

THE MONITOR

LEADING THE WAY



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MACM IS PREPARED

By: Robert M. Jones



As we move beyond the COVID crisis, we want you to know that Medical Assurance Company of Mississippi is positioned to meet your next challenge. One of the reasons that MACM was able to respond to COVID and will be able to meet the next challenge that you face is because your company has experienced and dedicated leadership.

YOUR COMPANY HAS EXPERIENCED AND DEDICATED LEADERSHIP

MACM has an excellent Board of Directors, which meets regularly to review the operations, financial stability, and strategic plan of the Company. The Board is composed of physicians from across Mississippi representing multiple practice areas:

Eric A. McVey, III, M.D.	Infectious Disease	Jackson
James E. Hall, M.D.	Ophthalmology	Brookhaven
Steven L. Demetropoulos, M.D.	Emergency Medicine	Pascagoula
Roger L. Huey, M.D.	Gastroenterology	Tupelo
J. Clay Hays, Jr., M.D.	Cardiology	Jackson
Bryan N. Batson, M.D.	Internal Medicine	Hattiesburg
J. Joseph Durfey, M.D.	Anesthesiology	Jackson
L. Jefferson Moses, M.D.	Emergency Medicine	Greenwood
Lisa Gibson-McKee, M.D.	OB-Gyn	Flowood

You should also know that these professional managers of MACM are knowledgeable and talented in their respective areas, having many years of experience with the Company:

	<i>Years Associated With MACM</i>
Rob Jones, President and Chief Executive Officer	33
Walter Gilmer, C.P.A., Chief Financial Officer	31
Kevin Fuller, Vice-President of Underwriting and Marketing	24
Stephanie Edgar, General Counsel	6
Keith Westbrook, Claims Manager	25
Kathy Stone, RN, Vice-President of Risk Management	19
Alan Jones, Chief Information Officer	22
Gerry Ann Houston, M.D., Medical Director	6

I would be remiss if I did not take this opportunity to thank Dr. Buddy Williamson for his longtime service on the MACM Claims Committee, most recently as its Chairman. Later you will find an interview with Dr. Williamson. In addition to our Board of Directors and Management, MACM's success can be attributed to the involvement of physicians like Dr. Wil-

liamson on our Claims, Underwriting and Investment Committees.

Our Management works together to consider how best to protect you in your medical practice. Every day we consider how changes in medicine and the medical liability environment may affect you and our ability to defend you. As a result, we seek innova-

tive ways to fulfill MACM's mission to provide sound, stable insurance products and quality related services to healthcare providers practicing in the state of Mississippi. This is accomplished through thorough underwriting, proactive risk management, and aggressive claims defense. Thank you for your continued trust in MACM to handle your medical liability needs.

HOUSTON'S HANDOFFS
CASE STUDY
BE PREPARED

By Gerry Ann Houston, MD, Medical Director

A 20-year-old G2P1, six months earlier, had a cesarean section for failure to progress. Even after the risks were discussed throughout the pregnancy and again at the time of admission to Labor and Delivery, the patient elected to proceed with a vaginal birth after cesarean section. The patient was monitored closely with an intrauterine pressure catheter, and Pitocin was used only to augment labor secondary to a protracted first stage. When a prolonged fetal heart rate deceleration did not respond to intrauterine resuscitative maneuvers, an emergent cesarean section was performed. At the time of surgery, a uterine incision dehiscence was noted with the baby free floating in the peritoneal cavity, consistent with uterine rupture.

Six years later the OB was served with a notice of claim, alleging him to have breached the standard of care by not properly managing the labor and delivery, by failing to recognize the signs of fetal intolerance to labor, and in failing to timely deliver the infant. As a result of this alleged negligence, the infant sustained severe hypoxic injury to her brain resulting in cerebral palsy.

Four years after the claim, the Plaintiff's Complaint was dismissed.

The MACM claims representative handling this case received a letter from the defense attorney notifying MACM that this claim against a MACM physician had been officially dismissed. In the letter the attorney pointed out three things that he felt made a difference in this case and were the reasons why the case was dismissed.

- 1) The physician's documentation in the hospital chart
- 2) The physician's commitment to prepare for his deposition
- 3) The physician's testimony at deposition

Patients and families who are angry or upset after an untoward event or a result they do not like will contact an attorney to "sue the doctor" even if there has been no deviation from the standard of care. The plaintiff's attorney then will request records from the physician and hospital to see if the claim has merit. If the plaintiff's attorney finds documentation that is detailed and appropriate and that supports the physician has followed the standard of care, the plaintiff's attorney may decide not to file a claim.

Should the plaintiff's attorney feel that the claim has merit, he will proceed to take the physician's

deposition and may decide based on the physician's appearance, knowledge, and testimony at deposition whether to go to trial or not.

Documentation Can Win or Lose the Case

Many cases are won or lost because of documentation. Notes about a patient encounter should be put in the record as soon as possible after the event and should be in such detail to describe the episode accurately. Six years later as in this claim, most physicians will have to rely on the documentation, not their memory, to recreate the event and be able to defend their decisions and actions.

The documentation should additionally include the reason or rationale leading to a certain conclusion, any shared decision making with the patient or family, explanation of the risk and benefits, and any other available treatment options.

Though the diagnosis might be incorrect or the wrong decision made, the documentation of a thorough, systematic approach used to reach the diagnosis or decision makes a claim much easier to defend.

A Deposition Requires Preparation

As many months and often years may have passed since the actual incident that brought the claim, all the documentation must be thoroughly reviewed to prepare for the deposition. Review of all the medical records and any other depositions needs to be done with names, dates, and facts committed to memory. Frequent meetings with the defense attorney will be scheduled, and a mock deposition may be part of the preparation. Proper preparation and knowing what to expect should help reduce the anxiety usually associated with the deposition.

Deposition Testimony May Determine Whether the Case Goes to Trial

The deposition is probably the first time the plaintiff's attorney has any contact with the defendant physician. It is at the deposition that the plaintiff's attorney will evaluate the physician and his testimony and decide whether a jury would be favorably or unfavorably impressed by the physician's appearance and testimony. It is imperative that the physician be prepared and present well.

MANY CASES ARE WON OR LOST BECAUSE OF DOCUMENTATION.

There are multiple articles written about deposition testimony. All say to remain calm, listen carefully, answer only the question asked. Do not guess or volunteer information, and do not argue or become defensive. The defendant physician knows more about the case and the "medicine" involved and should not be intimidated by the plaintiff's attorney.

In the case described above, the plaintiff's attorney essentially said that the physician did so well at the deposition that he did not think his client would be able to prevail at trial.

Timely, appropriate documentation that will allow recreation of the event several years later as well as extensive preparation and a confident presentation at the deposition are essential to keep the claim from progressing to trial.



CONTINUING THE COVID FIGHT

Published at the request of MSDH

Although the number of new cases of COVID-19 continues to decrease and many people have received one of the effective vaccines, COVID-19 infection remains a deadly threat, especially to certain vulnerable populations. The Mississippi State Department of Health (MSDH) wants to remind physicians that a highly efficacious treatment is available for mild to moderate COVID-19 infection in patients who are at risk for progression to severe symptoms, hospitalization, and death. Monoclonal antibodies (mAbs), which directly neutralize the COVID-19 virus, are produced by both Eli Lilly (bamlanivimab/etesevimab) and Regeneron (casirivimab/imdivimab) and can be administered under Emergency Use Authorization of the FDA to specific cohorts in an outpatient setting. Evidence of their efficacy in preventing disease progression, when given early in COVID-19 infection as a single dose infusion, is strong.

To qualify for mAbs administration, an individual patient with early mild to moderate COVID-19 infection must meet the following criteria:

- Confirmation of infection via positive PCR or antigen test
- Treatment as soon as possible following positive viral test and within 10 days of symptom onset
- Patient symptomatic but not yet progressed to hospitalization or oxygen therapy

Treatment is recommended for high-risk adults and for pediatric patients 12 years and older who weigh >40 kgs. High-risk is defined by risk factors such as

- body mass index (BMI) ≥ 35
- chronic kidney disease
- diabetes
- immunosuppressive disease
- currently receiving immunosuppressive treatment
- ≥ 65 years of age
- ≥ 55 years of age **AND** have
 - cardiovascular disease, or
 - hypertension, or
 - chronic obstructive pulmonary disease or other chronic respiratory disease.

- 12 – 17 years of age **AND** have
 - BMI $\geq 85^{\text{th}}$ percentile for age and gender based on CDC growth charts, or
 - sickle cell disease, or
 - congenital or acquired heart disease, or
 - neurodevelopmental disorders, for example, cerebral palsy, or
 - a medical-related technological dependence, for example, tracheostomy, gastrostomy, or positive pressure ventilation (not related to COVID-19), or
 - asthma, reactive airway, or other chronic respiratory disease that requires daily medication for control.

The MSDH recommends that physicians assess their patients for treatment, and if eligible refer them to infusion sites throughout the state at Mississippi hospitals and clinics through the state's Centers of Excellence program. To locate an infusion center, visit https://msdh.ms.gov/msdhsite/_static/14,23128,420,694.html.

The MSDH also suggests this site for additional details on treatment options: <https://www.idsociety.org/covid-19-real-time-learning-network/therapeutics-and-interventions/monoclonal-antibodies>.

BE ON THE LOOKOUT FOR THE



BACK ←
TO THE FUTURE
OF HEALTHCARE →

MACM RISK MANAGEMENT

2022

OFFICE STAFF PROGRAM

INTERVIEW WITH
**BUDDY
 WILLIAMSON, M.D.**
 MACM CLAIMS COMMITTEE CHAIRMAN

By: Kim Mathis, Director of Marketing

The following are comments from my interview with Johnnie W. “Buddy” Williamson, M.D., who has retired from medical practice and is stepping down as a longtime Chairman of the MACM Claims Committee. Insured by MACM for 41 years, Dr. Williamson served on the MACM Claims Committee with distinction from 1997 to the present and as Chairman of the Committee from 1999 to 2021.

Dr. Williamson is originally from Moss Point but was raised in Bay Springs. He grew up in the home of a Methodist Minister who taught him that everyone is called to serve his fellow man. In Bay Springs, he had the opportunity to observe two family practice physicians, seeing how hard they worked and how much they were respected. Dr. Williamson graduated from the UMMC School of Medicine, continued his general surgery residency there and completed a fellowship under Dr. James Hardy in vascular surgery.

Dr. Williamson practiced general and vascular surgery most of his career in Tupelo until he retired from full time practice in 2013. He spent almost 40 years devoted to the Tupelo community mentoring young physicians. He raised four children and now has ten grandchildren and

one on the way. He continued to do some part time work in Oxford where he currently resides with his wife Linda.

Dr. Williamson has been with MACM almost as long as MACM has been in existence. “MACM is a company run by Mississippi physicians for Mississippi physicians and that is a good thing.”

Dr. Williamson believes his job as Chairman of the Claims Committee is to channel the discussion about the case. “We are working for the insured. As the Committee reviews the case, we are looking for anything that may be used against our insured to enable his or her attorney to defend the insured’s position.”

Dr. Williamson has had the opportunity to work with MACM insureds in situations that were



BUDDY WILLIAMSON, M.D.,
 HAS BEEN A LEADER, MENTOR,
 AND SERVANT TO PHYSICIANS
 THROUGHOUT THE STATE.

often difficult and stressful. “MACM has the best defense attorneys in the state. They are skilled, professional, knowledgeable, top notch and will have your back. There are no others that are better.”

Dr. Williamson believes it is critically important for Mississippi physicians to be a part of MACM. “It started with physicians before me who had the foresight to start this company. Now we need the young physicians and leadership to step up and continue the spirit of MACM.”

“Being part of the Claims Committee has been extremely gratifying to me. Rarely did I see a marginal physician walk through those doors before the committee. Generally, the doctors were hard working, solid, well trained physicians who have been sued for no reason or for circumstances they could not control.”

When asked what he would tell physicians who came before the Claims Committee, he said, “I always tell them before they leave, go take care of your folks and we (MACM) will take care of this.” “If you do get sued, MACM will be there in your corner every time.”

Dr. Williamson knows firsthand that MACM is there to help whenever it might be needed. “MACM not only will be with you from day one if you are sued, but the company is also proactive. They will help you with risk management so hopefully you never need them to defend you in a claim.”

“While other insurance companies have come and gone, and unfortunately abandoned some of our Mississippi physicians, MACM has always been there. MACM has weathered the storms and stayed true to physicians from the beginning. That speaks volumes about the management of the company and the Board of Directors.”

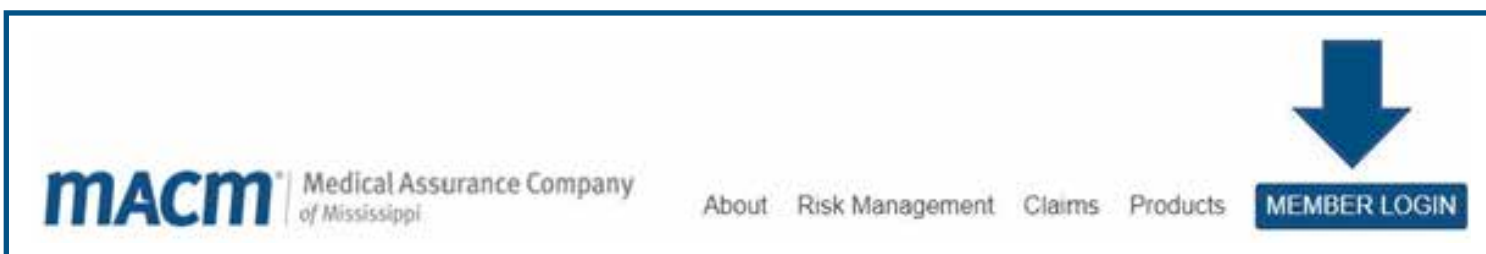
It only takes a few minutes speaking to Dr. Williamson to understand that he has a passion not only for medicine but also for MACM and his fellow physicians. He has been a leader, mentor, and servant to physicians throughout the state. MACM will certainly miss his smiling face, the integrity he has brought to the Claims Committee, and his wealth of knowledge about the history of MACM. We are truly grateful for his service and dedication to all he has served.



BENEFITS OF MEMBERS ONLY PORTAL

We all know that when renewal time comes around you are scratching your head trying to remember that password. Well, we wanted to make sure you were aware that the Members Only section of our website has capabilities other than for renewal purposes. Of course, our Underwriting Department can provide you with the info you need during business hours, but the Members Only portal allows insureds to access the same information 24 hours a day, 7 days a week, in a matter of just a few clicks of the mouse.

To begin, every physician and every Clinic Administrator has the ability to access Members Only Section by using their email address on file with MACM. To create an account, go to www.macm.net and click on Member Login in the top right corner of the website. You will then select 'Need an Account'. Once a password is established, log in at www.macm.net to see the following features:



Renewals – this is where you are directed each September to complete your renewal application. The current year renewal application is available for you to view or print should you need to look back at what was submitted. As a reminder, renewal applications are pre-filled with your prior year's information to expedite the renewal process.

Policy Information – this provides details of the most current policy including limits of liability, premium payments, equity account balance and more.

Clinic Administrators will see a list of all physicians associated with the clinic at the bottom of the policy information. When you click on a physician, another box will open with tabs for policy information, claims history, COIs and contact change.

Claims Histories – this tab is where physicians and/or clinic administrators can request a 2-year, 5-year 10-year or since-inception claims history and receive it within minutes by email, day or night.

Clinic Administrators can request a claims history on any of the clinic physicians by selecting a physician name and selecting the claims history tab. The claims history will be emailed to the contact email on file for the clinic. You can check this by looking at the email address under Policy Information. If this needs to be changed, you can use the Contact Change tab or contact the Underwriting Department.

Certificate of Insurance Requests (COIs) – this feature allows physicians and/or clinic administrators the option to receive copies of COIs previously issued on the policy and allows you to submit a request for a new Certificate Holder. New requests are sent to the Underwriting Department for review and consideration.

Clinic Administrators can request a COI on any of the clinic physicians by selecting a physician name and selecting the COI tab. Copies will be emailed to the email address on file. New requests are sent to the Underwriting Department for review and consideration.

LOG IN TODAY

Departments – This tab provides contact information for MACM staff.

Cyber Liability – Tokio Marine HCC (TMHCC), with whom we partner to provide cyber liability insurance to each of our members, provides free access to a compliance website that has helpful information for you and your employees. You can access the TMHCC's Data Security Risk Management Website by logging in to your "Members Only" account. Once you are logged in to your account, you will see a tab at the top of the website labeled "Cyber Liability Compliance". By clicking this tab, you will be provided instructions on how to access Risk Management information through TMHCC. There are so many resources, webinars, quizzes, audit checklists, etc., on this website that can help to protect your clinic and educate everyone on cyber safety.

For any additional information regarding Cyber Liability coverage, you can contact Charity Huston (charity.huston@macm.net) or Tammi Arrington (tammi.arrington@macm.net) at 601.605.4882

Education – This provides access to Continuing Medical Education (CME), Maintenance of Certification Points (MOC), New Physician Orientation and other Risk Management resources.

Within the Continuing Medical Education selection, MACM has provided a way for physicians to complete online CME courses and MOC points for FREE through its partner, Medical Interactive. Click on the Medical Interactive box and it will take you to the website. You will need to create a separate log in. <https://www.medicalinteractive.com/macm>

RM Programs – this tab will have upcoming Risk Management Programs that MACM will offer.

Contact Person/Address Change – this tab provides a form to update contact information, address changes, phone number changes, email address changes, etc. MACM should be notified when a clinic administrator leaves so the account can be disabled and we can get your new admin setup accordingly.

Soon, we plan to have policy documents and ancillary COIs and/or claims histories available through the Members Only portal.

Please do not hesitate to contact us in the Underwriting Department should you need assistance.

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The Monitor is a publication of Medical Assurance Company of Mississippi.

MEDICAL INTERACTIVE

Medical Interactive is a national provider of risk management and patient safety education providing our physician insureds access to **free** online CME and MOC credits. As of April 2021, our insureds have completed 656 courses and been awarded a total of 818.5 CME hours. MACM obtains physician feedback through our online evaluation process to ensure quality content. Insured physician comments include; "this is a very timely article, great lecture, enlightening presentation, very well presented, and I will incorporate this knowledge into my patient's care." Insureds can choose from a variety of topics such as controlled substances, diagnostic error and risk & claims. To access, visit www.macm.net and sign in to the Member Login section of the website using your email address and password on file. For further assistance, you may contact Yevgenia Wilkerson at yevgenia.wilkerson@macm.net or (601)-605-4882.

