



# North Carolina Obstetrical & Gynecological Society

Newsletter, November 2014

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## Kiawah, Here We Come! 2015 NCOGS Annual Meeting Venue Change

While it's too soon to preview the scientific program, you *can* start planning for our 2015 NCOGS Annual Meeting. The meeting will be held **April 17-19, 2015, at the Kiawah Island Golf Resort**, in Kiawah Island, SC. This venue change is good news, according to NCOGS Associate Director Nancy Lowe, CMP. Nancy reports, "Kiawah Island is a luxurious resort. Conference attendees and their families will enjoy the many amenities available on the resort grounds." The NCOGS room block includes spacious **one-, two- and three-bedroom villas**. For room reservations, call 800-654-2924.



## Before You Vote, See List of Endorsed Judicial Candidates

The outcome of judicial contests is particularly relevant to physicians because the court system may be called on to determine the legality of the **medical liability reforms enacted in 2011**. To help our N.C. physician community recognize which candidates understand the NCMS stance on this and other issues that matter to doctors, the NCMS Political Action Committee – NCMS PAC – has endorsed [seven candidates for the N.C. Supreme Court and N.C. Court of Appeals](#) in this year's elections. Before you vote, all physician families are encouraged to review the list of judicial candidates endorsed by the NCMS PAC. **Share this [sample ballot](#) with your family.**



This publication is a service of the N.C. Obstetrical & Gynecological Society

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## Meet Our New NCOGS Lobbyist, Rob Lamme



The NCOGS has contracted with Rob Lamme (pronounced LA-may) for government relations and political affairs support. Rob is an accomplished government relations, policy and communications consultant, having previously served as Government Relations Director for the N.C. Department of Health and Human Services (DHHS). His work with the North Carolina Dermatology Association (NCDA), also a client of his, has helped to advance the NCDA-backed "[Youth Skin Cancer Prevention Act](#)," legislation that would protect children and teens from the health risks of indoor tanning. Through direct lobbying, political consulting and DermPAC fundraising, the NCDA advocacy program has benefited greatly from Rob's work. We're looking forward to Rob's support on the key issues of health care access, Medicaid reform, and patient safety as we prepare for the upcoming 2015 legislative session. In addition to policy consulting and lobbying, Rob will also provide assistance with our GOPAC fundraising efforts.

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## CFTF: Maternal Mortality Legislation Sought in Upcoming Legislative Session

The Child Fatality Task Force (CFTF) met Oct. 20 in Raleigh to review and discuss committee reports and to refine its legislative priorities for the coming year. Dr. Margaret Harper, of the Wake Forest School of Medicine, presented an update on the Perinatal Health Committee's *Every Mother Initiative*. A goal of the CFTF in 2015 is passage of legislation by the N.C. General Assembly. Legislation is needed to give the Committee access to the medical and hospital records of women who die during pregnancy or within one year of the end of pregnancy from pregnancy-related causes and to protect Committee proceedings from legal discovery. Belinda Pettiford, MPH, Branch Head, Women's Health Branch at DHHS, updated the NCOGS Executive Committee on the status of this project at its Oct. 24 meeting in Greensboro.

The NCOGS and the American Congress of Obstetricians and Gynecologists (ACOG) are committed to reducing maternal mortality. In N.C., the process of reviewing cases of maternal deaths is made difficult because it is not mandatory for hospitals to release all medical records that involve a maternal death. The effectiveness of the review committee will be dramatically improved by protecting those individuals involved from being subpoenaed and their reports from being admissible in court. The NCOGS will work to promote legislation that provides this protection.

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## Public Comment Invited on Telemedicine Position Statements

The N.C. Medical Board invites public comment on the discussion drafts of its *Telemedicine* and *Contact With Patients Before Prescribing* Position Statements approved at its September board meeting. The deadline for submitting public comments and/or redline edits is **Wednesday, Nov. 5**. Submit your comments and edits to [telemedicine@ncmedboard.org](mailto:telemedicine@ncmedboard.org) and kindly cc the NCOGS by email to [ncobgyn@ncmedsoc.org](mailto:ncobgyn@ncmedsoc.org). The discussion drafts can be reviewed here:

- Contact with patients before prescribing: [PDF](#) or [Word](#)
- Telemedicine: [PDF](#) or [Word](#)

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## Keep Calm and Review These Ebola Resources

As public concern over Ebola rises, physicians are fielding many questions from patients and doing their best to calm patients' fears. Many resources are now available to help you understand the virus and provide you with continuously-updated professional guidelines. The American Congress of Obstetricians and Gynecologists' (ACOG) [Ebola and Women's Health](#) webpage links to a joint ACOG/Centers for Disease Control practice advisory, an advance print of the November 2014 Green Journal article "[What Obstetrician-Gynecologists Should Know About Ebola](#)" and other up-to-date resources.



**KEEP  
CALM  
AND CARRY ON  
CARING**

### Quick Links:

- [NC DHHS Ebola Information](#)
- [CDC Ebola \(Ebola Virus Disease\)](#)
- [Joint ACOG/CDC Considerations for Ob-Gyns and Their Patients](#)
- [Breastfeeding/Infant Feeding Recommendations in the Context of Ebola](#)

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### Medicaid Fee Cut Coverage

## Survey: What's the Impact of a 4 Percent Medicaid Cut?

(Reprinted with permission from the North Carolina Medical Society)

The North Carolina Medical Society (NCMS) continues to work to oppose Medicaid rate cuts enacted by the General Assembly during the 2014 short session that will take effect in the near future. Please [take this brief survey](#) to let us know how your practice will respond to the impending cuts, your responses will help our continued advocacy efforts on this important issue.

The General Assembly recently enacted a 3 percent rate reduction in Medicaid for physician services, which the NCMS expects to be implemented in December. Primary care physicians who qualified for the increased payment rates under the ACA are exempt from this reduction until Jan. 1, 2015, when the increased ACA rates expire. Additionally, the General Assembly's 2014 budget calls for another 1 percent reduction to payment rates for Medicaid providers. This brings the total coming rate reductions for physician services to approximately 4 percent in 2015 and beyond.

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## Consulting Opportunities Available with N.C.-based Physician Re-entry Program

The [Center for Personalized Education for Physicians](#) (CPEP) is recruiting N.C. physicians from various specialties to serve as occasional consultants and associate medical directors (AMDs). CPEP is a non-profit group that assists physicians in the process of reentering clinical practice after a prolonged absence as well as providing general competence assessment and remedial education services.

Consulting physicians conduct structured clinical interviews with participants in order to gain insight into their experience, thought processes and clinical judgment. AMDs oversee the interview process and are responsible for the final assessment reports. These positions do come with stipends, but consultants and AMDs are more frequently motivated by a desire to give back to both their profession and their community. We invite you to learn more about the available [consultant](#) and [AMD](#) opportunities.

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## 17P Remains the Best Option for Some Patients Despite Threat of FDA Enforcement

The NCOGS advises that it is still reasonable for a physician to prescribe either Makena or the compounded 17-alpha-hydroxyprogesterone caproate for specific individual patients. The decision to use the Makena brand or the compounded version may be impacted by a patient's history of an allergy and financial circumstances. Lumara Health, the makers of Makena, states that [financial assistance](#) will be available for most patients. The most important issue is that all patients who qualify for progesterone supplementation be given the opportunity to benefit from the risk reduction in preterm birth it provides.

The U.S. Food and Drug Administration (FDA) intends to enforce the Federal Food, Drug, and Cosmetic Act to regulate compounding pharmacies, which may cause some pharmacies to limit or stop offering [17-alpha-hydroxyprogesterone caproate \(17P\)](#), the active ingredient in Makena. On its website, the FDA warns, "When FDA identifies a pharmacist that compounds regularly or in inordinate amounts any drug products that are essentially copies of Makena as defined under section 503A, it intends to take action as it deems appropriate."

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## 2014 NCOGS Annual Meeting - Dr. Hal Lawrence Honored with the 2014 Distinguished Service Award



**Dr. Hal C. Lawrence, III**, was honored with the NCOGS 2014 Distinguished Service Award at the 2014 NCOGS Annual Meeting, held at the Pinehurst Resort and Spa, April 11-13, 2014. Dr. Lawrence is a fixture at NCOGS functions and is well-known among his N.C. colleagues. Before taking the reins as ACOG's Executive Vice President and CEO, he had a long and distinguished career in Asheville, N.C. The 2014 Presidential Speaker **Alfred Abuhamad, MD, FACOG** addressed *Patient Safety and Quality*. Dr. Abuhamad is a Maternal-Fetal specialist at Eastern Virginia Medical School where he serves as the Chair of the Department of Ob/Gyn and also Associate Dean for Clinical Affairs. **Robin G. Cummings, MD**, Medical Director at the N.C. Division of Medical Assistance, discussed the status of the N.C. Medicaid Program. The agenda also included the annual NCOGS business meeting and a Legislative Update.

The meeting attendance included 61 physicians, 20 residents, fellows and medical students, and 55 exhibitors. Six resident papers were presented. Up to **12 AMA PRA Category 1 Credits™** were available to attendees for their participation in this live activity.

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## Are You Still Experiencing NCTracks Problems?

The NCMS continues to log physicians' challenges with NCTracks and we encourage you to share your experiences if you have unresolved difficulties or if new issues have come up. Submit your comments to [Belinda McKoy](#) and kindly cc us at [ncobgyn@ncmedsoc.org](mailto:ncobgyn@ncmedsoc.org).

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## The Pregnancy Medical Home: A Shining Star in an Uncertain World

The Pregnancy Medical Home (PMH) program is forging ahead with plans to expand in the remaining months of 2014 and into 2015 despite an uncertain future, which hinges on the outcome of Medicaid reform discussions taking place currently in Raleigh. Despite recent challenges with NCTracks, claims and outcomes data is beginning to provide some excellent metrics that providers can use to improve the perinatal care of North Carolina’s pregnant Medicaid recipients. Approximately 85 percent of providers are now enrolled in PMH and [OB Nurse Coordinators](#) (PDF) have been identified throughout the state. With the generous support of the Duke Endowment, **PMH will launch 3 new projects in the coming months.** First, a new preterm birth prevention program will help sonographers in rural communities achieve their CLEAR certification. Also, PMH will develop and distribute a series of 8 preterm birth prevention webinars and other resources. Finally, PMH will identify and begin offering telemedicine sites as a new resource for program participants. PMH is a collaborative program of the N.C. Division of Medical Assistance, the N.C. Division of Public Health and Community Care of North Carolina. PMH provides comprehensive, coordinated maternity care to pregnant Medicaid patients.

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## GOPAC Supports the Push Toward Provider-led Accountable Care

We’re saying “NO” to corporate managed care and fighting for adoption of the provider-led Accountable Care model as the solution to the state’s troubled Medicaid program. You’ve seen first-hand the benefit of Community Care of North Carolina’s Pregnancy Medical Home. You can help bring the value of accountable care to even more patients in our state by supporting GOPAC – the political action and education committee of NCOGS. Each year, GOPAC works to identify state legislators and candidates who understand the NCOGS position on issues that impact women’s health. We’re committed to delivering great outcomes for women and babies. [Become a GOPAC Hero](#) by contributing today.

### 2014 GOPAC Heroes

Timothy F. Edwards, MD  
Robert V. Higgins, MD  
Rob Lamme

### 2014 GOPAC Champions

Scott T. Chatham, MD  
C. Richard Kirsch, MD  
Keith H. Nelson, MD

### 2014 GOPAC Friends

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GOPAC Donor Recognition Levels	
<b>GOPAC Hero</b>	<b>\$1,000+</b>
<b>GOPAC Champion</b>	<b>\$500+</b>
GOPAC Friend	\$365+
GOPAC Donor	\$1+

Want to be on the GOPAC Advisory Committee? Email [dsuko@ncmedsoc.org](mailto:dsuko@ncmedsoc.org).

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## N.C. Ob/Gyn Physicians Urge Congress to Repeal the SGR, Protect Physicians from Medical Liability, Prevent Gestational Diabetes

Five ob/gyn physicians from North Carolina participated in the ACOG's 32<sup>nd</sup> [Annual Congressional Leadership Conference](#) (CLC) in Washington, D.C., March 2-4, 2014. The annual advocacy event included a legislative briefing, advocacy training, and a full day of lobbying at the U.S. Congress on issues that impact the specialty and ob/gyn patients. Participants spoke with their elected representatives in the U.S. House and Senate about the need to modernize the Medicare physician payment formula and repeal the Sustainable Growth Rate (SGR). Participants also voiced their support for medical liability reform initiatives and a bill to prevent gestational diabetes.

The N.C. delegation included:

- Octavia Cannon, DO (*Charlotte*)
- Gerald Comer, MD (*Charlotte*)
- Lydia Jeffries, MD (*Asheville*)
- Robin Matthews, MD (*Clyde*)
- Kate Menard, MD (*Chapel Hill*)
- Alan Skipper (*NCOGS Exec. Dir.*)

The next ACOG CLC will take place  
**March 8-10, 2015.**

Download the [2015 ACOG CLC flier](#).



Left: Gerald, Lydia, Kate, Octavia and Robin at the 2014 ACOG CLC.

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## ACOG District IV Update

The NCOGS was represented by Dr. Haywood L. Brown and Dr. John Allbert at the recent ACOG District I, III, and IV Annual Meeting, Oct. 10-12, 2014, in Baltimore, Md. Dr. Brown also serves as ACOG District IV Chair and Chair of the Well Women's Task Force. There were 306 attendees at the meeting.

- Dr. Brown reported that ACOG and the American College of Nurse Midwives reaffirmed recognition and acceptance of the International Standard as common worldwide education for licensure and practice standards for midwifery. By 2020 all midwives must meet the national requirements for training and graduate from an accredited program. ACOG supports the development of legislation and regulations that utilize the International Certified Midwifery Education Standards as the baseline for midwifery education training.
- Dr. Sandra Reed, District Treasurer, reported that District IV funded 18 attendees to the ACOG's 2014 Congressional Leadership Conference, 4 attendees to the Cefalo Leadership Institute, and 39 Gibbons medical students to the 2014 Annual District Meeting in Baltimore.
- The Junior Fellows hosted a medical student skills lab on Saturday, Oct. 11. They were taught skills such as knot tying, laparoscopy, suturing, IUD insertion, and operative delivery. Medical students were provided information on residency applications and interviews. Timberly Butler (Gibbon award recipient) wrote in her essay that her most memorable event from attending the District IV meeting in Baltimore was the medical student simulation fair. Ms. Butler stated, "the opportunity to be involved in a vaginal delivery, D&C simulation, Implanon, and IUD insertion, suturing, knot tying, and honing her laparoscopic skills in one setting was so much fun. The opportunity to attend the District I, III, and IV Annual Meeting in Baltimore is an experience that I will never forget."
- Dr. Lydia Jeffries, Legislative Chair for District IV, stated the immediate goal is to continue to provide communication regarding section legislative and professional liability issues as well as facilitating sections in their communication with ACOG National on those issues in our district. The priority legislative issues include: Medicaid expansion/reforms, substance abuse issues, midwifery, reproductive health (contraception, family planning and abortion-related restrictions), adolescent access to health care, breast density, and shackling of pregnant women.
- Members of the Committee on Patient Safety-Quality Improvements from District I, III and IV will develop an education project that will address preeclampsia, postpartum hemorrhage, and deep vein thrombosis. Use of simulation and drills could be incorporated in the project.
- Dr. Hal Lawrence reported that new ACOG office is complete. Additionally, the ACOG.org website now has the latest guidelines regarding Ebola from ACOG and CDC.
- Dr. John Allbert reported that recently-passed legislation in Georgia would be very helpful to the N.C. Maternal Mortality Committee. The legislation requires all records related to a maternal death be submitted to the N.C. Maternal Mortality Committee, and it would provide protection from legal discovery.

**Your NCOGS Executive Committee, 2014-2015**



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