

President's Message by Jay B. Hollander, MD



Jay B. Hollander, MD

My wife Jill and I hope that this spring letter finds all North Central members healthy and happy after a "real deal" winter. As spring blooms, we look forward to our annual meeting in September.

We have had the good fortune of attending many NCS annual meetings. The meetings always seem to have the optimal blend of balanced academics and social camaraderie. Though our section has a reputation for its research wherewithal, I personally have benefited from the didactics, reviews, and state-of-the-art lectures.

I would like this year's meeting to emphasize education without shorting our research presentations. All urologists today must be aware of board certification, re-certification, and maintenance of certification. As such, I have asked our secretary, Howard Winfield, to frame a meeting to accommodate state-of-the-art review lectures, including new AUA guidelines and best practices. As you will see in this letter's secretary's report, Howard has done an excellent job securing our visiting professors. We have a special AUA course in urologic ultrasound and again feature the NCS "Urology Bowl" resident competition, which was well received last year. Howard's secretary's report summarizes the accomplishments of the Board of Director's Winter Meeting. The program committee will be working hard on September's meeting.

I am honored to work with our Board of Directors and Program Committee. A special thanks goes to our treasurer, Peter Knapp, local arrangements chair, Gary Faerber, and again to Howard Winfield, our secretary. Wendy Weiser and her group are again doing an outstanding job for our organization.

It has been my humble honor to serve as President of the North Central Section this year. Jill and I hope to see you in Chicago!

Secretary's Report

by Howard N. Winfield, MD



Howard N. Winfield, MD

We are finally through the harsh winter months and enjoying the Summer time weather. With this comes reports of accomplishments within the NCS and information for the upcoming September annual meeting. At the February interim meeting in Chicago, the Board of Directors, led by President Jay Hollander, MD, reported on the following recent events and awards. The NCS will be contributing \$125,000 towards the AUA Foundation Section Research Scholar Endowment Initiative. The AUA will match these funds with \$625,000 needed to endow the Research Scholarship in perpetuity. The NCS scholar will be announced hopefully by the 2009 – 2010 grant cycle. Congratulations go out to Brian Helfand, MD, PhD who is the 2008 NCS Research Scholar and Kristina Penniston, PhD who received two-year funding from the AUA Foundation Innovative Research Fund. Dr. Quentin Clemens of Ann Arbor,

2008
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Michigan, received the 2008 – 2009 Gallagher Health Policy Scholarship. Finally, Drs. Richard A. Santucci and Chandru P. Sundarum were unanimously nominated to represent the Section for the AUA Leadership program. They will begin this program in May 2008.

Despite the volatile swings on Wall Street, the financial picture for the NCS appears solid with a strong positive education fund balance. Under the guidance of our treasurer Dr. Peter Knapp, the performance of our current financial advisor, Merrill Lynch, was reviewed and two alternative advisors were interviewed at the interim meeting. The consensus of the Board was that Merrill Lynch's performance was very good but we will continue to monitor this closely.

The Young Urologist report from Chris Gonzalez, MD suggested that the committee be reduced to one representative from each state. This would result in six committee members as opposed to twelve. This motion was approved. In addition, it was suggested that the chair of the NCS Residents' committee be incorporated into the Young Urologist's committee as a venue to making their voice heard at Board meetings.

The upcoming annual meeting, to be held in Chicago on September 24 – 27, has all the makings of an amazing educational opportunity and spectacular social program. On Wednesday, September 24th, a hands-on GU ultrasound course lead by Dr. Pat Fulgham will be offered. A total of 6 hours of training will result in a certificate of verification of training to be issued to all participants. Only 36 registrants will be able to receive the hands-on course so be sure to register early! In addition, a Research Clearing House symposium led by Tim Ratliff, PhD will be held on September 24th from 1:00 p.m. – 4:00 p.m. for high-level urologic researchers to present some of their work and receive constructive criticisms, which will hopefully lead to important collaborations. Finally, the Young Urologists Symposium will be meeting from 4:15 p.m. – 6:00 p.m. on September 24th and will be featuring a high profile guest speaker.

To date, over 325 high-quality abstracts have been received which will complement the presentations of our outstanding guest speakers, Drs. Gerry Jordan, Elspeth McDougall, Curtis Nickel and Brantley Thrasher. We are graced with numerous national leaders in urology within the Section which will allow high-quality panel discussions and debates on controversial issues in our specialty. Dr. Ananias C. Diokno will be this year's honoree and will give the Honorary Lecture. Finally, our industry support for the upcoming meeting appears very strong and will allow a number of early morning and lunchtime industry-supported educational symposia. New this year will be a history exhibit related to the Civil War and urologic injuries / diseases. A "Job Search" bulletin board will also be in the Exhibition Hall at the Hyatt Regency Chicago Hotel. Finally, the *Canadian Journal of Urology* has offered to publish all accepted abstracts at no cost to our association. The welcoming reception will be on the evening of September 24th. Theme night on September 25th will be at the Adler Planetarium & Astronomy Museum and the Annual Banquet will be held at the hotel on Friday evening, September 26th.

It should be noted that we are accepting nominations for treasurer-elect, to begin in September 2008. The nominee will work closely with Dr. Knapp, our current treasurer, and take over the reins at the conclusion of the 2009 Annual Meeting.

In closing, Lori and I wish you all a wonderful summer and thank you for your continued educational and social support in making our Section the very best! Looking forward to seeing you in Chicago, September 24-27th.

Treasurer's Report

by Peter M. Knapp, Jr., MD



Peter M. Knapp, Jr., MD

The NCS Interim Board Meeting was held in Chicago on February 2, 2008, giving the board a chance to review the finances of 2007 and prepare for the 2008 Annual Meeting.

The 2007 Annual Meeting was a financial success with moderate cash surplus. The Educational Fund demonstrated good financial returns for the first three quarters of 2007. The fourth quarter of 2007, however, had disappointing results with only modest appreciation and earnings. Overall, 2007 was cash

flow positive for the NCS as we look to the new year.

The finance committee continued its work evaluating our current Educational Fund advisors and other alternatives. New financial advisors were surveyed and two were asked to attend the meeting and make a presentation to the finance committee. After careful deliberation, it was decided to continue using our current financial advisor, Merrill Lynch, as the track record for the past ten years with them has been strong. The investment policies of the NCS were also reviewed and maintained without alteration.

The budget for the 2008 Chicago meeting was proposed and approved. Our President, Dr. Jay B. Hollander, and Local Arrangements Chair Couple, Drs. Gary Faerber and Kathleen Cooney, are planning another outstanding meeting in Chicago, September 24 – 27, 2008. I look forward to seeing all of you in Chicago in September. I am certain the social and academic content of the meeting will be outstanding.

From the Representative to the AUA Board of Directors

by Richard A. Memo, MD



Richard A. Memo, MD

I've appreciated the opportunity to be the NCS-AUA representative to the Board of Directors for 2 years. Presented here are my global impressions to date.

The AUA has worked hard to be the voice of urology, the urologist, and the patient. The annual meeting is the AUA on display, but doesn't expose to all the introspection, study, communications, or works of its many arms.

To maintain its worldwide leadership in urologic diseases and representation of urologic surgeons, the AUA has to compete with other national and international organizations. Others are willing to fill the gap anytime the AUA eases its presence in the research, education, or policy areas. For example, medical and radiation oncology groups have their eye on prostate cancer, while gynecology and rehabilitation groups are very visible in leadership of incontinence matters.

The AUA recognizes the importance of quality measures, guidelines, political activities, and collaboration to keep urology at the head of the pack. With this in mind, the practicing urologist attending the national meeting will understand why we cater to international groups, why we have guidelines when the diagnosis and treatment of urologic diseases change on a yearly basis, and why UROPAC is so important.

The latest AUA venture has been the opening of a new Washington, DC, office, not far from the Capitol. We are a small specialty competing for shrinking government healthcare dollars.

The DC office will help achieve the goals of more research dollars to urology, urologic division at NIDDK, quicker response to legislative bills, and effective networking with legislators and their staff.

Urology is envied by even larger groups for their foresight, organization, and resource management. While the practicing urologist is in the trenches of daily care to the patient, the AUA stands in the background to provide support to the urologic community. The picture I've painted seems too rosy, as there are many unresolved problems. The changing landscape of urology requires us to be flexible, wary, and active. I've always believed the basic forums for state or regional matters are the State Society and AUA section. The AUA, our partner at the national level, is open for dialogue and uses its resources to solve hot item issues. It is the responsibility of urologic leaders to address global

issues and sift solutions back down to the individual urologist and urological patient.

I'm available to individuals or state groups to be your agent at the AUA Board of Directors. It is an honor to be your representative.

AACU Government Affairs Mid-Year Overview

by Ian Van Dintner
Director of Health Policy and Government Relations
American Association of Clinical Urologists

2008 Urology Joint Advocacy Conference

AACU, in conjunction with the AUA, held a successful Third Annual Joint Advocacy Conference in Washington, DC, March 30 – April 1, 2008. Featuring engaging speakers, thoughtful discussion, advocacy training, and intense lobbying efforts, this meeting is held every year as part of AACU's public policy mission and outreach to Congress, and provides an opportunity for urologists to address the issues confronting the profession and to speak to lawmakers with a united voice.

Advocates for urology lobbied Capitol Hill for a halt to the scheduled physician payment cuts and lasting reform of the SGR payment formula, a moratorium on the Recovery Audit Contractor (RAC) program, and the need for effective quality improvement measures in urology. Attendees also educated lawmakers on the use of in-office imaging by urologists. Many of these issues or pieces of legislation are at different points in the legislative process and required different action items. By the meeting's end, however, attendees were up-to-speed on their messages to the Hill, and made effective contacts with Congressional staff and legislators. Urologists were successful in informing members of Congress about the unique problems posed to the profession by the draconian 10.6% Medicare payment cuts scheduled to take effect on July 1, 2008, and made great strides to advance the Medicare Recovery Audit Contractor Program Moratorium Act of 2007 (HR 4105), with the legislation picking up numerous co-sponsors after our Hill visits.

The Urology Joint Advocacy Conference has always enjoyed a strong complement of speakers and presenters, and this year was no exception. Acting Administrator of the Centers for Medicare and Medicaid Services (CMS), **Kerry Weems**, provided this year's Russell Carson Memorial Lecture. US Representatives **Jim McCrery**, **Lois Capps**, and **Brian Higgins**, along with Congressional staffers **William Wynne, JD** and **Geoff Gerhardt**, also addressed the audience, providing their views on the issues affecting physicians and the delivery of health care. In addition to presentations by numerous AACU and AUA staff and volunteer advocates, health care policy experts **Julie Kass, JD**, **Howard Rubin, JD**, and **Roy Ramthun** gave the audience briefings on current

political and legal developments affecting urology. Political pundit **Stuart Rothenberg** provided a humorous and insightful overview of the 2008 elections at the annual UROPAC luncheon.

While these speakers provided a welcome inside-the-beltway perspective, attendees heard from their peers as well. Urologists **Pat Fulgham, MD, Dave Penson, MD, and Craig Niederberger, MD** participated in an excellent health policy panel, with discussion of the policy issues impacting health IT, in-office imaging, and pay-for-performance.

On the opening day of the meeting, the AACU presented its 2008 State and Federal Legislative Priorities to the audience, and reinforced our commitment to protecting the financial and entrepreneurial interests of urologists across the country. To review our Legislative Priorities for the current year, please visit <http://www.aacuweb.org>.

Also highlighted were the efforts of the AACU State Society Network, with a panel discussion on state legislative issues affecting urology and the importance of advocacy on the state level, featuring AACU board members **P. Miller Ashman, MD, B. Thomas Brown, MD, Arthur Tarantino, MD, and Jeffrey Frankel, MD**. The session concluded with an insightful discussion with participants about their advocacy experiences in state legislatures, and successful strategies that their state societies have employed to advance urology's agenda.

On the last day of the program, former AACU President, **Jeffrey Kaufman, MD**, gave an overview of the Recovery Audit Program and the problems experienced with the heavy-handed methods that auditors have subjected urologists to in California. His presentation was followed by a greeting from Congresswoman **Lois Capps**, sponsor of the legislation to place a moratorium on the RAC program.

The meeting culminated with our Hill visits and a post-conference luncheon at the Capitol Hill Club. In all, the meeting was very successful in getting urology's message to key lawmakers and in furthering our advocacy goals. Many thanks go to those of you who took time away from your busy practices to join us in Washington, DC.

Planning for the 2009 Urology Joint Advocacy Conference is already underway. Next year's meeting will be held March 29–31, 2009, at the Ritz-Carlton Hotel in Washington. We look forward to seeing you there.

AACU and UROPAC Activities at the AUA Annual Meeting

The AACU Hoffman Lecture and Socioeconomic Forum was held on Tuesday, May 20th at the 2008 AUA Annual Convention at the Orange County Convention Center in Orlando, Florida, and drew an engaged and sizeable audience. **Douglas McKinney, MD**, the current AACU President, convened the session and introduced our 2008 Hoffman lecturer, **David Gratzner, MD**. Dr. Gratzner joined the audience to discuss the future of American health care and the opportunities for lasting change to our health care system. Dr. Gratzner, a psychiatrist, and senior fellow at the Manhattan Institute, most recently authored the book *The Cure: How Capitalism Can Save American Health Care*. Dr. Gratzner's discussion

drew from his expertise in medicine, economics, and politics, in an effort to make sense of how the American health care system has evolved, and provide guidance on how it can be saved from insolvency, in a way that will best serve patients and physicians. His remarks concluded with an extensive question and answer session on a number of current health care issues. AACU thanks Dr. Gratzner for his participation in the program. In 2009, the AACU and AUA will jointly convene a policy

briefing at the AUA annual meeting in Chicago, and we look forward to continuing our successful lecture series in that setting.

The newly updated UROPAC booth made its

debut at this year's 2008 AUA Annual Convention. Urologists visiting our booth were engaged and interested in discussing the policy developments affecting urology and the success of our political action committee.

Orlando was a very successful outing for UROPAC; all tolled, UROPAC staff and volunteer physicians brought in over \$22,000 in contributions for the meeting, and spread the UROPAC name and mission to hundreds of physicians from across the country. Staff at AACU and the AUA will continue to work diligently to expand our fundraising capacity and increase UROPAC's ability to contribute to the political education of urologists, with the ultimate goal of supporting legislators in Washington who are supportive of our interests.

AACU had a display co-located with the UROPAC booth, where we informed attendees about the AACU's mission, solicited membership to the organization, and provided advocacy materials and other information to attendees. In addition, the UROPAC reception held at the Peabody Hotel was well attended and enjoyed by our members. Our thanks go to all of you who participated in our efforts at the meeting, and for your continued support of UROPAC.

Legislative Roundup

Budgetary Landscape

The Democratic majority in Congress announced in late May that they have reached agreement on budget resolution to the tune of 3.3 trillion dollars, and did not accept the Medicare and Medicaid cuts proposed by the White House. The President estimated that his proposal over five years would reduce spending for Medicare by \$178 billion and spending for Medicaid by \$17 billion. The Republicans have countered that Democrats shouldn't have rejected the spending reductions for Medicare and Medicaid proposed by the President, particularly those provisions shifting costs to Medicare beneficiaries with the ability to pay higher premiums, and are critical of the effort to let the President's tax cuts expire in 2010.

It is important to remember that this process is somewhat ceremonial; the real fiscal decisions will be made during appropriations later in the year. However, the budget resolution sets a roadmap for spending at that time, and these negotiations portray the broader fiscal climate that

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the government is currently operating under and the conditions under which key health care decisions will be made this later this year.

SGR and Medicare Payment

As discussed earlier, physician payment was the priority issue for our visits to the Hill at the Urology Joint Advocacy Conference this year, and for that matter, the priority issue for all of organized medicine. Urologists are all too familiar with the impact of decreased physician payment, not only to your practice and your patients' access to care, but also to the future impact on the profession. This becomes an important issue as young people make choices whether or not to pursue the profession of medicine, especially at a time when physicians will be most in need.

The issue is the 10.6% cut to Medicare payment scheduled to take effect on July 1, 2008. At the present time, CMS is currently pressing Congress that checks must be cut by June 16th in anticipation of either the impending July 1st cuts or another payment fix. What is primarily being suggested at this time is that the Medicare bill will come together very quickly on the Senate floor. The good news is that there is continued discussion of an 18-month stay on physician payment cuts, and a modest payment increase. With that said, Democrats and Republicans continue to battle over the pay-fors needed to offset these payment cuts.

These decisions will likely have been made by the time this newsletter has reached readers. Even in the event of an 18-month reprieve, we will continue to need your calls, letters, emails, faxes, and personal communications to Congress, asking them to end the threat of payment cuts that you face every year, that payment increases should be reflective of your real practice costs, and most importantly, for a genuine reform to the flawed SGR formula, once and for all.

Recovery Audit Contractor Program reform

Another issue where urology has been heavily involved — and one where we gained positive ground — is reform of the Recovery Audit Contractor (RAC) program. The RAC program is set to expand, but legislation has been introduced to put a moratorium on the program. The Medicare Recovery Audit Contractor Program Moratorium Act of 2007 (HR 4105) would place a one-year moratorium on the RAC demonstration program, preventing it from beginning in any other states, requiring CMS to detail the number and nature of claims as well as the outcomes of all appeals, and requiring GAO to evaluate the RAC program for efficiency, integrity and compliance. The legislation is concurrently being considered by the House Ways and Means and Energy and Commerce Committees, and currently has 90 co-sponsors, many of which were picked up following contacts by advocates for urology.

Your advocacy makes a difference, and we genuinely appreciate — and need — your continued support. Thank you for your contributions to the profession through your hard work and outreach at the state and federal level!

Exciting Changes at AACU

AACU is very happy to announce that we have hired a new State Affairs Manager. Bonnie Shadid, JD, began work at AACU on Tuesday, May 27. Bonnie will be the principal contact for the AACU State Society Network and will be responsible for our outreach efforts on the state legislative level. Bonnie will also have a key role in the development of our first State Society Network Annual Meeting, to be held September 13 – 14, 2008 in the Chicago area.

Bonnie comes to us from a provider of supplemental accident and health insurance based in the Chicago area, where she served as their senior legislative and regulatory analyst. She was also legislative liaison to the Illinois Municipal Retirement Fund, and spent two years as a staff analyst in the Office of the Illinois Senate Minority Leader. Bonnie holds a Bachelor of Science degree from Western Illinois University, and a law degree from the University of Illinois.

Her combination of work experience in both the public and private sectors bodes well for AACU, and provides a good fit to AACU's focus on the practice and entrepreneurial needs of our members. If you have questions about the State Society Network or legislative developments on the state level, please contact Bonnie at (847) 517-7225 or at statesociety@aacuweb.org.

We welcome your questions and feedback about emerging issues on the state or federal level. Please contact Ian Van Dinther at (847) 517-1050 or at info@aacuweb.org.

Wondering how to send your message of support or concern on a bill mentioned above? Go directly to <http://www.aacuweb.org> and head to our government affairs section, where you can send a message to Congress. Your voice matters!



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Plan to Attend:

NCS 82nd Annual Meeting

September 24 – 27, 2008

Hyatt Regency Chicago

Chicago, IL

For more information, visit: www.ncsuaa.org.

Special Note:

At the interim meeting, the Board of Directors agreed to accept the new pattern of resort style meeting, which will go into effect in 2011.