

The President's Page

Address to the CSA House of Delegates by CSA President Linda J. Mason, M.D.

Madame Speaker, officers, delegates, and friends, it is a true privilege to speak with you today and to reflect on the last year that I have spent as president of the California Society of Anesthesiologists (CSA). It has been a very exciting year for me and an honor to serve as your president. But before I talk about the accomplishments of the Society this year, I would like to thank some people who have made these accomplishments possible. First and foremost, I must thank my husband, Traian. He has been totally supportive of me in this journey and beside me even though I had to be away on many weekends when I was busy with Society business. Without his support, it would have been impossible for me to accomplish the tasks I have. His love and encouragement have allowed me to be at my best for the good of the Society. Secondly, I must thank my colleagues at Loma Linda who have shown a lot of tolerance, sacrifice and flexibility with my schedule. They have done their best to allow me to fulfill the obligations of the role of president, even though it meant many of them spending extra time in the operating room.

Many other people that have been helpful to me during this past year. I agree with the quote from Woodrow Wilson—"I not only use all the brains I have but all that I can borrow," and I have been fortunate to borrow a lot this year. I can't say enough about the Central Office staff. Barbara Baldwin and I have enjoyed a very good relationship in moving issues forward. The Central Office has been restructured this year and the new staff consists of: Susan Weiner, Administrative Assistant; Lesley Franco, Operations Assistant; Linda Risdon, Operations Manager; Andrea de la Peña, Communications Specialist; Terry Rowe, Education and Member Services Coordinator; and our newest member, Michael Whitelock, who is the Chief Operations Officer. This is a dynamite group of people of whom you should be very proud. They have a tremendous commitment to the CSA and work day by day as the backbone of our Society. In addition, there are some other people who have made my life better. First and foremost are our consultants. Our advocacy needs are handled by Bill Barnaby, Sr., our legislative counsel, and Bill Barnaby, Jr., our legislative advocate. The Barnabys have their finger on the pulse in Sacramento, and they have made a huge difference in keeping us informed of challenges that occur in the legislature and being proactive in meeting these challenges. In addition, our esteemed legal counsel, David Willett and Phillip Goldberg, have given advice behind the scenes, and their guidance through the political and legal maze has been invaluable. Two other people need recognition for their constant devotion to the CSA: our communications leaders, Dr. Stephen Jackson who edits our *Bulletin* and our editor of electronic media,

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Dr. Kent Garman. Both have really made a difference in keeping our members informed about important events.

The Executive Committee is an important part of the CSA, and I must express my deep appreciation to: President-Elect, Edgar Canada; Immediate Past President, H. Douglas Roberts; Secretary, Mark A. Singleton; Treasurer, Michael W. Champeau; Speaker of the House of Delegates, Linda B. Hertzberg; ASA Director for California, R. Lawrence Sullivan, Jr.; Chief Executive Officer, Barbara Baldwin; Division of Legislative and Practice Affairs Chair, Virgil Airola; and Educational Programs Division Chair, Barbara Van de Wiele. Also I must thank the remaining members of the Board of Directors for their support throughout the year. This is the working group of the CSA, and they have come together to serve on committees and to contribute in areas where we needed special expertise. Many of you in the audience have served on committees and made a difference in the CSA's efficiency, quality and output, and to you I want to say a special thank you.

I must also say a special thank you to all of the past presidents, but I must say that there are three past presidents who have been particularly important for me in my CSA career. The first is Dr. Daniel Cole. When Dr. Cole was chair of the Educational Programs Division, he involved me as a member of that committee. Because of that I moved up to Chair of the EPD and then on to be President. Thank you, Dan, for always being there as a colleague with wisdom and insight when I needed help. Secondly, I must say something special about Dr. Patsy Dailey. Watching Dr. Dailey work tirelessly for the Society gave me a real role model to live up to, and I have always appreciated her input and support on the important issues. And finally, Dr. Larry Sullivan. Larry Sullivan has really served as a mentor for me and has also become a good friend and someone who has helped me understand the workings of not only this Society, but also the ASA. We are very fortunate to have him as our Director to the ASA, and I know I look forward to a continued working relationship with Larry.

Now on to issues that the Society has worked on this year, issues that face us all as anesthesiologists practicing in California. The first is Workers' Compensation. The Barnabys, our legal counsel, and the Society itself has put a lot of time into preventing the decrease in Workers' Compensation payments that may come for all of us as of January 2006. If compensation for anesthesiologists under Workers' Compensation in California is adjusted under the present plan, our compensation will fall to 120 percent of Medicare rates. This is especially bad for anesthesiologists because we are only paid by Medicare at 39 percent of commercial rates, whereas other physician services are paid at 83 percent. This will leave us at a level of approximately less than \$22 per unit. Workers' Compensation is not

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charity. Employers are financially responsible for such care, and Workers' Compensation insurance companies have agreed, at least until now, to pay what is interpreted as reasonable fees. We will continue to work for this reimbursement to be kept at the current level.

The second problem is AB 1321 which is the prohibition against balance billing. This bill would prohibit balance billing by hospital-based physicians. The CSA mounted a strong opposition in an effort to keep this bill from being passed. It has, however, moved out of the Assembly Health Committee, but it still has a number of hurdles to overcome. The fight is definitely not over, and we will be working closely with CMA and other opponents to defeat this bill.

Chiropractic manipulation under anesthesia is another challenge. The CSA has sent a letter of strong opposition to proposed regulations on chiropractic manipulation under anesthesia. The CSA is concerned about the use of anesthesia for manipulation by chiropractors and by a new proposed amendment intending to let CRNAs—who are currently not allowed to act upon orders from chiropractors—administer anesthesia under their supervision.

And finally, scope of practice issues are still ongoing. The Barnabys and Mr. Willett met with the Department of Consumer Affairs about a Board of Registered Nursing (BRN) informational statement that suggested that CRNAs did not need physician supervision in California. This has been withdrawn from the BRN Web Site. The BRN Executive Director has promised to make the request to the California Association of Nurse Anesthetists to withdraw this statement from their web site. We will continue to work on clarification of this with the Department of Consumer Affairs and the BRN.

At the national level we have had some successes but still have some challenges to address. The Medicare Locked Cart Regulation has been revised as a Condition of Participation by the Centers for Medicare and Medicaid Services due to the concerns over safety that had been brought to the ASA by the CSA in 2003. The proposed rule deems operating rooms secure areas so carts do not have to be locked between cases. Although adoption of this regulation in the published form is not guaranteed, we are hoping that after the comment period, this will go into effect and allow us to take care of our patients safely.

The biggest issue in focus at the ASA is the Medicare update and sustainable growth rate (SGR). Based on the formula enacted by the Balanced Budget Act of 1997, with minor modifications made in the more recent Medicare Modernization Act, all Medicare physicians are facing real cutbacks to the conversion factors, averaging some five percent per year for the next eight years, absent legislative or regulatory actions to the contrary. This would reduce the current conversion

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factor by some 50 percent over this period, meaning that for anesthesiologists, whose current conversion factor is roughly half as large as the conversion factor for other Medicare services, the final value could become less than 25 percent of commercial rates. This was the major focus of discussions with legislators at the ASA Legislative Conference two weeks ago. To fight the larger Medicare issue, the ASA, in conjunction with the AMA and a large coalition of national medical specialty societies, continues to push Health and Human Services for an administrative fix to the problem, one that would include removing physician-administered drugs from the underlying SGR formula.

Finally something that is near and dear to my heart, reimbursement for academic anesthesiologists. Currently under Medicare, the fee is cut in half for academic anesthesiologists that supervise two residents. With our already low Medicare reimbursement, this has a significant impact on academic institutions. The ASA has been working behind the scenes to try to get this rule changed which would make a huge impact on academic centers, many of whom are struggling financially. We are dependent upon academic institutions to help us solve patients' problems and improve care with continued research, but our academic faculty are now spending a very small percentage of their time doing research, and this danger of continued decreased professional reimbursements, greater demands for clinical services, and difficulties in attracting and retaining faculty are a big problem. Our professional societies must work together with these institutions to provide solutions for these extraordinary problems. This is the future of our specialty.

As I close, I must say that there are many things that are positive for the future of the CSA. The reorganization of the central office has enabled the Society to bring in people with needed skills and experience to make the CSA a more efficient and effective organization. Beginning this year, more resources are being devoted to bringing greater value to CSA membership with new member services. The Society will be seeking your input on how the CSA can better meet your needs and keep you informed of issues of importance to anesthesiologists in California. Another important aspect is that active membership in the CSA has increased, and now we have the most delegates ever, 27, to represent any component society at the ASA national level.

Finally, I must say a few words about the next president of the Society—Dr. Edgar Canada, who will be assuming this role at the close of this meeting. You couldn't have a better, more committed or sincere individual taking over the role as your president. Dr. Canada exemplifies everything that is important in an anesthesiologist and a leader—commitment, caring and clinical excellence. He will need

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your support as I have had it, and I have the fullest confidence that the Society will go forward to even greater heights under his direction.

In closing, I want to thank everyone in the room: the district directors, delegates, and alternate delegates here today. You have certainly made the difference in the Society this year. We are our members' representatives. We are here to bring the issues of the members forward and obtain the best resolutions. We are the servants of the Society, and I hope that I have been able to fulfill this role well for you in this last year. I will always be proud to have been the President of the CSA, an organization that is dedicated to promoting the highest standards of medical care for our patients. It has been a wonderful experience to serve you and the Society. I am proud that anesthesiologists do make a difference in the lives of our patients every day, and we should continue to pursue excellence in the care of our patients, in the training of our residents, and, by these mechanisms, we will continue to be an important and respected specialty. As Emerson said, "What lies behind us and what lies before us are tiny matters compared with what lies within us." Within this Society lies the ability to accomplish great things. Thank you for your support and for the honor that I have had to be your President.