

CSA Has Smooth Sailing on Mission Bay

Overview of the 2004 CSA House of Delegates

By Edgar D. Canada, M.D., Speaker of the House of Delegates

This article will serve as an overview of the 45th meeting of the CSA House of Delegates. Details on some of the items discussed here can be found in other parts of this *Bulletin*. The 2004 House of Delegates Meeting was held at the Hilton San Diego Resort, Mission Bay, on Friday, May 21, and Saturday, May 22. On Friday evening, prior to the beginning of the Reference Committee, Dr. Linda Hertzberg presented the results of the CSA Reimbursement Survey. This presentation included information on average unit value for the various anesthesia practices across the state as well as information on the amount and types of stipends that anesthesiologists receive.

The Reference Committee Hearing considered two resolutions. The first resolution was testimony related to AB 2389, which is a bill by Assemblyman Koretz. This bill would limit balance billing by radiologists, anesthesiologists, and pathologists for professional services provided to patients of preferred provider organizations that do not have contracts with the physicians, but for which contractual arrangements may exist with the surgeon and/or hospital.

The second resolution asked the ASA to develop specific credentialing guidelines for sedation provided by non-anesthesiologists. Testimony on this issue highlighted the need for such measures to increase patient safety in such situations. It also included discussion of a controversial joint statement by the American College of Gastroenterology, the American Gastroenterological Association, and the American Society for Gastrointestinal Endoscopy that stated in part: "There are data to support the use of propofol by adequately trained non-anesthesiologists. Large case series indicate that with adequate training, physician-supervised nurse administration of propofol can be done safely and effectively."

The House of Delegates meeting on Saturday afternoon heard the Presidential address of Dr. H. Douglas Roberts as he reviewed the accomplishments and challenges of his year at the helm of our organization. Dr. Linda Mason, President-elect, in her speech to the House, presented her vision of what she would like our organization to achieve during her year as our president. Dr. R. Lawrence Sullivan, Jr., our ASA Director, offered information on the more significant issues being addressed by the ASA at the national level. The business of the

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House of Delegates was concluded with most items being adopted by acceptance of the consent calendar. Among these items was the CSA policy for drug testing.

Drs. Robert Martin, Secretary, and Michele Raney, Treasurer, received recognition for their many years of service on the CSA Executive Committee. President H. Douglas Roberts and Dr. Stephen Jackson, Chair of the Committee on Physicians Health and Well Being, presented the first ever “Friend of the CSA” award of recognition to Ms. Jodie Brokowski, legal counsel for Team Health Anesthesia Management Services (a practice management group), for her assistance in helping the CSA develop a prototype policy for drug testing for dealing effectively with chemical dependence in anesthesiologists at the hospital or medical group level.

As you can see, the CSA had smooth sailing at its most recent meeting on Mission Bay in San Diego, California.

CSA President’s Address to the CSA House of Delegates

One short year ago, President Dailey stood before you to present a summary of CSA’s activities of the past year and to pass the baton (or gavel) to me. In turn, I am now ready to provide a few remarks concerning this past year and to pass the baton to Dr. Linda J. Mason as she becomes the 53rd President of CSA. In reviewing the past year, the recall of Governor Davis and election of Governor Schwarzenegger which was precipitated by the huge budget deficit threatening California with total financial collapse combined with our country’s War on Terror on an international level tends to overshadow the relatively peaceful work by CSA during the course of the past year! A number of projects have been either successfully completed or are nearing completion. Continued hard work by your officers, committee members, and the central office staff are keeping CSA strong and prepared to aid our membership as needed.

The following are some of the more important accomplishments of CSA in keeping with the goals of CSA and the needs of its members.

- The positive financial picture reflects the combined hard work of the Treasurer, Dr. Michele Raney, the Finance and Administration Committee chaired by Dr. Michael Champeau, and the central office—especially Ms. Barbara Baldwin, CSA Executive Director, and Mrs. Linda Risdon. Combined with an increase in membership, the improving economy, as well as a very successful year by our Educational Programs Division, chaired by Dr.

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Barbara Van de Wiele, resulted with the CSA ending this fiscal year with a significant increase in the reserve fund balance.

- The combined efforts of CSA and UC SD’s Department of Anesthesiology provided CSA with a successful Annual Meeting last year at Disneyland in Anaheim. The EPD’s efforts were also rewarded by CSA having experienced two very successful Hawaiian seminars. These meetings drew over 830 participants from more than forty (40) states as well as a number of other countries—Australia and New Zealand to the west and Finland to the east.
- The CSA Central Office has been busy with providing the ongoing needs of CSA as well as undergoing an evaluation and assessment survey in an attempt to improve the efficiency of the work place. Job descriptions are being and have been crafted to aid in this endeavor. In addition, preparations are being made to move the CSA office to newer and nicer facilities this coming August which will actually provide a substantial cost savings at the same time. A real “win-win” situation! Lastly, this past March, the new CSA Web Site was finally launched. Many new and improved items are featured on this web site which will continue as a work in progress. One very notable addition is the section on Disaster Preparedness. This was made possible by the task force chaired by Dr. Kenneth Pauker. The very extensive work is now available to all CSA members and the public. It is hoped that arrangements allowing browsers on the ASA web site will be able to link to this source of important information.
- An Academic Chairs Dinner was held in Los Angeles this past February providing CSA Leadership and the Chairs of a number of California Anesthesiology training centers a chance to discuss issues of mutual interest and needs. As a result of this meeting, the Legislative and Practice Affairs Division, chaired by Dr. Virgil Airola and aptly aided by Dr. Earl Strum, has begun an investigation into a possible avenue of help in attempting to retain potential future academic anesthesiologists within these training centers. It is earnestly hoped that similar dinner meetings will continue on an annual basis as a means to provide needed dialogue between CSA Leadership and the Anesthesiology Academic Chairs of California. The luncheon held each year during the Annual Meeting will continue; however, because of time constraints. I have felt this meeting alone is not enough.
- A survey on CSA members’ reimbursement and stipend experience was conducted this past year. The analysis and final report of this survey was presented at the Reference Committee meeting last night. First conceived and set in motion by Dr. Patsy Dailey during her term as president, this endeavor

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was felt necessary to respond to financial issues being discussed in Sacramento, namely, the reworking of Workers’ Compensation as well as anticipated Medi-Cal reimbursement changes.

- The Task Force on Office Based Anesthesia stumbled onto some very important information. It is possible that, in this period of rapid growth in office based surgery, a few offices which offer surgical procedures with anesthesia may not be correctly certified or licensed. Anesthesiologists who practice in offices need to know that they are responsible for ascertaining if the facilities within which they work are, in fact, certified or licensed correctly. Should an anesthesiologist become connected with misadventure within such a facility, not only could they find themselves with a malpractice insurance policy that would be null and void, but they could also be charged with unprofessional conduct by the California Board of Medical Examiners and with a possible loss of their California Medical License.
- The Task Force on Pain Medicine Anesthesiologists became involved in the Workers’ Compensation revision by the California Legislature under Governor Davis. The re-visitation by the California Legislature under Governor Schwarzenegger’s threat to bring forth an initiative at the next election did not allow much input by CSA. At the present time it appears that we anesthesiologists have not suffered a decrease in reimbursement; however, it may be too soon to tell. During the next year, the affairs of Pain Medicine Anesthesiologists will be cared for by LPAD.
- The Committee on Physicians Health and Well Being, chaired by Dr. Stephen Jackson, after many months of work, has finally completed a proposed template for those practice groups or Anesthesiology departments who seek help in establishing protocols and/or agreements in regards to impaired physicians. This document was evaluated and discussed at the last meeting of ASA Committee on Occupational Health. Many CSA and ASA members have given of their time to produce this document which is intended to serve as a template or model for medical staffs or medical groups seeking help in establishing a drug testing policy. Special thanks to Dr. “Connie” Ward and Ms. Jodie Brokowski for their expertise and help with this endeavor. This service can now be added to the many services available as benefits of membership. Working within the same committee, Dr. Mark Singleton wrote and successfully took a resolution to the CMA House of Delegates regarding the possibilities of false positive testing created by ingestion of poppy seeds.
- The Task Force on Deep Sedation, chaired by Dr. Eddie Canada, resulted in a resolution being forwarded to ASA to help resolve some serious issues

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involving the administration of propofol which may pose a threat to patient safety.

- The financial future of those physicians practicing anesthesiology remains one of constant vigilance and political preparedness. Medicare reimbursement battles are being waged in the U.S. Congress as we speak. Financial adjustments by CMS administrative decisions as well as the need to overhaul the Medicare reimbursement system are the areas of constant attention by ASA and CSA. Threatened cuts in the reimbursement schedule on almost an annual occurrence combined with the need to pressure U.S. Congress for relief from these ill-conceived attempts to enforce a flawed formula continues to keep CSA and ASA officers and our legislative advocates busy. The need for contributions towards GASPAC and ASAPAC mounts at a time when members seem less inclined to help these PACs protect and improve these same members.
- Last year, Dr. Patsy Dailey discussed with this House of Delegates the importance of balance billing in a just and reasonable manner. Apparently this warning was misunderstood and/or ignored by some individuals. There have been instances noted where outrageous fees for anesthesia services have been forwarded to patients where balance billing was considered possible. The result has been several featured articles both on TV and in newspapers, plus outcries to various state government bodies, the most important being the California State Legislature. As with any controversial subject, there are obviously other aspects to this problem; however, it remains a problem which will demand that a solution be obtained soon. Currently, CSA, CMA and several other medical specialty societies are working to rework legislation which could severely injure, on a financial basis, all anesthesiologists with respect to contracts, both signed and not signed. This is a prime example of how a few individuals can cause a specialty to become the poster child of a campaign to limit or destroy financial options which organized medicine has worked so hard to obtain. It behooves all of you to carefully check with your billing agencies or employees within your business offices regarding what is being sent out to patients under provisions of balance billing.
- The Guedel Memorial Anesthesia Center (GMAC) has become a focus of attention over the past several years. The GMAC, which is an often overlooked jewel, was founded by some of CSA’s early visionary leaders. The GMAC has struggled financially and one of its original reasons for being has been eclipsed in part by the ASA Wood Library Museum in Park Ridge, Illinois. Dr. Selma Calmes, current President of the GMAC Board, and myself met with the board of the WLM this past March with a board meeting

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of the GMAC planned for June of this year. Current hopes are for GMAC to be redefined as a resource for anesthesiology history teaching among our residency programs within California and to curtail one of its ongoing practices of being a library of worldwide anesthesia journals. Hopefully, more information about this transformation will become available later this year.

Finally, I want to express my sincere thanks to all within this great organization who have worked to allow CSA to accomplish its many feats this past year. Your support and tireless efforts are most appreciated. Special thanks to the staff who maintain our central office: Barbara Baldwin, executive director, Linda Herren, assistant executive director, Cammie Pisani, membership/meeting coordinator, Linda Risdon, accountant, Andrea de la Peña, communications coordinator, and Sandra Ferrari and Lesley Franco, administrative assistants. Our legal counsel, Mr. Dave Willett and Mr. Philip Goldberg, deserve your thanks. Our legislative counsel and advocates, Bill Barnaby, Sr., and Bill Barnaby, Jr. (affectionately referred to as Team Barnaby or “The Bills”), are a most critical part of the success formula within CSA. I also need to thank my group in Santa Barbara which tolerated my many absences, often at inconvenient times. During the past two years, Anesthesia Associates Medical Group, Inc. has experienced the closure of a hospital, the opening of several new anesthesia providing locations as well as a decrease in the number of members to accomplish the demands placed upon the group.

Lastly, I want to thank my wife, Karen, who has been of incalculable help to me this past year as she acted as my sounding board, helped me to keep in perspective the demands, needs, and resulting actions I have been faced with, tolerated my many hours before the monstrous computer, and all the while remained my loving companion and devoted mother to our three sons—Sam, Josh and Adam.

To those special ones who have supported and guided me through these past several years, I also give you my heartfelt thanks. It has been a great honor to have served as your President—Thank you. To Dr. Linda J. Mason, as you assume the Presidency of CSA—Good Luck and Godspeed!

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