



**Mission:** The Western Carolina Medical Society is the physicians' voice advocating for the health of the medical profession, the health of the patient, and the health of the community.

**Vision:** To be a dynamic physician community dedicated to a healthy, vibrant Western North Carolina.

**Values:** Integrity. Quality. Compassion. Diversity. Innovation.

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## 2012 Accomplishments

### **Physician leadership development, education and advocacy**

- Held a [Leadership Summit](#) on 2/25 and invited physician leaders from across the region to come together and discuss health care reform with a focus on delivering high quality, cost-effective healthcare for our region. Meeting was facilitated by Dr. Richard Lauve from the American Academy of Physician Executives.
- Held [DEA Educational Forum, Pain-It's Not Just a Four Letter Word](#), on 3/15 -- one of our most successful events ever, with approximately 200 attendees.
- Collaborated with Henderson County Medical Society to hold Henderson County provider forum for chronic pain "[Prescribing For Pain: A Life or Death Practice?](#)" on 9/26 at Highland Lake Inn in Flat Rock, NC.
- Held "[The Supreme Court Ruling: Health Care Reform Survives and What it Means for Your Practice](#)" on 7/19 in collaboration with MAHEC, featuring speakers from JPS and Van Winkle Law Firm, and on 11/6 co-hosted with MAHEC "Meaningful Use Stage 2 Final Rule: What you need to know now!"
- Created [virtual 2012 Candidates Forum](#) prior to 2012 elections.
- Established legislative outreach campaign to connect physicians with legislators <http://www.mywcms.org/Legislative/Legislative-Issues/Physician-Liaison-Program>
- Provided legislative advocacy education and updates to medical staff of regional hospitals in Haywood and Henderson Counties.
- Participated in NCMS' [Toward Accountable Care Consortium and Initiative](#) for the purpose of providing the medical community with the knowledge and tools needed to understand, participate in, navigate, lead, and succeed in a value-driven health care system.
- Developed a [www.mywcms.org](http://www.mywcms.org) webpage devoted to [Health Care Reform](#), which includes articles and presentations on the implications of ACA, how physicians can play a leadership role in accountable care, payment reform, and more.

## **Expanded/New Benefits**

- Expanded [Endorsed Vendor Program](#) and saved our members money by offering discounts on various products and services designed to accommodate the business needs of physicians.
- Developed additional benefits for practices with [100% physician members](#).
- Expanded WNC Interpreter Network services into 4 counties (McDowell, Yancey, Mitchell, Madison) in addition to Buncombe so physician members can take advantage of reduced pricing.
- Continued [Group Purchasing program](#) in collaboration with WNC Health Network, available to all WNC physicians.

## **Collegiality**

- Held our [Annual Celebration](#) on 2/18 at Highland Brewing Company.
- Co-hosted [Doctors' Day](#) with Mission Hospital on 3/29, an event to honor physicians by providing them with health screenings, lab work, positive PR and gifts.
- Held our bi-annual [Shrimp Picnic](#) (honoring Cornerstone Physicians from 1980-1982) at the NC Arboretum on 6/2; the donations from this event were used to publish Dr. Irby Stephens' book, [The History of Medicine in Asheville](#).
- Held our annual [Newcomers' Picnic](#) on 10/14 at Claxton Farms welcoming new physician families to WNC.
- Implemented a [Women in Medicine Section](#) of WCMS.
- [Emeritus Section](#) continued to meet quarterly.

## **PR/Marketing**

- Developed and implemented a WNC advertising and public relations campaign reaching into Haywood, Jackson, Henderson, and Transylvania counties through expanded radio spots on WCQS, 105.6 The Mix, WHKP AM in Hendersonville with WCMS physicians recording the spots.
- Media coverage expanded to include all print publications in same counties, plus Mitchell/Yancey County and WCMS billboards in Hendersonville.
- The "Physicians' Voice" health columns continued monthly in the Asheville Citizen Times and Mountain Express, with expanded outreach in 2012 into the Mountaineer (Haywood County), The Hendersonville Times-News (Henderson/Transylvania Counties) and translated in Spanish for La Voz Independiente, the region's only Spanish-speaking newspaper.
- PR director offered free marketing and consulting services to the practice managers at the annual Fall Conference.
- A radio campaign featuring local dignitaries highlighting our physicians and Doctor's Day was created in partnership with Clear Channel and the Asheville Radio Group.
- WCMS community presentations were made to two Rotary groups in Asheville and Waynesville.

## **Support for vulnerable populations (Foundation)**

- Provided [interpreter services](#) 24-7 in 21 languages at over 3100 appointments for an estimated 160 unique patients. Provided free interpreter services for Project Access patients and discounted fees for [100% WCMS member practices](#).
- Carried out the highly successful [Medical Minority Mentoring Program](#). Thirty eight student interns have completed this program since 2005. Here is a [video](#) of the 2012 interns sharing their experiences.
- Served almost 4100 [Project Access](#)® patients to help over 560 physicians care for the low-income, uninsured residents of Buncombe County. Began to [revamp and retool Project Access](#) to align with healthcare reform and current economic realities confronting physicians and their patients.

- Brought all screening and enrollment processes for PA in-house to insure that appropriate patients were being referred into the program and to insure equitable distribution of PA patients among physician volunteers.
  - Tightened the eligibility criteria (e.g., lowered the income level to 133% of the federal poverty income line).
  - Tightened medication management policies.
  - Employed new software to better track and monitor physician volunteerism.
  - Researched the implementation of a sliding scale tiered payment system for Project Access patients (awaiting grant funding to implement). With the changing demographics of the uninsured anticipated under ACA, it may make sense for Project Access to serve the needs of the remaining uninsured through a sliding-scale, subsidized service. Fees paid through a structured medical discount program will provide much-needed but affordable services for the uninsured, and would provide a positive economic return to local providers.
- The [WCMS Foundation and Buncombe County Medical Society Alliance Endowment fund](#) awarded a \$4,600 grant to WNC Healthy Kids to implement 5-2-1-Almost None! More information on this program can be found at: <http://www.wnchealthykids.net>.

### **Organizational sustainability**

- Recruited 36 new members from WNC and 35 new members from Buncombe, for a total of 71 members, a 3% increase in membership from 2011.
- Engaged in a [comprehensive strategic planning process](#), including a sustainability assessment for 10 of our programs and events, an internal organizational capacity assessment to determine WCMS' strengths and weaknesses, and a unique, aspiration-driven strategic planning process in which the leadership team (the CEO and the Directors) interviewed key partners in our community on whom our future depends, including independent and employed physicians, health system leadership, funders and donors, community leaders, patients and our employees.

#### **Foundation:**

- Raised over \$30,000 during our 2012 WCMS Annual Campaign appeal. A new Physicians in Philanthropy (PIP) program was initiated and Community and Corporate campaigns along with the event donors showed a 50% overall increase of WCMS donors for 2012.
- The 10th Anniversary [HeartStrings fundraiser](#) for Project Access was held at the Asheville Mall on 2/12. We netted over \$15,000, which was used to provide medications, DME, and other critical services for Project Access patients.
- [Fourth Annual Sawbones vs. Jawbones Game](#) was held on September 30 at Carolina Day School and netted \$10,275 to support the Foundation's charitable programs.
- Dr. Suzanne Landis' 60<sup>th</sup> Birthday Bash was held on September 23 at Packs Tavern and netted \$7,150 to support the Foundation's charitable programs.
- The [WCMS Women's Golf Tournament](#) in association with the Executive Women's Golf Association of Asheville was held on 8/7 at the Grove Park Inn Golf Club and netted \$7,993 to support the Foundation's charitable programs.
- The 20 member Development Council comprised of business leaders, Alliance members, students, an Emeritus representative and a PA patient, surpassed their annual appeal and overall fundraising goal by over \$15,000.
- Two Planned Giving Educational Initiatives were created at an Emeritus meeting and the Biltmore Forest County Club.
- Developed the Foundation's Gift Acceptance Policy.
- Quarterly newsletter "The Foundation Builders" was created through the Development Council 2012 plan, going to all donors, sponsors and financial supporters of WCMS.
- Received grants and contracts to support Project Access from: Buncombe County, HealthNet, [Mission Community Benefit](#), Three Streams Family Health Center, Walnut Cove Men's and Women's Associations and the Downtown Rotary.

- The Western Carolina Medical Society's Western NC Interpreter Network Henderson/Transylvania County Expansion project was awarded a \$20,000.00 grant funded through the Connestee Falls Endowment Fund, Dogwood Charitable Endowment Fund, and [Janirve Legacy Fund of the Community Foundation of Western North Carolina](#) for the 2013 fiscal year.

## **2013 Strategies**

### **Strategy 1: Physician leadership development, education, advocacy**

1. Develop physician leadership academy in partnership with MAHEC, Mission, WNCHN and other organizations. (MAHEC is the lead)
2. Research and highlight local innovative physician practices to our membership.
3. Work with WNCHN to develop a WNC Physician Leadership Committee (comprised of hospital CMOs and COSs) to foster physician leadership communication, learning, and collaboration across hospitals/health care systems, and to serve as a companion strategic group to the WNCHN board (comprised of hospital CEOs). (WNCHN is the lead)
4. Foster opportunities for physician leadership development by placing physicians in various health improvement projects around the region (in collaboration with WCMS partner organizations).
5. Continue to advocate for a legislative agenda that reflects the aspirations of our WNC physicians by focusing on one large, patient-focused, "unifying" issue to draw physician leaders together into a strategic, multi-faceted campaign (e.g., mental health).

### **Strategy 2: Networking/collegiality between WNC physicians AND with other key partners**

6. Convene physicians in various affinity groups that enable closer relationships between physician demographic/geographic communities. Develop affinity groups that represent key membership sectors essential for WCMS growth, and under-represented voices (for example, young physicians, physicians of color, primary care, small practice owners, LGBT physicians, physician executives).
  - a. Start two new groups in 2013 in addition to Women in Medicine.
  - b. Use affinity groups for relationship building, peer support, information sharing/peer learning.
  - c. Utilize information technology between in-person meetings to facilitate objectives (i.e. online forums).
7. Build social networking and learning opportunities between physicians and business leaders to strengthen business relationships. (The long term goal is to engage WCMS staff, physicians, business leaders, and key partner groups to collectively move medical interventions upstream via participation in existing or new wellness, health promotion, and prevention programs).
8. Visit constituents from our key partner groups (payors, funders/donors, patients, hospital leadership, community leaders, independent and employed doctors) in-person ("high touch") from across the region to build relationships, draw in new members to WCMS, refer physicians to appropriate resources as needed, and identify new constituent needs (eg, continue collecting strategic planning information).

### **Strategy 3: Support for Vulnerable Populations**

9. Continue enhancing access to care for the region by:
  - a. Apply for TDE grant to sustain and market Project Access® in the short term via tiered payment system for charity care, Crescent's claims processing, adjudication and data analytics, all on an enhanced phases platform.
  - b. Apply for HealthNet grant to sustain and improve Project Access® in collaboration with CCWNC by 'crosswalking' their Medicaid database with ours, implementing their 'Chronic Pain Management Initiative' and recommended Medicaid preferred drug plan, and exploring ways to collaborate on patient navigation.
  - c. Explore working with Care Share network to apply for a NCDOT grant to provide Assister ("navigator") services for the anticipated health insurance exchanges.
10. Continue moving toward health parity by marketing/growing WIN throughout the region, focusing on Henderson and Transylvania counties in 2013.

### **Strategy 4: Organizational sustainability**

11. Continue designing an enterprise-wide IT architecture that enables WCMS to implement its strategic plan in a fully-integrated, seamless, more cost-effective manner in fulfillment of our key partners' aspirations and to serve as a communications hub for the physician community.
12. Implement the recommendations of our Sustainability Assessment with the goals of
  - a. Reducing the number of events from 10 in 2012 to four in 2014 (one big fundraiser, one big social/networking event, Doctor's Day, Fall Conference), while maintaining or increasing their profitability. As much as possible, events should be family friendly so that young families can bring their kids along.
  - b. Growing Annual Campaign with Development Council involvement.
13. Strengthen/expand non-dues revenue streams for Association
  - a. Endorsed Vendor
  - b. Circle of Friends
  - c. Advertisements
  - d. Other – explore consultative opportunities to sell to practices and other medical societies (PR/Marketing, Association management, Strategic planning, Legislative advocacy)
14. Employ the aspiration-driven strategic planning process again in 2013.