



Maine Medicine

a quarterly publication of the Maine Medical Association

OCTOBER/NOVEMBER/DECEMBER 2023

Maine Medical Association Mission: **SUPPORT** Maine physicians, **ADVANCE** the quality of medicine in Maine, **PROMOTE** the health of all Maine people.

MMA2023

HEALTH CARE REFORM, COMPARATIVE HEALTH SYSTEMS, AWARDS, AND ELECTIONS HIGHLIGHT 170TH MMA ANNUAL SESSION

Paul Cain, M.D. is inaugurated as the 171st President of the MMA and James Jarvis, M.D. is elected Chair of the MMA Board of Directors.

MMA members and guests enjoyed a full weekend of activities during the MMA's 170th Annual Session at the Holiday Inn by the Bay in Portland during the weekend of September 8-10, 2023.

Program highlights of the meeting included:

- T.R. Reid offered a keynote presentation. The well-known author, lecturer, and documentary filmmaker gave a talk titled, "U.S. Health Insurance – Big Profit, Lousy Coverage." Mr. Reid is best known for his book, "The Healing of America: A Global Quest for Better, Cheaper, and Fairer Health Care."
- Two panels of physicians who practice in the health care systems of other countries moderated by MMA Board member Scott Schiff-Slater, M.D. Panelists included Marie Shieh, M.D. from Australia; Melanie Bechard, M.D. from Canada; Frank Richter, M.D. from Germany; Amanda Pencek Dornfeld, M.D. who practiced in New Zealand; Astrid Thomas, M.D. from Greenland; and Asher Salmon, M.D., Ph.D., M.H.A. from Israel. The six panelists were very articulate and their stories about practicing in other health care systems were most enlightening.

- An update on Maine's medical liability climate and forecast by Frank Lavoie, M.D., M.B.A., President & CEO, and David Herzer, J.D., VP of Claims with Medical Mutual Insurance Company of Maine.
- A poster session presented by the MMA Medical Student Section.
- The MMA General Membership annual business meeting, featured a robust discussion of the recently adopted *Statement on Reform of the U.S. Health Care System*, https://www.mainemed.com/sites/default/files/content/statement_hcr_mma_board_adopted_6_7_23_FINAL.pdf.
- Meetings of the MMA Independent Practice Section, the Medical Student Section, and the Maine Society of Anesthesiologists.
- A panel on the importance of leadership in treating substance use disorders (SUD) in primary care. Judiann Smith, Esq., Executive Director of the Daniel Hanley Center for Health Leadership (now part of the Maine Medical Education Trust) moderated the panel composed of Elisabeth Fowlie Mock, M.D., M.P.H.; Erik Steele, D.O.; and Tess Parks, a representative of the recovery community.

During the Inauguration & Awards Dinner on Saturday evening, Erik Steele, D.O. and Paul Cain, M.D. shared the podium to emcee the program. MMA recognized 16 members of the medical school Class of 1973 on the 50th

Anniversary of their graduation. Past President Jeffrey Barkin, M.D. presented the Mary Floyd Cushman, M.D. Award for Exceptional Humanitarian Service as a Medical Volunteer to one of two recipients, Anthony Ng, M.D. Dr. Ng was recognized for his service in disaster response behavioral health care. Constance Adler, M.D. presented the Cushman Award to the second recipient, Julia McDonald, D.O. Dr. McDonald was recognized for her tireless work for women's reproductive health care rights. Dr. Steele presented Governor Mills with the President's Award for Distinguished Service in recognition of her leadership in improving access to care in Maine through ACA Medicaid expansion; management of the COVID-19 pandemic in our state; and response to the public health scourge of opioid addiction. Governor Mills attended the dinner to receive the award and was accompanied by her sister, Dora, Senior Health Policy Advisor Bethany Beausang, and Director of Opioid Response Gordon Smith.

MMA thanks our Annual Session Committee Chair, Lisa Ryan, D.O. and the Committee for planning the event. We very much appreciate the support of our Partner Sponsors, RBC Wealth Management; Harvard Pilgrim Healthcare; and Norman, Hanson & DeTroy and all of our exhibitors.

We look forward to seeing you for the 171st Annual Session at the Harborside Hotel & Marina in Bar Harbor during the weekend of September 6-8, 2024!



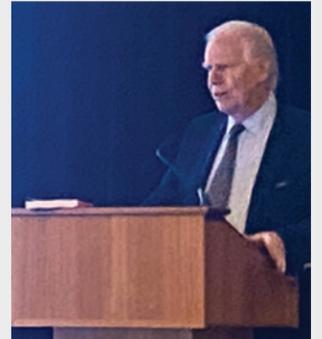
MMA Past Presidents



Robert McAfee, M.D. and Governor Mills



L-R: R. Scott Hanson, M.D., M.P.H., MMA President, Paul Cain, M.D., and wife, Kathy Cain at Student Poster Session



T.R. Reid, Keynote Speaker



MMA President Paul Cain, M.D. and Immediate Past President Erik Steele, D.O.



Annual Session Exhibitors



Tess Parks, MPPM, SUD Panel participant

1000 LIVES CAMPAIGN FOR MAINE: Maine's Clinical Community is Coming Together to Save More Lives from Opioid-Related Death

The Campaign is an initiative of Immediate Past President Erik Steele, D.O. to enhance clinician engagement in the response to the opioid use disorder (OUD) crisis in our state. Dr. Steele announced the Campaign during Governor Mills' 5th Annual Opioid Response Summit on July 20, 2023 and MMA is now developing the Campaign concept and building support among other health care professional organizations in anticipation of a formal Campaign announcement in December and kick-off in January 2024. Modeled on the IHI's 100,000 Lives Campaign, the Campaign goal is to save 1000 lives from OUD-related death during the next five years. A Campaign Overview may be found in the Spotlight Section on the home page of the MMA web site at www.mainemed.com. If you would like to join the Campaign or schedule a briefing in anticipation of joining the Campaign, please contact MMA CEO Andrew MacLean at amaclean@mainemed.com. You may also reach out to Dr. Steele directly by email at erik.steele@martinspoint.org or by phone at 207-356-7953.



Health Care Practitioners from Around the World Session



Cushman Award for Humanitarian Service Recipients: L-R: Anthony Ng, M.D., presented by Jeffrey Barkin, M.D.; and Julia McDonald, D.O., presented by Constance Adler, M.D.



HANLEY CENTER'S FALL COURSE LAUNCHES, SPREAD THE WORD!

By Judiann Smith, Esq., Executive Director, Daniel Hanley Center for Health Leadership

The Daniel Hanley Center for Health Leadership is pleased to share its next leadership development offerings, designed specifically for Advanced Practice Providers and Nurse Managers, respectively:

PELI Foundational for APPs, 6 seats left, starts January 2024: This virtual curriculum includes sessions in:

- Systems awareness
- Strategic thinking
- Management/business skills
- Self-awareness
- Interpersonal skills
- Project Management
- Teamwork and collaboration

Learn more here: <https://www.hanleyleadership.org/leadership-courses/provider-executive-leadership-institute/>

Nursing Leadership Institute, 10 seats left, starts November 29, 2023: This virtual course designed by New England nurse leaders aligns with AONL nurse manager competencies and is perfect for new and emerging nurse leaders to both develop skills and support resilience. Learn more here: <https://www.hanleyleadership.org/nursing-leadership/>

Save the Date, Hanley Center 2023 Annual Networking Event! Monday, December 4th, 5:30pm-8:30pm, Harraseeket Inn, Freeport, Maine. Together, we will explore ways to promote age equity, enhance the quality of care, and ensure that age is never a barrier to accessing the healthcare services people need. Let us collectively embrace age, unite against ageism, and create a society where every individual is valued and celebrated. Registration link at: www.hanleyleadership.org.

And, if that's not enough, check out these scenes from the September launches of our Health Leadership Development Cohort XVII and our Physician & Provider Executive Leadership Institute Advanced Course Cohort VIII!



PRESIDENT'S CORNER

By Paul Cain, M.D., President, Maine Medical Association



At our last Annual Meeting, on September 9th, at the Holiday Inn by the Bay in Portland, I was honored to be elected as President of the Maine Medical Association. I consider this one of the high points of my career, after practicing orthopedics in the Lewiston-Auburn area

for more than 30 years. I am looking forward to the year to come; we have much to do as a medical association. Fortunately, we have an outstanding leadership team on our board, which is comprised of a balance of primary care/specialty service and private practice/hospital employed physicians. We also have an expert administrative staff at the MMA. I believe we are ready to meet the challenges ahead.

If you did not make it to the Annual Meeting, you missed an excellent one. The theme of the meeting was health care reform and we had presentations from physicians throughout the world who described their experiences working with their health care systems. This included the countries of Australia, New Zealand, Canada, Germany, Greenland, and Israel. Each had their pros and cons, and plenty of challenges. Interestingly, despite the individual challenges with each system, the physicians felt good about their jobs and the systems they worked in. The noted author T.R. Reid gave an enlightening talk, "U.S. Health Insurance - Big Profit, Lousy Coverage." \$4.2 trillion is a lot to spend on health care!

In my practice in orthopedics, I learned a lot about the difficulties of surviving in private practice, meeting overhead expenses, and maintaining a staff of well-trained practitioners. More importantly, I saw the challenges of not only paying the bills but meeting the needs of the community. It wasn't enough to develop skills and equipment to treat diseases; we had to ensure that people had access to these treatments at a reasonable cost. Too often, I saw patients not be able to access comprehensive care for treatable problems or go deep into debt to pay for needed care. I am still shocked to think of the health care personnel I saw for orthopedic conditions that were reluctant to initiate a treatment program because of a \$6,000 deductible, even though they had spent the previous 24 hours caring for indigent patients in the ER. We need to do better as a health care system.

Apart from this, I will do my best to fulfill our core mission at the MMA: support physicians, advance the quality of medicine, and promote the health of all Mainers. I look forward to expanding our services through our recently added programs of the Center for Quality Improvement and the Daniel Hanley Center for Health Leadership. We will continue to support physicians through our clinical health and resiliency programs. We will advocate for patients and physicians in Augusta and in Washington, D.C. Most importantly, we need to engage more members of the physician community so we have your support and can use your talents. There is much to be done and I look forward to the challenges. I can be reached at president@mainemed.com or 207-233-7534.

UPDATE ON THE STATE'S RESPONSE TO THE OPIOID DRUG EPIDEMIC

By Gordon H. Smith, J.D., Director of Opioid Response, State of Maine



Fall greetings to my MMA friends. There are some positive signs that the opioid/fentanyl crisis may be easing but we still have lots to do and we very much appreciate that the MMA's 1000 Lives Campaign for Maine will be an important activity which will complement many other

State activities as spelled out in our updated strategic plan. Overdose mortality is improving compared to last year and we hope to sustain and even accelerate this reduction. As the use of opioid litigation settlement funds is critical to our effort, I would like to use the rest of this article to provide a summary of the work and status of the Maine Recovery Council (MRC).

The MRC was established in 2022 to be the recipient of one-half of the funds received by the State through the national opioid litigation settlements. The Council consists of 15 appointees and its legal basis is found in both the Maine State Subdivision Memorandum of Understanding and Agreement Regarding Use of Settlement Funds, dated and signed on January 26, 2022. Administratively, the Council is within the Office of the Attorney General.

Council appointments were made in 2022 by Governor Mills, Attorney General Aaron Frey, the President of the Maine Senate Troy Jackson, the former Speaker of the House Ryan Fecteau, and the 39 subdivisions that will be receiving funds during the duration of the 18-year pay-out.

Continued on page 5

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NOTES FROM THE CEO

By Andrew MacLean, J.D., CEO, Maine Medical Association



The final quarter of the calendar year is a time of transition at MMA.

The organization presented its 170th Annual Session in September with some changes in governance resulting from elections at the General Membership meeting, including the inauguration of Paul Cain, M.D. as the 171st President of the MMA. At the first meeting of the new Board of Directors in early October, members elected James Jarvis, M.D. Chair of the Board of Directors and Henk Goorhuis, M.D. as an at-large member of the Executive Committee. I thank Samuela Manages, M.D. for several years of service as an at-large member of the Executive Committee and congratulate her on completion of an Addiction Medicine Fellowship at MGH in Boston. I look forward to working with Drs. Cain and Jarvis, and the 28 other members of the MMA Board of Directors in the year ahead. The Board held its annual President's Retreat at the Rangeley Inn during the weekend of October 20-22, 2023 when members were joined in discussions about the challenges facing medical associations and other non-profit organizations by representatives of the AMA, the Vermont Medical Society, and the Maine Association of Non-profits, as well as the Maine State Economist, Amanda Rector. At the Retreat, Dr. Cain also facilitated discussions about the MMA's strategic plan and "action priorities" or work

plan for 2024. We will have more to report on the Board's "action priorities" for 2024 in the first quarterly issue in 2024. I acknowledged the service of retiring Board members and welcomed those nominated to join the Board in the last issue, but I want to again thank Dr. Charles Pattavina for his many years of service to MMA in many capacities since his election to the Board in September 2011. Dr. Pattavina retired from the Board after reaching his term limit and officer extensions in September. Although he has returned to his home state of Rhode Island to be near family, Dr. Pattavina remains closely connected to the MMA family. In addition to his acceptance of additional responsibilities of the Executive Committee and serving as the 164th President of the MMA (with an extended term of approximately 18 months), Dr. Pattavina served as Alternate Delegate to the AMA; Chair, CEO Search Committee; Chair, Ad Hoc Committee on Physician-assisted Suicide/Death with Dignity; Vice Chair, 2021 Ad Hoc Committee on Health System Reform; and Member, Nominating Committee. Dr. Pattavina also remains involved with MMA's Maine Independent Clinical Information Service (MICIS). We will all miss his participation in Board activities and will look forward to seeing him at MMA events when he can join us!

Please contact me any time with your comments or suggestions about how we might serve you better – amaclean@mainemed.com; 207-480-4187 Direct; 207-215-7462 Mobile.

MEDICAL PROFESSIONALS HEALTH PROGRAM

By Guy Cousins, LCSW, LADC, CCS, Director, MPHP

WTF

I heard a story recently from a colleague who was helping his grandmother learn her smart phone and she was getting pretty proficient at texting back and forth with her friends. When he shared with his grandmother that he was getting ready to take a trip south, she responded back "WTF." Shocked, he immediately phoned her asking her what she meant by her text. His grandmother responded, "Wow, that's fun." I was told of another older person who kept texting "LOL" thinking it meant "lots of love" instead of "laugh out loud."

It's interesting to hear something as simple as this to help us realize the power and importance of perspective and paradigm when we are communicating with another person. You may be related to someone like the story above or have a patient/provider relationship that may be relatively new. How we engage with another person is critically important to developing a healthy working relationship. Some individuals might suggest that it is the difference between hearing and listening.

What do I mean by that? Hearing to a degree is automatic. It's a passive process that doesn't require

a lot of intellectual energy from the individual who is hearing what is said.

Listening, however, isn't automatic. It is done with intent, effort, and concentration. It will often require a high order of mental skills that may include comprehension, interpretation, evaluation, appreciation, and a coherent response. Our ability to stay in the moment when listening is key to communicating with another person. There are plenty of things that get in the way of us being present in that moment. You're probably aware of what those things are that are specific to you. Your perspective and paradigm (how you see the world) will certainly impact how you take in information that is presented to you. Do you take the time to do what the young man did in the story above? One of the major challenges is that we are often moving so fast and choose not to slow down to be in the moment. Another often heard reason; people don't know how to slow down or do it any differently.

Pace is incredibly important in the active listening process. Slowing down to not only hear, but listen to what others are sharing, especially in our professional roles, is important. It becomes easier when we are doing it in all of the roles that we have in our lives.

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- have graduated from an accredited medical school & completed a residency in Family Practice or Med/Peds,
- have a current State of Maine Medical License and D.E.A.
- have certificate & at least 5 years' experience in the practice of family or internal medicine.
- be board certified

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Information in this newsletter is intended to provide information and guidance, not legal advice. Since exact language and definitions of key terms are critical to understanding the requirements of legislation, rules or laws, we encourage you to read each carefully. Articles submitted to *Maine Medicine* represent the views of the author only and do not necessarily represent MMA policy.

MMA FAMILY MOURNS THE PASSING OF PRISCILLA H. STRED



Priscilla Stred, widow of former MMA Executive Vice President Frank O. Stred, resident of Granite Hill Estates in Hallowell, Maine, died at age 90 on September 26, 2023. Priscilla was well known to members of the MMA staff and she was an occasional visitor to the MMA office (named in honor

of her husband) or MMA events upon her return to the Augusta area following Frank's death. Frank served as MMA EVP from 1978 to September 1993, following Daniel Hanley, M.D. and preceding Gordon Smith. Before coming to MMA, Frank served in positions with General Mills and Central Maine Power Company. Among his accomplishments at MMA, Frank negotiated the purchase of the land on which the Stred and Hanley buildings are located on the MMA campus and he hired Gordon as the MMA's first employed legal counsel and lobbyist. Priscilla and Frank were proud graduates of Bates College where they met.

MMA NECROLOGY

MMA has learned of and mourns the passing of the following physicians since our last publication:

Patrick A. Dowling, M.D. (1941 – 2023)

If you are aware of the passing of a Maine physician, please notify Lisa Martin, Director of Membership, at lmartin@mainemed.com or 207-480-4201.

SPECIALTY SOCIETY MEETINGS

November 10-11, 2023

Maine Neurological Society Annual Meeting
Senator and Augusta Civic Center – Augusta, ME
Contact: Dianna Poulin 207-480-4194 or
dpoulin@mainemed.com

November 11, 2023

Maine GI Day: Update in Gastroenterology
for Primary Care Providers
Harraseeket Inn – Freeport, Maine –
7:00am - 3:00pm
Contact: Noelle Federico 207-480-4195 or
nfederico@mainemed.com

November 15, 2023

Use of Prepayment Review by Managed Care
Payors (ASMAC)
Live Webinar 1:00pm – 2:00pm EST
Contact: Cathryn Stratton 207-592-5725 or
admin@asmacinfo.org

December 7, 2023

Maine Chapter – American College of
Emergency Physicians
Portland Regency Hotel – Portland, ME
4:30pm
Contact: Cathryn Stratton 207-592-5725 or
acepmaine@gmail.com

February 10-11, 2024

Maine Society of Anesthesiologists
Sugarloaf – Carrabassett Valley, Maine
Contact: Lisa Montagna 207-620-4015 or

MMA HAPPENINGS

All meetings take place at the MMA office,
30 Association Drive, Manchester, ME unless
otherwise noted.

2023

DECEMBER 6

5:00pm – 7:00pm
MMA Board of Directors

DECEMBER 14

6:00pm – 8:00pm
MMA/MOA Joint Legislative Committee Meeting

2024

JANUARY 17

11:30am – 1:30pm
MMA Senior Section

5:00pm – 7:00pm
MMA Board of Directors

THANKS TO THE MMA'S RECENT SUSTAINING MEMBERS

Thank you to the following hospitals/practices who
have shown support for the MMA's long-term growth by
renewing at an additional sustaining membership level
since our last publication.

Coastal Women's Healthcare
EyeCare Medical Group
St. Joseph Hospital

FOR YOUR MEETING NEEDS

If you are looking for space to conduct a meeting, MMA
has a nicely renovated high tech Conference Room
available for rent.

Please contact Lisa Martin at lmartin@mainemed.com
or 207-480-4201.



STATE HOUSE NOTES

By Mikenzie Dwyer, Public Health & Government Affairs Associate



MMA and MOA Announce Joint Legislative Committee for 2024; Save the Date for Pre-session Organizational Meeting on

Thursday, December 14, 2023

In pursuit of greater efficiency and stronger physician
advocacy, the Maine Medical Association and the Maine
Osteopathic Association have merged their Legislative
Committees and public policy advocacy efforts, when
aligned, for the Second Regular Session of the 131st
Maine Legislature scheduled to begin on January 3,
2024. MMA's Legislative Committee Co-Chairs are
Kevin Fickenscher, M.D. and Henk Goorhuis, M.D.
MOA's Legislative Committee Chair is Kathryn Brandt,
D.O., MS. MEdL. We are developing our joint member
communications and engagement and legislation
tracking tools and processes, but we anticipate one
weekly Zoom meeting for review of new bills and
updates on State House activity. We aim to make the
joint advocacy effort open, accessible, and inclusive
to all members of each organization who wish to
be involved. We also expect to be joined in these
advocacy efforts by all of the medical specialty
organizations in Maine.



Senator Jill Duson & Sydney Sewall M.D., M.P.H.

Please SAVE THE DATE: The two organizations will
be hosting an organizational meeting for the 2024
legislative session on Thursday, December 14, 2023 from
6:00-8:00 pm in the large conference room at the MMA
office in the Frank O. Stred Building, 30 Association Dr.,
Manchester, Maine. We encourage members to come in
person to network (dinner will be provided), but we will
also have a Zoom option. Please RSVP to Sarah Lepoff
at slepoff@mainemed.com and let us know if you will
attend in person for meal planning.

The MMA advocacy team monitors and influences
hundreds of bills affecting the practice of medicine in
Maine each legislative session. Our Legislative Summary
of the highlights of the First Regular and First Special
Sessions is available on the MMA website: [https://www.](https://www.mainemed.com/sites/default/files/content/2023%20Legislative%20Summary_8.4.pdf)

[mainemed.com/sites/default/files/content/2023%20
Legislative%20Summary_8.4.pdf](https://www.mainemed.com/sites/default/files/content/2023%20Legislative%20Summary_8.4.pdf). Additionally, MMA
Staff are available to provide a Legislative PowerPoint
presentation to groups and specialty societies.

The MMA has been working on several projects in the
Summer and Fall months between the first and second
sessions, including involvement in the Commission
Regarding Foreign-trained Physicians Living in Maine
and the newly formed Office of Affordable Health Care.

Included in MMA's priorities for the Second Session is
L.D. 796, An Act Concerning Prior Authorizations for
Health Care Provider Services, sponsored by physician
legislator Representative Jane Pringle, M.D. The bill seeks
to create a Prior Authorization exception rule inspired by
the Texas "Gold Card" standard and a data reporting and
enforcement provision for health insurance carriers.



Erik Steele, MMA Past-President, D.O. providing testimony to the
Judiciary Committee.

During the legislative session, MMA staff provides
links to bills for review and comment, updates on the
legislature's work, and calls to action through our weekly
electronic newsletter, *Maine Medicine Weekly Update*.
The Legislative Committee will have their weekly
Zoom call to review new bills and provide updates on
legislative activity every Thursday evening, from 6pm
to 7pm during the session. Any interested member or
staff person is welcome to participate. Please refer to
the Legislative Committee's rules of conduct [here](http://legislature.maine.gov/) and
watch for the bills to review in the weekly newsletter!

To find more information about the MMA's advocacy
activities, visit the Advocacy section of the MMA
website, <https://www.mainemed.com/advocacy>. You
will find more information about the Maine Legislature,
including schedules, committee assignments, legislator
contact information, audio coverage of legislative work,
and newly enacted laws on the web at: [http://legislature.
maine.gov/](http://legislature.maine.gov/).

The MMA welcomes your participation in our legislative
advocacy activities. For more information, please
contact Andrew MacLean, Chief Executive Officer, at
amaclean@mainemed.com or Mikenzie Dwyer, Public
Health and Government Affairs Manager, at [mdwyer@
mainemed.com](mailto:mdwyer@mainemed.com).



Evidence-Based Prescribing Education
Fall/Winter 2023 Topics
Group Education Outreach & Academic Detailing

Schedule a presentation at your medical practice, hospital or conference:

- Diabetes Update Focusing on GLP-1s and SGLT-2s
- Using Data to Improve Opioid Prescribing
- Simplified Treatment of Hepatitis C in Primary Care Settings
- Adult & Pediatric Asthma: Evidence-based Prescribing Update

Meet with an Academic Detailer:

- Diabetes Update Focusing on GLP-1s and SGLT-2s
- Level 2 Simplified Treatment of Hepatitis C in Primary Care Settings
- Level 2 Adult & Pediatric Asthma: Evidence-based Prescribing Update
- Opioid prescribing topics available
- RSV Prevention

www.micismaine.org

MICIS is a program of the Maine Medical Association.

VISIT THE MMA WEBSITE: www.mainemed.com

By Kathryn Bourgoin, M.D., National Security Committee, PSR Maine



Nuclear Weapons

When I was 7 years old, I was very scared of nuclear weapons. In school we were taught to “duck and cover,” lying face down under our desks and covering the backs of our heads with our hands in case of nuclear

attack. We were given plans to build a bomb shelter in our basements.

Our generation grew up with this fear, and the risk of a nuclear war is not gone. The Bulletin of Atomic Scientists moved the hands of the Doomsday Clock to 90 seconds before midnight this year, the closest to nuclear war that we have ever been. They set the clock there because of Russia’s threats to use nuclear weapons in Ukraine. They urged leaders to address climate change and nuclear weapons to secure a “peaceful and livable planet.” The right not to be killed by a nuclear weapon is a human right. As a doctor I believe that although climate change is a grave long-term threat, nuclear weapons are the greatest immediate threat to human health that we face.

The U.S. still has a total of 5224 nuclear weapons, and Russia has 5889. Nuclear weapons are the only weapons of mass destruction that are not banned under international law. President Reagan said that “a nuclear war cannot be won and must never be fought,” views that President Biden recently echoed.

What prevents the U.S. from reducing nuclear weapons? Nuclear weapons contractors spent \$18 million in the 2012 elections. They also employed 95 paid lobbyists. Imagine if groups against nuclear weapons had 95 paid

Congressional lobbyists! In contrast, 73% of the public favors eliminating all nuclear weapons. This shows that we need public funding of federal elections, so voters can regain control of the country.

Maine Physicians for Social Responsibility, the MMA and four other state health associations endorse the Back from the Brink Resolution, five actions the U.S. Government should take to prevent nuclear war.

1. Start arms control talks with all countries that have nuclear weapons to agree to reduce and eliminate their nuclear weapons.
2. Renounce the first use of nuclear weapons.
3. End the sole power of any U.S. President to launch a nuclear attack.
4. Take U.S. nuclear weapons off hair-trigger alert.
5. Cancel replacing all our nuclear weapons with new weapons.

If you are interested in passing this resolution in your community, or joining PSR, please contact info@psrmaine.org. Many of us in PSR are health professionals, but anyone who wants to support our work can join.

Please urge Representative Golden to support H.Res.77, “Embracing the goals of the Treaty on the Prohibition of Nuclear Weapons.” Representative Pingree has already signed on.

While watching *Oppenheimer*, I cried when they tested the bomb that killed 200,000 people in Hiroshima and Nagasaki. The future of our children depends on our actions today. Let us never again have to tell our children they must hide in fear from the mass murder that is nuclear war.

Continued from page 2...Update on the Response to the Opioid Drug Epidemic

Council Members serve two-year terms with a limit of two terms. Patricia Kimball is the current Chair. The Council recently established subcommittees on Governance, Finance and Grants and Programs. Staffing is currently provided by the Office of the Attorney General and the Council is currently in the process of contracting for additional administrative and consulting assistance.

The core functions of the Council include doing a needs assessment, facilitating collaboration among State, subdivisions and stakeholders and distributing grants from the Maine Recovery Fund through a process that is both transparent and compliant with standard procurement practices. Settlement proceeds are received by the Fund every year for 18 years and as of October 1, 2023, there is approximately \$17 million available to spend.

The Council meets every month and all the meetings of the Council are open to the public. In the last year,

the Council has completed some critical administrative/organizational tasks such as establishing bylaws and a conflict of interest policy. In the future, the Council will be receiving public input into its spending plan with an expectation of some funds being available no later than early 2024. The Council is required to develop a centralized public dashboard or other repository for publication of expenditure data and may require outcome related data from any entity that receives funds from the Council. All the spending must be consistent with the opioid remediation uses set forth in schedules A and B of the Memorandum of Understanding filed in Maine Superior Court.

More information on the Council and its work can be found on the following websites:
www.maine.gov/ag/recovery-council
www.maine.gov/ag/opioids

Communications can be sent to the Council at info.recoverycouncil@maine.gov.



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The MMA-CQI, with funding support from the Maine Board of Licensure in Medicine (BOLIM), developed and maintains online on-demand learning modules available for CME credit at:

www.qclearninglab.org



MMA, Center for Quality Improvement Launches Six New Learning Modules

MMA-CQI has launched six new learning modules on its Learning Lab. The modules offer physicians, health care practitioners, professionals, and practice teams the opportunity to earn CME credits.

The Learning Lab is free and easy to use: qclearninglab.org.



Maine Board of Licensure in Medicine Modules

These modules have been approved for 1 AMA PRA Category 1 Credit(s)[™]. Funding for these modules is provided by the Board of Licensure in Medicine.

Chronic Pain, Opioids, and Suicide

This module examines the trends and demographics for suicide in the U.S., the role that prescription and illicit opioids and Opioid Use Disorder (OUD) have played in those trends, the risk factors for suicidality in the context of chronic pain and in OUD, and the impact of opioid de-prescribing on suicidality and on population health.

System Level Care: Taking Care of the Medical Professional’s Behavioral Health and Wellness

This module will enhance your understanding of mental health awareness and support as it relates to medical professionals. Screening tools, obstacles and barriers, risk and protective factors, safety planning, and resources for you to reach out to for help will be discussed. Gain valuable insights into the 2022 Healthcare Provider Protection Act and its implications for Maine.

Gender Identity and Respectfulness in the Medical Practice

Attendees will learn the skills they need to be respectful of gender identity in the medical practice, which both improves patient experience and patient health outcomes. While transgender people have always existed, it is more recent that many trans people have been able to be out and access medical care as themselves. Because of this, many health care staff are unsure of how to navigate gender identity and respectfulness in medical practice.

Perinatal Respectful Care Learning Modules

Farrah Sheehan, MSN, RN, IBCLC, CCBE (BFW), is the presenter for these modules. These modules have been approved for 1.5 AMA PRA Category 1 Credit(s)[™]. Funding for these modules is provided by the Maine Department of Health and Human Services, HRSA Grant # U7AMC46840-01-01.

Transforming Birth in Our Culture by Understanding, Preventing and Healing Obstetric and Birth Trauma

This module explores the complex narratives of birth in our culture and how individual and system wide efforts can save lives, improve health outcomes, and change the way people feel about their birth experience.

Trauma-Informed and Trauma-Responsive Care for Perinatal Professionals

Participants will expand their understanding of the prevalence and impact of trauma on both patients and health care professionals. They will learn how trauma-responsive care is being integrated into perinatal quality improvement initiatives and how to be trauma-responsive in individual practice and organizations.

Solution-Focused Communication and Self-Reflective Practice to Improve Quality of Care and Mitigate Compassion Fatigue

This module explores how developing a solution focused mindset and skills can improve the quality of care professionals provide and the quality of their experience as professionals. Learn what compassion is, where it comes from, how to develop and express it, and what prevents us from feeling or expressing compassion in our work environments.

FMI: mmacqi@mainemed.com.

COMPLIANCE NOTE:

Notification Requirements Pursuant to Board of Licensure in Medicine Rule Chapter 1, Rules Regarding Physicians, Section 12, Notification Requirements for Physicians

MMA draws the attention of members who are licensees of the Board of Licensure in Medicine to certain time sensitive notification requirements contained in Section 12 of the Board's Rule Chapter 1. Some members with matters before the Board have had their situation complicated further by failing to meet these obligations. Note for example, the requirement to notify the Board of an *arrest for any crime*, not a final resolution of a charge. Members who are licensees of the Board of Osteopathic Licensure are not subject to a comparable provision. You can find the laws relating to the Board of Licensure in Medicine on the web at: <https://www.maine.gov/md/laws-rules-updates>. You also can find the laws relating to the Board of Osteopathic Licensure on the web at: <https://www.maine.gov/osteo/rules-statutes>.

If you have questions about the obligations under Section 12, please contact Andrew MacLean, J.D. at amaclean@mainemed.com.

SECTION 12. NOTIFICATION REQUIREMENTS FOR PHYSICIANS

1. Change of Contact Information

A physician licensed with this Board shall notify the Board in writing within ten (10) calendar days of any change in work or home address, e-mail, phone, or other contact information.

2. Criminal Arrest/Summons/Indictment/Conviction

A physician licensed by the Board shall notify the Board in writing within ten (10) calendar days of being arrested, summonsed, charged, indicted or convicted of any crime.

3. Changes in Status of Employment or Hospital Privileges

A physician licensed by the Board shall notify the Board in writing within ten (10) calendar days of termination of employment, or any limitation, restriction, probation, suspension, revocation or termination of hospital privileges.

4. Change in Status of Employment of Physicians Issued Emergency 100-Day, Temporary, Youth Camp License, or Educational Certificates

A physician issued an Emergency 100-Day license, Temporary License, Youth Camp License, or Educational Certificate shall notify the Board in writing within ten (10) calendar days of termination of employment with the specific practice location for which the licensed was issued.

5. Disciplinary Action

A physician licensed by the Board shall notify the Board in writing within ten (10) calendar days of disciplinary action taken by any licensing authority including, but not limited to, warning, reprimand, fine, suspension, revocation, restriction in practice, or probation.

6. Material Change

A physician licensed by the Board shall notify the Board in writing within ten (10) calendar days of any material change in qualifications or the information and responses provided to the Board in connection with the physician's most recent application submitted to the Board.

7. Termination of Plan of Supervision

A primary supervising physician licensed by the Board shall notify the Board in writing within ten (10) calendar days regarding the termination of any plan of supervision or supervisory relationship with a physician assistant and the basis for the termination of the plan of supervision or supervisory relationship with the physician assistant.

8. Change of Name

A physician licensed by the Board shall notify the Board in writing within thirty (30) calendar days regarding any legal change in his/her name and provide the Board with a copy of the pertinent legal document (e.g. marriage certificate or court order).

MAINE DHHS UPDATE

By Adrienne W. Carmack M.D., Medical Director Office Child & Family Services & Lisa M. Letourneau, M.D., M.P.H., DHHS Senior Advisor for Delivery System Change



Adrienne W. Carmack M.D.



Lisa M. Letourneau, M.D., M.P.H.

Strengthening Behavioral Health Services for Maine Children

While the federal COVID-19 public health emergency is now over, many of its effects persist, including a heightened and well-recognized need for Children's Behavioral Health (CBH) services. The COVID-19 pandemic significantly changed the landscape, escalating stress, anxiety, and substance use disorders (SUDs) for children, youth, and families. The pandemic also profoundly affected the CBH workforce and how people get services. In response, Governor Mills included nearly \$20 million in her next biennial budget to accelerate and intensify implementation of Maine's comprehensive CBH plan. These funds will allow the Office of Child and Family Services (OCFS) to expand on its 2019 Children's Behavioral Health Services Plan and intensify its efforts to improve the accessibility, availability, quality, and consistency of CBH services through the following initiatives:

Improving Accessibility:

- Create a single point of access for CBH services for youth with higher level service needs.
- Launch an ongoing public education campaign aimed at families about mental health, the value of mental health care, and the availability of care for children and youth.

Improving Availability of Services: Fill gaps in Maine's current array of CBH services by adding the following CBH services:

- Multi-dimensional Family Therapy, an evidence-based developmentally targeted youth treatment that addresses substance use and mental health

concerns with a family-centered approach.

- Therapeutic Foster Care, an evidence-based model to address the needs of system-involved youth before the need for residential treatment or incarceration arises.
- High-Fidelity Wraparound provides a team-based, collaborative process to deliver intensive services coupled with provider training and other supports to support youth with complex behavioral health needs and their families.

Improving Quality and Consistency of Services and the System

- Expand the workforce for CBH services by continuing to support Behavioral Health Professional (BHP) certification at no cost to providers and developing a marketing campaign to build awareness of the role and career opportunities in this field, especially for BHP positions serving children and youth.
- OCFS has also continued to leverage federal funding to train the CBH workforce in additional evidence-based models such as the Positive Parenting Program (Triple P), Trauma-Focused Cognitive Behavioral Therapy, Research Units in Behavioral Intervention, and the Modular Approach to Therapy for Children with Anxiety, Depression, Trauma, or Conduct challenges.

This array of strategies and funding represents a comprehensive response to the current demand for CBH services and will strengthen the CBH delivery system for years to come.

OCFS has also applied for and received federal funding to continue the Maine Pediatric and Behavioral Health Partnership Program, which provides psychiatric consultation services and educational resources to primary care providers and their teams. To learn more about this program go to www.bhpartnersforme.org.

For more information on Maine's comprehensive CBH plan, refer to the Children's Behavioral Health website: <https://www.maine.gov/dhhs/ocfs/data-reports-initiatives/system-improvements-initiatives/childrens-behavioral-health-evaluation-improvement> or contact Dr. Adrienne Carmack at adrienne.w.carmack@maine.gov.

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Strategies for Effective Communication

While communicating effectively leads to improved patient relations and improved patient outcomes, there are times when providers and staff encounter difficult conversations with patients. Studies have shown that providers rate as many as 15–30% of their patient encounters as “difficult.”

Factors such as personality disorders, multiple and poorly defined symptoms, non-adherence to medical advice, and self-destructive behaviors can lead to providers perceiving patients as difficult. Providers should consider screening these patients for underlying psychological conditions, such as depression, anxiety, and previous or current exposure to abuse, which may be contributing factors to the difficult encounters.

Some studies have suggested that providers are more likely to misdiagnose “difficult patients,” in comparison with patients who engage in neutral or non-disruptive behaviors, regardless of the complexity of the care.

Patients frustrated with insurance coverage, high deductibles, long wait times, and other issues may take out their frustrations on office staff. Staff not only need to know the technical aspects of their job but also how to approach patients in a manner that helps build a

relationship where they can work together to address these issues.

Strong communication skills are necessary to effectively deal with difficult patient encounters. Providers and staff members who feel increasing pressure to do more with fewer resources may wonder how they can find time in their busy schedules to improve their communication skills. Studies have shown that effective provider/patient communications increase patient treatment adherence, which can lead to improved outcomes and may reduce the time necessary to deal with these issues.

Identifying how attitudes and behaviors contribute to conflict in the workplace is a good first step in improving communication skills. Common factors such as negative bias towards specific health conditions, poor communication skills, and situational stressors may lead to communication breakdowns. Being aware of factors that affect your ability to communicate effectively is an important first step in overcoming these obstacles.

An article published in American Family Physicians states, “Empathy requires understanding the patient’s circumstances and perspective. Empathic listening skills and a non-judgmental, caring attitude are necessary to

improve patient trust and adherence to treatment. This approach may decrease unnecessary diagnostic testing and reduce the risk of malpractice accusations.”¹ Employing empathy can help diffuse difficult patient encounters. Another article addressing difficult patient encounters notes that “empathetic listening skills and a nonjudgmental, caring attitude are necessary to improve patient trust and adherence to treatment.”²

Once an organization identifies a communication model they want to use, it is important that staff be given the opportunity to practice their skills.

Resources

^{1, 2}. Managing Difficult Encounters: Understanding Physician, Patient, and Situational Factors Rosemarie Cannarella Lorenzetti, MD, MPH; et al American Family Physician Web site March 15, 2013 Volume 87, Number 6

Medical Mutual Insurance Company of Maine’s “Practice Tips” are offered as reference information only and are not intended to establish practice standards or serve as legal advice. MMIC recommends you obtain a legal opinion from a qualified attorney for any specific application to your practice.



20TH ANNUAL MMA/MMET GOLF TOURNAMENT SUPPORTS MEDICAL EDUCATION IN MAINE

Thank you to our sponsors and congratulations to our winners!

The 20th Annual MMA Golf Tournament benefiting the Scholarship Fund of the Maine Medical Education Trust (MMET) took place at the Augusta Country Club in Manchester on Monday, October 2, 2023, postponed from July because of heavy rain. “We are very grateful for the support of our team sponsors, players, and tournament supporters for this event to raise scholarship money to assist medical students from Maine achieve a medical education,” said Lisa Ryan, D.O., tournament Chair.

Our winners include:

- Gross 1st Place: Jonathan Brogan, Esq., John Doyle, Sean Anderson, CEO, John Gross
- Gross 2nd Place: Chris Perry, David Trusdell, Rob Laroche, Jeff Doucette
- Gross 3rd Place: Andy Dionne, M.D., Jason Brown, M.D., Tim Borelli, M.D., Derrick Tooth, M.D.
- Net 1st Place: Jeff Sedlack, M.D., Tony Fournier, Steve Conley, Ryan Conley
- Net 2nd Place: R. Scott Hanson, M.D., M.P.H., Jill Robertson Olausson, Jeff Hutchins, Cathy Lyden
- Net 3rd Place: Roger Poitras, DHA, CEO, Wai Leung, CIO, Tim McAteer, M.D., Ron Reilly, M.D.
- Men’s Longest Drive: Ryan Conley
- Women’s Longest Drive: Jill Robertson Olausson
- Men’s Closest to the Pin Hole #2: Simon Hebert

Our tournament sponsors included: (listed in alphabetical order)

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Thank you to all for your continued support!



L-R: Krishna Bhatta, M.D., Michael Genetti, Brian Jumper, M.D., Lawrence Perry



L-R: Gordon Smith, J.D., Janet Smith, Katharine Ayer, Andrew MacLean, J.D., MMA CEO



L-R: Jeff Hutchins, Cathy Lyden, Jill Robertson Olausson, R. Scott Hanson, M.D., M.P.H.

MMA’S REVISED STATEMENT ON REFORM OF THE U.S. HEALTH CARE SYSTEM – NEXT STEPS

The MMA Board of Directors adopted this Statement (On the Home Page Spotlight at www.mainemed.com) on June 7, 2023 after a lengthy process of soliciting member input and developing consensus in our diverse membership of more than 4000 physicians in all parts of Maine, in different medical specialties and practice settings, and from different age cohorts and ethnic and cultural backgrounds. This was no easy task. The MMA has had standing policy in support of universal coverage and access to health care since the early 2000s, so this Statement documents the evolution of physician attitudes about the U.S. health care system and clearly demonstrates widespread frustration among our members with the status quo. The most recent health care reform initiative began in early 2021 when the Board of Directors established an Ad Hoc Committee on Health System Reform to review and revise a previous Statement adopted in 2017. The Ad Hoc Committee undertook a 2-year process of seeking the opinions of MMA members through surveys, “listening sessions” in various regions of our state, and meetings with group practice members. The Ad Hoc Committee developed an initial revised Statement which was distributed for comment, followed by a second draft which became a recommended revised Statement to the Board of Directors. The Board, as the governing and policymaking body of the MMA, reviewed, debated, and further refined the Statement over several months before it was finally adopted on June 7, 2023. This is a “consensus document” which in the true nature of compromise represents many Board members’ and individual MMA members’ “best second choice.” At its last regular meeting, the MMA Board of Directors established an Ad Hoc Steering Committee on Health System Reform that will advise the Board on ways to further engage members and advocacy partners in the health care reform debate and how the MMA might pursue the principles and goals of the Statement through policy action at the state and national levels. The members of this operational committee include:

- Paul Cain, M.D., MMA President
- Maroulla Gleaton, M.D., MMA Board Member, AMA Delegate, and Chair of the Ad Hoc Committee on Health System Reform
- Henk Goorhuis, M.D., MMA Executive Committee Member and Co-Chair, Legislative Committee
- Scott Schiff-Slater, M.D., MMA Board Member
- Nate Meyer, M.D., MMA Board Member
- Lani Graham, M.D., M.P.H., MMA Public Health Committee Member
- The Honorable Patricia Hymanson, M.D., MMA Member and former Member, Maine House of Representatives



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The Bourget Family:
(l to r) Bob, Lori,
Robyn and Jill (on
video conference
from Florida)

Because of genetic testing, they're all breast cancer survivors.

After two breast cancer diagnoses in the family, including Patty, the matriarch, Robyn, Lori, Jill and Bob Bourget all got genetic testing. Surprisingly, Bob—not Patty—turned out to be the carrier of the offending BRCA II gene. Sadly, Patty lost her battle in 2013.

Three more individual diagnoses later and the rest are all breast cancer survivors because of early detection and a prophylactic surgery.

Genetic testing saves lives.

If you have a patient with a family history of cancer, encourage them to visit NewEnglandCancerSpecialists.org/High-Risk or scan the QR code at right to learn more. It could very well save their life.

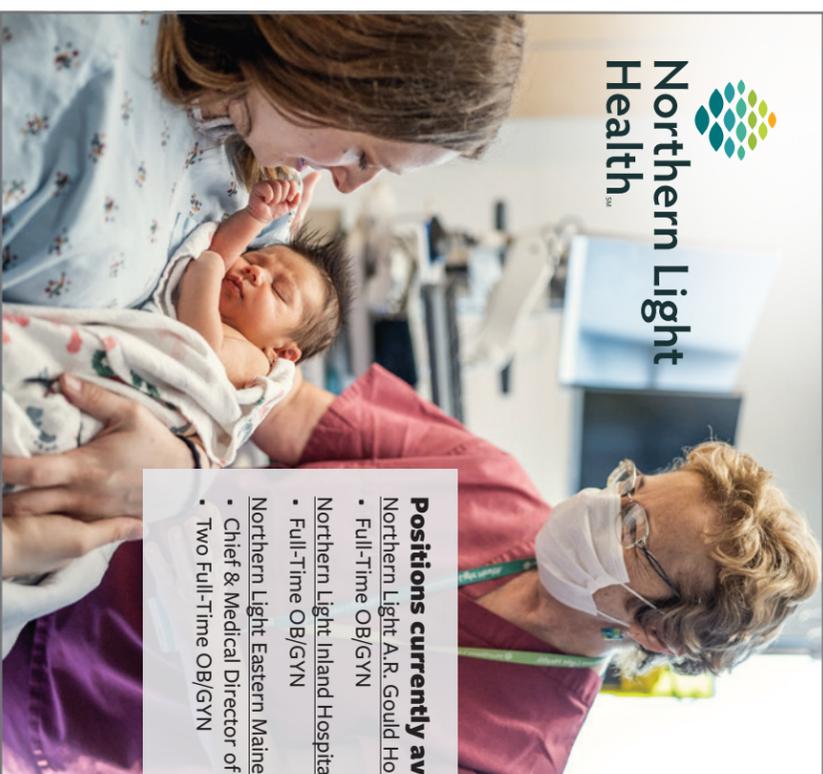


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