



Winter Newsletter

February 2020

Message from the President Snohomish County Medical Society-2020 Membership Dues

Snohomish County members will receive an invoice from the Washington State Medical Association (WSMA) with an option to renew with Snohomish county while renewing your WSMA membership.

If you are not a WSMA member, and wish to be a member of SCMS only, you can do so online at: www.snohomishmedical.org

If you have any questions, please contact us at: 206-956-3624 or by email at: LMK@wsma.org

Gerald Yorioka, MD
President

Sea Mar Family Medicine Residency Update

The Sea Mar Marysville Family Medicine Residency will have the first class of 6 graduating in June 2020. Our residents are getting great training, at Sea Mar and at Providence. Thank you everyone in the community who has helped train the residents. We are expanding to 10 residents per year over the next few years. Also, note that Providence is starting an internal medicine residency next year.

Finally, we are developing an OB Fellowship. Exciting! Our residents are required to do a community project. I would like to plug "Walk with a Doc," which Dr. Kirstin Hansen, a R3, is developing. The Snohomish County Medical Society is funding this endeavor. There is more information about this in the newsletter. We invite you to be a participant!

Submitted by Greg Sanders MD
Program Director
Sea Mar Marysville Family Medicine Residency

Walk with A Doc Community Event on February 29, 2020 at 1:00 pm Jennings Memorial Park in Marysville, WA

As part of a community outreach project we have partnered with a national organization called Walk With A Doc to organize an event in which we meet at a local park and invite our patients to walk with us!

Walk with a Doc was started in 2005 by Dr. David Sabgir, a cardiologist in Columbus, Ohio. Frustrated with his inability

to affect behavior change in the clinical setting, Dr. Sabgir invited his patients to go for a walk with him in a local park on a spring Saturday morning. To his surprise, over 100 people showed up, energized and ready to move. Since that first event in 2005, Walk with a Doc has grown as a grassroots effort, with a model based on sustainability and simplicity. A doctor gives a brief presentation on a health topic and then leads participants on a walk at their own pace.

Our kick-off walk is planned for Saturday February 29th at 1:00 pm, at Jennings Memorial Park in Marysville. We will meet by the main entrance (where the Marysville Parks and Rec office is).

We hope to see anyone from Snohomish County Medical Society and other organizations at our walk along with your patients! We plan to have monthly walks hosted at Jennings Memorial Park.

This project was supported by a grant from the Snohomish County Medical Society and Sea Mar Marysville Family Medicine Residency.

Website: <https://walkwithadoc.org/our-locations/marysvillewa/>

Coronavirus

A novel coronavirus (2019-nCoV or SARS-COV2) emerged in China in late 2019. Coronaviruses are a group that include SARS and MERS. It was identified in Wuhan, capital of Hubei province, after 41 people presented with pneumonia. The virus has been confirmed to originate in an animal market in Wuhan. As of February 14, 2020: 64,470 cases have been confirmed, 15% are serious. Cases have been identified in all provinces of China. There have been 1,384 deaths (including the physician who identified the first case), giving a case fatality rate of 2%. Initially the case fatality rate was thought to be much higher; likely due to only more serious cases being tested and limited testing. On February 10, 2020, the death toll surpassed that of the SARS outbreak in 2003. Returning tourists from Wuhan have fallen ill. The first confirmed case of human-to-human transmission of the novel coronavirus outside China was reported by Vietnam on January 24, 2020. The first US case was a resident of Snohomish County eventually isolated in Providence Regional Medical Center in Everett.

There are now cases confirmed in seven states (AZ, CA, IL, MA, TX, WA, WI). On January 30, 2020, CDC confirmed the first person-to-person transmission in the US in IL. As of February 14, 2020, 15 (out of 362) tested have been confirmed; an additional 81 are pending. ➡ over

On January 30, 2020, the International Health Regulations Emergency Committee of the World Health Organization declared this outbreak a “public health emergency of international concern.” On January 31, 2020, Health and Human Services Secretary Alex M. Azar II declared a public health emergency for the United States to aid the nation’s healthcare community to respond. Also, on January 31st, the President signed a presidential “Proclamation on Suspension of Entry as Immigrants and Nonimmigrants of Persons who Pose a Risk of Transmitting 2019 Novel Coronavirus.”

The virus can cause a range of symptoms, including runny nose, cough, sore throat and fever. Some are mild, while others are more likely to lead to pneumonia. More serious cases tend to occur in frail individuals such as those with other co morbid conditions. Sustained person-to-person spread is confirmed. That means infection can result from being within approximately 6 feet (2 meters) of a patient with the virus for a prolonged period of time and having direct contact with infectious secretions (sputum, serum, blood, and respiratory droplets) from a patient with 2019-nCoV. So called “super-spreaders” have also been identified. One British businessman who contracted the infection in Singapore subsequently infected 11 others. The incubation period is likely 2 to 7 days. There is no vaccine and no treatment, though the entire viral genome has been sequenced. Wearing masking to prevent oneself from getting infection is not recommended by CDC.

For the best information and updates, visit <https://www.cdc.gov/coronavirus/index.html>.

Balanced Billing Law

Washington State’s Balanced Billing Law went into effect January 1, 2020. This may also be a bit confusing, but in simple terms, it stops what is called “surprise billing” where an out of network provider, who being out of the insurance plan network, will bill their usual fee for the service rendered. This might occur, for example, when a specialist is called in to an emergency room.

The Washington State Office of the Insurance Commissioner regards this as one of the strongest such laws in the nation. <https://www.insurance.wa.gov/news/surprise-billing-legislation-signed-law-gives-washington-strongest-protections-country>

Block Grants

A US federal grant is a form of monetary assistance given to an individual or group to carry out activities or research for public purposes. Federal grants do not directly benefit the government. The U.S. has 26 federal agencies that offer over 1,000 different grant programs.

Federal government grants may be unrestricted in terms of use, or they may come with specific stated guidelines. Federal grant money can be classified in two ways: direct grants and

pass-through grants. Direct grants are given directly by the government to an individual or group who applied for the money. Pass-through grants require the state to apply to the government for the grant, then the state hands out the federal grant to the organization that requested it.

A federal government grant can further be classified as competitive or formula. A competitive grant, or project grant, is one which several groups are vying for because the amount of money is limited. A group of peer reviewers makes the decision by scoring applications and assigning the one with the highest number of points the grant. A formula grant does not involve competition with other groups; the government simply distributes formula grants based on set standards. An application must be completed and submitted to the government, upon receipt of which the government hands out the grant.

A few additional types of federal grants include earmark, categorical, and block grants. Earmark grants are regulated by the U.S. Congress and are controversial for their steep involvement in politics. They are not given out competitively; instead, political lobbyists pay high prices to receive them.

Categorical grants have restrictions and dictate that the free federal grants must only be spent on projects or causes that fall within certain categories. Groups who receive categorical grants are often asked to match a set amount of the grant awarded. About a third of categorical grants are formula grants, so since most of these grants are awarded competitively, the restrictions make sense.

Block grants are similar to categorical grants, except they are lumped together in one category. Even though the money can only be used for projects within one category, those who receive block grants have fewer restrictions on the use of the money than categorical grant recipients. All block grants awarded are formula grants.

Why is this relevant? **Medicaid.** Under current Medicaid law, the federal government provides each state a percentage—in practice, between 50 percent and 70 percent, depending on a state’s wealth—of whatever it costs to insure any people who are eligible. A big expansion of Medicaid has taken place in recent years under the Affordable Care Act, which paid states the entire cost at first—now 90 percent—of enrolling poor people with slightly higher incomes than most states had allowed before. Three dozen states have expanded Medicaid since 2014. There is political interest to allow states to transform Medicaid funding to block grants. While this has worked well in addressing the opioid epidemic, the impact of all of health conditions funded by a block grant is in effect healthcare capitation leaving the states responsible for increases in healthcare demand such as may occur with the novel corona virus. ■