

2009 EVP Report
by
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It is my pleasure to provide this report for the purposes of the 2009 Annual Session, which represents the 156th Annual Meeting of the Association. The past twelve months have been busy and productive ones for MMA and I hope in this brief report to provide readers with a summary of our activities and to set forth some of the successes as well as the challenges. As I begin my 30th year of full-time employment with the Association, I want to begin by thanking the officers, lead by Dr. Stephanie Lash, members of the Executive Committee and the staff for working diligently throughout the year and for providing me with incredible support. We are very fortunate to have strong voluntary leadership as well as a very capable and experienced staff. These two assets will serve us well as we continue our advocacy on behalf of Maine's physicians during very challenging times for both physicians and associations.

As I do not wish to repeat the information in the several committee reports or in Mr. MacLean's legislative report, I will focus my report on the general status of the Association, any new programs and activities in the past year and any challenges we face.

STATE OF THE ASSOCIATION

With over 3300 members, MMA enjoys its largest membership ever. But numbers can be deceiving. Less than 1800 of these members pay any dues, with the remainder being students, residents and retirees. I should note that the retirees are asked to voluntarily contribute \$85 annually to help cover the cost of their membership and that over a hundred of them do so. The trend for active members (dues-paying) is flat and would be decreasing except for our successful group membership program. The group membership program allows groups with ten or more physicians to join as a group and earn a substantial discount off the dues. This past year, we were pleased to bring in the employed physicians at Inland Hospital (New Horizons) and we have offers on the table with Central Maine Medical Center, Mercy Hospital and Eastern Maine Medical Center. We have a full menu of services to offer such groups and we have been quite successful with this initiative.

Financially, the existing budget will be a challenge as we expect significant shortfalls in membership dues, corporate affiliate dues, seminars and Annual Session. If the shortfalls remain significant after the first three quarters of the year, we will take steps

to reduce our expenses. But we hope to keep all our services and programs going at some level.

Despite the challenges of membership, which is shared by all medical societies and many other associations, I remain optimistic about the ability of MMA to remain an effective advocate for Maine's physicians, regardless of their mode of practice (private, employed or otherwise). With challenges come opportunities.

NEW SERVICES AND PROGRAMS

Despite the challenges noted above, we have been able this year to establish some significant new programs/services, as follows:

- **Chronic Pain Consultation Project.** This project, funded by the Maine Board of Licensure in Medicine, offers a hands-on consultation to medical practices struggling with patients being treated with long-term opioid therapy for chronic pain. Noel Genova, PA is doing a terrific job staffing this project.
- **Academic Detailing.** Through a contract with the state of Maine, MMA is now offering academic detailing to practices, through the Maine Independent Clinical Information Service (MICIS). The Service provides up-to-date, evidence-based prescribing information to healthcare providers using data and guidelines developed by non-commercial sources. The primary goal of the project is to improve clinical outcomes. The first subject tackled was diabetes; next is anti platelet therapy.
- **Long Term Development.** For many years, MMA leadership has recognized the need to better fund the Maine Medical Education Foundation (loans to medical students), the Maine Medical Education Trust (supports educational programming and other activities eligible for tax-exempt status) and MMA itself. A year ago, a consultant was retained to prepare a long-term development plan. The Plan was accepted by the Executive Committee earlier this year and a two days a week position established to begin implementation of the plan. Dee de Haas of Winthrop has been hired to fill this position. When not assisting MMA in development work, Dee will serve as the events manager for Quality Counts, which has offices in the Frank O. Stred Building (which also houses the MMA staff).

In addition to the new projects, much time has been spent this year with the Medical Professionals Health Program, which will begin assisting nurses in recovery in Jan. 2010 and the Coding Center, which has a new Director. Gina Hobert, CPC, MBA is now directing the Center which continues to provide important educational and chart auditing services to institutions and individuals across the state.

CHALLENGES

Virtually all medical organizations are finding it necessary to re-invent themselves in order to show value. Physicians are practicing in groups, many are employed and many of the traditional reasons for joining a statewide professional association no longer apply. It is important for MMA to communicate with non-members and particularly younger physicians, to determine what would attract them to join. We spend a lot of time on retention and recruitment and these activities will be even more critical in the future. Whether the health system is significantly reformed in Washington or not, it will be necessary to show value to members in ways that have not been contemplated before. But I believe MMA is well positioned to meet this challenge. With a dedicated group of volunteer leaders and a capable and experienced staff, we have as a goal to be the best small state medical society in the country. While the first twenty-nine years were not easy, I may well look back on them as the easy years as we tackle the significant challenges ahead.