicians of Chattanooga
- 66. Inpatient Physicians of the Mid-South
- 67. Jackson Pathology Group
- 68. Jackson Surgical Associates
- 69. Jefferson Family Physicians
- 70. John Lawson Surgical Group
- 71. Johnson City OB/GYN Associates

72. Kentucky Lake Urology Clinic

- 73. Knox County Regional Forensic Center
- 74. Knoxville Dermatology
- 75. Knoxville Institute of Dermatology
- 76. Knoxville Pediatric Associates PC
- 77. Knoxville Radiology Group
- 78. Lakeway Dermatology Associates
- 79. Lakeway Anesthesia
- 80. Lakeway Ear, Nose and Throat
- 81. LifeCircle Women's Healthcare, PC
- 82. Livingston Clinic
- 83. McDonald Murrmann Women's Clinic
- 84. Medical Anesthesia Group
- 85. Memphis Dermatology Clinic

- 86. Memphis Pathology Group
- 87. Memphis Surgery Associates

88. Methodist LeBonheur Pediatrics

- 89. Methodist Healthcare
- 90. Michael W. Goodman & Associates
- 91. Mid-South Ear, Nose & Throat
- 92. Mid-South Imaging & Therapeutics
- 93. Mid-South Retina Associates LLC
- 94. Mid-South Surgical Associates
- 95. Morristown Heart Consultants
- 96. Morristown Regional Eye Center
- 97. Mountain Empire Eye Physicians
- 98. Mountain Empire Neurological Associates

99. Mountain Region Family Medicine

100. MSK Group, P.C.

- 101. Nashville Fertility Center
- 102. Nashville Gastrointestinal Specialists Inc.
- 103. Nashville Oncology Associates
- 104. Nashville Surgical Associates
- 105. Nephrology Associates (Nashville)
- 106. Nephrology Associates (Chattanooga)
- 107. New Life Center for Bariatric Surgery
- 108. OB/GYN Center of Excellence
- 109. OBGYN Associates of the
- 110. Mid-South PLLC

111. Pain and Spine Consultants

- 112. Pain Consultants of East Tennessee
- 113. Pain Medicine Associates
- 114. Parkridge Bone and Joint

115. PathGroup

- 116. Pediatric Anesthesiologists, P.A.
- 117. Phillips Healthcare Group, Talbott
- 118. Plastic Surgery Center of Nashville PLLC
- 119. Plastic Surgery Group of Memphis
- 120. Plaza Urology
- 121. Premier Surgical Associates, PLLC
- 122. Primary Care Associates, Talbott
- 123. Provision Center for Proton Therapy
- 124. Psychiatric Associates of Kingsport
- 125. Rheumatology and Dermatology Associates PC
- 126. Rheumatology Consultants PLLC
- 127. Saint Thomas Medical Partners—Breast Surgery
- 128. Seal & Lawrence
- 129. Semmes-Murphey Clinic
- 130. Shea Clinic
- 131. Shell Cosmetic Surgery Center
- 132. Siskin Spine and Rehab Specialists
- 133. Soddy Daisy Pediatrics

- 134. Southeastern Retina Associates
- 135. Southeastern Retina Associates PC-Knoxville
- 136. Southern Oncology Inc.
- 137. Southern Surgical Arts
- 138. Specialists in Pain Management
- 139. Specialty Surgeons PC
- 140. State of Franklin Healthcare Associates PLLC
- 141. Summit Medical Group Healthcare Services

142. Surgical Associates of Cleveland

- 143. Surgical Associates of Kingsport
- 144. Susong Dermatology
- 145. Sycamore Shoals Primary Care
- 146. Takoma Medical Associates
- 147. Tennessee Cancer Specialists
- 148. Tennessee Interventional & Imaging Associates
- 149. Tennessee Oncology
- 150. Tennessee Orthopaedic Alliance
- 151. Tennessee Urology (Oak Ridge)
- 152. The Colorectal Center
- 153. The ID Group
- 154. The Plastic Surgery Group
- 155. The Skin Wellness Center
- 156. The Surgical Clinic
- 157. The Urology Group, PC
- 158. Tranquility Sleep Specialists PLC

159. Tri-Cities Skin and Cancer

- 160. University Anesthesiologists
- 161. University Cardiology
- 162. University General Surgeons
- 163. University Gynecologic Oncology
- 164. University Heart Surgeons
- 165. University Oncology & Hematology Associates
- 166. University Surgeons Associates
- 167. Urology Associates, PC
- 168. Vigilance Anesthesia, Elizabethton
- 169. VIP MidSouth
- 170. Vista Radiology
- 171. VRF Eye Specialty Group
- 172. Wellmont CVA
- 173. Wesley and Klippenstein PC
- 174. Wesley Neurology Clinic
- 175. Women's Center of Greeneville
- 176. Womens Group of Franklin
- 177. Women's Health Specialists

*New all-in group



TMA proactively created numerous proprietary resources to help members understand how to comply with restrictive new opioid prescribing laws.

tnmed.org/opioids





Physicians' Voice on Capitol Hill

TMA in 2018 had one of its most active and effective legislative sessions in recent history. The state's strongest voice for physicians reviewed nearly 1,300 bills, tracked 447 and supported, amended or defeated more than 50 pieces of legislation affecting Tennessee physicians and patients.

Fighting Tennessee's Opioid Epidemic

The state's number one public health crisis expectedly became the legislature's top priority in 2018. TMA was actively involved during every step of Governor Haslam's "TN Together" initiative, communicating doctors' concerns to lawmakers about the plan and negotiating crucial amendments to ensure related laws did not interfere with physicians' appropriate medical discretion or obstruct patients in legitimate pain from getting the care they need. New laws that took effect July 1, 2018 are the most comprehensive and restrictive opioid laws in the county.

Scope of Practice

TMA in 2016 negotiated a three-year moratorium with the Tennessee Nurses Association on any scope of practice legislation, so there were no bills in 2018 related to APRN independent practice, but a proposal for a new scope of licensure for physician assistants lead to a contentious legislative debate. Lincoln Memorial University sought legislation that would allow graduates of LMU's Doctor of Medical Science degree program to practice in primary care as "doctors of medical science." TMA was opposed to the bill in 2017 and 2018 and changed its position to neutral only after the proponents addressed all of physicians' concerns, including changing the licensure name from "doctor of medical science" to "Essential Access Practitioner." EAPs would have also been regulated by the Board of Medical Examiners in a physician-led, team-based care healthcare delivery model. The bill was withdrawn late in the session and is not expected to return in any form.

Maintenance of Certification

Tennessee now has one of the most physician-friendly MOC laws in the U.S. because of TMA's two-year effort. Laws passed in 2018 prohibit health insurance companies from requiring MOC as a condition for network participation and allows individual hospital medical staffs to determine whether MOC is a requirement for hospital privileges. In 2017, TMA successfully persuaded the legislature to ease the burdensome and costly MOC requirements by prohibiting MOC as a condition of state medical licensure.

Episodes of Care

TMA redoubled advocacy efforts to educate legislators on physicians' concerns about fundamental flaws in the TennCare episodes of care payment model design and implementation. The General Assembly passed three related laws in 2018 but the big news happened in May when the TennCare Bureau announced it would pause any new episodes and fix the current issues.

tnmed.org/episodes

Balance Billing

TMA, as it has in recent years, defeated numerous proposals in 2018 that would have eliminated hospital-based physicians' ability to balance bill patients for services provided out of a health plan network. Legislators continue to look for ways to address complaints about "surprise medical bills," including considering proposals to prohibit balance billing or lift the state's ban on corporate practice of medicine.

Tanning Beds

TMA led a coalition of healthcare organizations that persuaded lawmakers to require parental consent for 16 and 17-year-olds to use tanning beds and prohibit anyone younger than 16 from using the indoor tanning devices. The new law will help protect minors from avoidable risk of melanoma and other forms of skin cancer.



Physicians Involved in Grassroots Advocacy

TMA's annual Day on the Hill brought more than 300 physicians and healthcare advocates to the legislature's new Cordell Hull Building in March to advocate for better state healthcare policies.

tnmed.org/dayonthehill

More than 20 physician members volunteered as the legislative Doctor of the Day, serving the medical needs of lawmakers and staff, and discussing important issues Tennessee physicians.

tnmed.org/doctoroftheday

Nine of TMA's component medical societies hosted legislative dinners in the fall. The annual home-turf forum gives lawmakers a chance to meet and interact with their physician constituents on issues that will be important in the upcoming session.

Read more about TMA's state-level advocacy efforts in the 2018 legislative report card.

tnmed.org/2018reportcard

2018 IMPACT CORPORATE DONORS

Association of University Radiologists

Chattanooga Family Practice Associates, Inc.

OrthoTennessee

State Volunteer Mutual Insurance Company

Tennessee Interventional and Imaging Associates

The Jackson Clinic PAC

West Tennessee Radiology



TMA's political action committee invested **\$166,250** in 130 total (primary and general) races in 2018. Candidates IMPACT and TMA supported won all but one.

tnmed.org/impact

2018 IMPACT SUSTAINING MEMBERS | \$300

James Patrick Anderson, MD Shahin Assadnia, MD Allan H. Bailey, MD, FACP Stanley L. Bise, MD Glenn H. Booth, Jr., MD, FACP Harry E. Burck, Jr., MD Patrick H. Burkhart, MD Jeffrey Byers, MD Scott A. Copeland, MD Dennis H. Duck, MD, FACP David N. Dyer MD Jeffery Bein Eskind, MD Steven G. Flatt, MD Larry Gibson, MD James C. Gray, MD Richard S. Greene, MD Chad Aubrey Griffin, MD Erich Bryan Groos, Jr., MD David Nelson Gwaltney, MD Richard S. Hall, MD Melinda J. Haws, MD James William Haynes, MD Charles Hilgenhurst, MD George Alan Hill, MD David Harvey Horowitz, MD John Jackson Ingram, III, MD Stephen W. Jackson, MD Albert A. Kattine, MD Michael P. Kauzlarich, DO Haresh H. Khatri, MD Anthony D. Khim, MD

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2018 IMPACT ADVOCATE MEMBERS | \$500

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Scott W. McCall, MD Jonathan Reid Pettit, MD Erion Qamirani, MD William Cason Shirley, MD Dr. Kenneth T. Sykes Joseph Fredrick Wade, MD Charles D. Wilburn, MD

2018 IMPACT CAPITOL HILL CLUB | \$1,000+

Newton Perkins Allen, Jr., MD Rex Allen Amonette, MD Keith Gregory Anderson, MD Joseph R. Armstrong, MD Samuel Ray Bastian, MD, FACP, FAAP James Howard Batson, MD Gail Brabson Oran Lee Berkenstock, MD John Q. Binhlam, MD Leonard Allison Brabson, Sr., MD M. Bart Bradley, MD Joe H. Browder, MD, MBA Jeffrey William Bunning, MD C. Scott Callicutt, MD Edward W. Capparelli, MD Neil M. Coleman, MD Dale Criner, MD Brian J. Daley, MD Dr. Natalie R. Dickson MD Jennifer Michelle Dooley, MD Jacob Emile Dowden, MD

James K. Ensor, Jr., MD, FACP Eric Fox, MD John W. Hale, Jr., MD Omar L. Hamada, MD, MBA Danielle Hinton Hassel, MD Joseph Shelby Hensley, MD Joshua A. Hicks, MD Wayne Scott Kelly, MD Ronald H. Kirkland, MD, MBA Kenya Kozawa, MD George R Lee MD Drs. Adele and Rodney Lewis Matthew L. Mancini, MD Michael A. McAdoo, MD John David McCarley, MD Michel Alice McDonald, MD Patrick David McFarland, MD Kristen A. Stancher, MD Brent Robert Moody, MD, FACP, FAAD Autry J. Parker, MD Jeffrey Patton, MD

Basil Mantus Paulus, MD Julie Maria Pena, MD Matthew Lane Perkins, MD, FACP F. Bronn Ravne, MD Perry Clyde Rothrock, III, MD Nita W. Shumaker, MD Timothy Scott Smyth, MD W. Kirk Stone, MD Peter J. Swarr, MD Sue Vegors Raymond R. Walker, MD, MBA John J. Warner, MD William Turney Williams MD Timothy S. Wilson, MD George R. Woodbury, Jr., MD Subhi Ali, MD and Maysoon Ali, MD Yasmine Ali, MD John E. Blake, III, MD





KAREN BAIRD CPC, CPMA

Helping Doctors Solve Insurance Hassles

TMA entered 2018 with a renewed focus on insurance advocacy for members and in January welcomed Karen Baird, CPC, CPMA, to the staff as Director of Insurance Affairs. Baird oversees TMA's efforts to address systemic insurance issues and help physicians resolve network contracting, reimbursement and other insurance-related hassles.

TMA continually advocates for rules and regulations that reduce or eliminate unnecessary administrative burden and ensure fair business practices for Tennessee's doctors and their patients.

In January, a federal district court judge granted summary judgment in favor of several primary care providers who were at risk of millions of dollars in recoupment from the Centers for Medicare & Medicaid Services. TMA advocated for three years that the CMS and TennCare rate bump audits were arbitrary and unfair, and the federal court eventually deemed the regulation unlawful. This means that no other state Medicaid agency will be allowed to audit Medicaid providers using the criteria in the regulations and recoup money from primary care physicians.

In February, TMA helped a group of West Tennessee physicians at an addiction recovery treatment facility overcome credentialing denial to become re-credentialed with a major health plan.

Amerigroup relented to TMA's advocacy during the summer and pulled back its planned modifier 25 payment policies that would have reimbursed physicians only 50% of fee schedule for sick patient services delivered same day as a wellness visit. UnitedHealthcare also backed off its plans to implement a similar policy after TMA and others objected. A pediatric practice in Soddy-Daisy was under prepayment audit for more than a year due to billing and coding issues. TMA consulted with the office staff to correct billing and coding errors, acted as a liaison between the practice and payer and the prepayment audit was removed within 60 days.

TMA's advocacy with the regional Medicare contractor helped a group of East Tennessee physicians recover outstanding A/R after the payer admitted its own clerical error and began retroactively paying previously denied claims.

tnmed.org/insurance

My experience with TMA has been nothing short of professional, efficacious, and instrumental in building my new practice. The TMA staff are liaisons between me and insurance companies, helping form meaningful relationships and secure contracts so I can manage my patients in network. I believe in the resources TMA has to offer because its support led to a successful outcome for me, my practice and my patients."

Cynthia Niendorff, MD *Pain Management Specialist*, Knoxville













Legal and Regulatory Advocacy

While TMA is sometimes best known for legislative advocacy, the association continually works to protect physicians' rights in the state and federal court system, act as a voice for medicine before state and federal regulatory boards and committees, and give members expert legal and compliance guidance, hospital medical staff bylaw reviews and more.

Health Plan Network Adequacy

Insurance companies' trend of reducing the number of physicians in a health plan network can make it harder for patients to see doctors and make early intervention more difficult. Mass cuts in physicians from provider networks and the continued proliferation of narrow networks raise concerns about continuity of care and interference with the doctor-patient relationship.

In January 2018, CMS announced it would increase efforts to ensure adequate networks and confirmed that beginning in 2019 it will proactively review networks every three years, conduct immediate reviews when beneficiaries report access problems, and review plans' entire networks when a trigger event occurs.

Reducing Administrative Hassles in Federal Regulatory Scheme

TMA has advocated for the repeal of provisions of the Affordable Care Act and other laws and regulations that provide little value but cost physicians time and money to comply. TMA's 35-point letter to then-HHS Secretary Price in 2017 sets the guide for the federal government to reduce administrative hassles in government payer healthcare delivery; federal regulators addressed three of TMA's points in 2018.

In January, CMS addressed TMA's stated recommendation that CMS increase its enforcement of Medicare Advantage network adequacy and directory accuracy.

CMS has improved broken payer audits, such as RACs. Medicare must send audits to the physician for discussion with the RAC medical director or submit additional documentation prior to sending an audit to CMS.

TMA has since 2016 advocated to protect physicians' right to conduct in-office drug compounding for patients. In 2018, the FDA indicated a willingness to find a new path, Compounding Policy Priorities Plan, that acknowledges that physician activities in many cases pose negligible risks to patients and should therefore not be subject to the same compliance policy as compounding pharmacies.

Other Notable Legal and Regulatory Efforts in 2018

Physician Credentialing Hassle Relief

TMA started 2018 having worked for a year on credentialing solutions through Tennessee Physicians Quality Verification Organization, Inc. and its new software launch to ease the burden of hospital and health plan credentialing. TMA is also working with several stakeholders on a pilot project to consolidate credentialing data and simplify its portability.

Medicaid Primary Care Rate Bump Audit

In January 2018, nearly three years after TMA first engaged on the issue, a federal district court judge granted summary judgment on behalf of several primary care providers and invalidated the CMS rule that served as the basis for TennCare's audit and recoupment demands for millions of dollars owed to TMA members.

IPAB Repeal

The Bipartisan Budget Act of 2018, which included the repeal of the IPAB, was signed into law in February 2018. TMA advocated for the repeal since the enactment of the Affordable Care Act.







Grooming Physician Leaders to Shape the Future of Medicine

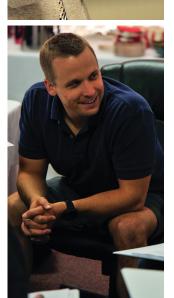
TMA's John Ingram Institute for Physician Leadership reported record-level statewide demand for its programs in 2018, pointing to notable shifts in the healthcare landscape and evolving roles and expectations for doctors to excel in team-based healthcare delivery.

The 2018 Physician Leadership Immersion Program graduated 11 doctors from across the state in July. The Immersion is a two-weekend course covering foundational leadership areas like teamwork, collaboration, conflict resolution and media and communications.

Five additional physicians implemented quality improvement projects in their own practice environments as part of the Leadership Lab, a multi-month course focusing on leadership in the team-based healthcare delivery setting.

Slots for both programs are already completely filled for 2019 with a waiting list for 2020.

TMA's Ingram Institute is partially funded in part by a grant from The Physicians Foundation, a nonprofit 501(c)(3) organization that seeks to empower physicians in strengthening relationships with patients, sustaining their medical practices and navigating the changing healthcare system. Since its inception, the Foundation has provided more than \$49 million in grants to nonprofit organizations, universities, hospital systems and medical society foundations.



tnmed.org/leadership

When it comes to leading a hospital, physicians must be at the table to help make decisions. If you are not at the table, you are on the menu. This Leadership Lab gave me the skills and tools to take a seat at the table. I also learned the value of working with frontline staff to create effective processes that achieve sustainable results. If this Lab can work for a radiologist who likes to stay in the reading room and read films, it can work for any physician. I strongly recommend it."

> Ina Radtke, MD, PhD Radiology, Paris

 Prior to this Leadership Lab, I never had the tools or skills to successfully bring about real change. I always tried to make things happen by sheer willpower. That didn't work. I found the Lab to be very valuable and it enabled me to lead a project that not only measurably improved care for our patients, it also improved the climate between the providers and our patients."

> Leslie Treece, MD Pediatrics, Cookeville

2018 Immersion Graduates

Patrick Andre, MD Family Medicine, *Milan*

Betsy Close, MD Family Medicine, *Chattanooga*

Nefeteria Coffee, MD Preventative Medicine, *Nashville*

Julie Haun, MD Family Medicine, *Chattanooga*

John Scott Major, MD Family Medicine, *Hermitage*

Deepak Mehrotra, MD Pediatrics, *Mt. Juliet*

Kenya Miles, MD, MSPH Occupational Medicine, Nashville

John Schneider, MD Neurology/Pain Medicine, *Murfreesboro*

Ruchir Shah, MD Neurology/Pain Medicine, *Chattanooga*

Jonathan (Taylor) Whaley, MD Radiation Oncology, Chattanooga

Michael Wilkinson, MD Anesthesiology/Pain Medicine, Johnson City

2018 Lab Graduates

Parul M. Goyal, MD Internal Medicine, Nashville

Ina Radtke, MD, PhD Radiology, Paris

Heather Rupe, DO OB/GYN, *Franklin*

Leslie Treece, MD Pediatrics, *Cookeville*

Jack H. Whitaker, MD Internal Medicine, *Greeneville*





The TMA Board of Trustees in 2018 embarked on a comprehensive strategic planning process to propel the organization into the next decade, and beyond.

After several months of reviewing historical data, evaluating current trends and projecting future market dynamics, the Board decided that TMA must make significant changes to ensure the association's long-term financial strength and relevance among Tennessee physicians.

Beginning in 2019, TMA will re-focus on its core values and chart a clear path for sustainable growth and success as the state's largest and most influential advocacy organization for doctors.

10-YEAR VISION

This is where we want to go.

- 1 Strengthen TMA's position as THE advocate for doctors and patients in Tennessee by narrowing our focus on our core values and mission.
- 2 Address changes in the physician practice environment so we can better understand and engage diverse physicians and fuel membership growth.
- **3** Grow membership to increase our voice in health policy and advocacy and support fiscal strength.

CORE VALUES

This is what drives and defines us.

1 Supporting Tennessee physicians

advocating for good healthcare policies, rules and regulations, and eliminating or alleviating the hassles of practicing medicine

2 | Advocating for patients

standing up when government and/or insurance companies interfere with the doctor-patient relationship and threaten quality care

3 | Maintaining fiscal strength

running the nonprofit organization as a business with strategic, efficient and effective operations









CORE FOCUS

This is how we will carry out our core values and achieve the vision.

Advocacy

TMA's clear strength and competitive edge is advocacy. That identity has to be reinforced through every other facet of operations. TMA cannot be all things to all doctors, but we will be laser-focused on influencing laws, rules and regulations, and business practices, governing medicine in the State of Tennessee.

2 | Communication

TMA must differentiate itself with a compelling value proposition in an increasingly competitive and fragmented market. Not all doctors care about advocacy, but advocacy benefits all doctors.

3 Diversity

TMA needs a strategic, proactive way to recruit and engage leaders who better represent Tennessee's diverse medical community (age, gender, ethnicity, specialty and practice environment) and will drive the organization in the future.

4 | TMA/county society roles

TMA must reexamine and renovate its internal structure to eliminate redundancies, avoid internal competition and be better stewards of members' dues.

5 Strengthening relationships with medical specialty societies

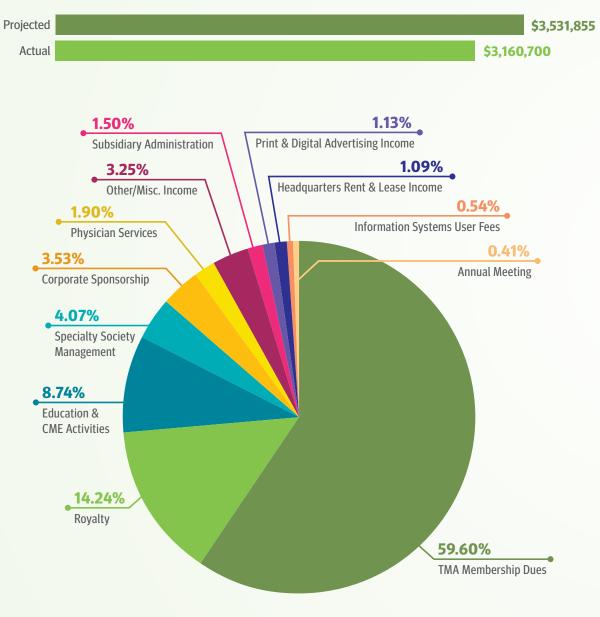
TMA must proactively engage state-level specialty organizations in advocacy and other strategic, collaborative initiatives that align with our core mission and benefit our respective physician members.

Financial Overview

2018 INCOME

*Unaudited as of December 31, 2018

TOTAL INCOME | 100%



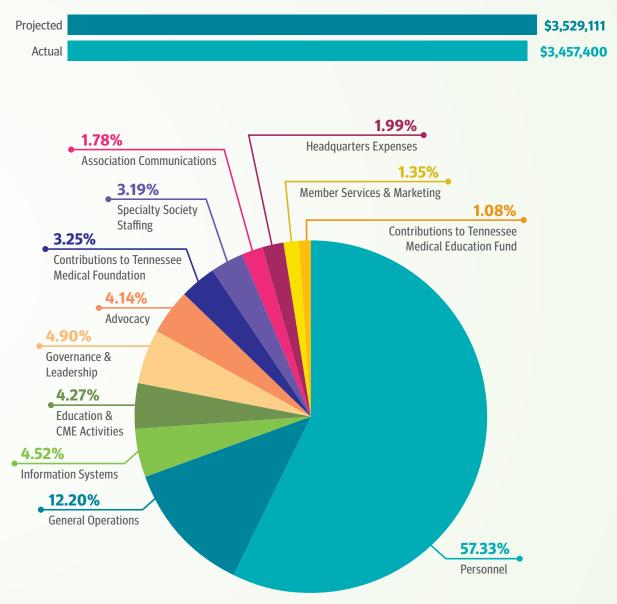
TREASURER'S NOTE

TMA's revenue shortfall in 2018 totaled \$371,155, 71% of which was due to a late-year market drop that adversely affected the value of TMA's investment reserve accounts. The remainder was due to lower than expected revenue earned at events and non-renewal of two large medical practices.

2018 EXPENSES

*Unaudited as of December 31, 2018

TOTAL EXPENSES | 100%





RUSS MILLER, CAE Chief Executive Officer

2019 and Beyond...

As evidenced in this annual report, TMA continues to achieve remarkable results for its members and the medical profession throughout Tennessee.

Organizationally, we have seemed consumed at times with the overbearing opioid crisis plaguing our state and nation. TMA has been at the forefront of efforts that have started to show positive results. From our initial efforts in 2010 to teach physicians about doctor shoppers and scams, to working with the statewide opioid taskforce, to improving pain clinic regulations, to advocating for important amendments to Governor Haslam's opioid bill, TMA has been there since the beginning representing physicians and patients. This battle is not over and we will be there every step.

We have been under a political cease fire with the nursing profession for a few years over a proposal to give advance practice nurses the right to practice primary care in Tennessee without agreement for oversight or collaboration with physicians. This moratorium ends after the 2019 legislative session, but we may face related challenges this year regardless of agreements made between our organizations. The House of Medicine, meanwhile, is considering a multitude of options to increase access to better care through more integrated and coordinated healthcare delivery teams. We support the team-based care model and respect all members of the team, but the unquestionable team leaders are physicians. We need to modernize our collaborative arrangements to maximize healthcare quality and efficiency without compromising patient safety.

While there will be much to do about the recent court ruling that parts of the ACA are unconstitutional, this is a long performance with many acts. In the short term, physicians deserve the ability to choose what plans they participate in without getting knee-capped by regulations requiring them to accept insurance terms decided by others or being forced into employment. TMA was able to slow the TennCare episodes of care rollout down to a veritable crawl throughout the last year as well. With the slow roll came a slowing in abilities to meet and work on improvements. The Lee Administration and new TennCare leadership will determine the fate of episodes of care, along with any potential for expanding access to healthcare coverage in our state.

We are seeing a lot of new faces on Capitol Hill since the November elections, and many are friends we supported in primary and general elections. Almost one-third of the men and women in the General Assembly are first timers or have moved from the House to Senate. We spent an enormous amount of resources meeting with the new lawmakers to introduce them to the issues facing physicians, explain our positions and make sure they know about TMA and what it represents.

Without a doubt, we are most excited about the work that lies ahead building out TMA's new organizational strategies over the next four years. The Board of Trustees spent time over the summer and will continually be involved in the creation and direction of new strategies to lead TMA into the future. TMA's physician leaders and staff are passionate about the renewed focus on who we are, what this organization means to physicians in Tennessee today and our role in shaping healthcare for tomorrow.

The core of TMA's existence remains the Tennessee physician. Period. Tremendous pressure is continually placed on our members and potential members, and we're advocating for you every day. What attracted physicians to TMA and organized medicine is evolving and it's been said before — TMA has to adapt to those changes to remain relevant. Relevancy translates to support from those you seek to serve; their support translates to the resources and financial solvency that enables TMA to better serve members!

Parse Mille

SNAPSHOT OF THE YEAR

2018 TIMELINE

JANUARY:

TMA adds Director of Insurance Affairs

AMA Data: Tennessee doctors support 175,831 jobs, generate \$29.1 billion in economic activity

TMA begins work on new opioid laws following Governor Haslam's announcement of "TN Together" initiative

FEBRUARY:

Tennessee physicians win lawsuit against federal government halting efforts to recoup payments from physicians



MARCH:

Elise Denneny, MD named TMA President-Elect, the third female in the organization's history

TMA celebrates Day on the Hill at the new home of the TN legislature, Cordell Hull

Tennessee Legislature approves physicianfriendly MOC bill

APRIL:

New data shows Tennessee making notable strides in opioid prescribing

TMA continues work on improving Governor Haslam's TN Together opioid plan

TMA partners with Department of Health and others launching "Safe Stars," promoting youth sports safety









MAY:

Physicians discuss opioids, scope of practice and more during TMA's annual meeting

Matthew Mancini, MD installed as TMA President

AMA report shows national progress toward reversing opioid epidemic

JUNE:

TennCare pauses Episodes of Care rollout

TMA leads physician education on new opioid laws

JULY:

TMA Board of Trustees conducts strategic planning weekend in Chattanooga







AUGUST:

Democratic and Republic nominees named for governor, senate in primary elections

SEPTEMBER:

Tennessee health plans rescind modifier 25 payment policies

TMA hosts statewide healthcare conference, focusing on opioid epidemic

OCTOBER:

TMA hosts statewide insurance workshops

TMA Board of Trustees adopts 4-year strategic plan and 10-year vision

NOVEMBER:

Tennessee voters choose governor, congressional and state legislature seats in the general election

DECEMBER:

Physician leadership training in high demand among Tennessee physicians and healthcare organizations







701 Bradford Avenue Nashville, TN 37204 615.385.2100 tnmed.org @tnmed facebook.com/TNMed

