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# Governor Signs Bill into Law Clarifying Provisions of AMMA

By Jennifer Chang, Attorney at Cross Gunter Witherspoon & Galchus

Today the Governor signed into law a bill clarifying the employment provisions of the Arkansas Medical Marijuana Amendment. The new law provides guidance for Arkansas employers who are required to comply with the marijuana law's employment provisions while maintaining safe workplaces for employees and the public. The bill was primarily drafted by CGWG, who submitted it to the Arkansas State Chamber of Commerce, and received input from Chamber members.

The bill defines an "employer" as an entity that employs nine or more employees in the State of Arkansas for 20 or more calendar weeks in the current or preceding calendar year. The bill defines "employee" to exclude independent contractors, individuals employed by their immediate family, and individuals in specialized employment training programs. These definitions mirror those contained in the Arkansas Civil Rights Act.



The bill defines "under the influence" to mean symptoms of an employee's "current use" that may negatively impact the employee's performance of his or her job duties or constitute a threat to health or safety. The bill includes examples of these symptoms, such as observable physical signs and symptoms, negligence or carelessness, disregard for safety, or involvement in an accident that results in property damage, personal injury, or disruption of a production or manufacturing process.

The bill provides safe harbors to employers who are covered by the AMMA. The bill protects employers acting on a "good faith belief" that an employee ingested marijuana or was under the influence of marijuana in the workplace. An employer's "good faith belief" may be based on a variety of factors, including the employee's conduct or appearance, marijuana labels, and other reasonably reliable sources of information.

Arkansas employers should be prepared to review job descriptions and substance abuse policies to ensure that they comply with the newly revised Arkansas Medical Marijuana Amendment.



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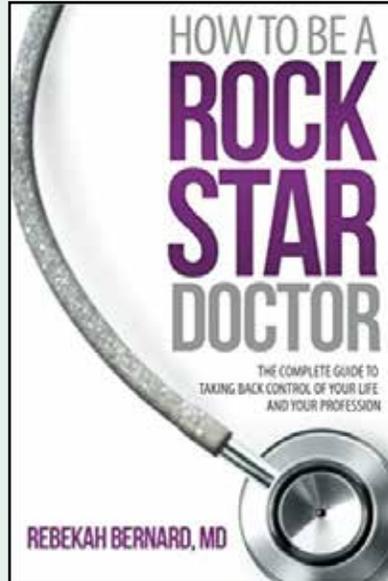
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## SVMIC Announces \$7 Million Dividend, No 2017 Rate Increase

The Board of Directors of SVMIC is pleased to announce a \$7 million dividend for policyholders again this year. This amounts to approximately 5.5% of annual premiums. SVMIC has now issued dividends in 33 of its 41 years in business. Further, the Board has decided to keep premium rates unchanged for 2017. SVMIC has not had a rate increase since 2008; when adjusted for inflation, average premiums now are nearly the lowest in the history of your company.



## Free Book, “How to be a Rock Star Doctor; The complete guide to taking back control of your life and your profession”

Author Dr. Rebekah Bernard’s, who spoke at the 2016 Annual Meeting, has donated several copies of her book for any physician who wants one. Please contact Derek Rudkin at the PCMS office at 501-687-0039 for your copy while supplies last.

### 2016 Printed Directories are still available

2016 printed directories are still available at \$5 each. Call 501-687-0039 if you wish to place an order.

## Annual Match Day

The annual “Match Day” event places medical students who will graduate from the UAMS College of Medicine in May in physician training programs and positions around the state and across the country. The matches are created through a computerized process on a nationwide basis. Seniors at other medical schools around the country participate in similar events at the same time, and some will undoubtedly be matched to a residency position at UAMS.



Lauren Hefta is excited about her vascular surgery match at UAMS.



Matt O'Neal and his fiance Erika Lozano Franz after being matched at University of Utah for general surgery.



Wilson Alobuia reacts to being Matched at Stanford University for a surgery residency.

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## calendar of events

### APRIL 19, 2017 - PCME Board of Directors Meeting



### MAY 24, 2017 - LUNCH & LEARN SESSION "Don't Let MACRA MIPS you in the Bud" Rebecca Tutton, AMIC

"This will be an overview to help demystify MACRA (Medicare Access & CHIP Reauthorization Act), and MIPS (Merit-Based Incentive Payment System)."

### JULY 19, 2017 - LUNCH & LEARN Office of the Inspector General (OIG) Compliance Plans Anne Pontius, SVMIC



Medical practices are inundated with laws, rules and regulations with which they must comply. The enforcement arm for the Federal Government for many of these programs is the Office of the Inspector General. This is particularly true for Medicare fraud and abuse issues. The OIG recommends that all medical practices have a compliance plan detail how the practice expects employees to adhere to its policies relating to the rules, laws and regulations. Having and living by a compliance plan will help mitigate penalties if a practice is found to be in violation. The presentation will discuss the need for compliance plans and details the key elements that need to be present in a plan.

### AUGUST 30, 2017 - LUNCH & LEARN We'd Like to Talk to You Tom Stearns, SVMIC



Most of practice managers will change jobs several times throughout their career. All managers should be prepared to deal with these changes. The presentation has two distinct parts. The first centering the evolution of management in a medical group. This discussion helps the individual identify where they are along their career path within a medical group and see where they are vulnerable. The second part of the presentation discusses what one should do when they lose their job including discussion of resumes, interviews and contracts.



# PCMS NEWS

## INTERVIEW WITH DR. DAVID RAINOSEK

### What motivated you to choose Medicine as a career?

I think all of us that go into medicine have some degree of altruism as our motivation, and it was no different for me. More literally though it was seeing two small town physicians who did everything from clinic to appendectomies to OB deliveries that inspired me to pursue Medicine as a career. That, and they didn't have to wear ties.



### Why did you choose your specialty?

I went into Medicine thinking I wanted to be as broad as the small town docs that had inspired me. I quickly found that it simply doesn't work that way in this country anymore, and found Internal Medicine to be the closest fit. The intensity and acuity of the inpatient setting, with (seemingly) less paperwork and more patient interaction is what drove me to a career as a Hospitalist. After a few years of this I found that even a busy clinician can only impact a handful of patients per day, and with time have found myself increasingly involved with the administration of healthcare in the hospital setting. By working part-time as a Hospital Administrator, I am able to impact a much greater number of patients, and help guide the future of healthcare delivery in our region, which has been equally rewarding.

### Who were the people who influenced you the most in your professional life and why?

Medicine, as much as any career in the modern world, is driven largely by apprenticeship and mentorship. In that sense, there were dozens of key mentors in my professional life. In general, the attending physicians that took an active role as teachers were the most influential.

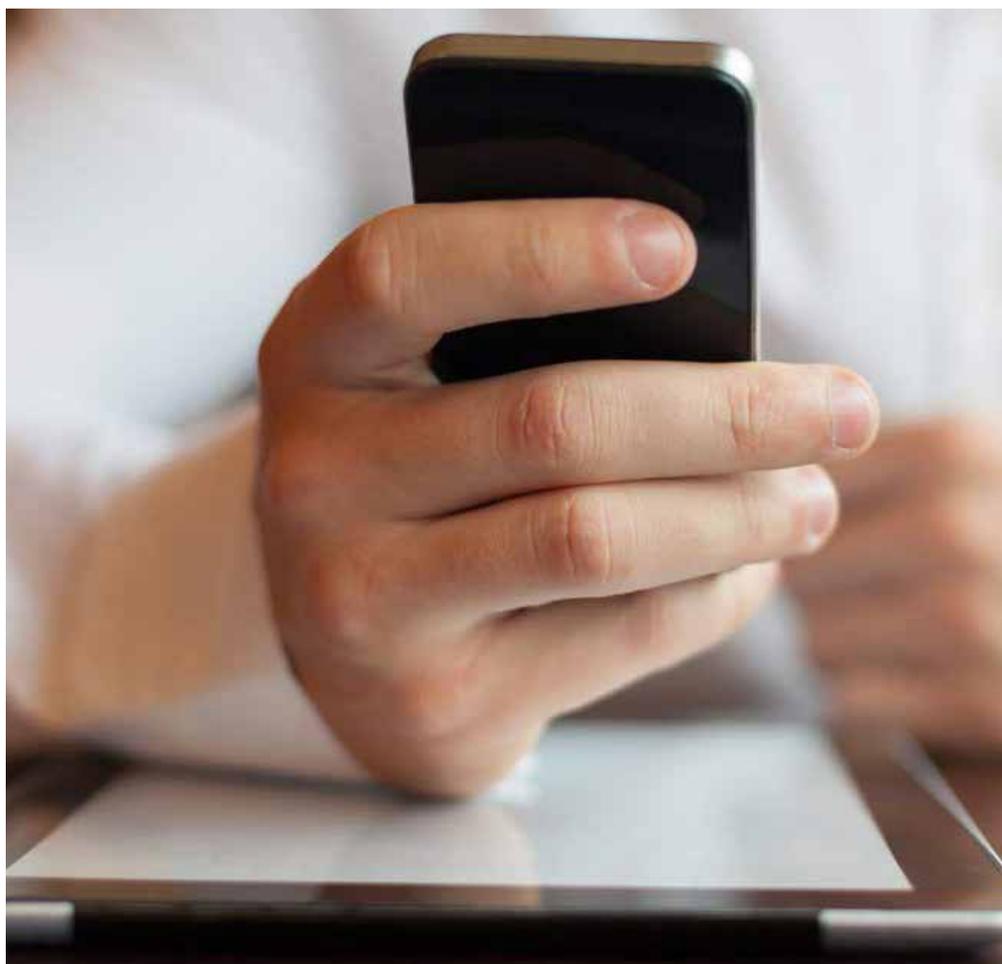
### What advice would you give a Medical Student in school right now?

Focus on studying and learning as much as you can. It's busy now, it will be busier later, and never will you have such an opportunity to systematically learn medicine. Life will be filled with opportunities throughout your career, but assimilating as much knowledge as possible will be key to getting there. Use this time wisely.

### National Doctors Day was Celebrated on March 30, 2017



# FDA Approved Mobile Apps



The only mobile apps that are currently regulated by the FDA are those that are used as an accessory for a regulated medical device, or transform the mobile platform into a regulated medical device. The apps and devices listed below fall under these categories and have been approved for use by the FDA.

## **AliveCor**

AliveCor is an app and portable device that works as a portable ECG heart monitor. The heart monitoring device costs \$199, the app is free. The link above will bring you to more information about the AliveCor system. Links for iTunes and Google Play (Android) can be found on the bottom

of the page The FDA approved the AliveCor device for over-the-counter purchase.

## **iExaminer**

Information provided by the manufacturer: The iExaminer turns the PanOptic Ophthalmoscope into a mobile digital imaging device allowing you to view and take pictures of the eye. The adapter aligns the optical access of the PanOptic Ophthalmoscope to the visual axis of the iPhone camera to capture high resolution pictures of the fundus and retinal nerve. The iExaminer App then allows you to store the pictures to a patient file or email and print them. The system requires the purchase

of a PanOptic ophthalmoscope, and an adapter for the iPhone. The app is available for free. Click on the link above to learn more.

## **MobiUS (portable ultrasound)**

The MobiUS system allows physicians to view ultrasound images on their smart phones, thus creating a portable ultrasound machine. Requires the purchase of a specially-designed ultrasound wand. Click on link above for more information.

## **Dash: Smart Instrument Technologies**

The Dash tool along with its app for the iPod touch, provides visual feedback of knee and hip joint surgical sites. More information can be found at the link above.

## **BodyGuardian Remote Monitoring System**

BodyGuardian allows physicians to remotely monitor their patient's vital signs. Requires the use of a wireless monitor. Patient information is accessible via the internet or an iPad app. Click on the link above for more information

## **Mobile MIM**

Mobile MIM is a diagnostic imaging app. It provides a portable way to review x-ray, ultrasounds, and other types of diagnostic imaging. Click on the link above for more information

## **Resolution MD**

Resolution MD allows users to access radiology diagnostic images and reports on their mobile devices.

## Gauss Surgical Triton Fluid Management System

The Triton system is a mobile platform for real-time estimation of surgical blood loss on surgical sponges. Surgeons can use the Triton system (iPad and app) to more accurately estimate the amount of blood loss during a surgical procedure, and thus potentially prevent unnecessary blood transfusions. Click on the link for more information and pricing.

## Kinsa Thermometer

The Kinsa thermometer can be attached to a smartphone and used to measure and track body temperature. The app is free, but there is a cost to purchase the thermometer.

## Otoharmonics

The Otoharmonics systems is designed to help treat patients suffering from tinnitus. Click on the link to learn more about how the system works and for pricing



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**LEFT TO RIGHT:** Dr. Mohamed Tolba, Dr. Krishnappa Prasad, Dr. Amir M. Qureshi, Dr. Muhammad Arshad, and Dr. David L. Harshfield

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## Student Projects are funded by the Society

Each year the Pulaski County Medical Society (PCMS) chooses one or more projects to fund that are submitted by UAMS medical students. The board of directors has chosen to fund two projects in 2017; The Foot Care Clinic for the homeless population in Pulaski County and The Asthma trigger prevention project at Stephens Elementary School.

The Foot Care Clinic focuses on the feet of the homeless population because they are poorly protected, highly utilized as their primary mode of transportation, and at great risk for injury. The Asthmas Trigger Prevention project provides asthma screening for every Stephens's Elementary student, work with faculty to establish diagnoses for new and previously undiagnosed student, and provide trigger prevention kits to parents/guardians and trigger education through interactive student sessions.



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