

# MSSC NEWS

## Annual meeting to recognize Minns, frontline physicians



**Dr. Garold Minns**  
Sedgwick County  
Public Health Officer



**Dr. Lee Norman**  
KDHE Secretary

### ► December Annual Meeting

**DATE:** Tuesday, Dec. 7, 2021

**TIME:** 6:30-8 p.m.

**PLACE:** The Hudson,  
508 S. Commerce

**COST:** FREE for physicians and spouses. Vaccinations and masks required.

**RSVP:** By Wednesday, Dec. 1. Call (316) 683-7558 or e-mail Denise Phillips at [denisephillips@med-soc.org](mailto:denisephillips@med-soc.org)

Join the Medical Society of Sedgwick County at its 2021 Annual Meeting as we recognize Garold Minns, MD, for his service as county public health officer and honor frontline physicians and health systems. KDHE Secretary Lee Norman, MD, who led the state's COVID-19 response, will speak. The meeting also will feature an MSSC annual report and the official passing of the gavel from 2021 MSSC President Stephen Grindel, MD, to 2022 President Jeanne Kroeker, MD.

Thanks to sponsors, the event is free for physicians and spouses. However, space is limited, and vaccinations and masks are required.

## Film builds bridges to support more Black physicians

The 2021 documentary "Black Men in White Coats" pulls no punches: Black men are dying from preventable medical conditions, in large part because there are not enough Black male physicians.

Only 2% of U.S. doctors are Black men and Black men have the lowest life expectancy in America, says Texas physician, author and social change influencer Dale Okorodudu, MD, who started the grassroots movement Black Men in White Coats in 2013.

"We are in a crisis," Okorodudu said. "Black men are going to continue dying."

Six virtual screenings of the documentary were held recently in Wichita – two through the Medical Society of Sedgwick County, two at the University of Kansas School of Medicine-Wichita, and one each through the Wesley Medical Center and Via Christi Family Medicine residency programs.

More than 130 people watched it locally, followed by discussions led by Dr. Justin Moore, Dr. Maurice Duggins, Dr. Colleen Loo-Gross, Dr. Jennifer Thuener and KUSM-W medical student Kakra Boye-Doe.

The 80-minute documentary dissects the systemic barriers preventing Black men from becoming medical doctors and the consequences on society at large. One recurring theme is the dearth of Black men as role models. Okorodudu writes that a large number

of highly qualified minority and economically disadvantaged Black students were having their medical career dreams crushed simply because they had nobody to show them how to do it.

"You can't be what you can't see," Okorodudu says in the film. "There are so few African American males in medicine because we just don't see ourselves. If you don't see your dream, it's hard for you to imagine it."

The goal of the screenings was to raise awareness of the severe lack of Black male physicians and the impact that has on community health, said Phillip Brownlee, MSSC executive director. Research has found that Black patients, particularly Black men, tend to have better health outcomes when seen by Black physicians.

But there were fewer Black men applying for medical school in 2014 than there were in 1978, the film

PLEASE SEE **BLACK PHYSICIANS**, PAGE 2



**Dr. Dale Okorodudu**

### ► RELATED

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**NOVEMBER  
2021**

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# Another health consequence of the pandemic: weight gain



**Stephen J. Grindel, DO**  
November President's Message

When I began reviewing articles for this column, I was looking for the effect of the pandemic on Americans' weight. Most of the information I found was related to the effect of weight on the individual's response to the COVID-19 virus.

If you are overweight (defined as a BMI of greater than 25) or obese (BMI>30), you are at higher risk for severe COVID-19 than individuals with a BMI of less than 25. This includes symptoms of the illness such as coughing, shortness of breath and change in taste. You may also be at risk for a longer duration of symptoms.

The literature regarding the effect of the pandemic on weight showed the results I expected. A recent American Psychological Association survey indicated that 42% of American adults have gained weight during the pandemic, with an average self-reported weight gain of 29 pounds.

Another study found that in children ages 5-11, the average

increase in weight was 24% among 190,000 subjects. For 12- to 15-year-olds, the average weight gain was 13%, and in 16- to 17-year-olds, the gain was 8%. The causes of the weight gain are related to physical inactivity along with increased screen time and access to unhealthy foods, according to researchers.

In 2011, according to CDC data, the number of states with an obesity rate of over 35% was zero. Currently, there are 16 states with an obesity rate of over 35%, including Kansas. Four states joined that list during the pandemic. No state has an obesity rate less than 24%.

Possible causes for these increases include sedentary behavior, stress and job or income loss, which can lead to unhealthy eating. According to Dr. Fatima Cody Stanford of Harvard University, stress induces fat storage.

Obesity is a disease that is often unrecognized and under-treated. It is the prodrome for many of our disease states, including cardiovascular disease, kidney disease, diabetes and cancer. We all need to be vigilant in treating this disease, which is rapidly expanding.

We have our work cut out for us.

## KUSM seeks to increase physician diversity with new programs

The KU School of Medicine created two new programs aimed at increasing the racial diversity of physicians, with a particular focus on Black males. The impact is already big: KUSM believes it has the largest number of first-year Black medical students of any school in the country other than historically Black colleges and universities.

The Barbara Sheffield Scholarship Fund provides full-tuition scholarships for Black students to KUSM, including KUSM-W. The number of scholarships offered may vary – and may not be awarded every year. This year, KU awarded eight scholarships. One of the recipients, Kenneth Burnett, is a KUSM-W student.

The second initiative is called the Urban Scholars Program for Students Underrepresented in Medicine. It is similar to the Scholars in Rural Health program but will focus on students from Wichita, Kansas City, Topeka and Lawrence. Participants must commit to practicing medicine in urban areas and working on health equity.

A pilot program begins next fall in Wichita and Kansas City, Kansas, with applications open this Dec. 1. To apply, a student must be at least a sophomore in college and have two years remaining in school. The program includes mentoring and shadowing and required coursework. Students who complete the program and achieve the required GPA and MCAT score are guaranteed admission to KUSM.

KUSM hopes these initiatives will address both the racial imbalance of medical students and some of the inequities in health care.



## BLACK PHYSICIANS CONTINUED FROM PAGE 1

says, citing a study by the Association of American Medical College. Today, only 4.4% of residents in training are Black, and 1.5% are Black men.

"The responsibility falls upon the people who decide who get into medical school," Okorodudu said. "Make something happen today. The people in the best position to do that are the medical schools."

The film talks about changing a system that relies too much on standardized test scores, and the need for medical school admissions boards to get better at identifying intelligent, compassionate Black students and helping them pass through the gates.

Organizations such as MSSC and the KUSM are working to tear down those barriers through education and programs that actively support recruiting more Black men – and women – into medicine.

"MSSC has been working on ways to increase the number of Black physicians practicing in Sedgwick County," Brownlee said. "It started a mentoring initiative for Black residents. It also is looking at ways to increase the pipeline of medical students from underrepresented populations."



# Reports show public health departments face crisis



State and local public health departments across the country are facing an uncertain future. A New York Times report found that many health departments have endured not only resistance and anger from the public during the ongoing COVID-19 pandemic, but also staff defections, burnout, firings, and unpredictable and unstable funding.

These same departments over the past two years also have faced a significant erosion in their authority to impose the health orders that were critical to America's early response to the pandemic – and Kansas is not immune, the Times study found.

"The duration and scale of this pandemic is unprecedented and has brought challenges that were not anticipated and accounted for in our emergency response plans," Sedgwick County Health Director Adrienne Byrne said.



DR. MCKENNEY

The Times used Wilson County, Kansas, and Fredonia City public health officer Dr. Jennifer Bacani McKenney as an example. When the pandemic unfolded in 2020, McKenney, a family medicine physician who attended KUSM-W and did her residency in Wichita, began doing Facebook Live presentations about coronavirus and safety and coordinated with hospitals, schools and churches. She helped implement a state lockdown, but when it came time to reopen businesses, she didn't do it as quickly as her county commissioners desired.

The Kansas Legislature, alarmed by the persistence and power of public health orders around the state, passed a series of laws that gutted the authority of the governor and health officials like McKenney, the Times reported. The new laws limited COVID-19 contact tracing, gave authority for health decisions to elected leaders and allowed anyone "aggrieved" by a mask mandate, business closure or limit on public gatherings the ability to sue the agencies that imposed the order.

That effectively shut down COVID-19-related mandates around much of Kansas, limiting public health leaders such as Sedgwick County public health officer Dr. Garold Minns to voicing "strong recommendations" to county commissioners.

These restrictive laws pose a serious risk to public health and undermine effective government response to public health issues, according to a report by the National Association of County and City Health Officials and the Network for Public Health Law.

The pandemic raised the profile of once-obscure local public

health officials, as their decisions about lockdowns or mask orders became political fodder, according to Route Fifty, an online government news clearinghouse. Burnout became common and some public health officials faced threats of violence, leading to a wave of resignations, retirements and firings among public health leaders over the past year, Route Fifty reported.

In the end, local public health departments across the country are less equipped to confront a pandemic now than they were at the beginning – largely due to new state restrictions, rampant understaffing and an uncertain future. But Sedgwick County public health officials say they've worked tirelessly to serve and protect residents despite the challenges.

Sedgwick County hired more than 200 temporary staff through the county's hiring process and through temporary employment agencies to help with the COVID-19 response. Byrne said some staff have left to take permanent positions elsewhere. The department has had to create new positions as more and different work was needed throughout the pandemic. For some positions, Byrne said they have had difficulty finding qualified applicants.

"The pandemic length and work required has been exhausting for staff," Byrne said. "There has been burnout. We have tried to ensure our organizational structure can support the work, but it has been difficult to keep up with the urgent needs and surges."

Still, she said staff has been resilient and adaptable, quick to change directions and implement new processes based on federal, state, and county guidance that can change rapidly.

It's the lack of support at the state level and future funding that worry Byrnes and Minns. "Many worry that once this pandemic quiets down (and we all want that as soon as possible), that public funding to enhance public health will shrink and public health will not be a priority," Minns said. "That has happened in the past."

Byrne agrees. She said a lack of public health funding has created minimal staffing in many areas including disease investigators, data analysts, public health emergency preparedness, outreach staff and health educators.

"Unless this changes, this could be a vicious cycle," Byrne said. "We will have learned many things during this pandemic, but we will need adequate staffing to make a difference for the next pandemic."



BYRNE

# In Brief ▶▶▶

## New and noteworthy

### Rules issued for vaccine mandates

The Biden administration earlier this month issued regulations requiring COVID-19 vaccinations of health care workers and at businesses employing 100 or more people. Both mandates, which are facing legal challenges, require covered employees to be fully vaccinated by Jan. 4.

The medical mandate applies only to Medicare- and Medicaid-certified providers and suppliers that are regulated under the Medicare health and safety standards known as Conditions of Participation (CoPs) or Conditions for Coverage (CfCs). This includes hospitals, ambulatory surgical centers, long-term care facilities and other regulated providers. It does not directly apply to physician offices, because they are not subject to CMS health and safety regulations.

The requirement applies to all current staff as well as any new staff who provide any care, treatment or other services for the facility or its patients. This includes facility employees, licensed practitioners, students, trainees and volunteers. All staff who interact with other staff, patients or residents in any location beyond the formal clinical setting (such as homes, clinics, other sites of care, administrative offices and off-site meetings) also must be vaccinated. Physicians admitting or treating patients in person within a facility subject to the CMS health and safety regulations must also be vaccinated so that the facility is compliant.

Unlike the medical mandate, the large-employer mandate allows an option to undergo weekly testing and wear a mask instead of getting vaccinated.

### Cairn relocates, preparing holiday card

Cairn Health relocated its office to 1514 N. Broadway in Wichita. Cairn, which was formerly the Medical Service Bureau, helps low-income individuals and families access health and social services. It offers vouchers for prescription medications and low-cost vision care.

Cairn is preparing to send out its annual holiday card. This winter fundraiser was started many years ago by the MSSC Alliance. Letters about the fundraiser will be sent to MSSC members. Responses are due by Dec. 17.

"Cairn Health staff and board members appreciate the incredible support of MSSC and its individual members," said Aaron Walker, Cairn's executive director.

### MSSC delivers meals to COVID units



MSSC delivered about 150 meals to the COVID units at Ascension Via Christi St. Francis and Wesley Medical Center. The meals included a note from MSSC President Dr. Stephen Grindel, on behalf of MSSC and its member physicians, thanking staff for their service to our community.



January 13th, 2022  
5:30 p.m. - 9:00 p.m.

Sponsored by:  
**KU** WICHITA FAMILY & COMMUNITY MEDICINE  
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# OPIOIDS

Intended to Meet the Kansas Board of Healing Arts New Category 3 Requirement.

### Opioid conference in January

The KUSM-W Department of Family and Community Medicine is hosting an opioid conference on Jan. 13, 2022. All physicians are welcome to attend.

The course, supported by MSSC, is intended to meet the Kansas State Board of Healing Arts' new Category 3 "opioid training" requirement (K.A.R. 100-15-4 and K.A.R. 100-15-9).

Topics include responsible opioid prescribing, the pharmacology of opioids, tapering the dosage of opioids using motivational interviewing, and medication-assisted treatment for opioid-use disorder. For more information and to register, visit [www.eeds.com/live/420179](http://www.eeds.com/live/420179).

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### Health Insurance Now Available!

The Medical Society of Sedgwick County is now offering a new and exciting option for its members' group health care coverage.

ProviDRs Care's NexUS Health Plan is a value-based health care program designed to lower costs and improve health. It can be offered to groups down to 2 employees and depending on the size of your group, you can offer multiple options to your employees.



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## MEDICAL SOCIETY OF SEDGWICK COUNTY

### Proposed Budget for 2022

#### Revenues

Dues income	\$355,000
Roster income	50,000
Advertising and Sponsorships	65,500
Interest income	500
Dividend	4,000
Rental Income	77,179
Professional consulting fees	83,665
Gain/Loss on Investment	14,000

**Total Revenues** \$649,844

#### Expenses

Salaries	\$418,952
Salary credits	(157,778)
Retirement	18,386
Payroll tax - FICA	17,401
Unemployment taxes	630
Verification review	5,500
Telephone	5,250
Electricity	17,000
Water	5,500
Janitorial supplies	2,500
Gas utility	4,000
Maintenance and repairs	20,000
Postage	12,000
Grounds maintenance	8,000
Maintenance contracts	12,000
Insurance	38,702
Credit card processing fees, bank charges	7,000
Office supplies and printing	7,000
Computer and internet expense	15,300
Automobile expense	750
Meeting expense	27,000
Meals	7,000
Public relations	500
Marketing expense	500
Professional services	3,000
Travel	15,000
Awards and appreciations	3,000
MSSC News	22,000
Dues and subscriptions	5,000
Roster expense	56,000
Worksite wellness program	957
Community contributions	22,000
Property taxes	4,250
B & I depreciation	20,000

**Total Expenses** \$644,300

**NET INCOME** \$5,544

## ROSTER UPDATE

Keep your 2021 roster current with this information.

Key: [BC] Board Certified [F] Accredited Fellowship [R] Residency  
[AT] Additional Training [F\*] Unaccredited Fellowship

### NEW MEMBER



**Hibah Ismail, MD** (hospitalist)

[BC] Internal Medicine

Sound Physicians

OFF: 316-268-6976

FAX: 316-291-4396

929 N St Francis, 67214

NPI: 1659725877

Medical education obtained at American University of Beirut 8/2011-6/2015. Residency in Internal Medicine at Wayne State University/Detroit Medical Center 7/2016-6/2019.

### REINSTATE TO ACTIVE



**James A. Manry, MD**

[BC] Anesthesiology

Wichita Anesthesiology, Chtd

OFF: 316-686-7327

FAX: 316-686-1557

8080 E Central S-250, 67206

NPI: 1154392033

Active MSSC member 2005-06.

### RETIRED

**Patsy Barker, MD** – 10/31/21

**Glen J. Misko, MD** – 10/29/21

### DROPPED

**Daniel N. Dang, MD** – Moving out of state

### UPDATES

**Lauren K. Welch, MD** – Deceased 10/20/21

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# UPDATE

November 2021

## Central Plains Health Care Partnership

From the executive director



SHELLEY DUNCAN

### Project Access

Project Access continues to enroll clients for treatment of serious health conditions for which they have no other option except our program. The last few months have shown an increase in referrals to Project Access. We remain forever grateful to our generous medical community for the continued donation of medical care and treatment. The upcoming holiday season reminds us that the spirit of giving rings so true for those we serve and from whom we hear so many expressions of appreciation. We are equally grateful to each provider who donates care to our clients.

Project Access is hopeful for another year of funding that will allow us to continue serving those in need. Since our funding is never 100% certain year to year, and our United Way funding has been reduced the past several years,

our board decided to make a request to the state for funding. There are two other programs like Project Access in the state – one in Topeka and one in Kansas City. They face the same funding concerns as we do, so we are making a combined request to the state to help all three programs. While each program started in different years, ours being the oldest, the combined amount of donated care through 2020 equaled \$537 million and served more than 31,400 individuals. Each of our programs has a small staff, yet provides so much to our clients, providers and communities.

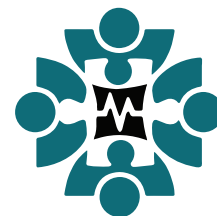
Open Enrollment for the ACA Marketplace began on Nov. 1 and will last until mid-January. We received funding to hire a full-time patient navigator who will help with the rather complicated enrollment process. Sadly, we seem to be facing what many employers are facing – a shortage of applicants, which has left us continuing to seek qualified applicants. This is a one-year position with the likelihood for three years if the goals are met. If you know of someone who might be interested in this position, please have them contact me at shelleyduncan@cphcp.com. It does not require a degree.

### Kansas Business Group on Health

KBGH is soon to complete its third year of affiliation with the Medical Society of Sedgwick County. KBGH continues to expand its scope of support, education and affiliations. Our goal is to help employers of all sizes improve their health care benefits through quality improvements and cost reduction. We find that many employers in this market seem unaware of cost drivers that can be mitigated with the right tools. In less than a year, we were able to successfully help a local, small nonprofit save around \$200,000 in pharmacy costs through the use of a pharmacy benefit management program we offer. KBGH offers several services that are proven to reduce costs for employers ranging from fewer than 10 employees to over 10,000. Our goal for 2022 is to grow membership through expanding our footprint outside of Wichita and engaging more local employers as well.

The Consolidated Appropriations Act (CAA) of 2021 was signed into law on Dec. 27, 2020. This act has a number of new requirements that will impact health care plan sponsors – i.e., employers. Most of these regulations involve transparency. There also are new requirements for mental health parity and non-quantitative treatment limitations (NQTL). Self-funded employers, as the fiduciary, are responsible for ensuring compliance with all new regulations. Fully funded employers, if managing the financial assets of the benefit plan, are also fiduciarily responsible. KBGH will have a presentation of all CAA employer-related changes at our annual Innovation Summit, which will

CONTINUED ON NEXT PAGE



**Kansas Business Group  
on Health**

### CONTACT US

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## Project Access Patient Testimonial

### Ralph – Project Access patient

Ralph has seen the lower 48 states during his 14 years as a semitruck driver. However, his eyes began to cause issues at night, and he knew he needed help. He was diagnosed with cataracts at a local clinic and was referred to Project Access. A donating ophthalmologist performed surgery on both eyes over the course of five weeks. This doctor not only gave him his sight back but gave him his life back. Ralph has returned to the road locally and is forever grateful for the opportunity to do what he loves. As an essential worker during a difficult time, this truck driver is able to provide goods to our community thanks to help from Project Access.



### About Project Access

In 1999, Project Access began coordinating access to donated medical care for uninsured, low-income residents of Sedgwick County. Thanks to our founding funders – United Way of the Plains, the City of Wichita and Sedgwick County – Project Access is still able to serve the community today. This is who participates in Project Access:

- 640 physicians
- Eight hospital systems
- 14 dentists
- 85 pharmacies
- Other allied health care services, such as physical therapy and hospice care

Project Access and its community partners serve patients in many locations. Eligible uninsured patients are enrolled for limited periods of time to address immediate medical needs. Once enrolled, patients have access to a variety of specialists, as well as prescription medication, durable medical equipment and diabetic supplies. Since 1999:

- 14,727 patients served
- \$56,043,657 physician contributions
- \$183,331,486 hospital contributions
- \$132,177 dentist contributions
- \$5,730,553 purchased medications and durable medical equipment
- \$5,851,042 donated medications
- 37,663 tests utilized through the Coalition Test Project

## Update on community programs

CONTINUED FROM PREVIOUS PAGE

be held virtually on Jan. 25, 2022. For more information about this or the CAA regulations, please contact Shelley Duncan at [shelleyduncan@cphcp.com](mailto:shelleyduncan@cphcp.com).

KBGH is finishing its annual benchmarking survey, which will be available soon. In addition, our annual report will be done by early 2022. KBGH is a regional leader for Leapfrog, which has recently posted its fall report. KBGH maintains a neutral stance on any Leapfrog findings and is merely here to help support local hospitals and ambulatory surgical centers.

Matt Thibault, our project director, was chosen as an Emerging Leader through the Wichita Business Journal. We are very proud of Matt and his achievements.

### Health ICT

Health ICT continues to support efforts around diabetes, hypertension and dyslipidemia. In addition to the two medical providers we've assisted with starting an in-house Diabetes Prevention Program (DPP) over the past year, we have also begun assisting a provider in Hays with starting its own DPP within the past month. This will be a very welcome resource in western Kansas, where programs like these are almost non-existent. We also have been making progress on encouraging employers to offer the DPP as a covered benefit for their employees.

On the clinical side of our grant work, we have been working with two clinics on separate projects. We are working with a local clinic to create a standardized process to identify expectant mothers who are at risk for developing Type II diabetes or who have gestational diabetes and referring them into the DPP or into diabetes care if they are found to already have developed it. We also have been working with a clinic in Atchison County on a hypertension and depression project to identify "positive deviance" within the clinic, which are providers who are doing exceptionally well at caring for their patients with hypertension and depression. Once the positive deviants are identified, their methods are teased out through one-on-one interviews in an effort to disseminate their practices throughout the clinic.

*Shelley Duncan*  
Executive Director

# MSSC NEWS

MEDICAL SOCIETY of  
SEDGWICK COUNTY 1102 South Hillside • Wichita, KS 67211  
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