

A PLACE JUST FOR PHYSICIANS MOMS R+R WELLNESS CENTER





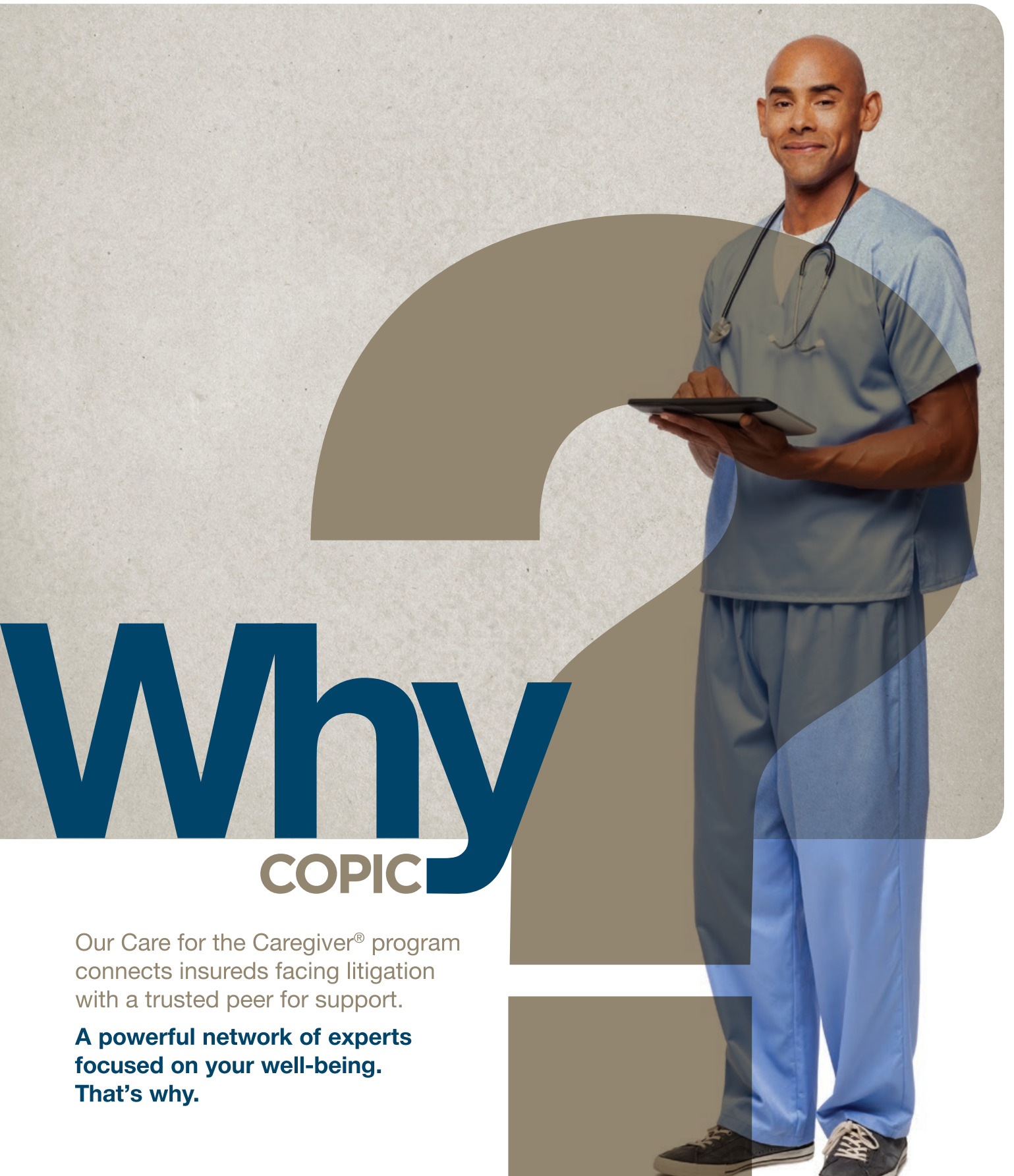
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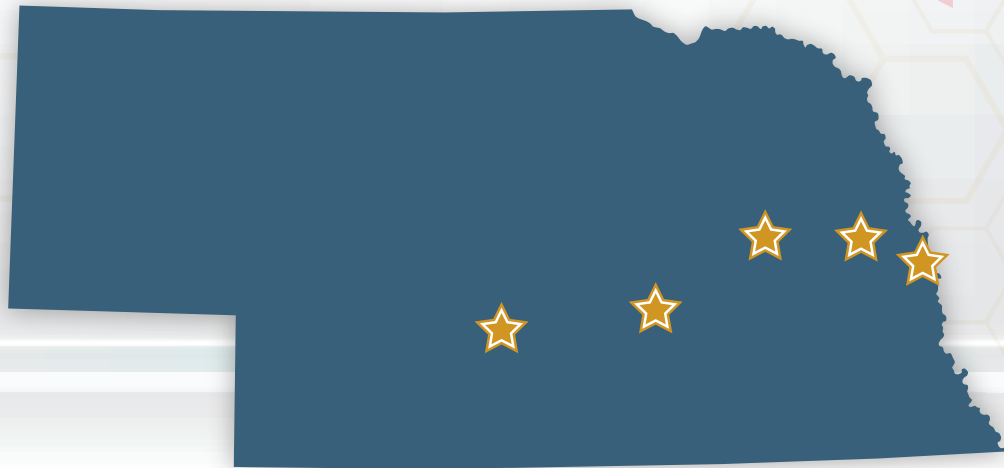
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COMING EVENTS

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FOR INFORMATION AND REGISTRATION

NMA SPECIAL MEMBER VIRTUAL SESSION VOTING ON BYLAWS AND ARTICLE OF INCORPORATION PROPOSED CHANGES

WEDNESDAY, DEC. 1, 2021 | 7 P.M.

The focus of the special virtual session will be to conduct a vote on the Amended & Restated Articles of Incorporation and the Amended & Restated Bylaws. All NMA members are encouraged to participate in this meeting and vote on these very important governing documents.

More information & registration on the MOMS events webpage:
omahamedical.com/event/nma-special-session.

If you have any questions about the special session, contact Amy Reynoldson at amyr@nebmed.org or 402-474-4472.

MOMS ANNUAL MEETING & INAUGURAL DINNER JANUARY DATE TBD | LOCATION TBD

Join us as we inaugurate Tina Scott-Mordhorst, M.D., as the 2022 MOMS President and bid farewell to outgoing president Richard Lund, M.D. The MOMS Foundation grant recipients and Strategic Partners will be recognized and the MOMS Foundation Match Grant check will be presented.

MOMS R+R MEDITATION CLASSES

INSTRUCTOR: DAVID WATTS, M.D.
WEEKLY ON WEDNESDAYS AT 5:30 - 6:30 P.M.
633 N. 114TH ST., OMAHA, NE 68154

MOMS R+R YOGA FOR RELAXATION CLASSES

INSTRUCTOR: SUSAN EVANS, M.D.
WEEKLY ON WEDNESDAYS | 8 - 9 P.M.
633 N. 114TH ST., OMAHA, NE 68154

MOMS R+R CREATIVE READING & WRITING WELLNESS SERIES

INSTRUCTOR: AMY HADDAD
DEC. 16, JAN. 20, FEB. 17 & MAR. 3
6:00-7:30 P.M. | 633 N. 114TH ST., OMAHA, NE 68154

Please register in advance at omahamedical.com/resource/rr-wellness-center-events-schedule. Attendance is limited.

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Physicians in the Omaha area now have their own pop-up wellness center courtesy of the Metro Omaha Medical Society Foundation. This innovative space aims to be open through March of 2022.

Our hope is that physicians will take advantage of this space to reconnect and utilize its resources to support one another in a caring and safe space just for physicians.

We welcome ideas for how to make it work for you.

Visit omahamedical.com/rrwellness



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SOME ASSEMBLY REQUIRED



AUDREY PAULMAN, M.D.

Editor

Physicians Bulletin

In a bold and innovative initiative, the Metro Omaha Medical Society, the MOMS Foundation, strategic partners and donors have come together to provide a new facility, the MOMS R+R Wellness Center.

Last edition, I highlighted some evolving information about physician burnout, most specifically, that physicians cannot heal themselves. Studies support that physicians benefit most from outside interventions. After long and careful consideration, MOMS decided that our intervention would be the R+R Wellness Center.

Quoting from an article in the Omaha World-Herald featuring the center, “Carol Wang, executive director of the Metro Omaha Medical Society, said health care workers were stressed out before the pandemic. And now the pandemic has stretched on longer than most anticipated, with the delta variant surge sending more patients to hospitals already busy with non-coronavirus patients.” Wanting to be of service to Metro Omaha physicians, the idea of a wellness center was developed.

The MOMS executive committee and staff researched best practices for physician wellness centers, and, while they could find wellness centers, they could not find one that exactly matched the needs of a group of physicians. The project would have to be bold and innovative to be just right. Assembly would be required—assembly of funding, of furnishings and amenities, and assembly of programs.

“Using resources from donors, the MOMS Foundation, and corporate grants—along with a fair amount of ‘do it yourself’ abilities—the R+R Wellness Center came to life.”

— AUDREY PAULMAN, M.D.

Using resources from donors, the MOMS Foundation, and corporate grants—along with a fair amount of “do it yourself” abilities—the R+R Wellness Center came to life.

The first goal was to find space. Kim Matney, a MOMS Gold Strategic Partner, is a professional at Berkshire Hathaway Home Services, Ambassador Real Estate. Kim met with MOMS staff to help define the required space. She identified potential spaces for the MOMS project and, equally important, found space that met the requirements for cost and size. After identifying countless properties, one was chosen that is conveniently located right in the middle of Omaha. That location is in the Miracle Hills shopping area. Kim, donating her services, helped negotiate the short-term lease and needed modifications for the pop-up wellness center to open. The location seems just right to me. It has easy access, ample parking, is close to restaurants and, for bicyclists, is just a quick ride down the frontage road from the West Papio Trail.

The next step after the site selection involved getting furnishings for the space. This included identifying doctors with extra armchairs and doctors with trucks. Working with a limited budget, MOMS reached out to physicians for support, and found some furniture that was donated. Additional furniture was purchased from a local retail store, and physicians with pickup trucks volunteered time and energy to help with the move in.

My husband and I, out running errands one afternoon, happened to stop by the R+R center. The chairs were being assembled and the area rugs being placed, giving the storefront bay a welcoming and homey feeling. Carol and Laura, surrounded by “some assembly required” furniture, were hard at work, Allen wrenches and screwdrivers in hand.

The locksmith still needed to come. The desk needed assembled. The coffee maker needed tested. The WiFi needed set up. The television needed to be connected to the internet. The small office needed arranged. A thousand details needed addressed before the open houses that were to occur right after the first of November.

I can say, it looks good. The facility looks really good.

The programming looks good as well. At the time of this writing, there is a writing and poetry group planned, along with a physician-led meditation group and yoga group. There will be monthly gatherings in the mornings and after work.

Thank you to Carol and Laura and the MOMS staff who have worked hard to get the wellness facility open for a 6-month trial. Thank you to those who helped, including doctors with chairs, doctors with trucks, and realtor Kim Matney.

I hope it is successful, because I think it is, well, it’s just what the doctor ordered.

Here is where you can be involved. The MOMS R+R Wellness Center is an evolving center, so additional programming is welcome. Feel free to contact MOMS with your ideas because some assembly is still required for this center to achieve its maximum potential.

Oh, by the way, if you are interested in biking next summer, let me know. We are always interested in riding Omaha’s trails.

I hope you enjoy this edition of Physician’s Bulletin.

Stay well. 

ADDRESSING FOOD INSECURITY, FROM THE GROUND UP



CAROL WANG

Executive Director

Metro Omaha Medical Society

Walk into the meeting with a sense of anticipation, excitement and curiosity. They're the same feelings every year when the October MOMS Foundation board meeting takes place. It's during that meeting that the match grant is decided for the year. In the weeks preceding, I will have spoken to several non-profits trying to identify programs that the board members and you, our physician members, will find worthy investments in our community. And thanks to all of you, we have done some substantial good in the past few years: providing devices in senior living communities so that they can hear newspapers and magazines read out loud; funding math tutoring for at-risk north Omaha boys during the pandemic; supplying a health clinic for homeless people.

This year, the match grant is focusing on food insecurity in South Omaha through the Latino Center of the Midlands' Siembra Salud program. It helps families learn how to grow their own food in an effort to provide access to fresh produce and education in healthier eating. The contributions by physicians and the MOMS Foundation will provide tools, seeds and raised cloth beds for the participants. In addition, it will include soil testing to ensure that it's safe from contaminants like lead which are factors in that area. They give the families the supplies to build cloth raised beds; they're built so that they can move with the families since many of those who take part tend to move frequently. In choosing this, the foundation board members believe that teaching families these skills will change generations.


Now the work is up to you. The foundation puts up the first \$5,000 as a match, hoping the physicians will match it to make the kits available for 20 families. The more generous you are, the more families we can serve because we know the program has a waiting list of 50 to 80 families each year.

We also owe huge thanks for the board members who serve on our foundation board. They are a mix of physicians and community members and every year; I am so appreciative of the thoughtfulness in which they evaluate grant requests and determine what community organizations will get dollars for their projects. This year, they have chosen 10 organizations to invest more than \$31,400 of your donated dollars to provide translation services for an organization that works with abused and foster children, STEM equipment for an after-school program, and mental health support groups in four languages for a senior citizen center among others.

“The foundation represents the investments from you and the physicians who have preceded you, who have trusted MOMS to be good stewards of your dollars to vet the organizations and the impact they can make to make our community better and healthier. Thank you for your trust and for believing in the collective good we can do.”

— CAROL WANG

Board members have also helped fund the start-up money for the R+R Wellness Center that we've opened as a physician space to provide connection and a safe place in light of the extreme strain that COVID-19 has wrought on your lives.

Last, but not least, we have to express our profound gratitude to all of you. The foundation represents the investments from you and the physicians who have preceded you, who have trusted MOMS to be good stewards of your dollars to vet the organizations and the impact they can make to make our community better and healthier. Thank you for your trust and for believing in the collective good we can do. It ensures that next October I will be busy talking to people about innovative programs that can transform lives with an investment from the MOMS Foundation and then walking into the meeting with the same sense of anticipation and excitement to see what fuels the imagination of the board members and inspires you. 

THANK YOU!



AMY REYNOLDSON

Executive Vice President
Nebraska Medical Association

“Thank you for continuing to stay the course, taking the high road, focusing on the goal when I know that it has been challenging, frustrating, and just plain exhausting. A unified voice can become a resounding voice if we all continue to sing from the same sheet of music.”

— AMY REYNOLDSON

it is no secret that many of you are feeling the fallout from those that have expressed a lack of trust or appreciation for you as a physician.

I am confident that we will return to a time when the entire community, most important your patients, will trust your guidance as a physician without hesitation. They will look to you for answers knowing with great confidence you will be there right beside them, step by step. We will return to a place where the science is trusted and recognized as the foundation for medicine and not referred to as the enemy or misinformation. I know this will happen because I have seen firsthand the way you have all gone through the storm and are standing stronger now more than ever before, unified. Continue to remain steadfast with your commitment to medicine and doing what is best for your patients because it is driven by the science.

Thank you for continuing to stay the course, taking the high road, focusing on the goal when I know that it has been challenging, frustrating, and just plain exhausting. A unified voice can become a resounding voice if we all continue to sing from the same sheet of music.

Thank you. Thank you for continuing to get up every day and doing what you do, because it matters. You matter. Your guidance, knowledge, and ability to lead others matters. Science matters.

Thank you for doing what is right even though it means you may be targeted on social media or even the mainstream media. Thank you for putting in those incredibly long days only to know that you must get back up and do it all over again. Thank you for sticking your neck out a little further than most when you want to do what is right for your community members because you care.

Thank you for all that you do for your patients, your community and this great state. I am proud to be a Nebraskan and I am even more proud to be associated with all of you, trusted leaders of health care in the state of Nebraska.

Thank you.

Thank you.

Thank you!

THANK YOU!

Thank you for advocating for the health of all Nebraskans. 

The world has changed. Your world as a physician has changed and keeps on changing. It has been nearly two years. Two years of constant change: adjusting, learning, educating, addressing disruption, confusion and misinformation. You have been at the epicenter of it all. The center of determining how to best move forward based on science. Unfortunately, at times physicians have been at the core of criticism for following the foundation of medicine, the science, and advocating for what you believe is in the best interest of the public.

Little did we know when this all unraveled that the public's trust of physicians would be hampered by all the inaccuracies and false information. Some may say that the distrust has been caused by the ever-changing, sometimes conflicting, information conveyed by our elected officials, national experts, or leading health care organizations around the globe. Others may say it is due to the influx of misinformation being shared in the various forms of media and being absorbed by many as though it is the gospel, no matter the source. Regardless of the why,

THE IMPORTANCE OF RELATIONSHIPS AND TOUCHLESS TECHNOLOGIES WHEN INVESTING IN COMMERCIAL REAL ESTATE



KIM MATNEY

Berkshire Hathaway Home Services

Many trusted business relationships have been strengthened since the onset of a global pandemic that has affected every area of our lives and every industry, including commercial real estate.

Hospitality, office and retail segments were initially hit the hardest due to sudden lockdown and then the extended limited capacity requirements. From the onset of the pandemic, there continued to be a healthy demand within the multifamily, health science/medical and Industrial sectors as they continued to sell and lease at pre-COVID rates, even promptly seeing an increase in their sales and lease figures, growing within the hardest part of the pandemic and beyond.

Many industry experts concur that, even though they are not presently near their pre-COVID occupancy rates, hospitality has made steps toward recovery. Office is also making progress as many companies have already safely returned to the office with the adoption of new sanitizing procedures, distancing policies and touchless technologies that allow staff to access space without contact. Big tech companies

are also buying up large quantities of office space while pioneering the confidence that the world will safely return to the office. Retail has made remarkable progress since the shutdown with many brick-and-mortar retailers stating their on-site visits are at pre-COVID numbers.

Meanwhile, landlords are upgrading existing buildings with the same wellness design and touchless technologies that developers are now prioritizing in new developments. In addition to accommodating the necessity for physical distancing by creating alternate operational entrance and exits, widening the areas of pinch points and security check points to allow for proper physical distancing, developers are now focusing on WELL Building Standard and Fitwel specifications more intently now than ever before, ensuring the building is designed to promote safety and mental wellbeing. These touchless technologies are becoming more and more common throughout buildings to keep people safe and reduce pathogens in buildings.

The demand for multifamily has remained strong even with the eviction moratoriums, which are now expired. Residential landlords are presently seeing record-setting increases in rental rates.


Industrial properties are in such high demand and inventory is so scarce that businesses are buying land and developing the property they were hoping to find to purchase for immediate occupancy. Some local industrial developers have projects booked out farther than they ever have been. The costs of certain building materials have significantly increased. This is driving increases in the sale price and lease rates of current existing NNN industrial properties.

Medical office buildings have also seen an increase in sale and lease rates within the economic climate of the pandemic. In addition to the pandemic, our aging population continues to require care, securing and increasing the demand for medical office space. From an investor's point of view, the limited amount of investable medical office building inventory continues to be highly desired as providers and health care systems own the majority of medical office buildings.

While relationships have always been important, the pandemic has placed an even stronger emphasis on relationships. Specifically, relationships between landlords and tenants. For years, long before the pandemic was ever fathomed, I have always noticed landlords working directly with their tenants to get through rough times.

Immediately when the pandemic hit, I observed several NNN landlords take prompt action with temporary rent abatements or other arrangements to greatly assist their small business tenants. These landlords continued to pay their lenders on these assets while the tenant/s were struggling to pay the rent. I know of several grateful small businesses that are operating today because their landlord was so supportive through the roughest parts of the pandemic. This landlord kindness was immediate, precisely at the moment of need and before any local or federal stimulus these specific tenants may have eventually received. As you can imagine, these businesses are quite thankful to lease from these kind landlords who diligently worked to cover property expenses when the rent was not always coming in as scheduled, while providing the opportunity for the tenant to catch up. With abundant gratitude, these tenants did catch up in full. The pandemic has created extreme circumstances that have strengthened many existing trusted business relationships.

Many investors are confident we will see this recovery continue and that is evidenced by the transactions that are currently taking place. While there is sincere concern about inflation, many investors are finding some shelter in their real property acquisitions and some comfort in the low interest rates we are seeing at this time.

Response to crisis situations can bring out the good in people. The importance of trusted business relationships cannot be underestimated. Helping each other in times of crisis can lead to long term rewards for everyone involved even if the kindness is not ever publicly known, the kindness is known to those who matter and will pay it forward. 

YEAR-END TAX PLANNING FOR PHYSICIANS



MARY E. VANDENACK

Managing Member
Vandenack Weaver

PLEASE NOTE: As this is being written, tax proposals that may affect tax planning for physicians are pending. Some of the proposals may affect entity selection, increase tax brackets, impact the benefit of the 199A deduction and add certain taxes. Because the proposals are still pending, tax legislation should be monitored through year end.

RETIREMENT PLAN CONTRIBUTIONS

Maximizing contributions to a retirement plan is one of the easiest ways to reduce income taxes. For those who own a practice, retirement plan structure should be evaluated to determine the best approach to maximize physician deductions. A common beneficial structure for a physician practice is a safe harbor 401(k), which has a discretionary contribution structured to allow physicians to maximize contributions at the lowest costs. For the employed physician, consider contributing the maximum amount permitted, which is usually accomplished by deferrals from wages.

Many employers structure plans to pay plan expenses from the plan itself. Doing so is paying otherwise deductible expenses from dollars that have already been deducted. That is, paying plan expenses from the plan reduces the value of deferral.

This is often sold as a way to shift certain plan expenses to non-physician participants; however, the tax benefit of paying the expenses at the employer level rather than at the plan level may often have the effect of paying the expenses by providing the physician-owners a greater deduction and more deferral. Plan experts should be able to provide you mathematical modeling to show the best approach to handling plan expenses.

THE BACKDOOR ROTH-IRA

A ROTH-IRA is an individual retirement account to which contributions are made with after-tax dollars. Contributions and earnings can grow tax-free and you can withdraw them tax and penalty free at the age of 59½ as long as the account has been open for at least five years. There are no contribution age requirements. There are no required minimum distributions. There are no income taxes for inherited IRAs.

High earners may not be able to make a direct contribution to a ROTH-IRA due to income limits established by Internal Revenue Service. A backdoor ROTH-IRA is a strategy used by high-income earners to create a ROTH-IRA. To create a backdoor ROTH-IRA, you make a nondeductible IRA contribution to a traditional IRA and then convert the IRA to a ROTH-IRA. The contribution limit for 2021 is \$6,000.

The backdoor strategy works best if you don't currently have a traditional IRA. If you want to use the strategy and do currently have a traditional IRA, you may be able to roll the IRA into a 401(k) plan prior to using the backdoor strategy.

This strategy has been targeted under legislative proposals. Check the latest rules prior to engaging in this strategy.

CHARITABLE CONTRIBUTIONS

Generally, charitable contributions are limited to a percentage of adjusted gross income. For 2021, individuals may deduct up to 100% of adjusted gross income and corporations may deduct contributions

up to 25% of income. For the charitably inclined, 2021 allows a greater than typical charitable contribution; however, if you believe that tax rates are likely to increase in the future (as provided in current legislative proposals), it may be more tax beneficial to make charitable contributions over time.

REVIEW BENEFIT PLAN OPTIONS


The employed physician should review employer benefit plan offerings and ensure that any tax advantageous benefit options are being utilized. Many employers offer Section 125 plans for various benefits. The medical practice should annually review benefit plans such as group disability, group dental, and health care plans.

A health savings account (HSA) is one of the ultimate tax-efficient ways to save. HSA contributions are contributed tax free, grow tax free and are distributed tax free if used for qualified medical expenses. While the author generally favors tax deferral, HSAs are a possible exception in that you can accumulate substantial funds in an HSA and potentially never pay income tax if the amounts are used to pay medical expenses.

REVIEW ENTITY SELECTION

The right business entity depends on practice structure, revenue, whether you have employees, and asset protection issues. Current legislative proposals may impact the best entity type. Such legislation should be monitored. Regardless of proposed legislation, best practices include annual review of entity structure.

REVIEW INCOME PRIOR TO YEAR END

After the tax year ends, it is too late to manage income. Review income and expenses prior to year-end. Manage the income. Look for opportunities to defer income, maximize deductions and consider any legislation that may get passed. 

READY TO ACTIVATE:

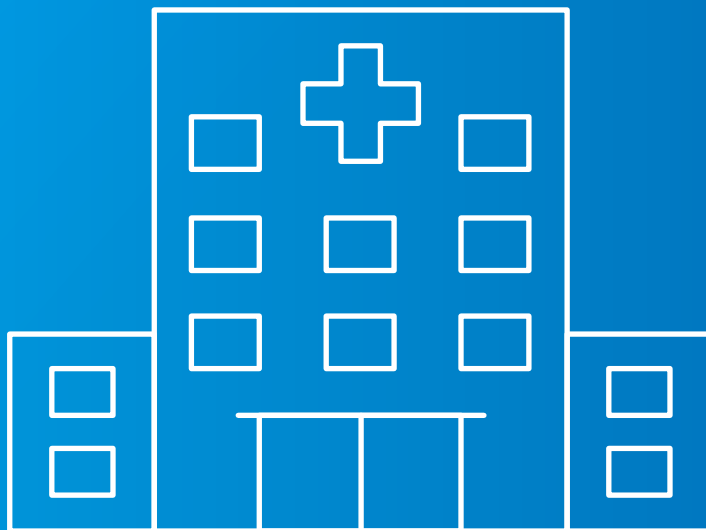
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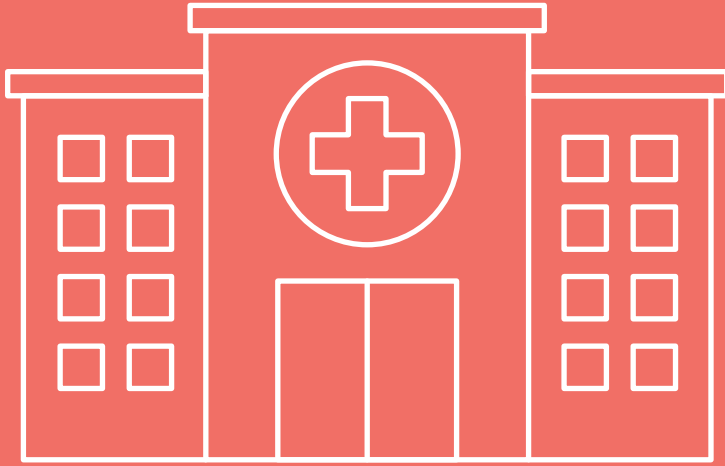
When heavy rains in spring 2019 pelted parts of Nebraska and cut off access to Fremont, the Omaha Metropolitan Healthcare Coalition sprang into action.

The coalition served as a coordinating organization for local hospitals, emergency management systems and public health to ensure that residents in the isolated area received the care they needed—and health care institutions could provide it, said Justin Watson, coalition coordinator. The coalition helped find needed resources for the Fremont health care institutions and others throughout the region affected by the flooding, Watson said.

Watson recalled that a resident in a homeless shelter in Fremont needed a bariatric chair—and the coalition located one and worked with state response partners to have it flown in with other medical supplies.

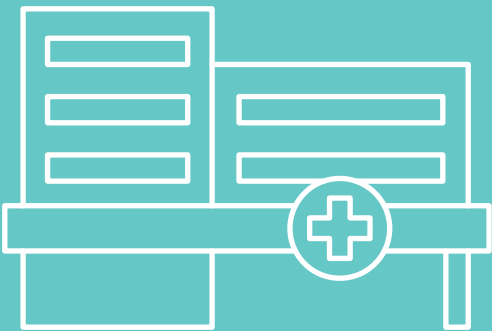
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“When we activate in response to an emergency, those who come to collaborate are doing so as volunteers. That speaks volumes about their commitment.”

— JUSTIN WATSON



FROM PAGE 15

“When we activate in response to an emergency, those who come to collaborate are doing so as volunteers,” he said. “That speaks volumes about their commitment.”

The coalition remained activated for nearly one month during the 2019 floods.

Now some background about the Omaha Metropolitan Healthcare Coalition, which goes by OMHCC. It was formed in 1999, but called the Omaha Metropolitan Medical Response System, or OMMRS, until about five years ago when federal guidelines dictated the name change, Watson said.

As the only paid employee, Watson said, the coalition relies on member organizations and many others that are involved in emergency response and preparedness in the five-county area served by the coalition (Douglas, Sarpy, Washington, Saunders and Dodge).

Membership consists of four core types of health-related organizations: hospitals, emergency medical services, public health and emergency management, as well as many other additional types of organizations. When the coalition activates in response to an emergency, Watson has 63 organizations and more than 250 people as contacts.

The coalition, Watson said, has four main responsibilities:

- Information-sharing—“We focus on situational awareness and making sure we have a common operating picture.”
- Resource-sharing among the facilities—“Whether it’s our own or other health care assets.”
- Liaison with jurisdictional authorities—“Coordinating with emergency management, public health, and others.”
- Facilitate response actions and commands—“Coordinating how we are doing this and how can we do it better.”

Watson said the coalition has activated one other time during his three years on the job: the COVID-19 pandemic. The coalition activated on Jan. 27, 2020, which remains in place.

The coalition first coordinated a health care unified command, beginning in March 2020, among member institutions and organizations. Discussion led to collaboration and resulted in unified policies in health care relating to such topics as masking and visitation policies. The institutions were better able to navigate the pandemic, Watson said, because they collaborated. “Iron sharpens iron.”

Watson said the coalition quickly dispersed its stockpile of resources that had accumulated in the past two decades. The coalition responded to 256 requests for resources and, for example, supplied 1.3 million surgical masks, 12,000 surgical gowns and 20 sets of everything needed to set up care for a patient (Think, for example, bed pans, linens and blood pressure cuffs.)

“Not only were we involved in the distribution of coalition assets, the Douglas County Department of Health relied on us to help distribute its stockpile.” — JUSTIN WATSON

“Not only were we involved in the distribution of coalition assets, the Douglas County Department of Health relied on us to help distribute its stockpile.” The coalition, to date, has provided eight distributions of supplies to hospitals, emergency medical services and long-term care facilities in the five-county area.

The coalition also has focused on such areas as PPE reuse, IT resources and infection prevention.

At the outset of the response, the coalition brought together senior leaders and chief medical officers from all hospitals in the region to discuss the current situation, a regional response, and establish communication and information sharing.

Those initial calls also included local and state public health partners, including the state epidemiologist at the Nebraska Department of Health and Human Services. These initial discussions laid the foundation for the OMHCC response and the ongoing work of the regional health care unified command. All hospitals with open incident command centers are invited to participate in the health care unified command. This unified command approach has allowed for information sharing, problem-solving, and strategy discussions in the health care community.

Watson said responding to health-related emergencies draws the most attention to the coalition but is only part of its role. Preparedness is the other.

The coalition features an executive committee, a general membership committee and several work groups (such as alternative care facilities, pharmacy and exercises/training). These work groups bring like-minded individuals and organizations together to improve facility and regional

planning through discussion, education, training and exercises.

In recent years, at the suggestion of the Nebraska Department of Health and Human Services, the coalition focused its planning and training on incidents involving a surge of burn patients and pediatric patients in the five-county area. A new focus in the near future will be on radiologic and chemical response annexes, he said. Watson added the coalition has four separate training exercises planned for its member organizations through June.

“Our focus is not just on the pandemic—it’s all hazards.” 

COMMUNICATION IS KEY WHEN TREATING REFUGEES

Physicians should be prepared to look beyond the obvious when treating refugees new to Omaha and, possibly, the United States.

“The obvious and most prevalent challenge is the language barrier,” said Will Ostdiek, M.D., chief medical officer at the Charles Drew Health Center. “One key is using quality interpreter services.”

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(from left) Charles Drew Health Center CEO Kenny McMorris and chief medical officer William Ostdiek, M.D.

“Our health system can present challenges enough for patients who are native to the United States. It can be a completely different world for refugees and immigrants.”

— WILL OSTDIEK, M.D.



FROM PAGE 17

Avoid the temptation to allow a relative or friend, who accompanies the patient, to interpret for you, Dr. Ostdiek said, to ensure that what you are saying is conveyed to the patient and vice-versa. Friends and families may screen—whether knowingly or unknowingly—the information being shared, he said.

“Relying on a trained interpreter is key—it ensures that all information shared is conveyed accurately—both ways.”

Being prepared to bridge any communication challenges is just one piece of advice Dr. Ostdiek offered Omaha physicians who currently treat—or may soon do so—refugees who are new to Omaha and, possibly, unfamiliar with our health care system.

“Our health system can present challenges enough for patients who are native to the United States,” he said. “It can be a completely different world for refugees and immigrants.”

Be prepared to explain how referrals work. Explain how to pick up prescriptions at pharmacies—all tasks that may be familiar to most patients. Refugees may also encounter financial barriers and not understand how insurance and what assistance may be available to them.

Don’t assume patients are current with their vaccinations. “The schedules for vaccinations may be similar to ours or they may be different in their home countries. This can be a challenge.”

Similarly, don’t assume female patients have received regular gynecologic care or pre-natal care, if they are pregnant. Again, communication is key.

Don’t assume refugees understand Omaha’s transportation system, including the bus system. Determining how to get to the pharmacy can be problematic without a working knowledge about how to get from one place to another.

Don’t assume patients are current with their vaccinations. “The schedules for vaccinations may be similar to ours or they may be different in their home countries. This can be a challenge.”

— WILL OSTDIEK, M.D.

SOME BACKGROUND: Refugees are people outside of the United States seeking protection from feared persecution in their homeland. Millions of refugees are driven from their homes and communities each year because of armed conflict, human rights violations and fear of persecution. They come to the United States seeking the chance to live in freedom and peace. Nebraska’s refugee population has mainly come from Southeast Asia and Vietnam, the former Soviet Union, Bosnia, the Middle East and Africa.


While Charles Drew Health Center, OneWorld Community Health Centers and other community health clinics may regularly treat refugees and immigrants, Dr. Ostdiek said, for most physicians these encounters will be occasional, at best, and, more likely, rare.

Dr. Ostdiek offered additional advice, noting that being able to communicate with patients through interpreters or services can help with all other aspects of their care. He noted that physicians may encounter social barriers that extend beyond medicine when treating refugees:

Be prepared to spend additional time with your patients. Communication using an interpreter will add to the needed time, along with the extra time needed to explain referrals, prescriptions, payment options and follow-up visits.

Community health centers, because of their higher volume of patients who speak languages other than English, can have forms and signage available in multiple languages, Dr. Ostdiek said. Physicians in private practice may not be able to justify the cost.

“Have materials in multiple languages available when you can,” he said. “Some languages are easier than others. Do what you can.”

ANOTHER SUGGESTION: Hire support staff who are bi-lingual when you can. A multilingual staff can bridge some communication gaps. Learn which pharmacies feature bilingual staffers. 



**“It’s a space where
physicians can come
and go. It’s a place
where they can just be.”**

— CAROL WANG

A PLACE JUST FOR PHYSICIANS:

MOMS R+R WELLNESS CENTER

More than anything else, it's a safe place for physicians. It's a place where they can relax, where they can exercise and where they can socialize. It's a place where they can enjoy a snack, a soft drink or a glass of wine. Or, have a private conversation, read a book and take a yoga class.

"It's a space where physicians can come and go. It's a place where they can just be," said Carol Wang, MOMS executive director.

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FROM PAGE 21

Wang is describing the R+R Wellness Center, which opened in November thanks to support from the MOMS Foundation. The center, at 633 N. 114th St. in Omaha, is open, 24 hours a day, seven days a week, to all physicians. MOMS members, however, can reserve space for private group meetings and social gatherings.

The R+R Wellness Center is part of MOMS' focus on physician wellness, which became even more essential during the pandemic, Wang said.

Wang said the time was now to create the wellness center—noting she's seen physicians retire early because of the pandemic, experience depression and even contemplate suicide. In hospital settings, physicians were required to refrain from socializing. "Everyone is avoiding each other."

Welcome to the R+R Wellness Center, she said.

CONT. PAGE 24



The Esser File

Hometown
Omaha

Undergraduate Degree
University of Nebraska-Lincoln in chemical engineering

Master's Degree
Tulane University (New Orleans) in medical management

Medical Degree
University of Nebraska Medical Center

Title
Chief Medical Officer, Blue Cross Blue Shield of Nebraska

Hobbies
Cooking, gardening and photography

Family
Husband, Bruce Esser; two daughters, Sara Jansen and Beth Esser

Why She Joined MOMS
"I saw the opportunity MOMS gives us to make a difference in the medical community and in our community at large."

FROM PAGE 22

Idea in hand about bringing physicians together in a safe environment, Wang went looking for examples of wellness centers to replicate—and found none. Somewhat similar, she realized, were the lounges at UNMC for medical students and medical residents. Back in the day, she knew, hospitals included lounges just for physicians. Similar, but not quite what was needed.

"This is an experiment for us," she said. "It's that novel of an idea."

MOMS needed funding for the center and turned to the Metro Omaha Medical Society Foundation. "We couldn't do this without the foundation," Wang said. "The foundation is behind our effort to promote physician wellness."

The MOMS Foundation, which traditionally offers grants to health-related organizations in the greater Omaha area, decided to deviate from its funding norm and financially back the Wellness Center, said Debra Esser, M.D., foundation president.

Dr. Esser said she is planning to use the Wellness Center as a place to meditate—something she has neglected at times during the past two years. She also looks forward to getting reacquainted with colleagues she hasn't seen for some time.

Funding in place, MOMS went looking for an appropriate location—and found it near 114th Street and West Dodge Road. The center is situated in a former clothing boutique and includes 1,400 square feet in the main showroom area. The center includes a small kitchenette, rest rooms and storage space in back, which has been converted into an office.

Physicians may access the building at any time using a lock box. No usage fees, including for the snacks and refreshments, are charged.


Wang said MOMS will track usage for the next six months to see if the Wellness Center resonates with physicians. "This is an experiment. I am eager to see how our

"As a physician, I think sometimes we take care of others and don't take care of ourselves as we should. The center will allow us a place where we can be with other physicians and go through some healing. It's a place where we can take care of ourselves in a place that understands what physicians are going through."

— DEBRA ESSER, M.D.

"As a physician, I think sometimes we take care of others and don't take care of ourselves as we should," she said. "The center will allow us a place where we can be with other physicians and go through some healing. It's a place where we can take care of ourselves in a place that understands what physicians are going through."

members—and the community of physicians—respond to this opportunity."

Dr. Esser invited her peers to join her at the center. "I want to stress that this center is made available by physicians for physicians, with support from their foundation," she said. "It's a very unique opportunity for our members. I hope it will be well utilized." 



NEW MEMBERS

Elizabeth Reiche, D.O.

Emergency Medicine
UNMC/Nebraska Medicine

Krysta Sutyak, D.O.

General Surgery
UNMC/Nebraska Medicine

IN MEMORIAM

CJ LABENZ, M.D.

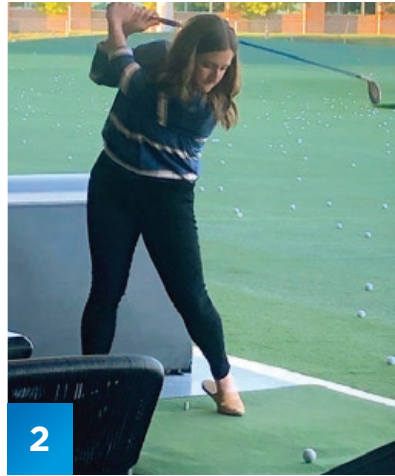
June 22, 1948 – Aug. 11, 2021

JOHN D. WOODBURY, M.D.

Sept. 22, 1938 – Sept. 12, 2021



MOMS EVENT RECAP



EARLY CAREER PHYSICIANS NIGHT AT TOPGOLF

MOMS Early Career Physicians resumed their in-person events in September and met at Topgolf for a night of networking, golf, food and drinks. 🍷

1. (from left) Drs. Betsy Mahal, Amandeep Mahal, Juan Santamaria, and Jordan Warchol-Brown enjoy their night out at Topgolf.
2. Dr. Jordan Warchol-Brown, Early Career Physicians Committee member, shows her golf swing.
3. Seneca Harrison, CEO of MOMS Strategic Partner, Quality Clinical Research, joins in at Topgolf.



WOMEN IN MEDICINE FALL SOCIAL

MOMS Women in Medicine group met in-person for the first time this year at its Fall Social at Bellevue Berry Farm & Pumpkin Ranch in late October. The women enjoyed catching up while staying warm with hot soup, snacks and s'mores around the bonfire. 🍷

1. (left to right) Co-chairs Drs. Cori McBride and Tiffany Tanner, Drs. Ann Russell, Audrey Paulman, Andrea Jones and Stephanie Hartman warm up around the bonfire.
2. (left to right) Drs. Audrey Paulman, Stephanie Hartman, Tiffany Tanner and Cori McBride.



RETIRED PHYSICIANS GROUP RECEIVED COVID UPDATE

The MOMS Retired Physicians Group held its final meeting of the year in late September at the UNO Community Engagement Center. Douglas County Health Department senior epidemiologist, Dr. Anne O’Keefe, provided members with a COVID-19 update for Omaha. 📍

1. Dr. Anne O’Keefe, senior epidemiologist for Douglas County Health Department, provides a COVID-19 update to the Retired Physicians Group.
2. Retired Physicians Group chairman, Dr. Robert Cochran, with Dr. Anne O’Keefe.



MOMS PHYSICIAN & POLICYMAKER MEET & GREET

MOMS member physicians, along with those representing the Nebraska specialty societies for pediatrics, internal medicine and psychiatry, met with state lawmakers during a reception at Heirloom Foods in early October for a night of health care policy conversations. 📍

1. Drs. Joan Daughton and Brett Kettelhut visit with State Sen. John McCollister.
2. Drs. Sean Figy, Rowen Zetterman and Jordan Warchol-Brown.
3. Nebraska state senators John Arch and Rita Sanders visit with MOMS Executive Director Carol Wang.




CENTER FOR HUMAN PERFORMANCE OPTIMIZATION FEATURES COLLABORATIVE APPROACH TO RESEARCH

Boys Town recently opened its Center for Human Performance Optimization at Boys Town National Research Hospital. The center features a neuroscience research-care hybrid. Adolescents who have a physical disability are surrounded by dedicated physical therapists, leading researchers and advanced motion technology and equipment. This collaborative research style makes the center the only of its kind, not only in Omaha but nationwide.

"Boys Town has a history of translating research into premier clinical care," said Jason Bruce, M.D., executive vice president of health care and director of Boys Town National Research Hospital. "Bringing together the best minds in neuroscience research and care will help us uncover new and better ways to help children with mobility limitations and support brighter futures for them and their families."

This 2,300-square-foot physical therapy center is filled with equipment that has been specially chosen to enhance skills for children of all abilities, such as the 60-plus-foot track with overhead robotics to optimize walking and provide safely guided fall strategies without risk of injury, or the specialized split belt and curved treadmills to increase leg power and improve gait.

With the Boys Town Institute for Human Neuroscience next door, collaboration will focus on developing rapid prototypes of technology and therapeutics so that every individual can have a breakthrough in improving their mobility.

"We have built a world-class environment where we can research cutting-edge physical therapy interventions and training," said Brad Corr, DPT, associate director at the Center for Human Performance Optimization. "Father Flanagan recognized the importance and strong influence environment has in how we think, perform and learn. The environment in the CHPO is designed to feel more like a fitness or sports facility than a medical clinic." 




DEMAND FOR BEHAVIORAL HEALTH SERVICES FOR CHILDREN ON THE RISE

CHI Health is seeing more demand for behavioral health services for children. Since March 2020, CHI Health providers have seen roughly 37,633 patients under the age of 18, up nearly 25 percent from the previous 18 months.

"Everyone became more anxious with the pandemic, we all went through a crisis," said Shashi Bhatia, M.D., CHI Health Child & Adolescent psychiatrist. "Everyone knows someone who was affected, and that stress and anxiety may take years for kids to work through."

Virtual visits account for almost one-half of the appointments in the last 18 months. Data show a 7,833 percent increase in telehealth usage for children and teens.

"It was genuinely amazing to be able to maintain therapy services this way," Dr. Bhatia said. "For kids who needed to be seen regularly, they were able to be more consistent and we had less no-shows. For families with limited resources and transportation, I don't know what we would have done without it."

With over 130 physicians, nurse practitioners, therapists and psychologists, CHI Health is the largest provider of behavioral health services in Nebraska and southwest Iowa, and continues to look for ways to support the community. In October, a digital version of CHI Health's "Better You: Healthy Minds" magazine was sent to school principals and superintendents in the region to share with families and teachers. This fifth edition of the magazine gives insight on the challenges young people are facing, and offers advice and solutions from mental health providers. 




CREIGHTON AND CHI HEALTH TO PARTICIPATE IN CDC STUDY EXAMINING POST-ACUTE COVID-19

Creighton University and its clinical partner CHI Health were selected by the Centers for Disease Control and Prevention (CDC) to participate in a study about the effects of COVID-19 following the acute illness.

The study, "Clinical Characteristics of Post-Acute COVID-19," involves examining the effects of COVID in those who exhibited significant symptoms of the disease, said Maureen Tierney, M.D., chair of the Department of Clinical Research in the Creighton School of Medicine and medical director for clinical research for CHI Health. Dr. Tierney is serving as the principal investigator of the study for Creighton/CHI Health.

The study, Tierney said, aims to take a broad look at the epidemiology of post-acute COVID to determine what percentage of people exhibited symptoms, including neurologic or pulmonary issues, after a clinical case of COVID-19. The study will review the course of the disease in several hundred patients beginning two weeks after hospitalization or acute illness.

"I think there was an interest in looking at individuals who had acquired the virus in communities where meatpacking is prevalent, and also because those communities were diverse in terms of location, ethnicity and occupation," Dr. Tierney said.

Investigators will work with a small team of medical students and internal medical residents. 



ROBOTIC-ASSISTED SURGICAL APPROACH CALLED 'GAME-CHANGER'

Methodist Hospital in Omaha became the first in Nebraska to acquire the Ion by Intuitive—a robotic-assisted surgical system for lung biopsies. Jennie Edmundson is now the second location in Iowa with the technology—the other being in Des Moines.


The new technology helps physicians access all lung nodules to detect and obtain tissue samples. Instead of taking a wait-and-see approach in some cases, physicians using the Ion technology will benefit from diagnostic answers and be able to jump-start the path to treatment, if warranted.

"This new technology is a game-changer for us," said Adam Wells, M.D., a pulmonologist with Methodist Physicians Clinic and Methodist Hospital. "Through our low-dose CT screening initiative we have certainly been able to identify more lung cancers than ever before. But with this new technology, we can more quickly and safely get a diagnosis for our patients with the goal of quickly identifying, and curing, early stage lung cancer."

Here's how Ion system works:

Using CT scan data of a patient's lungs, doctors generate a 3D image of the airways and its branches to identify the target nodule and create a preplanned path to reach it.

During bronchoscopy, the thoracic surgeon uses the Ion controller to navigate an ultrathin catheter along the preplanned path to the nodule. The flexible catheter has 180-degree articulation and is able to pass around tight turns and into the branches of the lungs.

Once the catheter reaches the nodule, robotic technology enables the pulmonologist to lock the catheter in place. The pulmonologist extends the special Ion system needle through the catheter into the lesion to obtain a tissue sample to biopsy. 



University of Nebraska Medical Center

PEDIATRIC DERMATOLOGY DIVISION WELCOMES NEW CHIEF


Nicole Harter, M.D., has been named first chief of the newly created Division of Pediatric Dermatology in the University of Nebraska Medical Center Department of Dermatology and division chief of Pediatric Dermatology at Children's Hospital & Medical Center.

"This opportunity is unique," Dr. Harter said. "There are not a lot of brand-new pediatric dermatology divisions being created, and not a lot of them are going to have a new chief that hasn't been a chief at a previous institution. It was something I couldn't turn down."

She will work again with UNMC Department of Dermatology Chair Ashley Wysong, M.D., who was a mentor to Dr. Harter during her residency training in dermatology at the University of Southern California.

With the support and resources from the UNMC and Children's collaboration, Dr. Harter said, "we'll be able to bring in people who are really invested in our goals, our mission, our vision—we can build this new division very carefully, from the ground up, learning and leading along the way."

Looking ahead, Dr. Harter is hoping to grow the program, adding other pediatric dermatologists on faculty and providing comprehensive outpatient and inpatient services as well as the development of multidisciplinary clinics.

She said she also is excited to have a teaching role. "A big part of why I love working in academics is the training aspect," she said. "We'll have pediatric residents with us, dermatology residents, and in the future a pediatric dermatology fellowship. Being able to bring these learners into our clinics and show them what pediatric dermatology has to offer is important for their education, and also for the care of the community at large." 

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APPLICATION FOR MEMBERSHIP



This application serves as my request for membership in the Metro Omaha Medical Society (MOMS) and the Nebraska Medical Association (NMA). I understand that my membership will not be activated until this application is approved by the MOMS Membership Committee and I have submitted my membership dues.

PERSONAL INFORMATION

Last Name: _____ First Name: _____ Middle Initial: _____
 Birthdate: _____ Gender: Male Female
 Clinic/Group: _____
 Office Address: _____ Zip: _____
 Office Phone: _____ Office Fax: _____ Email: _____
 Office Manager: _____ Office Mgr. Email: _____
 Home Address: _____ Zip: _____
 Home Phone: _____ Name of Spouse: _____
 Preferred Mailing Address:
 Annual Dues Invoice: Office Home Other: _____
 Event Notices & Bulletin Magazine: Office Home Other: _____

EDUCATIONAL AND PROFESSIONAL INFORMATION

Medical School Graduated From: _____
 Medical School Graduation Date: _____ Official Medical Degree: (M.D., D.O., M.B.B.S, etc.) _____
 Residency Location: _____ Inclusive Dates: _____
 Fellowship Location: _____ Inclusive Dates: _____
 Primary Specialty: _____

I certify that the information provided in this application is accurate and complete to the best of my knowledge.

Signature

Date

FAX APPLICATION TO:
402-393-3216

MAIL APPLICATION TO:
Metro Omaha Medical Society
7906 Davenport Street
Omaha, NE 68114

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www.omahamedical.com

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