

# North Dakota Physician

WINTER 2022

**Joshua Ranum, MD**  
122<sup>nd</sup> NDMA President



 NDMA

The mission of the North Dakota Medical Association is to advocate for North Dakota's physicians, to advance the health, and promote the well-being of the people of North Dakota.

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NDMA ND Physician welcomes submission of guest columns, articles, photography, and art. NDMA reserves the right to edit or reject submissions. All contributions will be returned upon request.

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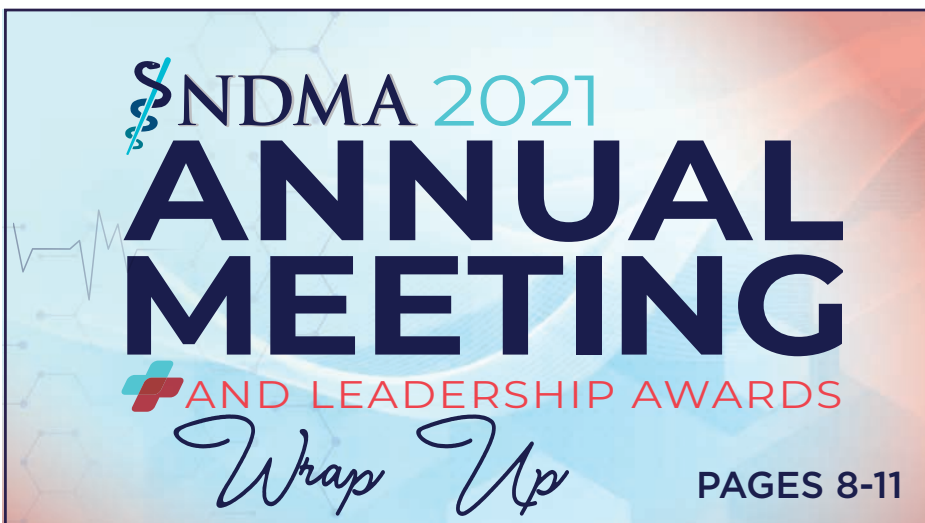
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**Joshua Ranum, MD**  
NDMA PRESIDENT

# Preparing for the Future: The Importance of Membership

I am honored to have been chosen as the president of the NDMA. To be selected by one's medical colleagues is especially humbling. Congratulations to outgoing president Dr. Misty Anderson on successfully leading our organization during the completely disruptive pandemic. I'm also thankful for the outstanding NDMA staff – Courtney, Leann, and Donna. They do the heavy lifting day after day advocating for and supporting the physicians of North Dakota.

The NDMA has been busy in the last year with two legislative sessions in addition to the ongoing battle against COVID. Many NDMA members, notably Dr. Joan Connell, participate in the Physicians' Advisory Group and in various advisory capacities within their organizations and for the state.

The biennial session is always full of healthcare focused bills, physician testimony, and meetings with legislators and this year was even busier than expected. North Dakota is no exception to the polarization rampant at the national level, although the polarization in North Dakota tends to be within the dominant party. Several very concerning bills were brought forth during the regular and special sessions. A friend of mine quipped, "It's like someone turned a Facebook page into a series of bills." The NDMA and our physician colleagues rallied and most of the damage was

averted. However, the session reminded me that although there are a number of decent, thoughtful legislators in both chambers, an increasing number of them are either practicing "take no prisoners" politics or being influenced by the vocal, angry Facebook mob. The Legislature overriding Governor Burgum's veto on the mask mandate bill is a reminder of what's at stake.

During the next session, we will see bills aimed at restricting public health measures, the return of a naturopath prescribing bill, more offerings in the same vein as vaccine/mask bans, ivermectin prescribing, and other attempts at legislators practicing medicine.

The near misses with the legislative sessions highlighted the importance of advocacy. Not by a few – we need more. The loudest voices are able to influence legislators, regardless of the validity of the message. All of the legislators that we've invited to our meetings speak to the power of an ongoing relationship. A personal relationship still cuts through much of the noise. The time to cultivate those relationships is now. We talk about herd immunity when discussing public health and it got me thinking about the concept of "herd advocacy." Just like vaccination, we don't get the full benefits if only a few are advocating for physicians and the practice of medicine. Don't be an "unvaccinated" member of the herd. Find a way to get involved.



Dr. Joshua Ranum and wife Dr. Carrie Ann Ranum became part of West River Health Services in Hettinger in 2012. Joshua specializes in internal medicine and wife Carrie in pediatric care. Today, the Ranums have three children and are deeply embedded into the community by participating in many volunteer efforts and serving on local committees. Josh and wife Carrie are pictured here along with their three daughters.





**Courtney M. Koebele, JD**  
NDMA EXECUTIVE DIRECTOR

# Navigating Policy Through the Special Session

**Y**ou may recall the Godfather III movie when Al Pacino, a mafia boss trying to go legitimate, chooses this quote to depict his situation: *just when I thought I was out, they pull you back in*. These words perfectly encapsulate the feeling of meeting the demands of a special session so soon after the conclusion of the 2021 regular session.

Through the regular session, NDMA fought a tough battle defending physician practices, patient care, and public health challenges. To name a few, topics included Medicaid expansion reduction, naturopath prescribing, and telemedicine payment parity.

The regular session closed just four days short of the 80-day maximum set by the North Dakota Constitution. This strategic move reserved four days to approve new legislative district boundaries. Then, to make things more complicated, funds from the American Rescue Plan Act (ARPA) required legislative attention, requiring further legislative action.

## PREPARING FOR THE LEGISLATURE

The question was whether Governor Burgum would call a special session to extend the four-day limit for legislators to conduct business. As legislators waited for the governor's decision, the legislature moved forward with plans to address both topics – redistricting and the ARPA fund distribution – at a session slated to begin on November 8.

On October 29, Governor Burgum held a

joint press conference with the House and Senate Majority leaders and announced an executive order calling for a special session. This cleared the way for the legislature to continue to save the four days and take the time necessary to address redistricting and ARPA funding.

## SPECIAL SESSION SPURS 25 BILLS TO BE ADDRESSED

Unfortunately, since the special session allowed as much time as necessary to meet, this opened a Pandora's box where legislators were now given time to file delayed bills on any topic. In total, 25 bills were filed by legislators addressing many controversial issues, including critical race theory, tax relief, and our favorite: vaccination policy.

The delayed bills committees from each house vetted the bills filed on the outside topics. The House filed 16 bills, and the Senate filed nine. During the hearing process, the Senate approved one bill to move forward; the House approved seven. Of those approved in the House, three bills dealt with COVID-19 vaccine issues. Of those, two bills were passed and signed by the governor.

The special session consisted of the joint technical corrections committee, appropriations, and redistricting. The delayed bills went through the joint technical corrections, co-chaired by Senator Judy Lee and Representative Robin Weisz, and only received one hearing.

When it came to the appropriations and redistricting committees, these committees already began meeting weeks leading up to the session, so the bills in those committees only needed final review and approval to be finalized. However, since the delayed bills were new policy items, and despite many legislators and stakeholder's concerns, the bills would move forward and be debated through the special session.

NDMA worked along with many of our partners, including the North Dakota Immunization Coalition, several North Dakota Public Health directors, the North Dakota Hospital Association, Essentia Health and Sanford Health to bring an organized front for public health and to keep North Dakotans healthy.

## NEW BILLS THAT ARE NOW LAW

The first bill that passed addressed vaccine mandates and documentation requirements:

- The state department of health may not create, administer, provide, or contract for electronic machine-readable code or a vaccine passport (QR code).
- A state entity may not require documentation of COVID-19 vaccination status before providing access to property, funds, or services. EXEMPTION: Does not apply to a correctional facility, state hospital, or public health unit.
- Private business may not require documentation of COVID-19

vaccination status for access.

EXEMPTION: Does not apply to healthcare entity, long term care, or non-profit that does not sell a product or service like Honor Flight.

- If a business, including a health care entity, requires a COVID-19 vaccination for employment, it must allow antibody test exemption (6 months), periodic testing option, medical exemption, and religious, philosophical, or moral belief exemptions.
- If under a federal mandate—Centers for Medicaid and Medicare (CMS), Occupational Safety and Health Administration (OSHA), or federal contractor—the law does not apply. Much discussion was had about the lawsuits, and if any of these requirements were stayed – then the mandate exemptions must be followed.

Although the bill technically allows for employer vaccine mandates, the exemptions swallow the rule in that philosophical and moral exemptions can be taken by anyone for any reason. Under the state of the law right now, any employer wanting a vaccine mandate must offer all the exemptions required by North Dakota law, unless covered by the federal regulations.

The other bill that passed originally required pharmacists and hospitals to dispense ivermectin to treat COVID, disregarding any professional discretion. The bill further limited the North Dakota Board of Medicine's authority to discipline licensees regarding off-label use of any drug for COVID-19. The ND Board of Medicine and the ND Board of Pharmacy strongly opposed the bill. The bill was amended to prevent any disciplinary action against a nurse practitioner, physician, physician assistant, or pharmacist based solely upon prescribing or dispensing ivermectin for COVID treatment.

The incredible timeline in which the policies were considered, amended, and passed by both Houses was astounding. The timeline of the bills passing through committee, passing through the House and Senate, then signed by the governor was less than 24 hours. In a regular

session, there are weeks between two hearings – one in the Senate and one in the House. This timing is important, because it allows issues to be thoroughly vetted, stakeholders to weigh in, and any unintended consequences of bills eliminated.

#### Other bills of interest that passed during the special session:

#### AMERICAN RECOVERY & PROTECTION ACT (ARPA) FUNDING

This was arguably the biggest reason for the legislature to meet. Each state was given \$1.25 billion in ARPA funds. There were requirements for the funds including emphasis on infrastructure and one-time spending. In North Dakota, \$944,634,705 of ARPA funds were allocated and \$62,867,810 was left for the 2023 legislative session to allocate. Among the allocations, the following related to healthcare:

- Nursing Homes: \$25M to be divided between long-term care, basic care and assisted living
- Broadband: \$45M
- Veterans' Affairs Fargo Medical Center: \$500,000 for construction, \$147,000 for transportation
- North Dakota Department of Health: \$15M for state lab improvements
- UND School of Medicine and Health Sciences: \$2.1M for hyperbaric oxygen therapy
- North Dakota State Hospital: \$350,000 for nursing staff retention
- Pierce County Hospital Project: \$1M
- North Dakota Department of Human Services: \$4M for community-based behavioral health, \$3M for substance use disorder treatment voucher system grants, \$1.5M for alternatives to abortion services, \$17M to the ND Department of Human Services to expand childcare services and \$2.5M for developmental disability providers.
- Free Through Recovery (North Dakota Department of Corrections and Rehabilitation): \$3M

#### MEDICAID POST-PARTUM

An important NDMA issue, and a subject of our recent policy forum, extending Medicaid to 12 months post-partum, was included in one of the appropriations bills passed. A total of \$600,000 spending authority was granted to the North Dakota Department of Human Services to pave the way for coverage in 2022.

#### REDISTRICTING

The other big issue that required the special session was redistricting. The redistricting committee met over several months, calculating the new legislative districts based on the increased population for the state. Some rural districts were eliminated, and new districts created to match the population growth.

The re-districting map that was adopted by the legislature will require some new elections and that will result in new legislators. In addition, the Senate majority and minority leaders, and the House majority leader, along with the secretary of state and attorney general, and other long-term legislators. State agency leadership and the legislature will change immensely in 2023.

No matter how the leadership changes, or what issues the bills present, NDMA will be at the forefront advocating for physicians and their patients. Membership and PAC contributions mean more now than ever.

**RENEW YOUR MEMBERSHIP AT  
WWW.NDMED.ORG OR CALL  
701-223-9475.**



# UND School of Medicine & Health Sciences

**Joshua Wynne, MD, MBA, MPH**  
UND Vice President for Health Affairs  
Dean UND School of Medicine & Health Sciences

One of the certainties in this unsettled time is the continued importance of making good decisions under conditions of uncertainty. After all, that imperative – to try to do the right thing even when it isn't clear what the right thing is – lies at the heart of being a health care provider. In my field of cardiology, for example, we have myriad guidelines and practice protocols – yet every patient is different and doesn't necessarily fit nicely into a particular niche. So what to do in such a conundrum? I think the only answer is to do the best you can with the available evidence, act in good faith, and then be prepared to adjust your plan as better data and evidence surfaces.

That's what the leadership team at the UND School of Medicine and Health Sciences has tried to do as we steer the School in these uncertain times. It isn't only the pandemic that has stressed our medical students. Let's face it – medical school is inherently challenging and stressful. Then add to that the stresses of sometimes virtual education due to the pandemic. But if those two stressors were not enough, over the past few years we instituted a major curricular change. Had we known that the pandemic was coming, we likely would have delayed the revamping. The changes were necessary and important, but change does come at a price.

There are four major components to the curricular modification: 1) a reduction

in the time devoted to the basic science/preclinical curriculum, with an attendant increase in clinical opportunities; 2) an opportunity for more elective clinical rotations earlier in the curriculum to allow students more opportunities to explore career choices; 3) enhanced preparation and support for the national licensure exams ("Step" exams) that have been used by residency programs to help determine student competitiveness for their programs; and 4) greater re-introduction of foundational basic science concepts in the clinical years.

There have been some bumps in the road, but faculty and staff have worked hard to respond to student concerns and feedback. Having robust discussions has been challenging over the past two years due to some limitations imposed by the mitigation procedures required during the pandemic, but we've done our best to be responsive to student feedback. Soon we will have some firm data to assess how we're doing from the students' standpoint, as the students just completed the second iteration of the Independent Student Analysis (ISA) as part of the School's accreditation process. The students completed the required ISA about a year ago, and we and they decided to develop a process to address any concerns that surfaced. Due to a lot of work by both the students and the faculty and staff, we think we've made good progress on addressing concerns. Thus, we encouraged the students to conduct this second survey (termed ISA2) so we

can compare the two datasets. Amazingly, both ISAs achieved a 100% response rate! That truly is unique in the country; in checking with other schools, no one knows of any other medical school that has achieved a 100% response rate to the ISA. Congratulations to our students, and especially to senior medical student Ryan Norris and his student leadership team who spearheaded this effort.

As we head into 2022, I am enthusiastic about the future and excited about the fantastic things that are happening at *your* School of Medicine and Health. Our educational outcomes continue to be outstanding; research growth has been amazing (our sponsored funding is up about 25% compared with the prior year), and service to the community of North Dakota continues to be widely appreciated and valued. One measure of this is that our retention rate of medical school graduates for eventual practice in the state has never been higher and well exceeds the national average. Additionally, the vast majority of North Dakotans who get into a U.S. medical school choose to come to UND. We are succeeding at "growing our own," thanks to the efforts of clinical (volunteer) faculty like you.

Finally, my wife Dr. Susan Farkas joins me in wishing you all good things in the New Year. North Dakotans appreciate what you do for them, the state, and our students. Thank you!

# New Year, New Goals

As we approach the new year, it's a time when many of us reflect on the previous year and look forward at what's to come. Keep us in mind as you think about what you would like to achieve in 2022. In Private Banking, we take the time to ask the right questions. Together, we develop a financial road map to achieve short and long-term financial success. At First International Bank & Trust, we are here to help turn your dreams into actionable goals so you can do what matters most, Live First.

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# NDMA 2021 ANNUAL MEETING AND LEADERSHIP AWARDS *Wrap Up*

## IT'S A WRAP!

As the pandemic picked up momentum through the summer and fall, the NDMA Annual Meeting was once again shifted from in-person to a virtual format.

The online event – held on October 1 & 12 – brought together member physicians from across the state to participate in outstanding educational sessions, discuss policy issues, and recognize outstanding individuals for their contributions to medicine and the community.

## Education

The educational session featured excellent speakers, and allowed participants the opportunity to earn continuing medical education credits (CMEs).

### PHYSICIAN LEADERSHIP IN SHAPING THE FUTURE OF MEDICINE

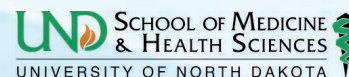
The educational session kicked off with American Medical Association President Dr. Gerald Harmon who provided an AMA update and discussed trends in health care and advocacy issues for physicians that go far beyond COVID-19.



**Gerald E. Harmon, MD**  
President, American Medical Association

### SERVING NORTH DAKOTA TODAY AND TOMORROW

UND School of Medicine & Health Sciences Dean & Vice President for Health Affairs Dr. Joshua Wynne shared insights on the latest developments for the UND School of Medicine & Health Sciences and its impact on the future of health care for the medical profession.



**Joshua Wynne, MD, MBA, MPH**  
UND School of Medicine & Health Sciences  
Dean & Vice President for Health Affairs

### THE RISKS AND BENEFITS OF RIGHTEOUS INDIGNATION

Dr. Andrew McLean's presentation, How to Get Your Point Across and Effect Change Amid Potential (and often self-inflicted) Obstacles shared a most inspiring twist on how to come to common ground with those resistant to concepts and actions best for health.



**Andrew McLean, MD, MPH**  
Clinical Professor and Chair, UND School  
of Medicine & Health Sciences Department  
of Psychiatry and Behavioral Science



# THE POWER OF A HEALTH CARE ADVOCATE

A panel featuring North Dakota Legislators shared how advocacy makes a difference in health care policy. The panel provided great insight.



**Senator  
Judy Lee**  
West Fargo,  
District 13



**Representative  
Corey Mock**  
Grand Forks,  
District 18



**Representative  
Emily O'Brien**  
Grand Forks,  
District 42



**Representative  
Greg Westlund**  
Cando,  
District 15

## *Some tips provided by the panel included:*

- *Know the issues and barriers and provide a solution*
- *Provide sources for information*
- *Be prepared to respond to questions*
- *Make yourself available as a resource*
- *Keep in mind there are many sides to many issues*
- *Be prepared and committed to finding a solution*
- *Remember that change is incremental*
- *Solutions must be focused on what is best for North Dakota*

The panel encouraged physicians to connect with legislators prior to the session. The key is to get to know your legislators BEFORE you are faced with a challenging health care policy issue.

## *Take Action Now*

Contact your legislators and set up a time to get to know each other and issues facing your profession. This conversation can be conducted through a face-to-face meeting, or a virtual format, or even a good old fashioned phone conversation.

## *Policy Forum*



Sharing your thoughts on policy, or letting your voice be heard, is a great way to get involved in policy issues that have the potential to impact your physician practice and patient care.

As part of the annual meeting, NDMA conducted a Policy Forum that brought members together online to discuss policy proposals brought forth by NDMA members. As part of the vetting process, all members attending the forum were given the opportunity to share comments.

At the conclusion of the Policy Forum discussion, the summaries were brought forward to the November 23rd NDMA Council for further vetting.

When it comes to policy proposals, the Council's job is to adopt, amend and adopt, reject, or refer for study. Here are the policy outcomes as determined by the NDMA Council:

### **MEDICAID COVERAGE 12 MONTHS POST-PARTUM**

NDMA should support the ND Department of Health and Human Services as it pursues steps to allow Medicaid coverage to extend to one year postpartum. And if necessary, support legislation during the 2023 legislative session to establish coverage 12-month post-partum.

### **LONG TERM CARE MEDICAL DIRECTOR DIRECTORY AND CME PROGRAM**

NDMA should support the development of a North Dakota nursing home medical director registry and continuing medical education (CME) for medical directors. NDMA should work with the ND Department of Health and Human Services and other agencies and organizations to support this goal.

### **PATIENT CHOICE OF PROVIDER: ANY WILLING PROVIDER (AWP)**

NDMA should closely monitor the AWP interim legislative study, and based on the results of that study, support patient choice and any willing provider legislation in the 2023 legislative session, if appropriate and in the best interests of patients.

### **STATEWIDE INVESTMENT IN RENEWABLE ENERGY**

North Dakota Medical Association will follow this area with interest, and adopt policy, if necessary, in the future.

### **BASIC CARE - MEMORY CARE FACILITY REGULATORY REFORM**

NDMA should continue working with the ND Long Term Care Association and the Department of Health and Human Services to create more transparency in reporting on basic care memory care and education of the staff of basic care.

# ANNUAL MEETING

## Leadership Awards

### PHYSICIAN COMMUNITY & PROFESSIONAL SERVICES



**DR. CASEY RYAN**  
Altru Health Systems  
Endocrinology, Internal Medicine

Since 1977, NDMA has been honoring physicians with the Physician Community and Professional Services Award. The award recognizes outstanding members of our organization who serve as role models and are active in both their profession and in their community.

#### **Dr. Casey Ryan is the 2021 recipient of the NDMA Physician Community and Professional Services Award.**

Dr. Ryan, nominated by Dr. Kevin Mork and Dr. Randy Szlabick, was chosen for the award due to his dedication to providing outstanding commitment to his community in the field of medicine. His leadership as a clinician, teacher, and volunteer in the Grand Forks community goes unsurpassed. In addition, Dr. Ryan's lifetime commitment to selflessly serving the UND School of Medicine and Health Sciences has extended beyond his own career by choosing to assist with the school's medical education curriculum.

### OUTSTANDING LEADERSHIP IN HEALTH CARE POLICY



**GREG WESTLIND**  
North Dakota Representative  
District 15

This year, for the second time in history, the North Dakota Medical Association recognized an individual for Outstanding Leadership in Health Care Policy.

#### **District 15 Representative Greg Westlind is the 2021 recipient of the Outstanding Leadership in Health Care Policy Award.**

Through the 2021 legislative session, Representative Westlind worked tirelessly educating legislators on the importance of strong policy in health care and championed many policies that stood to provide a platform of better health care for North Dakota citizens.

The October 12 meeting kicked off by announcing the 2021 award winners, including recognizing physicians who achieved 40 years of service to the medical community upon graduation from medical school.

### 40 YEARS OF SERVICE

MARC BASSON, MD  
JULIE BLEHM, MD  
WILLIAM CORNATZER JR, MD  
DALE ERNSTER, MD  
DAVID FLACH, MD

KENT HOERAUF, MD  
JEFFREY KEIM, MD  
ELLEN KETTERLING MD  
WILLIAM KLAVA, MD  
A DOUGLAS LANDERS, MD

MARY LEWIS, MD  
FREDRICK MITZEL, MD  
VANI NAGALA, MD  
MARY ANN SENS, MD  
STEVEN SPOTTS, MD

DAVID WIEST, MD  
JANE WINSTON, MD  
WILLIAM WOSICK, MD

### FRIEND OF MEDICINE

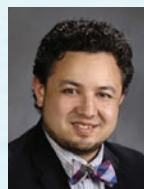


**MOLLY HOWELL**  
ND Department of Health  
Immunization Director &  
Assistant Section Chief  
Disease Control

NDMA's Friend of Medicine Award recognizes a non-physician for distinguishing themselves by serving as effective advocates for health care, patient services, or the profession of medicine in the state of North Dakota.

#### **Molly Howell is the 2021 recipient of the Friend of Medicine Award.**

Molly Howell serves as the North Dakota Department of Health Immunization Director & Assistant Section Chief Disease Control. Nominated by Dr. Joan Connell, Molly was selected for the award due to her dedication in overseeing state immunizations, including her outstanding efforts to maximize COVID-19 immunizations.



**DR. JAMES MILES**  
Altru Health Systems  
Pediatric Neurologist

### NDMA COPIC HUMANITARIAN AWARD

For the third year, NDMA is pleased to present the NDMA COPIC Humanitarian Award. This award honors a physician for volunteer medical services and contributions to the community.

As part of the award, COPIC designates a \$10,000 donation to a 501 (c)(3) charity of the recipient's choice.

#### **Dr. James Miles is the 2021 recipient of NDMA's COPIC Humanitarian Award.**

Dr. James Miles, a pediatric neurologist at Altru Health System, was nominated by Make a Wish North Dakota. Dr. Miles has made an indelible mark on children across North Dakota, not only through his work as one of only two board certified, fellowship trained pediatric neurologists in the state, but also through his volunteer work, which has focused on supporting children with critical or life-threatening illnesses.





**President**  
**Joshua C. Ranum, MD**  
 Hettinger, ND



**Vice President**  
**Stephanie K. Dahl, MD**  
 Horace, ND



**Policy Forum Chair**  
**Parag Kumar, MD**  
 Bismarck, ND



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 Dickinson, ND



**AMA Delegate**  
**Fadel E. Nammour, MD**  
 Fargo, ND



**AMA Alternate Delegate**  
**David F. Schmitz, MD**  
 Grand Forks, ND

*Congratulations*  
 to the 2021-2022 newly elected  
 officers and delegates.



**FRIDAY, MARCH 25, 7:30 A.M-4 P.M.**  
**SANFORD CENTER, DAKOTA ROOM**  
**2301 E. 60TH ST. N., SIOUX FALLS, SD 57104**

Medical professionals are invited to come together to learn about the latest advances and best practices in breast health and breast cancer care. At the full day event, breast cancer experts will present on topics including research, genetics, treatment, surgery and survivorship.

Cost \$50 or \$25 for Sanford Health employees and students.

**Virtual attendance options are available.**

**Register by Friday, March 18.**

**Visit [edith.sanfordhealth.org/symposium](https://edith.sanfordhealth.org/symposium) to register or learn more.**



# A FIREWORKS ACCIDENT ALMOST BLINDED JOSH IN HIS LEFT EYE



**An amnion graft using donated  
birth tissue saved his sight**



Dakota Lions Sight & Health  
Eye and Tissue Donation

Learn more about Josh's amazing recovery and the Dakota Lions Sight & Health's  
Birth Tissue donation program at [dakotasight.org](http://dakotasight.org).



# A TRUSTED PARTNER WITH PROVEN EXPERIENCE

COPIC is a better option for medical liability coverage. Our industry-leading programs support physicians, medical professionals, group practices, hospitals, and medical facilities to deliver improved patient care. And having a proven partner means you can focus on what matters most—better medicine and better lives.

COPIC benefits include:

- ▶ Eligible state medical society members can receive a 10% premium discount.
- ▶ Physician-led company recognized for its patient safety and risk management programs.
- ▶ A 24/7 risk management hotline staffed by physicians for guidance in urgent situations.
- ▶ An array of educational activities that include in-person seminars, on-demand courses, and multi-day conferences, and often qualify for CME/CNE credit.
- ▶ Frequency of claims among COPIC insureds is 30% less than the national average.
- ▶ 20+ years of experience with communication and resolution programs that address patients' needs after an unexpected outcome occurs.
- ▶ On-site and virtual reviews that identify high-risk areas and best practices to address these.
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Briana Rummel

Angie Lord

Brenda Blazer

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# WHAT TO DO WHEN YOU'VE BEEN HACKED: A GUIDE TO HIPAA AND RELATED CONSIDERATIONS



## Briana Rummel

Unfortunately, covered entities, including health care providers and organizations, and their business associates, or those individuals and/or entities who perform or assist in the performance of a function that involves the use or disclosure of individually identifiable health information, are not immune from ransomware and phishing attacks. Ransomware attacks can result in the theft of protected health information ("PHI"). Alternatively, ransomware may be used to encrypt PHI. In turn, victims are required to pay to either prevent public dissemination of the PHI or to obtain the information necessary to decrypt the files.

In recent years, there has been a significant uptick in both the frequency and severity of these cyberattacks across all sectors, healthcare not excluded. Consistent with the Health Information Technology for Economic and Clinical Health ("HITECH") Act, information regarding breaches affecting 500 or more individuals is published by the U.S. Department of Health and Human Services Office for Civil Rights. According to this data, over 330 breaches affecting 500 or more individuals were investigated in 2021 alone.

Although covered entities are not uniquely targeted by hackers, they are unique in what considerations must be made following a ransomware or phishing attack. The first and foremost consideration is determining whether the ransomware attack amounts to a security incident pursuant to the Health Insurance Portability and Accountability Act ("HIPAA"). A security incident is defined as the attempted or successful unauthorized access, use, disclosure, modification, or destruction of information or interference with system operations in an information system. From there, the covered entity should initiate its security

incident and response and reporting procedures, which must include determining whether there was a breach of PHI as a result of the security incident.

Importantly, any impermissible use or disclosure of PHI is assumed to be a breach unless the covered entity or business associate can demonstrate that there is a low probability that the PHI was compromised based on the following risk factors:

- the nature and extent of the PHI involved;
- the unauthorized person who accessed the PHI, whether the PHI was actually acquired or viewed;
- and the extent to which the risk to the PHI has been mitigated.

In the event of a breach, covered entities must provide notification to affected individuals, the U.S. Department of Health and Human Services and Office for Civil Rights if the breach impacts 500 individuals or more, the North Dakota Attorney General's office if the breach impacts 250 individuals or more, and, in certain circumstances, to the media.

“ Any violation of HIPAA can result in significant fines and penalties—regardless of whether a healthcare organization was directly responsible ”

Any violation of HIPAA, such as a data breach, can result in significant fines and penalties—regardless of whether a healthcare organization was directly responsible. Today, a single violation can result in fines up to \$50,000. Even

before a ransomware attack occurs, covered entities should review their current policies and practices for HIPAA compliance and, just as importantly, review existing insurance coverage to determine whether it includes coverage for cyber incidents, including the cost associated with identifying and correcting cybersecurity flaws that led to a breach, payment of ransomware demands, and any resulting HIPAA penalties imposed.



# Bismarck Cancer Center Builds HOPE for Tomorrow



The Bismarck Cancer Center has launched a building expansion, and its *'Healing for Today, Building HOPE for Tomorrow'* Capital Campaign in the fall of 2020. This much-needed expansion will provide over twice the square footage of the previous space by adding a second floor, an addition and a major renovation of the first floor.

"The Bismarck Cancer Center's expansion will be transformative in many ways," says Amy Gross, Executive Director of the Cancer Center, "This expansion focuses on providing world-class care to our patients, and in turn, it's a commitment we proudly make today and for the future of healthcare in our area and surrounding communities."

The extra space on the main floor will include three new exam rooms and one special procedure room. Additional treatment areas are being added, such as a dedicated HDR (High Dose Rate Brachytherapy) suite, a 3rd linear accelerator (treatment machine), and a 2nd CT scanner for specialized radiation treatments. The new second floor will include rooms for support groups, along with family and nutritional counseling rooms, a large conference room for educational needs and meetings, and an onsite cancer registry, just to name a few.

The thread of philanthropy weaves together the vision, the plan, the purpose, and the execution of the Bismarck Cancer Center's expansion. The estimated cost of this initiative is \$14 million, with the Bismarck Cancer Center covering \$10 million of that amount

through past savings and investments. They have invited individual donors and local businesses to join their mission to fight cancer through the *'Healing for Today, Building HOPE for Tomorrow'* Capital Campaign and to help raise the remaining \$4 million. They are well on their way to reaching their goal with only \$2 million left to go.

"The generosity, partnership, and commitment to our patients from donors has a significant impact in a project like this," says Gross. "The new facility and expansion will provide a warm and inviting space along with the newest technology in the region. We are grateful for those that have donated to our Capital Campaign so far and hope to meet our goal in the near future."

Benefactors are valued supporters who believe the best cancer care is possible through the Bismarck Cancer Center. Your investment provides the necessary support to ensure the full vision of the Cancer Center comes to fruition and addresses urgent patient needs in new and innovative ways. Gross feels the opportunities in the years ahead are boundless, "Visionary work is happening each day at the Bismarck Cancer Center, creating new standards in health care for the benefit of those going through cancer treatment. The capital expansion is an essential part of this progress."

Join the Bismarck Cancer Center today to bring a transformative health care experience for those in need. Together, we can build a new future of cancer care at the Bismarck Cancer Center.

**We are grateful for those that have donated to our Capital Campaign so far and hope to meet our goal in the near future.**





To learn more about the Capital Campaign and expansion, visit: <https://www.bismarckcancercenter.com/capital-campaign-building-hope/> or call 701-222-6100 for more information.



# HEALING FOR TODAY BUILDING HOPE FOR TOMORROW

A CAPITAL CAMPAIGN FOR BISMARCK CANCER CENTER

## MAKE A DIFFERENCE TODAY!

Join us as we strive to reach our *Healing for Today, Building Hope for Tomorrow* Capital Campaign goal of \$4M. Your support will assist us in our efforts to fight cancer locally.

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## Assistance for Physicians in a Confidential Environment

Submitted by the North Dakota Professional Health Program (NDPHP)



NORTH DAKOTA PROFESSIONAL  
HEALTH PROGRAM



increased risk for burnout including female providers and providers earlier in their careers.

The potential consequences of untreated burnout include cardiovascular disease, musculoskeletal pain, depressive symptoms, increased substance use and misuse, increased anxiety, job dissatisfaction and absenteeism. It can lead to destructive consequences not only for the medical provider but also for the patient.

The 2021 Survey of America's Physicians reported that more than 3 out of 5 physicians surveyed experienced symptoms of burnout in the past year. This is a significant increase from two years prior. Certain medical providers are at

The North Dakota Professional Health Program (NDPHP) was created by the North Dakota Legislature to provide a place where physicians, physician assistants and medical students could seek help for substance abuse and mental illness without the fear of the North Dakota Board of Medicine (NDBOM) becoming aware of their diagnoses. The NDBOM has changed the language on the licensure application and renewal application so that providers who are working with the NDPHP do not have to acknowledge their mental illness or substance use on the application and are able to get the help needed confidentially.

To date, the NDPHP has provided support, assistance and monitoring for dozens of medical providers struggling with substance abuse and mental illness to get the help that they need to continue to provide the medical care that the people of North Dakota have come to expect.

If you are a medical provider and struggling with burnout, mental illness, or substance abuse, please contact the NDPHP. We are here to help. 701-751-5090 or visit [ndphp.org](https://ndphp.org).



## Boys Town Pediatric Neuroscience

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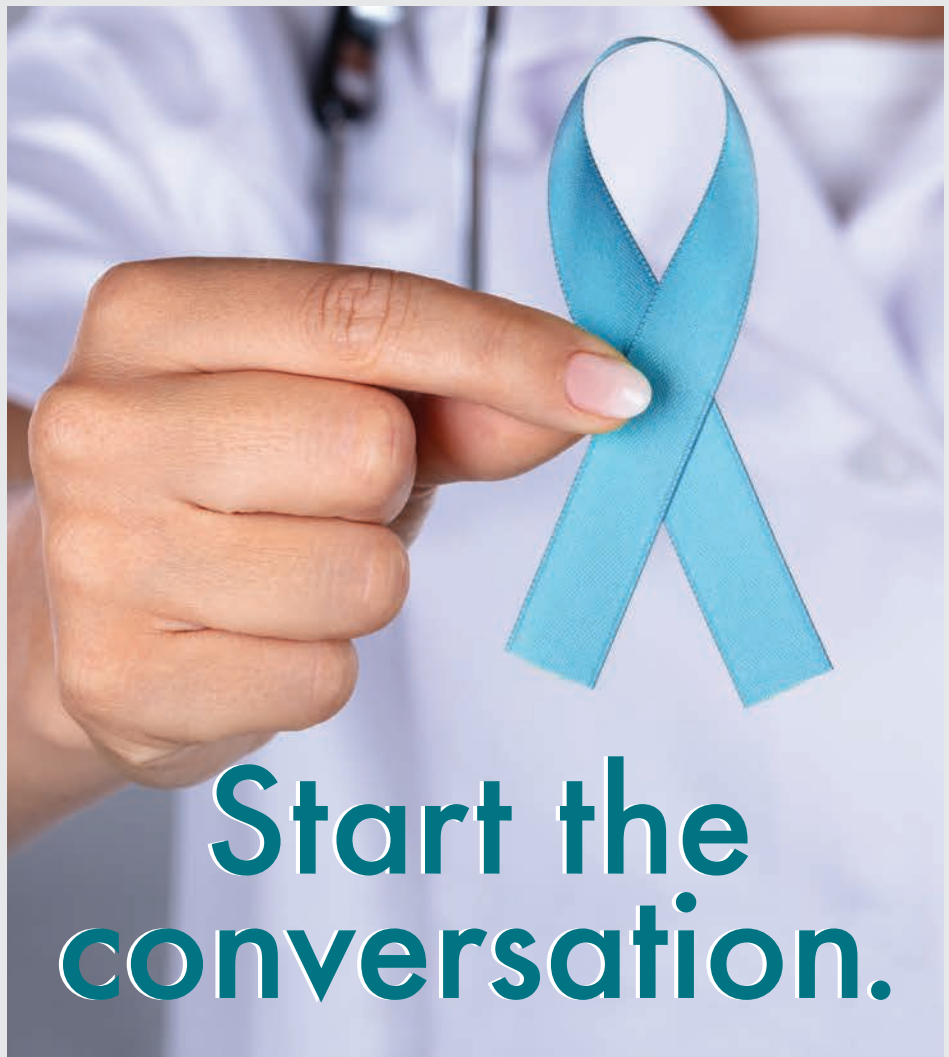
# January is Cervical Cancer Awareness Month

January is Cervical Cancer Awareness Month. Most cervical cancers can be prevented through early detection and other actions. Health care providers have a vital role in cervical cancer prevention.

- Encourage routine screenings for cervical cancer. During an office visit, review cervical cancer screening history with patients and inform them when the next screening is due. Send out patient reminders.
- Women infected with HPV who either smoke cigarettes or breathe in secondhand smoke have an increased risk of cervical cancer. Your patients can receive assistance in quitting tobacco by calling 1-800-QUIT-NOW (1-800-784-8669) or by visiting <https://ndquits.health.nd.gov>.
- For women who cannot afford cervical cancer screening, *Women's Way* may provide a way to cover the cost. Make a referral to *Women's Way* or encourage the patient to call 701-328-3398 or visit <https://health.nd.gov/womens-way> to see if they are eligible.
- Promote the human papillomavirus vaccine (HPV).
- HPV vaccination is recommended for preteens aged 11 to 12 years but can be given as early as nine years of age. For those not already vaccinated, the HPV vaccine is recommended through age 26 years.
- Some adults aged 27 through 45 years who are not already vaccinated may decide to get the HPV vaccine after speaking with their health care provider about their risk for new HPV infections and the possible benefits. However, HPV vaccination in this age range provides less benefit, as more people have already been exposed to HPV.

According to the CDC, HPV infections and cervical precancers (abnormal cells on the cervix that can lead to cancer) have dropped since 2006, when HPV vaccines were first used in the United States. The percentage of cervical precancers caused by the HPV types most often linked to cervical cancer has dropped by 40% among those who are vaccinated.

Working together, we can prevent cervical cancer.



## Start the conversation.

### January is Cervical Cancer Awareness Month.

Talk to your patients about risk factors and the importance of cervical cancer screenings.

Remind them *Women's Way* can help  
and may provide a way to pay.



**WOMEN'S WAY**  
A Breast & Cervical Cancer  
Early Detection Program

[health.nd.gov/womens-way](https://health.nd.gov/womens-way)

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## Programs

### Diabetes Prevention & Management

- National Diabetes Prevention Program
- Better Choices, Better Health

### Falls Prevention

- Stepping On
- TaiJiQuan: Moving for Better Balance

### Chronic Pain and Disease Management

- Better Choices, Better Health: Chronic Conditions
- Better Choices, Better Health: Chronic Pain

### Powerful Tools for Caregivers

Classes are offered either for free or at low-cost affordable rates throughout North Dakota and conducted in person or via Zoom. Learn more at [ndc3.org](https://ndc3.org).



**You Can Make A Difference.**

Refer your patients today to participate in healthier lifestyles.

For more information about programs facilitated by NDC3, visit the website at <https://ndc3.org/>.





## Comprehensive Care for Alzheimer's Act Proposes to Provide Better Care for Patients and Families

### By Senator Kevin Cramer

**F**or nearly two years, the COVID-19 pandemic has dominated the health care industry. And, at front and center is the critical work our physicians do to ensure delivery of quality health care.

As tragic as this pandemic is, it reminds us of the resiliency and ingenuity we have as Americans working together to tackle big problems. Imagine what we can do to address other important health care issues by dedicating as much time and attention to them as COVID-19. One of these diseases is Alzheimer's, which is particularly personal to me and my family after watching my mother suffer from it before she died last April.

Alzheimer's disease is an expanding public health crisis. Nearly 14 million people in the U.S. are projected to be diagnosed with the disease by 2050. Today 15,000 North Dakotans are battling this disease. Legislation I am working on in Congress assists caregivers, encourages greater participation in clinical trials, and addresses payment structures so the people dealing with Alzheimer's can spend more time managing it and less time worrying about how to pay for it.

I am a co-sponsor of the *Comprehensive Care for Alzheimer's Act* to provide better care for patients and their families. If passed, this bipartisan bill will reduce medical complications for patients by creating new ways to fund dementia care through Medicare. This new model helps reduce hospitalizations and emergency department visits and delays nursing home placement through better coordinated care efforts. This in turn improves quality of life for patients and makes treatment more affordable.

Just as we did with COVID-19, we should attack this disease from all sides. I want the Department of Health and Human Services (HHS) to prioritize reducing the prevalence of dementia because promising studies show early intervention can delay or in some cases prevent a significant percentage of dementia diagnoses. That's why in September I urged HHS Secretary Xavier Becerra to establish a national goal to prevent Alzheimer's disease and related dementias, and to develop a plan to achieve this goal.

Health care providers and leaders tell us that preventive health care measures allow Americans to live longer and healthier lives. This also helps dramatically lower cost, which the consumer and the taxpayer ultimately pay.

Early intervention results in substantial savings to the U.S. health care system, and has a considerable impact on preventing, diagnosing, treating, or slowing the progression of Alzheimer's disease. This leads to longer, healthier lives for patients, and additional cherished memories for their loved ones.

I sincerely thank our medical community for all you are doing to keep North Dakotans safe during the COVID-19 pandemic. I look forward to continuing our work on all important issues, including combatting Alzheimer's disease.

As always, I welcome your feedback on challenges impacting medical care across North Dakota.



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## Preserving Medicare & Helping Ensure Seniors' Access to Health Care

By Senator John Hoeven

**T**he COVID-19 public health emergency has clearly demonstrated the importance of our health care professionals, and we appreciate their tireless efforts throughout the pandemic to protect the lives and well-being of North Dakotans. This is particularly true for our seniors, who are among those most at risk of developing life-threatening symptoms due to the virus. Accordingly, we've worked to protect access to the critical services provided under Medicare, on which more than 61 million Americans rely for their health care coverage. Our efforts are about ensuring this program remains available to seniors, now and into the future.

In particular, we are concerned that our nation's debt and deficit stand as a threat to the integrity of Medicare. The most recent Social Security and Medicare Boards of Trustees report projects that the Medicare Trust Fund will be insolvent by 2026. Despite this, the majority party in the Senate continues to push ahead with their reckless tax-and-spend agenda, which will worsen our nation's fiscal challenges. This approach will also contribute to even higher inflation, which is already at its highest level since 1982. Increased costs impact every sector of our economy, straining the ability of health care providers to serve their patients and leading to greater spending out of the Medicare Trust Fund.

Democrats and Republicans should instead undertake bipartisan efforts to reduce the costs of care, while promoting better health outcomes. To this end, I am working as the Ranking Member of the Senate Agriculture and Food and Drug Administration (FDA) Appropriations Committee to:

- Ensure the FDA has the resources and funding it needs to address the backlog of generic drug applications, which will increase competition and help reduce costs.
- Support enhanced domestic pharmaceutical manufacturing capacity in order to avoid costly drug shortages.

• Advance the following bipartisan legislation, which I am cosponsoring:

- o The Pharmacy and Medically Underserved Areas Enhancement Act to expand access to basic health care services, such as immunizations, diabetes management and blood pressure screenings, by allowing Medicare beneficiaries in underserved areas to receive these services from pharmacists.
- o The Fair Accountability and Innovative Research Drug Pricing Act to increase transparency in prescription drug pricing and hold manufacturers publicly accountable if they drastically increase their drug prices.

Bipartisan efforts like this are the best path forward for preserving Medicare, both to support our health care providers and to ensure seniors continue to have access to the health care they need.

**★ REFERRALS START WITH YOU ★**

*I wish to have a playhouse!*  
**Laynie, 9**  
**Medora**  
genetic disorder

**DON'T WAIT FOR HOPE. Create it.**

**Make-A-Wish**  
NORTH DAKOTA

*Hope is essential* for children with critical illnesses, and you can unlock its life-changing power today. Help make wishes come true.

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**MD.WISH.ORG**





## All Hands Approach to Stopping the Substance Use Disorder Epidemic

**By Congressman Kelly Armstrong**

**T**he crisis of Substance Use Disorder (SUD) continues to ravage communities across the country. Addiction does not discriminate, affecting Americans of all ages and backgrounds. We must stem this epidemic and the flow of fentanyl that are ravaging families and communities across the country. That effort requires increased resources and tools for both health care providers and law enforcement.

Alarming, from April 2020 to April 2021, for the first-time in the United States, overdoses took the lives of more than 100,000 people in a one-year period. This is an increase of 28.5% from the previous year. At the same time, overdose deaths involving synthetic opioids such as fentanyl increased by 56%. North Dakota suffered a 49% increase in drug-related deaths in 2020, an increase largely attributable to fentanyl overdoses.

The first step to take is to secure the southern border and ports-of-entry. In Fiscal Year 2021, U.S. Customs and Border Protection (CBP) seized 11,201 pounds of illegal fentanyl, enough to kill more than 2.5 billion people. That represents a 42% increase from Fiscal Year 2020. Unfortunately, CBP likely can't catch everything, causing illegal drugs to devastate our communities and burden health care facilities.

Second, fentanyl and fentanyl-related substances (FRS), also known as fentanyl analogues, must be placed permanently into Schedule I of the *Controlled Substances Act*. Currently, fentanyl and FRS are temporarily Schedule I, but that expires February 18th, 2022. If this order ends without action, it will be more difficult for law enforcement to combat the flow of these drugs.

I am a cosponsor of the *Halt All Lethal Trafficking of Fentanyl Act*

(*HALT*), which will permanently schedule fentanyl and FRS, simplify registration processes for certain research with Schedule I substances, and provide for exemption of individual FRS from Schedule I when evidence demonstrates it is appropriate for medical use. This legislation will help in the fight against opioid overdoses and allow researchers the flexibility needed to study these substances.

Third, our state, local, and tribal governments and local healthcare professionals are the frontline in providing services and treatment needed to help fight addiction. I am a lead cosponsor on the *State Opioid Response Grant Authorization Act of 2021*, which passed the House last year. This legislation authorizes \$10.5 billion over six years in flexible funding for State Opioid Response (SOR) and Tribal Opioid Response (TOR) grants to fight the opioid epidemic. This authorization will give states and tribes certainty and stability to implement prevention, treatment, and recovery plans.

Finally, we must acknowledge that SUD and mental health are inextricably linked. Soaring rates of depression, anxiety, and other mental health challenges lead to increases of SUD. The federal mental health emergency hotline saw a near 900% increase in calls from March 2020 compared to March 2019. Congress has responded by creating a national mental health emergency text message hotline and providing additional resources but need still far outpaces availability.

The fight against the SUD crisis should not be a political one. I will continue working with leaders on both sides of the aisle to find solutions that help save lives.



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# Counselors Take Pride in Positively Impacting People's Lives



**“W**hy do you keep doing what you do?” Mental health counselors are often asked this question. The answer is simple: Because we have the privilege of positively impacting other people's lives, and we love what we do.

As providers for **The Village Family Service Center's Intensive Outpatient Program (IOP)**, we help so those with mental health challenges do not fall between the cracks.

The Village IOP offers individuals suffering from mental illnesses the opportunity to be heard and heal so they can become healthier versions of themselves. Because our program is group formatted, clients learn not only from licensed counselors, but also from peers who have similar experiences. We believe normalizing mental illness is part of our program's role. Clients often tell us that feeling connected to others who suffer from similar challenges was the catalyst in their mental health recovery.

We pride ourselves on teamwork and strive each day to offer a **healthy atmosphere** to allow all clients to feel comfortable and secure.

The Village IOP is one of a kind in the Fargo area in that we “bridge the gap” by offering intensive services for clients who



need more support than weekly therapy, but do not meet medical necessity for a hospitalization program. Rather than using a set curriculum for programming, we tailor each day to the clients' needs and offer **authentic, person-centered mental health treatment**.

The challenges the community has faced because of the pandemic have been enormous, including the vulnerability of attending an in-person group. We continue to adjust as needed to create as safe a place as possible, including wearing masks in all group rooms and sanitizing daily.

*grateful for you*

**THANK YOU** for trusting The Village Intensive Outpatient Program with your referrals. Together, we can ensure clients can heal from the past and hope for the future.

**KATIE FIGUERRES**  
MA, LPC, LPCC

**LYNAE HEMMING**  
PH.D., LPCC, NCC

**JODEE KNIPFER**  
M.ED., LAPC, LAC, MAC



**NO CHARGE SCREENING APPOINTMENTS ARE AVAILABLE.**  
**701.451.4900 | THEVILLAGEFAMILY.ORG/IOP**



Each time a client is referred to our program, they are offered a **no-cost screening appointment** to meet with the clinicians, see the space where group is held, and to ask questions. We have found this helps decrease client anxieties about starting group therapy and allows for a softer transition to either a higher or lower level of care.

In our program, clients' needs are put first. Along with **3-hour group sessions four days a week**, each client has one individual session per week, as well as family sessions as needed. We look at the whole person and not just the diagnosed mental health condition. Upon discharge, clients leave with a clear plan and a new outlook on life!

**Thank you for your continued referrals to our program. It is because of medical providers like you that we can continue to offer IOP services to the community. To learn more, visit [www.TheVillageFamily.org/IOP](http://www.TheVillageFamily.org/IOP) or call (701) 451-4900.**

JoDee Knipfer, Supervisor

Katie Figuerres, LPCC

Lynae Hemming, LPCC

Jenna Forbord, LPCC



**JoDee Knipfer**  
Supervisor



**Katie Figuerres**  
LPCC



**Lynae Hemming**  
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# NDMA

## LEADERSHIP HONORS

### Walz Receives NDAFP 'ND Family Physician of the Year' Award



**Joel Walz, MD**

NDMA member Joel Walz, MD was recognized by the North Dakota Academy of Family Physicians (NDAFP) as the 2021 'North Dakota Family Physician of the Year.'

Joel has taught countless students and residents over the years. During these times, he shared both his expertise and passion for family medicine and continuing the tradition of homegrown education.

Dr. Walz, a family physician practicing at Altru Health System, has been a leader in the Grand Forks community and has advocated for health, in part through his role as Grand Forks health officer, a post he has held since 2015.

### Schmitz Appointed to National Advisory Council for the Agency for Healthcare Research and Quality



**David Schmitz, MD**

NDMA member David Schmitz, MD, the Dr. Verrill & Ruth Fischer Chair of the UND School of Medicine and Health Sciences (SMHS) Department of Family and Community Medicine, has been appointed to the National Advisory Council for the Agency for Healthcare Research and Quality (ARHQ).

The ARHQ provides advice and recommendations to AHRQ's director and to the Secretary of the Department of Health and Human Services (HHS) on priorities for a national health services research agenda.

Dr. Schmitz said that the appointment will allow him to build skills and experience to help the SMHS improve in the areas of research and quality.

### NDMA President Dr. Ranum Recognized for 40 Under 40



**Joshua Ranum, MD**

Prairie Business magazine officially released its annual 40 Under 40 list, featuring the Northern Plains top 40 business professionals under the age of 40. NDMA is pleased to share that Dr. Joshua Ranum, president of NDMA, was selected as one of the top 40.

Dr. Ranum, a native of Scranton, ND, was recognized for his achievements in medicine and advocacy. As a physician

with West River Health Services in Hettinger, he serves on multiple boards including those of West River Health Services, Adams County Development Corp, and the Hettinger United Methodist Church. He is the volunteer medical director for three ambulance services, is a football official, and plays in the local Cowboy Band.

As the pandemic hit the state, Dr. Ranum quickly became a familiar face. He has given numerous media interviews and serves as an advisor to the North Dakota Department of Health and Governor's office on the coronavirus response.

### Mork Receives 2021 SSG Andrew P. Nelson Award for Outstanding Leadership & Service



**Kevin Mork, MD**

NDMA Member Dr. Kevin Mork was recognized as the 2021 Recipient of the SSG Andrew P. Nelson Award for Outstanding Leadership & Service and was presented the award by the Northern Lights Council Boy Scouts of America at the third Annual Heroes and Leaders Gala in Fargo.

### Bharath Receives Certificate of Appreciation for Outstanding Service



**Somasundaram Bharath, MD**

Congratulations to NDMA member Dr. Somasundaram Bharath for receiving a certificate of appreciation for outstanding services as governor of the American College of Gastroenterology (ACG).

Dr. Bharath, a gastroenterologist at Altru Health System in Devils Lake, served as ACG Governor for North Dakota from 2018 – 2021.

He is one of 77 Governors in the world who act as a grassroots force on important issues facing gastroenterologists and organized medicine at large.



# Granting Wishes During the Pandemic

In 2020, due to the COVID-19 pandemic, Make-A-Wish America made the difficult decision to pause wishes involving travel and large gatherings. On September 15, 2021, we began the first phase of returning to grant such wishes, resuming all domestic travel and large gatherings for wish children and their families who have been fully vaccinated.

We continue to monitor guidance from national and international public health and government organizations, while keeping the best interest of the children and families we serve at the center of all policy decisions we make. Our ideal scenario is to eventually return to granting wishes with extended travel and/or large gatherings, regardless of vaccination status.

In North Dakota, we have locally made the decision out of the utmost care for the children whose wishes involve travel and/or large gatherings that they may wait to see how things evolve if they cannot or choose not to be vaccinated. They may also at any time shift their wish if desired.

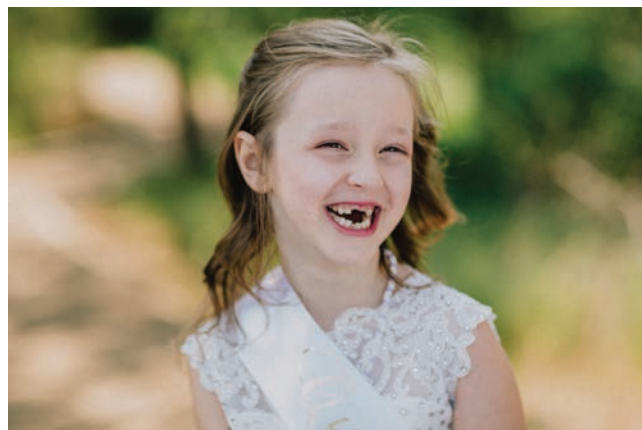
While much attention surrounds wishes that involve travel, many of the wishes we grant do not. Wishes like Laynie's for a playhouse, Liam's wish for a half basketball court, Cali's wish to be a queen for a day, or Cooper's wish to be a police officer for a day! In our fiscal year that ended August 31, 2021, we granted 38 amazing wishes, none of which involved travel.

Wishes are essential for children with critical illnesses. A wish allows a child to live outside the boundaries of their illness and just be themselves. A wish gives them hope, sparks joy, and can transform their lives for the better. In fact, research shows that children who receive a wish from Make-A-Wish do better in their long-term medical journey than children who do not.

As one of your peers, Shoba Srikantan, MD, Chairman of our Make-A-Wish America National Medical Advisory Council, says the following:



Cooper's wish was granted to be a police officer.



Being queen for a day was granted to Cali as her wish.

"We ask you to partner with us by reinforcing with your patients that Make-A-Wish remains committed to granting a timely and safe wish for the child by encouraging the child to think about the wide variety of wish ideas that inspire them locally or virtually. When the wish experience comes directly from the child it showcases their own unique creative vision and builds resilience through the wish journey. We also ask your support in encouraging your patients to choose their own special wish from their heart to maximize the life-changing impact of a wish."

Thank you for the care you give your patients. We are grateful you are in their lives. We invite you to continue referring children who may be eligible for a wish and appreciate your continued partnership in support of the amazing children who need a wish come true!

If you have questions, please contact us any time at 701.280.9474 or by emailing our Director of Program Services Angie Leier, [aleier@northdakota.wish.org](mailto:aleier@northdakota.wish.org)



A half basketball court was exactly what Liam wished for.

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Date	4M Framework	Topic	Presenter
February 8	Mentation	Sleep Disorders in Older Adults	James Wyatt, PhD Rush University
March 8	What Matters	Guardians of Healthy Longevity	Donald Jurivich, DO UND SMHS, Chair of Geriatrics
April 12	Mobility	Gait Disorders in Older Adults	Donald Jurivich, DO UND SMHS, Chair of Geriatrics
May 10	Medications	Vaccinations, Immunotherapy & Medications for COVID	TBD
June 14	Mentation	Delirium	TBD

Learn more: <https://ruralhealth.und.edu/projects/project-echo/topics/geriatrics>



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# The Empathy Effect: Two Ways to Build Trust and Strengthen Relationships with Patients

## By COPIC's Patient Safety and Risk Management Department

**T**he provider-patient relationship is critical to quality care. Communicating effectively is one of the most important skillsets any provider can have, and continuously improving your capacity for relationship building will benefit you and your practice for years to come.

### Cultivate Empathy Through Effective In-Person Communication

Empathy is the ability to show that you understand or even share the feelings of another person. Showing authentic empathy helps patients feel heard, understood, and supported. Research has shown that communicating with empathy leads to higher patient and provider satisfaction, improved adherence to treatment plans, and better health outcomes. Foundational to empathy is the ability to see a situation from within the patient's frame of reference. As doctors, for example, we know that infections can occur after surgery, but for a patient, that's not routine at all and can be very scary.

Once you're looking at a situation through your patient's eyes, practice reflective listening. When you listen reflectively, it means you make eye contact while your patients talk, show genuine interest in what they say, listen without interrupting or interjecting, and summarize what they said to make sure you understand and validate their concerns. You can also show you care through your facial expressions. These steps probably sound obvious, but when you're rushed, stressed, and expected to document every conversation with patients, reflective listening can be challenging. Like anything else, it takes consistent practice.

### Reflective Listening Best Practices

- Make eye contact while your patients talk
- Be seated and maintain an open posture
- Show genuine interest in what they say
- Listen without interrupting or interjecting
- Summarize what they said to make sure you understand
- Validate their concerns
- Show you care through facial expressions and empathy statements (e.g., "I understand this is scary, but we're going to get through it together")

### Use a Robust Informed Consent Process—Not Just a Form

Informed consent is much more than just a legal imperative, it's a chance to improve communication and help patients get the most out of their medical care. For informed consent to be effective, you need a thorough communication process that accompanies any relevant forms. It is helpful to distinguish between the process and the paper—the process is where you ensure your patients understand and to increase their compliance in their treatment and includes conversations, pamphlets, videos, or anything that helps them understand.

When patients understand a recommended treatment and its indications, risks, benefits, alternatives, and the risk of not proceeding, they're more likely to comply with treatment plans and experience improved outcomes. These have been measured by shorter hospital stay, decreased pain medication usage, decreased morbidity for procedures, and administration of medications for medical conditions.

There is also the importance of having the informed consent conversation yourself as the treating provider and never delegating it, though other providers can supplement the process and documentation. Once you explain the risks and benefits of a treatment or procedure, make sure your patients understand what you've said, including the potential for any adverse outcomes.

### Informed Consent Checklist

- Create a thorough communication process to accompany the forms
- Use reflective listening and direct questions to ensure that patients understand the benefits, risks, indications, and the risks of not moving forward
- Ensure the treating provider leads the conversations instead of delegating them to someone else
- Remember that forms alone will not accomplish the goals of informed consent, but they will document that the process occurred
- Assess that the patient is competent and understands the discussion
- Avoid boilerplate statements that aren't tailored to the specific procedure, treatment, or patient





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