

WELCOME TO OUR
Governor's Newsletter



President's Message

ANKUSH K. BANSAL, MD FACP FACPM SFHM

Dear Internal Medicine colleagues,

Since my last newsletter, there have been several developments. First, I would like to thank George Everett, MD MS MACP, for his dedication, service, and leadership to this Chapter.

Dr. Everett completed his 4-year term as Governor in April at the Internal Medicine meeting in Boston. Second, I would like to welcome Elisa Sottile, MD FACP as my Co-Governor of the Florida Chapter. Dr. Sottile will lead the education and membership activities of the Chapter while I will lead advocacy and membership benefits for the next two years.

The Florida legislative season is over for the year and there have been a number of developments, of which I will mention only two. First as part of a large health and medical act, Florida will be joining the Interstate Medical Licensure Compact. This compact will allow for more rapid application for medical licensure in other states and subsequent renewal. The same will be true for physicians in states already part of the Compact to be able to practice in Florida.

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It is not yet open for applications because the Board of Medicine must work out the logistics to integrate into the Compact system. There were potentially damaging parts of the Act though, particularly for our International Medical Graduates (IMGs), residency education, licensure, and patient safety. Florida has one of the highest numbers of IMG physicians of any state. More details about the law and its implications will be communicated in the future as the state regulatory bodies, including the Board of Medicine and residency programs, evaluate it.

In May, twelve of your fellow Florida ACP members participated in ACP Leadership Day in Washington, DC. The delegation included myself, Elisa Sottile, MD FACP, former Governor and Regent Jason Goldman, MD FACP, Membership and Communications Committee Chair for the Chapter Luis Isea, MD FACP, two medical students, Co-Chair of the Florida ACP Council on Resident and Fellow Members Shane Burstiner, MD, member of the national ACP Council on Resident and Fellow Members Elora Friar, DO, three other residents, and Chapter legal counsel and lobbyist Chris Nuland. We met with staff or members from several congressional districts throughout the state and staff from Senator Rubio's office.

The asks were 1) Reducing unnecessary administrative tasks on physicians and patients, specifically the Safe Step Act, 2) Stabilizing physician reimbursement, specifically the Physician Fee Schedule Update and Improvement Act that would tie Medicare physician reimbursement to the rate of medical inflation, and 3) Ensuring the supply of primary care physicians for the next generation, specifically, the Resident Physician Shortage Reduction Act of 2023.

We joined approximately 450 other physicians and medical students from every state in the country to advocate for our profession, specialty, and patients on the Hill. The fact that this is an election year, and not a typical one to boot, was not lost to anyone participating.

However, advocacy is for the long haul, not the sprint and the work we do now will lay the foundation for the next congressional session in January. I invite and strongly request each and every one of you get involved in advocacy for medicine. You do not have to travel to Tallahassee or Washington, if not feasible. You can meet with your state and federal representatives in district offices near you. You can participate in action alerts sent to you by the D.C. office of ACP. You can write letters to the editor in your local or regional newspapers, as an individual concerned physician and we are not advocating just for ourselves as physicians but for our patients, the public at large, and future generations. The Florida legislative session will start again just after the election and the Congress remains in session with important work to do.

I will leave you with this final quote by a famous physician we all know well from medical school stressing the importance of advocacy and why advocacy is part and parcel of being a physician:

"Medicine is a social science, and politics is nothing else but medicine on a large scale. Medicine, as a social science, as the science of human beings, has the obligation to point out problems and to attempt their theoretical solution. The politician, the practical anthropologist, must find the means for their actual solution. Physicians are the natural attorneys of the poor, and social problems fall to a large extent within their jurisdiction."

- Rudolf Virchow

Do not forget the Florida Chapter Scientific Meeting from October 25-27, 2024, at the Westin Ft Lauderdale Beach Resort. More information will be forthcoming this summer. With much gratitude for all that you do for your patients and profession,

Ankush K. Bansal, MD FACP FACPM SFHM DipABLM
**President and Governor, Florida Chapter
American College of Physicians.**

ACP Internal Medicine Meeting



MEETING HIGHLIGHTS



CONGRATULATIONS TO OUR NEW FELLOWS!



2024 ANNUAL CONVOCATION CEREMONY



OUR GOVERNOR ELISA SOTTILE, MD FACP



FLORIDA CHAPTER RECEPTION



LEADERSHIP DAY



BY THE NUMBERS, THIS YEAR'S ANNUAL LEADERSHIP DAY, HELD MAY 14 AND 15, WAS IMPRESSIVE:

430 ACP members took part in Leadership Day in May. Members came from across the country and participated in 369 meetings with members of Congress to seek support or co-sponsorship of three specific pieces of legislation.



The true impact of Leadership Day goes beyond statistics. It is an opportunity for ACP members to lobby for patients and physicians while making lasting personal connections with policymakers.

Advocacy is a process, not just a one-day event, and that ongoing and sustained engagement with our representatives is vital for success

If you have not attended a Leadership Day yet, please join us next year! It is a very exciting event, where you can feel the energy of IM physicians from all over the country exerting their political power to promote patient and physician advocacy. It is an amazing opportunity to enhance leadership skills and make long lasting connections.

From our Residents & Medical Students Council chair

I just wanted to shout out some of our awesome members who were able to attend ACP Leadership Day in DC last week! It makes a big difference when us medical students and residents are well-represented, and I think all the attendees can attest to that. So thank you to:

Residents: Elora Friar, MD, Saleha Ozair, MD, Vivek Patel, MD, Nancy Margarita Zerpa Lira, MD

Med Student: Taylor Colore and Amna G. Gul, MD – TMGM

For those that weren't able to attend, here's a synopsis of the three "main" bills ACP was advocating for:



Meeting with Rep. Frost's Staff (D-10)

H.R. 6545, the Physician Fee Schedule Update and Improvements Act

Official text: "The Medicare physician payment system fails to provide consistent, stable, and positive financial updates for physicians to meet their practice expenses. In fact, when adjusted for inflation, over the last twenty years, physician payments have decreased by thirty percent from 2001-2024. H.R. 6545 would raise the threshold for implementing budget neutral payment cuts from \$20 million to \$53 million and would provide an increased update to the threshold every five years afterwards based on the MEI."

My take: Would help Medicare payments keep up with inflation, instead of effectively decreasing the amount physicians are paid every year through Medicare.



Meeting with Rep. Neal Dunn (R-02)

H.R. 2389/S. 1302 – the Resident Physician Shortage Reduction Act of 2023

Official text: "It is estimated that there will be a shortage of 20,200 to 40,400 primary care physicians by 2036. Unfortunately, we are going backwards; the PCP ratio per 100,000 people fell from 67.8 in 2020 to 67.2 in 2021. This bill/bills would gradually raise the number of Medicare-supported GME positions by 2,000 per year for seven years."

My take: Forecasts are showing a huge shortage of overall physicians in the next 20 years, and unfortunately, it's going to hit primary care the hardest. This is a small step, but definitely an important one.



Meeting with Senator Marco Rubio's staff

H.R. 2630/S. 652 – The Safe Step Act

Official text: "Step therapy requires patients try and fail on lower-priced drugs selected by their insurer before the drug prescribed by their physician will be covered. This leads to unnecessary administrative burden for physicians, delays effective treatment, and can lead to negative health outcomes. This could lead to "a loss of eligibility for the drug under the new plan and could require completion of the new plan's step therapy protocol to regain access. This bill would require insurers to provide a transparent exception process for any medication step therapy protocol."

My take: Currently, insurers can arbitrarily pick out their own step therapy protocols, don't have to publish the protocols, and don't have to provide an easy way for physicians to request exclusions to the step protocols. I think this bill is a good start, because it forces insurers to clearly state their protocols and provide an easy way for physicians to appeal decisions. However, to be honest, it would be even better if there were automatic exclusions to step protocols (e.g. if taking the patient off a drug would cause them harm) which wouldn't allow the insurer to say no and require the physician to appeal.

Shane Burstiner, MD



Meeting with Rep. Kathy Castor (D-14)

If you'd like to be more involved in ACP, one of the best ways is through advocating!

Let us know if you're interested and mark your calendars – we have our next Leadership Day in Tallahassee in Feb 2025 and Leadership Day in DC in May 2025.

Advocating really makes a difference and you see it in little steps.



Next: The FTC Ban on Non-Competes

Regulatory News

The FTC Ban on Non-Competes

What You Need to Know



CHRISTOPHER L. NULAND, JD
GENERAL COUNSEL

On April 23, 2024, the Federal Trade Commission issues its Final Rule on worker restrictive covenants. Arguing that such non-competes are an inherent violation of Section 5 of the FTC Act as an “unfair method of competition,” and that the elimination of such barriers would save \$74–194 billion over the next ten years, the new FTC Rule (16 CFR Part 910) is scheduled to become effective on September 4, 2024. Restrictive covenants entered into after that date will be invalid, and non-competes entered into before that date may only be enforced if the worker is a “senior executive,” defined as a worker making more than \$151,164 per year who also has a “policy making position.”

Reaction to the announcement was immediate, as three lawsuits seeking to enjoin enforcement of the new law were instantly filed. The lawsuits are based upon three legal theories, to wit, that the new rule is arbitrary and capricious, is not within the scope of the FTC’s authority under the FTC Act, and is a violation of Article I, section 9 of the U.S. Constitution. If any of the three courts do issue an injunction, the new rule will not go into effect, and all parties fully expect that the issue ultimately will be settled by the U.S. Supreme Court.

Assuming that the new Final Rule does go into effect (which is highly questionable), employers would be required to notify existing workers who are not senior executives that their non-competes will not be enforced. That being said, employers are not without tools to protect their interests.

According to the FTC Press Release (April 23, 2024), employers may still enforce “concurrent” non-competes (prohibiting employees from working for competitors during their term of employment), as well as post-employment bans on the disclosure of trade secrets and bans on solicitation of customers and referral sources.

The question is often posed to me as to whether I believe that the FTC will indeed ever become effective. While I uniformly tell clients to prepare for the new rule, enforcement of the new law faces several hurdles, both legal and political. From a legal perspective, it is likely that at least one judge, somewhere in the United States, will find the new law unconstitutional and enjoin its enforcement until the Supreme Court can ultimately decide the issue, which is unlikely to happen before the Spring of 2025. From a political perspective, many observers believe that a second Trump administration would repeal the Final Rule in order to protect the interests of business.

In either event, the Chapter will be tracking events in this ongoing saga and will keep its members informed as events transpire.

In the meantime, should members have any questions, please feel free to contact me at nulandlaw@aol.com.



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UPCOMING NEWS

- **ANNUAL SCIENTIFIC MEETING INFORMATION**
- **CALL FOR ABSTRACTS FOR OCTOBER POSTER COMPETITION**
- **RESIDENTS & MEDICAL STUDENTS WORKSHOP**
- **RESIDENTS & MEDICAL STUDENTS NEWS**

AND REMEMBER...

SAVE THE DATE



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FORT LAUDERDALE BEACH
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- DOCTOR'S DILEMMA COMPETITION

OCT 25-27, 2024



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