Kentucky Chapter
American College of Cardiology

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(202) 375-6000, x5603

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resource@acc.org
(202) 375-6000, x5603

National Cardiovascular Data Registry (NCDR)
ncds@acc.org
(800) 253-4636

Heart House
2400 N St. NW
Washington, D.C. 20037

Password Assistance:
Members can contact the Resource Center at
800-253-4636, x5603
(9:00 am to 5:00 pm Eastern time), or email
resource@acc.org

Kentucky ACC Chapter
2010 Annual Meeting
in conjunction with the
Kentucky Medical Association
Annual Meeting
Wednesday, September 22, 2010
7:30 am-12:00 pm
Hyatt Regency
320 West Jefferson Street
Louisville, Kentucky
(502) 581-1234
www.louisville.hyatt.com

President’s Message
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Juan Villafane, MD, FACC
KY-ACC President

Hola Amigos! For me, it is an honor to take over Dr. David Molierno’s tenure as Governor for our ACC Chapter. I have been a member of the College for over 25 years. It is time for me to give back and help with our distinguished organization.

As you are well aware, the headlines in newspapers across the country are all about the Health Reform Bill. Your ACC, over the last several years, has been actively advocating with our legislators to fix our current healthcare system by focusing on both quality of care and accessibility to care. The legislative bill, as currently approved, improves funding in Medicaid, allows for a $250 rebate for Medicare drugs, grants small businesses a tax credit, eliminates the “pre-existing condition” clause, and expands coverage to about 32 million actually uninsured. As a result, there will be a shortage of physicians secondary to an increase in the insured population. Unfortunately, it does not address the SGR problem and lacks meaningful medical liability reform. The negative provisions of the current bill may be addressed as legislative amendments are crafted. In light of this, the College has been prescriptive about the pros and cons of this bill, and continues to be involved in shaping some of the amendments, pursuing the support of both democrats and republicans in Congress. Our advocacy for quality cardiovascular care and our continued strides to influence healthcare policies promotes our core value of professionalism, where the interests of the patients are primary.

In this regard, I would like to share some of our goals for the coming year. Our priority will continue to be addressing the recent Medicare cuts affecting many of our patients and practices. As a member of the ACC Board of Governors, I can tell you that we have dedicated an incredible amount of time in meeting with legislators trying to gain support for our cause. For example, the Gonzalez bill is currently being introduced to the House of Representatives. This bill will address the recent CMS cuts. To this date, we have acquired over 100 co-sponsors, including one of our own local leaders, the Honorable John Yarmuth. Your College has committed its leadership to work on possible solutions to the pending substantial cuts in reimbursement.

We will continue advocating for accessible care for our patients. This leads me to our second goal of increasing advocacy funds through ACC-PAC. Our goal this year is for our Chapter to win the ongoing ACC competition in recruiting as many new donors to our PAC and to emphasize the quantity of donations received, not the amount of the donation. You may donate as little as $100 through the ACC’s website: www.accpacweb.org. Just think of it as an investment in our future.

With regard to our community’s state of health, I personally feel strongly about the toxic effects of smoking and childhood obesity. To that end, we have started collaborating with the American Heart Association, Kentucky Medical Association, and Greater Louisville Medical Society, in defining common goals and future collaboration to influence legislation and create community awareness via media campaigns.

We also want to support and involve our members, and to that extent, we are planning a series of telephonic conferences dealing with crucial issues in which you will be invited to participate. Additionally, we have begun organizing our

2010 KY-ACC Councilor Teleconference Dates

Friday Mornings
8:00 am Eastern
- May 7th
- July 23rd
- August 20th
- October 22nd
- December 10th
Health Reform Bill Passes

That was the headline in newspapers across the country on March 22, 2010. Congress narrowly passed monumental legislation that sets the nation on a new health care course and extends true health care access for more of our patients. Your ACC over the last several years has been actively advocating for Congress to fix the current health care system to focus on quality and improve access to care. The bill passed yesterday makes significant headway in making coverage more affordable for the millions of uninsured Americans — including those with heart disease. It extends Medicaid qualifications, increases the age limit for young adults on family plans and eliminates pre-existing condition exclusions for health insurance. The legislation also addresses congenital heart disease, chronic disease management, prevention and wellness and includes funding for innovative Medicare and Medicaid pilot programs that could improve care coordination across sources and sites.

While the bill is a start, it includes several onerous initiatives, including the creation of an “independent payment advisory board” and prohibitions on physician-owned hospitals. It also fails to address several of the principles that your ACC has deemed essential for real reform. It does not include delivery and payment system reforms that provide incentives for improvement of quality and outcomes, nor does it repeal the flawed sustainable growth rate (SGR) formula used to calculate Medicare physician payment. It also fails to implement medical liability reforms that reduce legal and defensive medicine costs.

Now the real work begins. The Senate this week is expected to vote on a separate package of amendments that was also passed by the House yesterday that could alter portions of the health care reform bill. Your ACC is now poised to lobby for changes and lead the process of implementation. In fact, we are already working across multiple areas to ensure appropriate use of diagnostic equipment; promote adherence to clinical guidelines and appropriate use criteria; improve care coordination through the use of clinical registries; and reduce hospital readmissions and racial and geographic disparities in care. The ACC firmly believes that carefully crafted partnerships are critical to enacting real reforms and expediting the progress needed. The College looks forward to working with you, Congress and other key stakeholders to develop a health care system that puts patients first and rewards – not penalizes – physicians and other medical professionals for their commitment to quality and evidence-based care.

Do you have any questions or comments? If so, please contact ACC Advocate Editor Steve Erickson – advocate@acc.org

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annual CME meeting. This year we would like to emphasize the adult with congenital heart defects and cover controversial issues, such as closure (or non-closure) of PFO. Be sure to mark your calendars for September 22, 2010, as you will not want to miss this exciting event!

Because your support is crucial to my ability to be an effective leader, I am adopting an “open-door” policy in which any of you are welcomed to reach me by email (juanvillaf@yahoo.com). Your comments and suggestions are welcome. This, combined with your willingness to help, will certainly go a long way in assuring that our Chapter goals are met. Please remember that our Chapter is a volunteer organization so I urge you to get involved!

Currently, there are only about 400 active ACC members in Kentucky. We can do better! According to the College, only fifty percent of fellows in training (FIT) will join ACC. One of our goals is to get FIT more involved as we depend on them for our future growth. We are amending our bylaws to include FIT in our council. Watch for this exciting development!

Finally, our Chapter has made excellent strides thanks to the leadership of our former Governor, Dr. David Moliterno, our councilors, Dr. Albert Mercer, Dr. Jesse Adams, Dr. Vaughn Payne, Dr. Adrian Messerli, Dr. Bill Harris, Dr. Patrick Withrow, Dr. Roshan Mathew, Dr. Nicholas Xenopoulos, Dr. Louis Bezold, Dr. John Corrado Sartini, and our Treasurer/Secretary, Dr. John Johnstone. In addition, our Chapter continues to operate effectively thanks to the tremendous efforts of our Chapter Executive, Mrs. Jennifer Rzepka and her assistant, Mrs. Tiffany Tatieck.

As we look ahead, I am optimistic that we can and will expand our present limits. I look forward to working with you in reaching our common goals in fair reimbursement, advocacy and professionalism.

Attention Members
Bylaws Change in 2010

During the September 22, 2010, Annual Meeting members will have the opportunity to vote on the revisions to the Kentucky Chapter Bylaws which will include inclusion of membership categories for:

- Fellows-in-Training (FIT)
- Clinical Care Associates (CCA)
- Physician Assistants (PA)

Please mark your calendars now to attend, and if you are interested in becoming more involved in your local chapter, please contact the Chapter office: info@kentuckyacc.org / 414-755-6297.
The American College of Cardiology Political Action Committee was established to increase the political power and voice of members of the College. CMS cuts may continue into 2011 within Cardiology with decreases in RVU values, affecting private practice immediately and Institution-affiliated doctors over the long term. Contributions may only be accepted from individuals (not practices, academic institutions or companies).

ACCPAC Mission
To back Federal candidates that support legislation that improves healthcare for patients with cardiovascular disease, facilitates the delivery of cardiovascular services by practicing physicians, and provides funds for cardiovascular research and prevention. The PAC is committed to fulfilling the mission of the College.

ACCPAC increases your political power, and now more than ever we need your personal support.

It’s easy to contribute
1. Visit www.accpacweb.org
2. Click on “Join the PAC”
3. Follow the three simple steps on the screen:
   a. Verify your contact information
   b. Make your contribution
   c. Finalize with electronic signature
4. Then…you’re done!

Please join us in making Kentucky a more powerful presence in the federal legislature through the ACCPAC.

According to the CDC, heart disease is the leading cause of death in the United States and is a major cause of disability. The most common heart disease in the United States is coronary heart disease. Additionally, in 2009, about 785,000 Americans had a new heart attack and about 470,000 will have a recurrent heart attack. About every 25 seconds an American will have a coronary event and about one every minute will die from one.

Smoking is a long established major risk factor for the development of premature coronary artery disease. And, according to a new report by the Institute of Medicine, even brief exposure to secondhand smoke can trigger a heart attack. Tobacco smoke can cause health problems not only for smokers but also for people around them. Breathing secondhand smoke increases a person’s risk of heart attack and other heart conditions. This is to say nothing of the other serious and lethal effects of smoking and involuntary smoking.

Further, according to the CDC, secondhand smoke causes an estimated 46,000 heart disease deaths annually among adult nonsmokers. The 2006 Report of the Surgeon General makes the following statements:

1. There is no risk-free level of contact with secondhand smoke; even brief exposure can be harmful to health.
2. Eliminating smoking in indoor spaces is the only way to fully protect nonsmokers from secondhand smoke exposure.

The amount of hard factual data linking primary smoking and exposure to secondhand smoke to multiple lethal disease conditions is voluminous and beyond any reasonable question. Our challenge now is how to improve and protect the health of the citizens of our Commonwealth.

The United States Congress has not attempted to enact any nationwide federal smoking ban. Therefore, any smoking bans are entirely the product of state and local initiatives. According to the American Nonsmokers’ Rights Foundation, as of October 2009, 71% of the U.S. population lives under a ban on smoking in “workplaces, and/or restaurants, and/or bars, by either a state, commonwealth, or local law,” though only 41.2% live under bans in all workplaces and restaurants and bars. The laws which are in place can vary markedly from jurisdiction to jurisdiction.

The Commonwealth of Kentucky faces what may be interpreted as some of the most difficult hurdles to protect our citizens from the harmful effects of primary and involuntary smoking. According to the CDC in 2004 Kentucky had the highest percentage of smokers in the country.
United States at 27.5%. This can be compared to the lowest (U.S. Virgin Islands at 9.4%) and the average for the entire country (21.1%). It can be calculated that 72.5% of Kentuckians are not smokers, any of whom are at significant health risks by being exposed to secondhand smoke.

Various health related entities are making progress and according to the Kentucky Center for a Smoke-Free Policy 30.3% of Kentuckians are now protected by comprehensive smoke-free workplace laws or regulations (see map).

Kentucky does face a perceptual situation that tobacco is a significant portion of the its economy – both for the commonwealth as a whole and for individual farmers. However, the U.S. Department of Agriculture, 2007 Census of Agriculture reported in February 2009 that from 1992 to 2007 the number of tobacco farms in Kentucky dropped from 59,373 to 8,113 (over an 82% decrease) and for tobacco farms of less than 50 acres there was a drop from 20,445 to only 1,737 (for over an 87% decrease). Therefore, a common argument presented that we probably all have heard has become almost a non-issue.

Currently physician groups and health organizations such as the American Heart Association, American Lung Association, American Cancer Society and the Kentucky Medical Association (to name some) are working with state and local entities to protect the three-quarters of the population who are nonsmokers but whose health is threatened by second hand smoke. It will be vital that any laws be protective, and any statewide laws only strengthen existing protections.

Medicare/Medicaid Update

The White House finally announced, as we had long expected, that Don Berwick, MD will become the new Administrator of CMS (Medicare and Medicaid), subject to Senate confirmation. Berwick, a pediatrician by training, is a good friend of ACC. I have known him for decades, interacting on many projects. This year, ACC and Berwick’s Institute for Health Improvement are partnering on the H2H, or Hospital to Home, a national project designed to systematically reduce heart failure re-admissions to hospitals. This is a positive announcement for us and for Medicare and Medicaid at a critical time. Berwick should have little problem getting confirmed in my view – we will certainly support him there.

– Jack Lewin, MD, CEO of ACC
There are open positions in each Kentucky Chapter membership region, and we’re looking for interested members to step forward. If you are willing to volunteer your time to become a leader in the State, and work as a team with the rest of the Council to help plan meetings, represent cardiovascular medicine by becoming involved with your local legislators, and serve the needs of the rest of the members, please submit your name for consideration on the ballot.

Kentucky Member Districts - Councilors needed:
- Eastern
- Western
- Lexington
- Louisville

Board of Director - Officers needed:
- Secretary/Treasurer

Board of Director - Liaisons needed:
- Fellow-in-Training (FIT)
- Cardiac Care Association (CCA)
- Physician Assistant (PA)

The Council meets six times per year, all by teleconference except for the one in-person meeting held immediately after the Annual Meeting.

These are two-year terms beginning mid 2010 through mid 2012.

The KY-ACC office staff handle most of the event details and production work, the Board of Directors main role is to discuss the needs of the membership, and identify action items to carry out on their behalf.

Please consider committing your time and knowledge for one of the open positions, and encourage your colleagues to do the same.

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**Call for Councilors!**

**Councilor Ballot for 2010-2012**

___ Yes, I would like to submit my name for the ballot.

to serve as __________________________

Send your contact information and a brief biography to info@kentuckyacc.org.

___ I nominate __________________________

to serve as __________________________

If that person is an active member, the KY-ACC office will contact them to apply.

___ No, I do not have the time to commit right now, but I would be interested in future years.

The KY-ACC will keep your name on file and will contact you for the next elections.

Name: __________________________

E-mail: __________________________

Direct Phone: __________________________

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**Please respond to the Chapter Office before May 31, 2010**

info@kentuckyacc.org
Phone: 414-755-6297
Fax: 414-276-7704

Kentucky Chapter ACC
6737 West Washington Street
Suite 1300
Milwaukee, WI 53214

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**ACC Chapter Awards**

In 1986 the ACC founded the chapter system to further the College’s mission by supporting the cardiology community at a local level.

The ACC Chapter Awards Program showcases the achievements of ACC chapters by highlighting their accomplishments and illustrating their value to membership. At the 2010 Leadership Conference in January the award program recognized excellence based on the four pillars of the ACC Chapters’ mission – State Advocacy, Education, Membership & Community, and Quality.

Help us to make the Kentucky Chapter great by working toward these goals in 2010.
Invitation to Participate:

Cardiologist-for-a-Day Program in Kentucky

Every day Cardiology professionals are faced with new advances in medicine that are drastically changing the landscape of patient care. However, there are other new challenges such as important policy decisions that have a direct and significant impact on the ability of cardiologists to provide quality care while still operating an effective and efficient practice. One way that you can help policy makers understand the environment we work in is a program called Cardiologist-for-a-Day.

The Cardiologist-for-a-Day program is intended to give policy makers a rare chance to experience how policy decisions affect medicine and patient care in a way they may not have seen before. During the program, participants are given the opportunity to:

- Witness procedures such as the implantation of a defibrillator or the placement of a stent to open up a blocked artery.
- Learn about new advances in the treatment of heart disease and what it means for patients in their community.
- Get a behind-the-scenes look at how a medical practice operates—from what it takes to get reimbursed for treating a patient to the infrastructure needed to address regulatory requirements.

The Kentucky Chapter and Justin Behland, Associate Director of State Government Relations at the ACC are assisting members in coordination of Cardiologist-for-a-Day programs in 2010. Much of the logistical work is done for you, we simply need volunteers who are willing to host legislators to their practice or academic institution.

If you have any interest in this program and want to learn more, please fill out the form below and remit to the KY-ACC office.

_____ Yes! I am interested in more information regarding participation in a Cardiologist-for-a-Day event in 2010.

Name: ____________________________________________

Practice/Institution: ____________________________________________

Location (city): __________________________ Region of State: __________________________

Contact phone: __________________________

Direct e-mail: __________________________

Juan Villafane Appointed Professor in Pediatrics, University of Kentucky

Recently Dr. Villafane was approached by the Chief of the Pediatrics Department about an appointment at the University of Kentucky. We’re very pleased to announce that he has accepted, and views the position as the dream of a lifetime. Please note his updated contact information below:

Juan Villafane, M.D., F.A.C.C., F.H.R.S., F.A.A.P.
Professor in Pediatrics, University of Kentucky
Governor ACC, Kentucky Chapter
Tel: (502) 584-3200
E-mail: juanvillaf@yahoo.com
APRIL

Thursday, April 22, 2010
Convergence of Type 2 Diabetes and Cardiovascular Disease; In conjunction with Society of Vascular Nursing
28th Annual Convention
Learning Pathway: General Cardiology: Hypertension, Lipids and Prevention
Location: New Orleans, Louisiana
Directed by: Donna Polk, MD, FACC

Saturday, April 24, 2010
Convergence of Type 2 Diabetes and Cardiovascular Disease
Learning Pathway: General Cardiology: Hypertension, Lipids and Prevention
Location: Toronto, Canada
Directed by: Donna Polk, MD, FACC

April 28 - 30, 2010 (ACC Co-sponsored)
12th Annual Echocardiography Conference:
State-of-the-Art 2010
Learning Pathway: General Cardiology: Hypertension, Lipids and Prevention
Program #: 1957
Location: New York, New York
Directed by: Rebecca Hahn, MD, FASE, FACC
Sponsored by: Columbia University College of Physicians and Surgeons

MAY

May 1, 2010 (ACC Co-sponsored)
7th Annual Ponte Vedra Cardiovascular Symposium
Learning Pathway: General Cardiology: Hypertension, Lipids and Prevention
Program #: 1946
Location: Ponte Vedra Beach, Florida
Directed by: Daniel Yip, MD, FACC
Sponsored by: North Florida Cardiovascular Education Foundation

May 6 - 8, 2010
32nd Annual Recent Advances in Clinical Nuclear Cardiology and Cardiac CT Featuring Case Review with the Experts
Learning Pathway: Imaging and Diagnostic Testing
Program #: 1853
Location: Washington, DC
Directed by: Daniel S. Berman, MD, FACC; Guido Germano, PhD, MBA, FACC; Jamshid Maddahi, MD, FACC

May 20 - 22, 2010
2010 ACCF/SCCT Coronary CTA Practicum
Learning Pathway: Imaging and Diagnostic Testing
Program #: 1923
Location: Washington, DC
Directed by: Gerald Blackwell, MD, FACC

May 22 - 23, 2010
Peripheral Vascular CTA Primer
Learning Pathway: Vascular Heart Disease and Prevention and Imaging and Diagnostic Testing
Program #: 1532
Location: Washington, DC
Directed by: Gerald Blackwell, MD, FACC

May 21 – 22, 2010
Emergency Cardiovascular Care 2010: Transforming STEMI Care
Learning Pathway: Myocardial Ischemia and Infarction
Program #: 1697
Location: Chicago, Illinois
Directed by: Christopher B. Granger, MD, FACC; James G. Jollis, MD, FACC; Mayme Lou Roettig, RN, MSN

JUNE

June 1 – 3, 2010
Teaching Skills Workshop for Emerging Faculty
Learning Pathway: General Cardiology: Hypertension, Lipids and Prevention
Program #: 1597
Location: Washington, DC
Directed by: Rick Nishimura, MD, FACC; Elizabeth Klodas, MD, FACC

June 6 – 9, 2010 (ACC Co-sponsored)
20th Annual Congenital Heart Disease in the Adult - A Combined International Symposium
Learning Pathway: Congenital Cardiology
Program #: 1628
Location: Stevenson, Washington
Directed by: David J. Sahn, MD, MACC
Sponsored by: Oregon Health and Science University
Contact: Judy Schultheis (503) 494-2172

June 11 – 13, 2010
The West Coast Cardiovascular Forum
Learning Pathway: General Cardiology: Hypertension, Lipids and Prevention
Program #: 1683
Location: San Francisco, California
Directed by: Valentin Fuster, MD, PhD, FACC

Contact:
Judy Schultheis (503) 494-2172