Report of the Medical Care Commission Meeting
Held on Saturday, April 28, 2007 @ 9:30 a.m.

I. CALL TO ORDER AND ROLL CALL

The meeting of the Medical Care Commission was called to order at 9:30 a.m., on February 12, 2007, in the Town Council Chambers. Members of the Commission present were: Chair Michael Dennis, Vice Chair Robert Friedman, Commission Member Richard Furlaud, Commission Member Norman Goldblum, Commission Member Michael Stein, and Commission Member Norman Traverse.

II. PLEDGE OF ALLEGIANCE

The Pledge of Allegiance was led by Chair Dennis.

III. APPROVAL OF AGENDA

The Agenda was approved as printed.

IV. PRESENTATION BY RICK CAMERON OF THE PALM BEACH COUNTY MEDICAL SOCIETY PHYSICIANS' SURVEY RESULTS

Richard Cameron distributed the 2007 Palm Beach County Medical Society Physician Census Study, dated February 26, 2007, along with an additional Comparison Analysis document. He explained that he would present the results of the survey, request comments from the Medical Care Commission (MCC), and then receive comments from members of the Palm Beach County Medical Society, and the Emergency Department Management Group (EDMG). *[A copy of the Survey and Comparison Analysis is available for review in the Office of the Town Clerk or on*

the website of the Palm Beach County Medical Society].

Mr. Cameron summarized that one of the things that became evident from the study was the dilemma that had existed in Palm Beach County for a number of years. The environment for physicians in the community was not as positive as it could be, with a number of factors driving that - the risk of liability, high malpractice and high overall costs, low reimbursements, increasing number of uninsured and under insured patients. He noted that a delegation from the Palm Beach County Medical Society had spent time in Tallahassee, and the survey report had been distributed to representatives and senators. There were several bills that were filed through the Florida Emergency Physicians Group, however, they would not pass in this legislative session, but would provide the basis for at least some liability reform and also some physician education reform. He suggested that a major objective for next year would be to bring about a better set of bills, with more public support.

In response to Chair Dennis in regard to the level of physician organization, Mr. Cameron advised that a statewide data base should be developed to help point and galvanize action on a broader front. He noted that the EDMG and the Medical Society Board had set forth action steps which would include direct intervention with the legislative and business leaders in the community to develop a ground swell of support at the local level and use that to develop corollary efforts in other parts of the state. He stated that he would like to see a much stronger organized effort in time for the next legislative session

Commission Member Friedman commented regarding the VIP medical care situation, and how it would affect most people.

In response to Chair Dennis, regarding medicare reimbursement inequities based on region, Mr. Cameron replied that Medicare was designed to adjust for the cost of living; for example, rural areas were on a different payment rate than urban areas. He noted that the markets selected for the comparison study were markets that had common traits. He publicly thanked the Economic Development Research Institute for helping gather specific data for the report.

Mr. Cameron pointed out that the study had noted that the number of doctors being trained in Florida was very low relative to the country overall. That factor was another cause of the supply issue. There were efforts afoot to improve that, but the state would need to increase the total number of slots in order to encourage doctors to stay.

In response to Chair Dennis regarding getting the message out to the public, Mr. Cameron replied that the EDMG had agreed to a plan in which the EDMG members themselves would make themselves available to broadcast and spread out across the community to get the word out. Many members of the Medical Society would also participate in a broad community awareness program. In addition, that program would include targeting business leaders as well as political leaders and would include groups such as the MCC, who were obviously concerned about the quality of care and the access to care.

Commission Member Goldblum suggested that a petition campaign and an e-mail campaign may work in today's marketplace.

Mr. Cameron replied that would be put into place.

Commission Member Stein commented that it had always puzzled him that more had not been heard from an outraged public. He suggested that the assistance of some professional marketing people be used to devise a plan to get the word out, and organize some action. He also suggested that other governmental bodies like the MCC could be formed and organized.

Mr. Cameron replied that he agreed, however, there was a cost to doing the marketing, petition, etc. The database being used was an asset and a resource and would need maintenance and support on an ongoing basis, in order to be available as a tool for information to help point out the issues that needed to be addressed.

Commission Member Stein commented that the Town Council had approved a budget to fund the work of the MCC, and other governmental agencies should use that as a model.

Mr. Cameron asked Dr. Burns, a member of the board of the Medical Society, to provide his comments.

Dr. Jim Burns, a family doctor in Delray Beach, commented regarding his concerns with liability, malpractice insurance, capping of fees, business costs for physicians. He noted that he did not have malpractice insurance and was told if he had nursing home patients, he could not get anyone to insure him. He stated that if his patients wanted something routine done, the next appointment would be in July, and that he had tried to recruit a new physician, who needed over $100,000 per year to start. He noted that when a patient was brought to the emergency room, that emergency room doctor needed to be good, and Palm Beach County had to care about what doctors were here, and who stayed here. He cited the fact that his taxes for his office had gone up from $4,000 to $13,000 per year, and required that he work more hours per day to cover the rising costs.

Commission Member Friedman commented that this was the classic horror story, parts of which had been heard from other physicians, from other health practitioners, and that he would take the story out to the community.

Dr. Burns addressed the economical concerns of expanding his practice, noting that newer, younger doctors had a different expected life style, and were not working the same hours that he did. Nurse practitioners were a possibility, but they were still not doctors in primary care. Once salary desires were presented, it became unaffordable for physicians looking to recruit.

Dr. Burns commented that he was trying to get more doctors involved with the Palm Beach Medical Society, as an advocate.

In response to Commission Member Traverse, Dr. Burns advised that he was on call 24 hours per day during the week, and shared weekends; many of his associates were in similar situations.

Dr. Arthur Burdett commented that he had lived in Palm Beach since 1973, and had practiced orthopedics since that time. He noted that what Dr. Burns referred to was the essence of why new doctors were not coming to Florida; his orthopedic group

had been trying to recruit doctors for the past five years, and had grown their group by taking local doctors that were already in practice and bringing them into the group. They could not get new, young doctors here, and the facts presented today documented the problem. He cited the burn out factor, and the answer was to create a better environment to bring in young doctors. He congratulated the MCC on their work, and noted that the Palm Beach County Medical Society report would be very helpful in bringing the issues to the public, as well as the legislature. He maintained that the solutions were in the legislature.

Dr. Ivy Fast commented that she was a pediatrician in practice in Palm Beach County for 20 years, and noted that attorneys had to be a member of the bar in order to practice in the state, and were organized, and doctors did not have to be members of the Medical Society or the FMA. She advised that she had been in a group practice for 19 years, and had opened a boutique practice last summer and now had enough time to spend with her patients. The number of people interested in coming to practice over the past 20 years had gotten smaller and smaller, and overhead costs had increased, as well as physician salaries.

Dr. Fink addressed physician supply, emergency rooms, and malpractice:

- Need a source of physician supply - need a medical school or a major institutions.
- Primary care physicians - there were 17 fields in internal medicine today, and no one could possibly keep abreast in all of them.
- The involvement of agencies to staff emergency rooms.
- Referral of non-emergency cases that come to the emergency room.
- Malpractice - the costs of malpractice to the medical school would be about 40% of what it would be to the practicing physician.

Dr. Dennis thanked Dr. Fink for his comments.

Mr. Cameron noted that all four doctors had mentioned that Florida competed with physicians all over the country. He commented that every one of the specialties, which had been discussed today, was in a shortage situation in most other parts of the country. The demand was growing, not shrinking. He advised that Florida had to

look at how to become more attractive and more competitive to other markets. He explained that there were many other parts of the county where supply and the shift of specialties from primary care to sub-specialty medicine and surgery were further restricting the supply of primary care physicians. He noted that those two issues alone would create challenges to this market.

Don Chester, Associate Administrator of St. Mary's Medical Center, and a member of the Emergency Department Management Group (EDMG). He commented as follows:

- EDMG wanted to determine if there was a crisis in specialties, or in medicine and where those shortages were.
- St. Mary's Medical Center tried to recruit for some position every week. It was extremely difficult to recruit for top positions, not only due to medical malpractice, but due to property taxes, hurricanes, storm insurance, the quality of schools, etc.
  - St. Mary's Medical Center wanted to recruit young physicians, but it was getting harder and harder.
  - It was not that difficult to obtain board certified emergency room physicians because they preferred to work normal hours, and they were hired through recruiting firms.
  - The physicians, who took referrals - the internists, orthopedic surgeons and others - were the physicians working the 80 hour weeks; and they wanted a better lifestyle.
  - The University of Miami would be coming to Palm Beach County was a long term solution. There were no guarantees that the physicians would want to remain or go into the specialties that were needed.
- Legislators would not get involved until the voters did.
- St. Mary's Medical Center paid physicians to be on call.
- St. Mary's Medical Center last year had approximately 3,000 patients transferred in; 663 came from outside Palm beach County, because of the specialities St. Mary's had that they were unable to receive elsewhere.

- It was not just health care issues that needed to be solved, but there were

many other issues.

Mr. Chester commended the MCC and thanked them for the opportunity to be present this morning.

Dr. Dennis thanked Mr. Chester and asked what he believed was the current level of support from the Palm Beach County Commission?

Mr. Chester responded that they needed to sit down with each one of the County Commissioners and talk with to them. He commented further as follows:

- The County had not offered money toward the University of Miami.
- The elected officials needed to be made aware that the community had a severe shortage of physicians.
- The report provided today was the first report that contained data other than anecdotal information regarding this issue.
  - Businesses, Scripps, etc., when being recruited, questioned the quality of medical care, the quality of education, and the quality of life in the community.
- Doctors and hospitals were finding it enormously difficult recruiting physicians to the community and help was needed.

Dr. Dennis advised that he had a meeting on the 5th with County Commissioner Koons and County Commissioner Marcus.

In response to Dr. Dennis, Mr. Chester advised him that he could mention to the Commissioners that he and EDMG would be interested in talking to them on some follow-ups.
He commented that the County Commission needed to listen to the doctors, the hospitals, the citizens, the communities. It was not easy to be successful and get items passed such as this in Tallahassee, but with a lot of support, something can be accomplished, together.

Tenna Wiles, Executive Director of Palm Beach County Medical Society, commented, as follows, on some of the issues discussed today:

- The reason there was no public outcry was because every day and every night, the physicians, hospitals, health providers in this community were putting band-aids on a situation, and until something very bad occurred, it would not come to the attention of the public.
- A goal of EDMG was to hold a public awareness campaign.
- EDMG originally received significant funding from the Quantum Foundation as well as funding by hospital medical staffs and hospitals. to conduct the study presented, and continued funding was a challenge.
- Proposal at the Healthcare District, which dealt with the specialty call situation. It was anticipated that the response to this issue would be received in June.
- The EDMG would remain together to study the issues of physician shortage and the census study.
  - Data needed to be maintained.
  - The need to capture data regarding physician recruitment.
  - The hospitals, the medical staffs, and the Palm Beach County Medical Society have committed to the next phase of funding to keep this moving.
- The overall marketing initiative.
- The Palm Beach County Medical Society voted at its last Board Meeting to begin and initiate a study of the future of medicine in Palm Beach County.
- The community needed to be engaged in what they perceived the health care system should look like in five years. What was expected and what was wanted.
- The physicians and hospital administrators have committed so much and have stepped up to make the study a future reality.

Tim Henderson, consultant to the Palm Beach County Medical Society, discussed physician census data collection and maintenance. The most important part of any database was the person who maintained it, and the Palm Beach County Medical Society would like to have a database analyst to constantly maintain the data in order that future decisions were based on facts. He presented a two-page Palm Beach County Medical Society Services Physician Database proposal to sustain the maintenance of a database.

Dr. Dennis thanked Mr. Henderson. He addressed Mr. Cameron noting that he believed that a plan was being formed, which was that their obligation was not to inform the public, but to alarm the public. He noted that some good suggestions had come out of today's discussion: petition campaign; e-mail campaign; and a marketing plan.

Dr. Dennis stated that the Medical Care Commission would be very pleased to work with the Palm Beach Medical Society.

Mr. Cameron stated that he appreciated the opportunity to be on today's Agenda. He thanked the MCC for their support and advised that the Palm Beach Medical Society would take them up on their offer of assistance.

Dr. Stein commented that the MCC was in the process of printing a medical guide for the community. He suggested a slip-in page that would be carefully designed and worded to convey some of the information presented today. He advised that the medical guide would be well circulated, would be given to every household in Palm Beach, and might be used in other communities as well.

Mr. Cameron advised that they would be glad to work with whomever was putting the guide together to come up with a synopsis of the information for the slip-in.

VI. COMMENTS FROM THE PUBLIC

There were none.

VII. ANY OTHER MATTERS

There were none.

VIII. ADJOURNMENT

There being no further business, the April 28, 2007 Medical Care Commission meeting was adjourned at 11:45 a.m.

APPROVED:

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Michael Dennis, M.D.
Chairman