

## **GOMA News & Updates** Volume 47, January 2025



# Feb. 2 GOMA District 2 Meeting in Tucker is an Opportunity for Social, Food & 1 hour of free CME

The leadership of District 2 has taken GOMA President Gregory Harris' words at the Annual Meeting and put them to action. District 2 President Michael Mangonon, DO, and District 2 Treasurer/Secretary Bill Bostock, DO, are organizing a District 2 (Fulton, DeKalb & Gwinnett counties) social event at Dr. Michael Baron's home in Tucker on Sunday Feb. 2, 2025, from 5:30 to 8:30 pm. The central location of Lavista Road & I-285 makes it easy to reach for all the osteopathic physicians in the district. The address will be provided after RSVPing.

John Vogel, DO, will speak on Post-Traumatic Stress Disorder. Dr. John Vogel is an independent pain specialist in Marietta, GA providing personalized treatment for a wide spectrum of pain conditions. He completed his pain fellowship at Brooke Army Medical Center and his residency at Emory University. Dr. Vogel is board-certified in pain medicine, headache medicine and family medicine. He has had much success at using Stellate Ganglion Blocks for PTSD. Dr. Vogel is actively involved in teaching at national meetings and continually pursues additional knowledge to improve patient care. He has been a peer reviewer for the Journals Menopause and The Journal of Sexual Medicine, and he authored the chapter on Bio-Identical Hormones in Menopause Practice: A Clinicians Guide, 3rd Edition.

<u>Click this link by Friday, Jan. 31, to RSVP</u> to this great free District 2 event on Sunday February 2.



GOMA Day at the Capitol, Thursday Feb. 13
All osteopathic physicians are encouraged to attend. We will be
joined by physicians from Georgia OB/Gyn Society, Georgia Chapter
– American College of Physicians, Georgia Academy of Family
Physicians and Georgia Chapter of American Academy of Pediatrics.
Five Georgia health associations comprise PCPC and meet eight
times a year to discuss legislative issues on the State and National
level. Make plans to attend on Thursday February 13, 2025 by
clicking on this link to register.

**Renew Your GOMA Membership Now** 



AOA's 2025 DO Day on Capitol Hill March 22-23 (virtual) March 26-27 (in Washington, DC) The AOA is now accepting applications for the Bureau of Emerging Leaders (BEL) DO Day Scholarship, which provides opportunities for osteopathic residents, fellows and new physicians in practice to attend DO Day on Capitol Hill, set for March 22-23 (virtual) and March 26-27 (in-person), 2025. <u>Learn more and apply today!</u>

#### Register for the DO Day events here.

In 2024, the American Osteopathic Association successfully opposed several harmful legislative proposals. Additionally, the AOA impacted positive changes as listed below:

- Osteopathic Manipulative Treatment: Successfully included report language in the FY25 LHHS funding legislation that encourages CMS to cover non-pharmacologic treatments for pain management, such as OMT.
- Inclusion of the osteopathic profession in various bills and regulation.
- Numerous positives updates to the 2025 Medicare Physician Fee Schedule, including extending payment parity between telehealth and in-person services.
- The Federal Trade Commission (FTC) finalized its rule banning non-compete clauses in employment contracts after submitting comments to the FTC explaining the impact on the osteopathic profession.





### **Insurers Fight Over Who Will Control Medicaid**

From an article by Greg Bluestein in Atlanta Journal Constitution

An all-out battle for one of Georgia's most lucrative public contracts is underway as a group of insurers competes for the multibillion-dollar award from Gov. Brian Kemp's administration to manage health care for roughly 2 million state Medicaid patients.

The Department of Community Health in December granted new contracts to four insurers who spent more than a year jostling for the business and shut out two others — Amerigroup and Peach State Health Plan — that had long managed Medicaid care in Georgia.

The two powerful insurers are warning that the management switch by DCH could spark chaos in the state's Medicaid system, with Peach State saying it would force more than 1 million needy Georgians to find different doctors and hospitals. The successful bidders, meanwhile, say they'll implement a more streamlined system to provide health coverage to poor children and adults enrolled in the program, which also covers the disabled and elderly in nursing homes. And others who struck out are casting doubt on the entire bidding process and pressuring state officials to start all

over again. Georgia law allows unsuccessful bidders to protest the decisions to state agency heads and then lodge appeals in court.

Much is on the line. Georgia expects to spend about \$4.5 billion on Medicaid and PeachCare, the program for uninsured kids, in the next year. The Medicaid program is administered jointly by federal and state governments, so the feds chip in billions of dollars more. What's more, the state aims to transfer more than 200,000 Georgians who are elderly, blind or disabled to the managed care system. The overhaul would begin in mid- 2026, during a midterm election campaign cycle where healthcare could be front and center.

It's potentially the biggest shake-up of Georgia's Medicaid system since a 2006 overhaul under Gov. Sonny Perdue's administration moved about 600,000 Georgians into HMO plans after years of "unsustainable" double-digit increases in the program's costs. The arrangement was designed to steer more Medicaid patients toward primary care doctors who can manage their treatment — and discourage Georgia recipients from relying on costly emergency room visits for medical services.

About a decade ago, Georgia moved its foster children to a Medicaid managed care system with the promise of improving access to services and care of high-needs kids while also saving taxpayer dollars. The costs of all of Medicaid's programs have continued to grow, even as Georgia pushes to tighten Medicaid rolls that swelled during the pandemic. This year's state budget added hundreds of millions more in spending for the Medicaid program.

And the fight over the contracts also could echo in the ongoing political debate over Medicaid expansion, which Kemp has ruled out in 2025 as too costly and inflexible despite a growing push from some key Republicans to reevaluate his stance. "This is absolutely a big deal. These could be the largest contracts in Georgia, and they have a huge effect on Georgia's children," said Roland Behm, a cofounder of the Georgia Mental Health Policy Partnership. "The stakes couldn't be higher."

The bidding war began when the state's health agency in September 2023 sought new proposals to manage Georgia Families, which covers Georgia Medicaid and PeachCare recipients, and Georgia Families 360, which covers children, teens and young adults in foster care. The state also served notice that it plans to move about 200,000 older, blind or disabled people into managed care agreements under the new contracts.

Georgia now pays three insurance firms more than \$4 billion a year to run the federal-state health programs. Peach State Health Plan manages care for roughly 45% of Georgia's Medicaid patients, Amerigroup covers 30% and CareSource oversees about 25%. Amerigroup also handles the smaller contract for Georgia Families 360, which covers health care for about 33,000 foster care children and young adults.

Ten companies bid for the contract in December 2023. Earlier this month, four were named successful bidders: CareSource, Humana Employers Health Plan of Georgia, Molina Health Care and United Health Care of Georgia. United Health Care also won the foster care contract over CareSource and Molina. United Health Care would supplant Amerigroup, whose bid wasn't among the finalists.

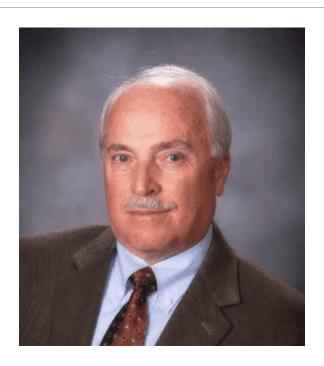
State agencies often routinely put contracts out to bid, but overhauls of this sort are rare. The potential upheaval led to a flood of formal protests from the losing bidders, some of whom fired off magazine-length complaints that picked apart the process and excoriated the winning bidders.

Several bidders filed formal complaints asking the Department of Administrative Services, which oversees the process, to start over. The agency didn't immediately comment for this report, nor did the Department of Community Health. In its 33-page filing, Aetna argued the changes are "manifestly not in the best interests of Georgia taxpayers or the Georgians who depend upon Medicaid benefits." Sentara Health Care said in its 40-page dispatch that the bidding process was "arbitrary and capricious."

Some of the most scathing pushback came from Peach State, who under parent company Centene has held a slice of the state's Medicaid contract since 2006. The insurer said in legal filings it now covers more than 700,000 Georgians. Peach State said in a 48-page complaint this month that the state's procurement process was "mismanaged, rife with errors and reckless practices" and that ousting Peach State from the Medicaid contract would "upend the way vulnerable Georgians receive their health care." "Georgia has never experienced disruption of this magnitude," Peach State wrote in its complaint, which warned the process would force 1.17 million Georgia Medicaid recipients to change health care providers. Others could be left with gaps in their network coverage, it said. "The Georgians who rely on these important programs for their health care, and the taxpayers who pay for these programs, deserve better," read the filing.

There is also blowback over the effects of sticking with the status quo. An Atlanta Journal-Constitution investigation found that Amerigroup denied or partially denied more than 6,500 requests for psychotherapy for children and teens covered by Medicaid between 2019 and mid-2022. Many of the requests were for kids in foster care. And in 2022, Department of Human Services Commissioner Candice Broce urged state officials not to renew Amerigroup's foster care contract because of "generic coverage denials, coverage gaps, and lackluster data-sharing" issues. The insurer wrote in its 42-page protest that it was the victim of a biased process and that Broce was "advancing a false narrative blaming Amerigroup for the agency's own failures." And in a statement, the company said it has "significant concerns" about the contracting decision. "Transparency is critical to ensuring that the needs of Georgia's Medicaid beneficiaries are prioritized," Amerigroup said, "and our focus remains on supporting the families we serve throughout this process."

Meanwhile, a pressure campaign is mounting outside the Capitol. Renu Gupta is the office manager for one of South Georgia's biggest psychiatric practices, with offices in Tifton and Valdosta that cover about two dozen counties. She's among a group of health care providers who oppose the overhaul. Gupta said she has a long-standing relationship with CareSource and Peach State — and is uninterested in dealing with the unpredictability of new insurers. "It's not easy to deal with insurance companies, and I'm worried it's going to be a terrible transition," said Gupta. "It's not fair for the doctors or their practices. And, I'm telling you, these patients are going to suffer for it."



## "Fifty Years"A Letter from Bill Delp, DO to his Colleagues

Fifty years ago, I was a senior med student training at Doctors Hospital in Tucker. My wife and I had decided that GA would be our home. I began my internship in July that year. Today I am thinking about the fact that GOMA is 68 and about the pioneer DOs who came GA to make their home and practice here. A few years ago, GOMA published the history of Osteopathy in GA. I think I donated my copy to the GOMA office when it was located on the campus of PCOM in Suwanee. It detailed the efforts of those DOs who made possible the positions held by DOs in our state today. We owe a great debt to them.

With the establishment of an Osteopathic hospital we had a focal point that drew DOs together. We all attended the state CME

meetings in spite of our specialty. Sadly those days are slipping away. The hospital is gone now along with the training programs it provided. There are a few of us who gather each year to see who is left from the staff of Doctors Hospital. Those docs and other DOs across the state laid the foundation that attracted PCOM to establish the first Osteopathic medical school in GA. Now there are two! The profession has expanded so much in my 50 years in GA. I have no vision of a return to the days of those GOMA meetings of the 70'sand 80's, but we need to support the focal point of our uniqueness in GA.

May the future be a good one for us all

William A. Delp, DO (Bi



Clay C. Guynn, DO's Case Series about Percutaneous Cryoneurolysis Published in PM&R Journal

"Percutaneous Cryoneurolysis As a Dynamic Treatment for Spasticity: a Case Series" by Clay C. Guynn, DO was published on January 6, 2025 in *Archives of Rehabilitation Research and Clinical Translation*. Dr. Guynn of Sports Medicine South of Gwinnett in Lawrenceville, GA is a physiatrist who completed a sports medicine fellowship. He is an expert in the non-surgical management of various painful syndromes, both new and long-lasting, including musculoskeletal disorders, peripheral nerve disorders, sports injuries and neck/back pain. He works at the practice's Lawrenceville and Dacula locations.

Spasticity, whether from stroke or spinal cord injury or other causes, remains challenging to treat effectively. Common spasticity treatments such as stretching, physical therapy, injection therapy, and even surgery may not result in optimal or the desired outcomes or be appropriate for all patients. Cryoneurolysis is another potential treatment option for spasticity that may have benefits over traditional spasticity treatments. In this case series, 10 patients received cryoneurolysis of specific nerves to treat either lower or upper extremity pain, weakness and spasticity, or neuropathic gait in an outpatient clinic. All 10 patients experienced immediate improvements that were sustained for 1-12 months after treatment. Cryoneurolysis is a safe and effective treatment for spasticity and can allow for easy access to involved nerves. Common treatments are stretching, physical therapy, splinting, oral medications, injection therapy with either botulinum toxin or phenol, and surgical procedures. Additionally, for patients who have no success or complications with these options, a baclofen pump can provide good spasticity relief without the negative cognitive effects of oral antispasticity medications such as baclofen.

Cryoneurolysis consists of the application of cold temperatures, between -20°C and -100°C, to peripheral sensory nerves to create second-degree injury (Wallerian degeneration) without damaging the surrounding tissues or permanently damaging the nerves. Schwann cells form scaffolding for nerve regeneration, which occurs at a rate of 1-2 mm per day, to reinnervate the muscle or sensory receptor.6 This gradual process results in prolonged efficacy, with some previous research suggesting the effects of cryoneurolysis can persist for months. Potential adverse effects associated with cryoneurolysis include bleeding, bruising, redness, infection at the injection site, development of an insensate area near the treated nerve, hyper- or hypopigmentation, and alopecia. Patients with cryoglobulinemia, cold urticaria, and Raynaud's phenomenon are contraindicated for cryoneurolysis. A diagnostic nerve block (DNB) with a local anesthetic (eg, 2% lidocaine) is typically used before cryoneurolysis to predict the potential effectiveness of

cryoneurolysis, given DNBs result in similar but transient effects that last for a few hours.

Read about each case and more about this novel approach to spasticity here.



### Residency Statistics From JAMA Dec 2024

It has been an amazing statistic that the osteopathic profession can now say that "1 of every 5 physicians graduating from medical school are osteopathic physicians," Actually, as of December 31, 2023, 18% of the residents in the United States are osteopathic physicians. The osteopathic profession has produced primary care physicians in high percentages for its 150-year history. Some have said that the cost of medical school is driving young doctors into specialty professions.

At the end of each year, JAMA produces statistics about Graduate Medical Education. Our short article highlights the osteopathic residents and where they do their specialty training.

- 34.5% of the residents in Family Medicine residencies are osteopathic physicians.
- 29.9% of the residents in Emergency Medicine residencies are osteopathic physicians.
- 19.2% of the residents in Pediatrics residencies are osteopathic physicians.
- 18.8% of the residents in Psychiatry residencies are osteopathic physicians.
- 17.7% of the residents in Internal Medicine residencies are osteopathic physicians.
- 16.3% of the residents in Obstetrics & Gynecology residencies are osteopathic physicians.

#### Notable specialties are:

- 38.1% of the residents in Physical Medicine & Rehabilitation residencies are osteopathic physicians.
- 23.6% of the fellows in Critical Care Medicine programs are osteopathic
- 20.8% of the fellows in Sleep Medicine programs are osteopathic physicians.
- 17.9% of the residents in Anesthesia residences are osteopathic physicians.
- 17.7% of the fellows in Allergy & Immunology programs are osteopathic physicians.
- 15.7% of the residents in Neurology residencies are osteopathic physicians.
- 14.1% of the residents in Orthopedic residencies are osteopathic physicians.
- 13.3% of the residents in General Surgery residencies are osteopathic physicians.



# PCOM South Georgia Student Evelyn Orusa is 1 of 5 Nationwide To Receive Prestigious Cardiology Scholarship

Evelyn Orusa (DO '27), a second-year Doctor of Osteopathic Medicine (DO) student at PCOM South Georgia, has been named one of five recipients of the prestigious Dr. Richard Allen Williams Scholarship from the Association of Black Cardiologists (ABC). The scholarship recognizes outstanding medical students who aspire to impact underserved communities.

Student doctor Orusa's journey into medicine was inspired during her teenage years in Fayetteville, Georgia, where she encountered a young girl with a cardiac condition. "She had this wonderful light about her, despite having to wear an external heart monitor," Ms Orusa said. This interaction sparked her interest in cardiology.

Before medical school, student doctor Orusa earned a degree in biomedical sciences from Georgia State University and worked as a medical scribe in an emergency department. At PCOM South Georgia, she serves as co-chair of Sisters in Medicine, an initiative dedicated to supporting Black women in medical and graduate school through mentorship, community engagement, and research on Black maternal health.

The scholarship award allowed student doctor Orusa to attend ABC's 15th Annual Spirit of the Heart Gala and participate in the PULSE retreat, where she engaged in virtual reality and simulated heart procedures. "It was surreal sharing a space with brilliant cardiologists who not only look like me but are paving the way for future generations," she said.

A daughter of Nigerian immigrants, student doctor Orusa plans to specialize in cardiology, focusing on underserved populations. "There are health literacy deficiencies and a lack of health care in underserved communities," she noted. Her mission is to offer care and advocacy, inspired by her parents' struggles accessing quality health care when they immigrated to the United States. "My parents have always encouraged me to chase my dreams," Ms. Orusa said. "Hopefully, soon, I'll be the first doctor in the Orusa family."



PCOM Georgia Student Mustafa Ansari Has Saved Two Lives

By Chris Starrs in the Gwinnett Daily Post

Thanks to Mustafa Ansari's training, his confidence and his compassion, a woman from California was able to enjoy Christmas with her family after a life-threatening incident earlier this year at Los Angeles International Airport. Student doctor Ansari, a second-year medical student at Philadelphia College of Osteopathic Medicine in Suwanee, saved a woman in cardiac arrest at the airport by implementing CPR and the use of a defibrillator before first responders took over.

"In your first year at PCOM, you are required to do basic life support training," said student doctor Ansari, 26. "Because of that training, PCOM has instilled in me not only the knowledge, but the confidence to react under pressure. In emergencies, seconds count and being prepared can make the difference between life and death. With that training, it showed me that I'm receiving the education that I need."

The Michigan native, who comes from a family of medical healers, said he traveled to Los Angeles in July to conduct research on orthopedic surgery with a doctor he met online. Student doctor Ansari, who is known at PCOM as "Moose," said he was walking through the airport terminal when he noticed "an unsettling commotion" ahead of him. When he arrived at where a crowd was gathered, he saw "an elderly lady sprawled on the floor" and sprang into action.

"I'm curious guy and curiosity tugged at me, so I moved closer to the crowd," he said. "... As the crowd got bigger, the gravity of the situation dawned on me that no one was doing anything. Instinct kicked in and I turned off the cacophony around me. The training I received at PCOM and my time as an emergency scribe kicked in. I noticed signs of cardiac arrest and in that moment, I knew what to do."

Ansari said that he identified himself to the crowd as "Dr. Moose," a second-year student doctor from PCOM. He added that upon identifying himself, he was later worried of the possible legal implications of the situation and after confirming that the woman was

in good hands, he retreated into the airport crowd, but not before speaking to the woman's daughter.

"I was relieved but had no time to celebrate," said Ansari. "Moments later, EMS arrived. Their presence was comforting to my frayed nerves, and I disappeared in the crowd as I didn't know the potential for liability or anything. As they transported her, I watched in gratitude and disbelief."

Not long after the incident, once Ansari had returned to PCOM, the daughter of the woman he helped sent an email of thanks to Andrea Mann, D.O., dean and chief academic officer at PCOM Georgia. The daughter only knew that the man who helped her mother was "Dr. Moose," and when Dr. Mann was able to determine just which PCOM student that was, she called student doctor Ansari to her office. "The dean pranked me," said Mr. Ansari. "I thought I was in trouble for something ... But she showed me the email from the daughter of the woman I'd helped, a thank you note."

Student doctor Ansari, whose grandfather was chief of surgery at Henry Ford Hospital in Detroit and whose mother is also a physician, graduated from Oakland University in Michigan with a degree in biology and later moved to New York, where he earned a master's in interdisciplinary biological and physiological sciences at Touro College of Osteopathic Medicine. While in New York, Ansari also worked as a model for designers like Dior, Prada and Lulu Lemon and returns to the Big Apple every year during Fashion Week to do model walks. "It's the highlight of my career," he quipped about modeling. "But it's on the backburner because med school is more important."

It was during a trip to New York earlier this year that student doctor Ansari helped a teenage girl who suffered a seizure outside of LaGuardia Airport. "My life is full of surprises," he said.

Student doctor Ansari has a little more than two years remaining at PCOM, and he said he hopes to secure a residency at nearby Emory University but said he may return to Michigan or New York. He's also planning to pursue an MBA while in residency.

"Biotechnology and AI have always been fields of interest for me," he "We appreciate the past We are grateful for the present and we're looking forward to the future with great anticipation and commitment."

President Jimmy Carter
 October 1986, at the dedication of the
 Carter Presidential Library and Museum