We are back at SUTTON BAY for the Annual Meeting!

Date: Sept. 30 — Oct. 2, 2011
Meeting Location: SUTTON BAY
28950 Sutton Bay Trail
Agar, SD

Located in the heart of South Dakota, Sutton Bay sits along one of the most beautiful lakes you have ever laid eyes on ... Lake Oahe. Come relax in the solitude of the prairie.

The clinical conference will feature one or two keynote speakers and a review of the questions on the AAOS Self-Assessment Exam. This will be a time of learning, multiple CME’s and lots of fun.

Interspersed in the clinical program there will be plenty of time for activities (hunting, fishing, golf, etc.)

A registration form and brochure will be forthcoming.
I just returned from the National Orthopedic Leadership Conference in Washington, D.C. This is now my third NOLC visit as SDSOS president, and the first as South Dakota’s representative on the Board of Councilors. I always approach this meeting with a certain amount of trepidation and cynicism but afterwards realize the vital nature of involving oneself in the political process. Besides me, the other orthopedic surgeons in the South Dakota delegation were Rick Little of Spearfish, Peter Looby of Sioux Falls, and Bryan Den Hartog of Rapid City and Mary Bechler, our Executive Director. We met with Senator Thune, Representative Noem, and a staffer from Senator Johnson’s office. We were to meet with House Speaker Boehner, but that was the night he was called to the White House by President Obama during the budget impasse. Instead, we met Rep. Greg Walden from Oregon, who holds a leadership position in the House.

The AAOS had four issues that we were to speak about. Our meetings focused mostly on the quality advantages of integrated (i.e. physician owned) ancillary services including physical therapy, advanced imaging, and hospital ownership. The other burning issue was the Independent Payment Advisory Board (IPAB) which is a major tenet of Obamacare. AAOS, as well as most other health care organizations including the American Hospital Association, want this Board to be abolished. There are bills in the House and Senate to repeal this provision of the new health care bill. Noem and Thune agree, Johnson’s staffer stated he’d like modifications, but not repeal.

One of the best reasons to attend the NOLC is to see what dangerous legislative activities are occurring in other states. Most of the dangers orthopedic surgeons face on the legislative front occurs at the state level. After nearly three years of deliberation the Maryland Supreme Court recently affirmed an older state law that prevents any physician, other than a radiology group, from owning “advanced” imaging, such as MRI scanners. The passage of this law was due largely to Maryland physicians being “asleep at the wheel” while the radiologists, to their credit, quietly were able to get it passed. Read past newsletters for details on this law. Physicians in Maryland now have to work to get a new law passed. Fortunately, we in South Dakota have the advantage of seeing what is happening elsewhere before it emerges here. Constant vigilance and maintaining relationships with our own State legislators is vital.

On the BOC side, I am still learning the ropes. As a first year “newbie”, I’m supposed to attend as many different committees as I can. Later this year, I will submit a request to be a member of a specific committee, but that assignment is not guaranteed. There are about six standing committees of the Board of Councilors. The BOC is almost entirely composed of orthopedic surgeons in private practice. As I learn more about the workings of the AAOS, I have seen the real value of this body. The most recent case revolves around the new American Board of Orthopedic Surgeons Maintenance of Competency (MOC) procedures for Board recertification. If you haven’t already experienced the complexity of this process, you are either an old guy with a lifetime certificate, or you are doomed, because if you haven’t followed the process it’s probably too late for you to get recertified. The Arkansas State Orthopedic Association sponsored a resolution that the AAOS communicate to the ABOS that its MOC procedure is overly complex, too rigid, and has no proof that it actually does anything to make us into better doctors. Representatives from the ABOS got an earful during the open microphone session, and the resolution passed overwhelmingly. MOC will certainly not go away, but the ABOS heard many different ways that they can make the process less painful. This all began because, rather than just complain in private, some Arkansas docs contacted their State Society, and working with their Councilor, got the resolution to the AAOS.
Problems? Issues? I encourage anyone to contact me or the other members of your State Society leadership.

Finally, our State Annual meeting will be held September 30 - October 2nd at Sutton Bay. This year’s meeting will allow participants to fulfill one big requirement of the MOC, the scored self-assessment exam. We will have experts review each question on the test and present it with an explanation. It will be an excellent opportunity to complete this requirement, pick up 20 CME’s, and hobnob with your fellow orthopedic surgeons. See you there.

The 2011 National Orthopaedic Leadership Conference (NOLC), April 6-8, JW Marriott, Washington, DC was the first I have attended. Invited as an at-large member of the South Dakota State Orthopaedic Society by our state organization president, Dr. Steve Eckrich, and attending alongside Drs. Eckrich, Bryan Den Hartog, and Rick Little and our state executive director, Mary Bechler, I have been asked to share a few reminiscences and impressions of the experience.

First, I want to thank Dr. Eckrich and all the members of our state orthopedic society for allowing me this opportunity and privilege. Essentially a newcomer to our state society and the NOLC, I was made to feel welcomed and my limited input valued by our state colleagues and Ms. Bechler every step of the way.

The AAOS invites the Board of Councilors, the Board of Specialty Societies, and the state societies to attend the NOLC annually. It is an intensive 3 days of educational symposia, board and committee meetings, and legislative lobbying all rolled into one. The agenda is packed and begins daily at 6 am extending into the evening hours.

The 2011 NOLC focused on four areas of import to orthopedic surgeons: 1) the AAOS Act is legislation seeking to support trauma and rehabilitation services, musculoskeletal research, and women’s bone health initiatives; 2) the AAOS seeks to repeal the provisions of the Patient Protection and Affordable Care Act (PPACA; better known as ObamaCare) that restrict the establishment and growth of specialty hospitals; 3) the AAOS supports repeal of the Independent Payment Advisory Board established in PPACA; and 4) the AAOS continues to pursue meaningful medical liability reform via the Help Efficient, Accessible, Low-cost, Timely, Healthcare (HEALTH) Act of 2011.

After educational symposia and lobbying tips and instruction our delegation visited South Dakota’s elected national representatives Thursday, April 7th. Many times have I called on our senators and representative in DC to discuss physician ownership, and this was the first time I can remember when Sen. Tim Johnson was unable to personally meet with our group. I couldn’t help but wonder what that may mean regarding Sen. Johnson’s future plans. We did meet with one of his staffers. As usual we had a very pleasant and substantive discussion with Sen. John Thune. And for the first time I had the pleasure of sitting down with Rep. Kristi Noem in her congressional offices. We found her to be unfailingly supportive of our organization’s positions on these issues and thoroughly enjoyable to speak with.

Other highlights of the trip included a visit to the AAOS national office in Washington, seeing the cherry blossoms around the Tidal Basin, learning of the Maryland orthopedic experience with limitations on in-office imaging, a visit from Rep. Greg Walden (R-Ore.), informal chats with Drs. John Gill and Peter Amadio, and a photo opportunity with Smokin’ Joe Frazier, heavyweight boxing champion of the world.

An exhaustive review of all the topics covered during the Conference is beyond my task for our state newsletter, but I would be happy to discuss any part of the agenda. I certainly would love to attend next year and encourage any state society member with an interest in politics and policy to learn more about the NOLC.
MEDICARE ERRORS

We have been contacted by Ellen Berra, Provider Outreach & Education, WPS Part B - Medicare Contractor. Ms. Berra pointed out there is a 58% error rate in the use of CPT code 99203 - Office or other outpatient visit for the evaluation and management of a new patient which requires these 3 key components: a detailed history, a detailed examination, medical decision making of low complexity.

In performing their review, they discovered several errors in the medical record documentation to comprise the 58% error rate:
- 37% did not support the level of service billed.
- 7% were billed under the physician's Medicare provider number when a non-physician practitioner (NPP) performed them and the Medicare guidelines do not allow for "incident to" billing for a new patient.
- 13% were denied as they did not receive any documentation.
- 1% were denied as the documentation submitted was for the wrong date of service.

The following is an excerpt from her latest correspondence:

"WPS Medicare Part B Needs Your Help!
We ask for your assistance in reducing the Comprehensive Error Rate Testing (CERT) and the internal Medical Review (MR) error rates. WPS Medicare MR recently conducted a review of evaluation and management (E/M) documentation by Orthopedic Surgery, specialty 20, for Current Procedural Terminology (CPT) code 99203. What we found was surprising. The error rate was 58%. This is unacceptable.

We have many resources on our website to assist physicians with an understanding of the Medicare rules and knowing what Medicare is looking for in documentation. You can access the latest CERT information on our website at: http://www.wpsmedicare.com/j5macpartb/departments/cert/cert_articles.shtml
You can access the results of our MR findings at http://www.wpsmedicare.com/j5macpartb/departments/medical_review/2010_0830_99203.shtml

In addition, we have a separate section of our website devoted to E/M services including questions and answers and articles: http://www.wpsmedicare.com/j5macpartb/resources/provider_types/evalandmngmnt.shtml
We also have a video presentation of our E/M education on our training page: http://www.wpsmedicare.com/j5macpartb/training/on_demand/eval-mngmnt.shtml
Please access the resources we have available to verify you are submitting services correctly to Medicare.

Thank you for your time."

DISTRACTED DRIVING PUBLIC SERVICE ANNOUNCEMENT Ads
and "Decide to Drive” MATERIALS

Page 6 is a copy of the public service announcement ads that should be on television and radio stations in your area. On page 6 is an order form to order materials to educate your patients on the hazards of distracted driving. These “Decide to Drive” Resource materials can be ordered through the AAOS and are available to all orthopaedic surgeons for the cost of shipping only.

Remember.....Behind the wheel there is no such thing as a small distraction.
2011 PSA MATERIALS

Anti-Distracted Driving Public Service Announcement Ads

In an average year, 500,000 people are injured in accidents caused by drivers who are distracted. Orthopaedic surgeons are the specialists who put bones and limbs back together after road accidents and trauma. Instead, they would like to see your readers arrive safely. Those “little” everyday driver distractions — be it the radio, a phone call, a passenger or that cup of morning Joe — aren’t little at all. In fact, they are a significant threat to the safety of the driver and his or her passengers and everyone else on the road! Educate your patients that any distraction is just an accident waiting to happen with these free materials.

2011 RADIO PSA

Spoken Word

“Spoken Word” is a 30- and 60-second radio public service announcement reminding listeners that those “small” everyday driver distractions — the radio, a phone call, a child’s dropped toy or that cup of morning Joe — actually aren’t so little at all. In fact, these diversions are a significant threat to the safety of the driver, his or her passengers and everyone else on the road!

2011 TELEVISION PSA

Froggy

This 30- and 60-second television spot that reverses and dramatically slows down the split-second decision a young mother makes on the road — hinting at a serious consequence. Viewers are encouraged to “decide to drive” and to speak up against poor driving behaviors by visiting DecidetoDrive.org.

To order products, fill out and fax the form on the back.
Order your FREE “Decide to Drive” Resources:

<table>
<thead>
<tr>
<th>QUANTITY</th>
<th>POSTCARDS (6&quot; x 3&quot; EACH, 25/PACKAGE); POSTERS (18&quot; x 24&quot; EACH); EASEL BACKS (8.5&quot; X 11&quot; EACH)</th>
<th>Distracted Driving PSAs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Postcard(s)</td>
<td>Poster(s)</td>
<td>Easel Back(s)</td>
</tr>
<tr>
<td>Behind the wheel there is no such thing as a small distraction.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>QUANTITY</th>
<th>OTHER MATERIALS</th>
</tr>
</thead>
<tbody>
<tr>
<td>“Decide to Drive” Vehicle Decals</td>
<td></td>
</tr>
<tr>
<td>“Decide to Drive” Lapel Pins</td>
<td></td>
</tr>
<tr>
<td>“Decide to Drive” “Orthopaedic Surgeons’ Tips to Avoid Distracted Driving” Bookmarks</td>
<td></td>
</tr>
</tbody>
</table>

* Pay only for the cost of shipping. Shipping limited to addresses within the U.S.*

Three Easy Ways to Order

1. Phone
   - Call toll-free (800) 626-6726 Monday through Friday, 8:00 AM to 5:00 PM, Central Time.

2. Fax
   - Fax a copy of your completed order form, toll-free to (800) 823-8025.

3. Mail
   - Mail your completed order form and method of payment to:
     - AAOS, P.O. Box 75838
     - Chicago, IL 60675-5838

<table>
<thead>
<tr>
<th>Quantity of Posters in Order</th>
<th>Shipping Cost</th>
<th>Quantity</th>
<th>Cost of Shipment</th>
</tr>
</thead>
<tbody>
<tr>
<td>1-12 posters</td>
<td>$12.95</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Additional posters in increments up to 12</td>
<td>Additional $12.95</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Quantity of Non-Poster Items in Order</th>
<th>Shipping Cost</th>
<th>Quantity</th>
<th>Cost of Shipment</th>
</tr>
</thead>
<tbody>
<tr>
<td>1-5 posters</td>
<td>$12.95</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Additional posters in increments up to 5</td>
<td>Additional $12.95</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Total Cost of Shipment**

**Method of Payment**

- Check or money order payable to AAOS enclosed
- Institutional purchase order enclosed.

- Visa
- MasterCard
- American Express Card #: |
- Exp. Date
- Signature
- Name
- Address

City State Zip

Academy ID Number (If known)

Area Code, Daytime Phone, Extension

Email
**The Political Action Committee of the American Association of Orthopaedic Surgeons:** In the 2009-2010 election cycle, the Orthopaedic PAC collected over $3.8 million dollars. The PAC had almost 5,000 contributors with a 27.7% participation rate and an average contribution amount of $590 as of the end of 2010.

The PAC set a record at Annual Meeting in San Diego, collecting over $32,000 and the PAC has gotten off to a great start raising over $125,000 in soft dollars and $300,000 in hard dollars in the first month and a half of 2011. The Orthopaedic PAC sent orthopaedic surgeons to over 215 events in-district in the 2009-2010 election cycle and continues to work hard to help AAOS members develop relationships with their members of Congress.

**Strength in Numbers (Total Hard Dollar Receipts)**
- as of December 31, 2010

The PAC was engaged and successful in the 2009-2010 election cycle, participating in 237 Congressional races. Out of the 27 Senate campaigns that received contributions from the Orthopaedic PAC, 26 candidates were elected (96 percent success rate). The Orthopaedic PAC donated to 210 House campaigns, supporting a total of 184 victories (87 percent success rate).

The PAC Executive Committee had a strategic meeting in January to discuss strategies for the 2011-2012 election cycle. Mr. Ben Ginsberg, a prominent election lawyer and expert, spoke to the Committee and moderated the discussion. He brought up many good suggestions which the Committee is looking to implement over the next year.

**Membership Report**

Membership in the SDSOS skyrocketed in 2010 from 43 to 63 dues-paying members. This growth is more than significant, it is awesome! And I am happy to report that to date in 2011, we have 64 members. So we are holding our own and maintaining very well. If you have new physicians in your group who are not members, please let me know so they can be invited to participate. We are all doing a very good job - keep up the good work!

Support the AAOS PAC. Send personal checks to PAC-AAOS, PO Box 2748, Des Plaines, IL 60019-8701.
BOARD OF DIRECTORS ........ 2011

PRESIDENT ...................................... Stephen Eckrich, M.D, Rapid City, SD
VICE PRESIDENT .................................. Rick Little, MD, Spearfish, SD
SECRETARY/TREASURER...........Robert VanDemark, Jr., MD, Sioux Falls, SD
MEMBER-AT-LARGE...................... James MacDougall, MD, Aberdeen, SD

AAOS BOARD OF COUNCILES & SOUTH DAKOTA STATE MEDICAL SOCIETY REP............... Stephen Eckrich, Rapid City, SD

EXECUTIVE DIRECTOR ...................... Mary A. Bechler, FACMPE
                                      Sioux City, IA

Please feel free to contact any of the above or your Executive Director, Mary Bechler, if you have any issues, concerns, or good ideas for the society.