



PULASKI COUNTY MEDICAL SOCIETY News

January 2023

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When you think professional, ethical, quality healthcare,
think physicians of Pulaski County Medical Society.

President's Address

Dear Members of PCMS,

It is with distinct pleasure to have the opportunity to serve as President of the Pulaski County Medical Society (PCMS) for the 2023 year. It is an honor to serve the largest and oldest county medical society in the state of Arkansas. I would like to thank the Board of Directors for their dedication and hard work over the past year. I would also like to thank Dr. Krishnappa Prasad for his leadership as President of PCMS during 2022. I look forward to continuing and growing our support for the health and wellness of our community.



Dr. Nicholas Brucker

I have had the privilege of serving on the Board of Directors of PCMS for the past two years. I am proud of what we have accomplished and how we have navigated through the difficult waters that the pandemic has presented. From virtual meetings to countless emails, we have been able to continue supporting our community despite the barriers that COVID has given us. I am optimistic that we have better days on the horizon and excited about what the future brings for the health of the people of Pulaski County.

Despite the pandemic, we were able to accomplish quite a lot in 2022. This past year we were able to fully fund two of the medical student projects that were submitted. These include funding the Lifestyle Medicine Committee at the 12th Street Health and Wellness Center as well as the 12th Street Pop-Up Clinic. We also sponsored a clinic at Harmony Health Services in the spring of this past year. These projects have continued to bring access to healthcare to the underserved patients of our community. With your support, I hope to continue, and possibly even expand, some of these programs. We have also continued to grow and support our relationship with the medical students at UAMS. From scholarships and financial awards for outstanding students to sponsorship of the School of Medicine House Olympics, we continue to build on our relationship with the future physicians of Pulaski County. We have expanded our social media outreach on Facebook in hopes to attract more support for PCMS going forward. We also hosted a Zoom meeting, in partnership with Aptus Financial, to educate physicians who may qualify for student loan forgiveness. As the pandemic slowly draws down, I am excited about what we can accomplish in 2023.

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Together, we go further.

The practice of medicine is full of unforeseen challenges, and an experienced, proactive partner will help navigate them. As a premier provider of medical malpractice insurance, our in-house attorneys and unique array of tailored services are always at the ready to help you be prepared for what lies ahead.



After Almost 50 Years the Medical Exchange and Society Have Moved

Shortly after 11:00 pm December 15, 2022, suite 311 of the Doctor's Building was empty of people for the first time since 1973. Although we cannot pinpoint the exact date both the Pulaski County Medical Society (PCMS) and Pulaski County Medical Exchange (PCME) moved into this location, we do know the year. The Doctors Building was originally built in 1963. In 1973 they added a new wing onto its original building that doubled its size and added the 8th floor to the full building. If you are ever in the Doctors Building, that is why you can only access the 8th floor from the elevators in the newer West Wing. The building manager confirmed that both organizations were one of the first tenants to move into the new western building. With the Exchange operators moving to a work-from-home model, the large space we had was no longer needed. The business offices are still in the same building, just a few floors below where we were.

The Medical Exchange began as a partnership In March of 1956 to offer an around-the-clock emergency service that was available regardless of the patient's ability to pay but soon became a 24-hour Doctor locator service on its own beginning on March 1, 1963. The Pulaski County Medical Society voted in October of 1962 to operate its own emergency exchange. The original Pulaski County Medical Exchange (PCME) had three outside lines for the public and two unlisted numbers were reserved for the physicians. The unlisted numbers were to have a minimum waiting time for the doctors contacting the operators. The telephone company provided specialized training for the operators at no expense to the Society. The original phone number for the Exchange was FR6-1987.

By September of 1963 the Exchange had grown to 121 exchange users. One of the first major upgrades for the PCME was to lease the newly-developed "Rapideal". Two hundred names, including office and home phone numbers of members of the Exchange as well as hospitals, were recorded on a magnetic tape and the name corresponding to this number was written on a revolving cylinder. A motorized unit turned to the name of the physician being called and the operator pressed a bar which automatically called the number. By November 1965 it was necessary to go to two operators at certain times. Since that time the Exchange has computerized its operations to be more efficient.

The Exchange began with less than 100 doctors, and has grown to over 700. Not only does the Exchange provide the only locator service exclusive to physicians in the area, but also supports its physicians by keeping a record of calls for a time when they may be needed. It has been more than once that a doctor has needed our help recalling information from a specific call. The Exchange was built for doctors by doctors and will be here to serve the members of the Pulaski County Medical Society when called upon.

Now that the Medical Exchange is no longer in the Doctors Building, and moved to a new model for providing services, there are bound to be hiccups and we are sorry for that. We promise you that we will do our best correct them as quickly as we can when they arise.

If you have a question about the services provided by the Medical Exchange you can contact Derek Rudkin at 501-687-0039 or derek@pulaskicms.org.

New Mailing Address

Beginning January 1, 2023 both the Pulaski County Medical Society and Medical Exchange will have a new physical and mailing address. Please make a note of the address below for your records going forward.

500 S. University Avenue, Suite A-14 • Little Rock, AR 72205

President's Address

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I am pleased to report that this past year we were able to return to an in-person annual meeting. We had the pleasure of having Representative Dr. Stephen Magie as our guest speaker to inform us of changes to healthcare in 2023. I thank all those who attended (guests and sponsors) and look forward to seeing new faces at this year's annual meeting.

As an emergency medicine physician, I know, we as healthcare providers, have endured the extreme challenges that the COVID pandemic has presented us.

I would like to personally thank all those that persevered though these challenges and continued to provide excellent care for the patients of Pulaski County. As we eventually emerge from the pandemic, I hope to see a brighter future for the health and wellness of our community. With your continued support, I am sure we can accomplish so much more. Thank you, and I look forward to serving as your President in 2023.

Nicholas Brucker M.D.

Showing Commitment to Patient Safety Through Improved E-Prescription Accuracy, Baptist Health Receives Surescripts White Coat Award

Baptist Health has received the 2022 Surescripts White Coat Award™ for Structured & Codified Sig Champion, the healthcare industry's premier recognition for leaders in e-prescription accuracy. The health care system is among the 11 winners from across the Surescripts Network Alliance® who met the highest standards for prescription accuracy and patient safety.

This important standardization helps reduce the opportunity for errors while prescribing and dispensing medications to patients.

The 2022 Surescripts White Coat Award recognized winners in three categories:

- The Highest Accuracy award recognizes the best overall accuracy score.
- The Structured & Codified Sig Champion award recognizes organizations making the best use of the Structured & Codified Sig field.
- The RxChange Champion award highlights organizations successfully advancing the RxChange transaction.

"We are incredibly proud of this year's White Coat Award winners, who are among the highest achieving to date," said Frank Harvey, CEO of Surescripts. "It is a tremendous

point of pride that they are among our Surescripts Network Alliance, optimizing the performance of the Surescripts network and leading the transformation of healthcare across the country."

White Coat Award winners are evaluated based on data provided by Surescripts Sentinel®, an automated system that monitors electronic prescriptions and delivers insights to pharmacies, health systems and technology vendors.

In 2021, the Surescripts Network Alliance saw a 10% increase in the aggregated Quality Index Score for electronic prescriptions across the network—a 200% improvement since 2016. Visit [Surescripts.com](https://www.surescripts.com) to learn more about the Surescripts White Coat Award.



E-Alert:

NLRB Expands Remedies for Unfair Labor Practices

This article was submitted by Cross, Gunther, Witherspoon and Galchus.

On December 13, 2022, The National Labor Relations Board (NLRB or the Board) issued a 3-2 decision in *Thryv, Inc.* that expands its "make-whole" remedy. The NLRB's decision expressly clarifies that employees subject to an unfair labor practice (ULP) committed by their employer can now be compensated for all "direct or foreseeable pecuniary harms" suffered as a result of the ULP. This expanded remedy goes beyond traditional back pay and reinstatement that is generally available.

Unsurprisingly, the Board majority did not provide a thorough list of what "pecuniary harms" could be sought. Instead, the Board simply said employees may now be compensated for significant financial costs incurred as a result of an ULP such as out-of-pocket medical expenses, credit card debt, or other costs incurred to make ends meet. The General Counsel will have the burden to present evidence in order to establish the amount of pecuniary harm caused by showing such harm was a



Cross, Gunter,
Witherspoon &
Galchus, P.C.

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Arkansas Health Network Saves \$8.1-Million in Medicare Payments for Latest Performance Year While Improving Quality and Outcomes for Patients

The [Arkansas Health Network](#) (AHN), a physician-led, Clinically Integrated Network (CIN) serving Arkansas patients, providers and employers through a value-based approach to healthcare, saved Medicare \$8.1-million in its latest performance year. These earned shared savings mark five-years of record-breaking success for AHN. AHN earns shared savings through proactive engagement with vulnerable patients and a suite of innovative programs to address unmet medical, behavioral and social needs. This holistic approach drives positive outcomes for patients, employees and their dependents while generating cost savings for Medicare as well as private employers.

"AHN's consistent, successful performance engaging with both government and commercial health plans is rare and proves that real change is possible in healthcare by focusing on value vs. benefits, quality vs. quantity and especially patient experience," said AHN President [Bob Sarkar](#). "The year-over-year savings we've earned while improving results for our Medicare patients are the same kinds of results we're delivering through our growing work with private employers."

In the latest performance year (2021), AHN managed care for approximately 28,127 attributed Medicare



beneficiaries. As the largest and most successful CIN in the state of Arkansas, AHN manages more than 139,000 patients across the state and partners with a growing network of nearly 3,600 providers, 25 Skilled Nursing Facilities and 18 hospitals.

With the rising cost of healthcare growing as a concern for employers across Arkansas, AHN, a wholly owned subsidiary of CHI St. Vincent, has partnered with [Arkansas Children's Care Network](#) and NextHealth to provide a unique health care delivery model designed specifically for employers. The model leverages technology and data analytics to pre-emptively identify high-risk and rising risk patients. These patients are then connected with a care team of registered nurse health coaches, social workers, pharmacists and others to proactively manage their care with an emphasis on preventive, rather than reactive services. The patients' own physicians are also engaged in this endeavor.

E-Alert: NLRB Expands Remedies for Unfair Labor Practices

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direct result of the ULP committed or was foreseeable at the time of the ULP was committed.

The case itself involved a software company that was alleged to have violated Sections 8(a)(1) and 8(a)(5) of the National Labor Relations Act (NLRA) by failing to bargain over layoffs with the local union representing its employees. Finding that the company violated the NLRA, the Board took it upon itself to examine and expand its statutory powers when it comes to "make-whole" remedies.

NLRB Chairman Lauren McFerran was quoted in the press release accompanying the decision as saying

"The Board clearly has the authority to comprehensively address the effects of unfair labor practices. By standardizing the Board's make-whole relief to fully include the direct or foreseeable financial harms suffered by affected employees we will better serve the important goals of the National Labor Relations Act." This expanded remedy will apply to all cases that include a make whole remedy and will also be applied retroactively to cases currently pending.

This decision is troubling for employers as the NLRB continues to push boundaries of its statutory authority. If you have questions concerning this new law, please feel free to contact one of our labor and employment attorneys by calling (501) 371-9999.

Rhonda M. Dick, M.D., and Joseph Kennedy “Ken” Dick, MBA, to Establish Endowed Scholarship in UAMS College of Medicine

The University of Arkansas for Medical Sciences (UAMS) has received a \$2 million commitment from Rhonda M. Dick, M.D., and Joseph Kennedy “Ken” Dick, MBA, to establish the Dr. Rhonda and Ken Dick Endowed Scholarship in the UAMS College of Medicine. This pledge is made through their revocable trust.

“We are profoundly grateful to Dr. Rhonda and Ken Dick for their generosity and dedication to young Arkansans, especially those from rural areas, who aspire to become physicians and continue their legacy of service in our state,” said Susan S. Smyth, M.D., Ph.D., UAMS executive vice chancellor and College of Medicine dean. “Scholarships are a powerful tool for recruiting promising students to UAMS and to careers in rural medicine, and this endowment will have a tremendous impact for generations to come.”

The scholarship will be awarded to a student enrolled in the College of Medicine who is a resident of Arkansas, with preference given to a student from or living in a rural area who demonstrates a financial need.

The Dicks created the scholarship in part to honor the memory of Dr. Herd Stone, in appreciation of his mentorship and compassionate care of the people of Monroe County, Arkansas.

The inspiration for the scholarship’s creation came from Rhonda Dick’s initial experience working in health care. She grew up in Holly Grove, Arkansas, and at age 17, began working in Stone’s medical clinic, curious if it would inspire her to pursue a career in nursing.

“After working for Dr. Stone for about six months, he called me into his office to discuss my career plans. He encouraged me to go to medical school. It was something I had never considered,” she said. “I had not been exposed to many potential career opportunities in our small, isolated rural community and there weren’t many women practicing medicine at that time. So it had never occurred to me as a possibility.”

Stone would continue his mentorship of Dick while she attended Hendrix College and later UAMS, graduating as part of the College of Medicine Class of 1981.



“Dr. Stone taught me some valuable lessons that I carried with me through medical school later in my medical practice,” Dick said. “He often took me on house calls in the evenings to some of the most rural parts of Monroe County to provide medical care to disadvantaged people who were unable to make the trip to his clinic. Although I didn’t realize this until many years later, he did this for a reason. He wanted me to understand the challenges that many of my future patients might be facing. Those lessons served me well throughout my career.”

Inspired by Stone’s work as a general practitioner, the couple hope that the scholarship will allow a student to consider a profession in primary care.

“Considering the expense of medical school, it is understandable that many doctors feel that they need to become specialists in a field of medicine,” said Rhonda Dick. “We wouldn’t mind that this scholarship would allow a student to pursue a career in primary care, and we would love it if it was in a rural community in Arkansas.”

The scholarship also honors the memory of Ferrill and Betty Martin, the parents of Rhonda Dick, and George Theodore Jr. and Charlotte Kennedy Dick, the parents of Ken Dick.

“Rhonda and I have been blessed with great lives and much of that is because of our respective parents,” said Ken Dick. “Growing up, we both received great support and love from our families, and it set us up to both have fulfilling careers.”

Rhonda Dick retired as the medical director of Pediatric Emergency Medicine at Arkansas Children’s in Little Rock in 2019. Ken Dick retired as an assistant director of fiscal services for the Arkansas Bureau of Legislative Research in 2006.

UAMS Study Finds One in Four Adults Have Experienced Loss Due to COVID-19

FAYETTEVILLE — One in four U.S. adults has experienced the death of a family member or close friend due to COVID-19, according to a study led by researchers at the University of Arkansas for Medical Sciences (UAMS) Office of Community Health & Research.

The study, [COVID-19 Death Exposure Among Adults in the United States](#), analyzed the responses of participants who self-reported the death of a loved one due to COVID-19. Other studies show that those who experienced loss due to COVID-19 have also suffered prolonged or complicated grief, and that those grieving the loss of a close relative or friend experience increased chances of physical health issues and higher rates of disability, medication use, hospitalization and depressive symptoms.

"People who have suffered loss during the pandemic may still be suffering," said Don E. Willis, Ph.D., an assistant professor in the Office of Community Health & Research. "The impact of the pandemic does not end at the point of death, but ripples out across social networks. Even if the last COVID-19 death were to occur tomorrow, the staggering loss of life from the pandemic will likely be impacting the lives and health of the bereaved for many years to come."

UAMS researchers also found that minority populations — particularly Black individuals — experienced greater risk of death due to COVID-19, as did people 60 or older, married couples or people who had forgone treatment due to health care costs.

"This study showed that there have been major racial disparities in exposure to the loss of close friends or family due to COVID-19," Willis said. "This is critical for understanding how the pandemic may shape health disparities moving forward because unequal death exposure is a contributor to racial health disparities."

There have been more than 1 million deaths related to COVID-19 in the United States, according to the World Health Organization (WHO). Nearly 12,700 Arkansans have died from the virus, according to the Arkansas Department of Health, which also reported that 72% of Arkansans who died of COVID-19 since February 2021 were not fully vaccinated against the coronavirus.

The U.S. Food & Drug Administration (FDA) approved bivalent booster shots for both Pfizer and Moderna, which target new Omicron variants of the coronavirus. The Pfizer booster is authorized for ages 5 and up, and the Moderna booster is authorized for ages 6 and up.

UAMS, Arkansas Children's Launch Program To Improve Mental Health Care for Children in Arkansas

Program Will Train Primary Care Providers to Screen, Diagnose, Treat and Refer Children with Behavioral Health Issues

In November, The University of Arkansas for Medical Sciences (UAMS) has been awarded more than \$2 million in federal grant money to equip and support primary care providers across the state to screen, diagnose, treat and refer children with behavioral health conditions.

With the grant money, the UAMS College of Medicine Department of Pediatrics, under an agreement with Arkansas Children's, is developing a program called Children of Arkansas Mental Health in Primary Care (CHAMP).

The program's primary goal is to promote the integration of behavioral health in pediatric primary care in Arkansas by linking primary care physicians around the state with a pediatric mental health care team for initial and ongoing education, consultation and referral of patients who are under 18 and have behavioral health needs.

The pediatric mental health care team will consist of a child and adolescent psychiatrist, a pediatric psychologist and a care manager. The team will work with a curriculum specialist and a diverse, interdisciplinary educational team to develop the curriculum and conduct sessions using a network-based learning and guided practice model for medical education.

"Pediatric mental and behavioral health is a pandemic in this country. With this large, four-year grant, UAMS and Arkansas Children's can start to develop the best approaches to enable primary care providers to detect issues earlier and treat and refer more efficiently in order to make a real and lasting impact for society," said William J. Steinbach, M.D., chair of the Department

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UAMS, Arkansas Children's Launch Program To Improve Mental Health Care for Children in Arkansas

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of Pediatrics and associate dean for child health in the UAMS College of Medicine and pediatrician-in-chief at Arkansas Children's.

Arkansas Children's will serve as the program manager in collaboration with the UAMS College of Medicine Department of Psychiatry and the Arkansas Department of Health.

The Health Resources and Services Administration of the U.S. Department of Health and Human Services recently awarded the grant funds as part of its ongoing effort to help providers improve access to pediatric mental health services for people who are uninsured, isolated or medically vulnerable.

"This program will allow us to set up much-needed support for primary care providers around the state who are the first point of contact for many of these children," said Chris E. Smith, M.D., professor and vice chair for primary care in the UAMS College of Medicine Department of Pediatrics and medical director of primary care services at Arkansas Children's. He will serve as principal investigator for this grant.

The initial group of providers targeted through CHAMP will be those in practices that are a part of the Arkansas Children's Care Network (ACCN), which has 30 pediatric

practices and 160 general pediatricians in its network and plans to add an additional 100 family practice providers around the state.

The grant provides \$445,000 each year for four years, with an additional \$300,000 in additional expansion funds provided the first year, for a total of \$2,080,000 over four years, in addition to any non-federal matching funds.

The CHAMP project will focus in its first year on building a foundation, including assembling and hiring staff, conducting a needs survey of providers in the network, conducting patient focus groups, designing curriculum for sessions and establishing a telehealth process.

The second year will focus on analysis of the program's first year's results and expansion to additional practices; the third year, consolidation and expansion; and the fourth year, sustainability, including expansion of the program to additional community providers.

A CHAMP advisory committee will include the Arkansas Children's Care Network; the UAMS Department of Psychiatry; the Arkansas Department of Health; the Arkansas Department of Human Services; the director of Diversity, Equality and Inclusion at Arkansas Children's; the UAMS Department of Pediatrics' developmental and behavior pediatrics division; Blue Cross & Blue Shield of Arkansas; the Arkansas chapters of the American Academy of Pediatrics and the American Academy of Family Physicians; the Arkansas Behavioral Health Integration Network; the UAMS Fay W. Boozman College of Public Health; Arkansas Children's Community Engagement; and the Arkansas Rural Health Partnership.

When Doctors Know Each Other, Patients Benefit, Study Suggests

Sometimes, it's who you know that makes a difference. A new [study](#) in JAMA Internal Medicine found that when primary care physicians' patients were referred to specialists with whom they trained in medical school or later programs, patient reviews of the specialist were higher than when there was no such bond - even if the PCP didn't make the referral. In evaluations at one large health system, patients said these specialists treated them with more concern, gave clearer explanations, engaged them in more shared decision-making, and spent more time with them compared to patients who saw specialists without ties to their PCPs.

The researchers suspect specialists knew PCPs would read their clinical notes or hear from their patients. As opposed to incentives that involve money, "this study suggests potentially large gains in quality from encouraging and harnessing physician-peer relationships," the authors write.

