

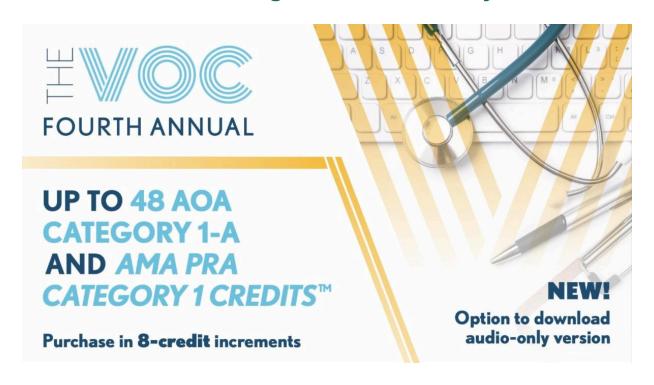
GOMA News & Updates Volume 46, May 2024

National Osteopathic Medicine Week



April 15 was the start of a week-long celebration of more than 186,000+ members of the osteopathic medical profession who have dedicated their careers to caring for the body, mind and spirit of their patients – National Osteopathic Medicine Week. GOMA was present on the campus of PCOM Georgia sharing pizza with the students and explaining the importance of having a state organization to represent the osteopathic profession. Special thanks to Immediate Past President Dianna Glessner, DO for spending her day off representing GOMA.

Last Chance: VOC Registration Ends May 31!



Georgia Medicaid Proposes Increase in Reimbursement 3–6% on select Primary Codes

A public meeting related to increased primary care codes pursuant to HB 916 regarding the FY25 state budget was held and adopted unanimously. Written comments are due no later than May 21. Final adoption is scheduled for June 13, 2024, at the next DCH Board meeting.

Pending Centers for Medicare and Medicaid Services (CMS) approval, the Department of Community Health (DCH) proposes to increase reimbursement rates for select Primary Care codes to 90%

of 2024 Medicare rates (99213 & 99214) and select Obstetrics and Gynecology (OBGYN) codes (59400; 59510; 56610 & 59618) to the 2024 Medicare rates.

Certificate of Need Changes Signed into Law



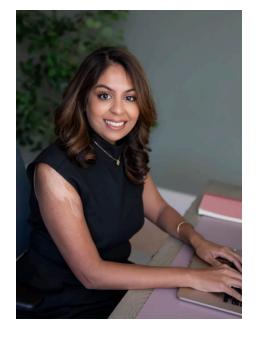
New health care facilities and services will soon be able to open in Georgia with less government regulation. Gov. Brian Kemp signed House Bill 1339 in mid-April, rolling back some of the rules governing the establishment of new hospitals in the state. Lawmakers and hospital executives, especially in rural areas, consider the final bill to be a compromise. Some advocates had pushed to do away with state-issued certificates of need, or CON, that required new hospitals to demonstrate significant enough demand to open. Meanwhile, others wanted the process to remain completely untouched. Ultimately, legislators in the state House and Senate struck a deal to shorten the timeline for review of hospitals' applications and expand the rural hospital tax credit program, giving taxpayers a credit toward their state tax bill if they donate to qualifying medical facilities. CON rules were developed in 1974 to comply with a federal mandate requiring states to regulate new medical facilities to help control the costs of government reimbursements for Medicaid and Medicare. That mandate ended in 1986, and some states have since repealed or amended their requirements.

Negotiations between legislative chambers also prevented a full repeal of CON for free-standing outpatient care facilities. Those facilities, also known as ambulatory surgical centers, or ASCs, provide some surgical procedures to patients, but they are not required to meet the same requirements as hospitals. And despite a last-minute attempt to pair the measure with an expansion of Medicaid, the government health care program for people with low or no incomes, the effort failed. However, the legislation does direct the state to form a study commission to explore the idea.

The biggest clash in CON conversations hinged upon what kinds of health care facilities should be exempted from undergoing the process. Supporters said the free-standing outpatient clinics allow Georgians to have closer access to health care, particularly obstetric and gynecological services. But hospital advocates and executives cautioned that a full-scale elimination of the CON review for those facilities would hurt hospitals. That's because hospitals are mandated to provide care to everyone, regardless of their ability to pay. They must also provide all clinical specialties and keep their doors open 24/7, 365 days per year.

HB 1339, sponsored by Rep. Butch Parrish of Swainsboro, will allow facilities to establish behavioral health services without having to go through a CON process in order to meet the growing demand for mental health care, which has increased, especially among young people, since the pandemic began. Behavioral health services don't make hospitals much money and emergency rooms aren't the best places to get long term treatment.

Neha Amin, DO: The Top 5 Trends Shaping the Future of Coaching



An Interview With Chad Silverstein in Authority Magazine

The world of coaching is undergoing a seismic shift, with emerging trends set to redefine its boundaries and possibilities. From digital transformation and the integration of artificial intelligence to the growing emphasis on mental health and the global rise of coaching cultures within organizations, these developments are reshaping the landscape of personal and professional growth. As we navigate through these changes, understanding the forces that drive the future of coaching becomes paramount. I had the pleasure of interviewing Neha Amin, DO.

Neha Amin is a double-board certified burn and critical care surgeon at Grady Memorial Hospital in Atlanta, Ga. She is also a certified health and wellness coach and the founder of Balance and Breakthrough, www.balanceandbreakthrough.com. After recovering from her own burnout, she is committed to "empowering female physicians to reclaim balance and joy in their lives and in practice."

Thank you for joining us. To start, could you share your "origin story" with our readers? How did you begin your coaching journey, and what challenges did you face in the early days?

I began my coaching journey when I hired a physician coach at the peak of my burnout. After sacrificing and investing so much in becoming a surgeon, I felt completely lost. Hiring a coach helped me clarify so many things by really breaking down my thought

processes. It felt like a whole new world opened to me. The trapped feelings I felt were mostly placed there and built by me. I realized I had the power to tear them down and create an entire new path for myself. And it didn't feel impossible anymore. After this, I enrolled in an intensive health and wellness coaching program. I knew I had to help other female physicians and high achievers see there was a way out of burnout. The hardest challenge was switching from a physician mindset where assessments and plans are being created in your head as soon as you meet your patient, to a mindset that was focused on active listening and avoiding giving advice. I definitely failed my first two assignments because it was hard for me to get rid of that physician mindset.

You are a successful business leader. Which three character traits do you think were most instrumental to your success? Can you please share a story or example for each? Before coaching, I likely could not have answered this question so easily.

Resilience — This is a word that makes so many physicians cringe because administrators have tried to really push it onto us. However, when that resilience comes from building yourself up with compassion and confidence, you can finally see that not only do doors open and close, but you have the power to open and close them.

Self-compassion — As I went through medical school, followed by coaching, then building another business, I have had to give myself constant grace. It is so easy to beat yourself up and tell yourself you could do better or you should do better. But that's not sustainable in the long term. I had to change my immediate reflexive self-talk to be more patient. Being kind to myself helped rebuild my confidence in a way that finally seems permanent.

Authenticity — Some of the biggest heartbreaks I have had, whether they were professional or personal, were always followed by versions of the advice "you trust too easily," or "you give too much of yourself." But I don't plan on changing these parts of myself.

Instead, I had to teach myself boundaries and be attentive to the energy I was letting in. I no longer let things that were draining me spend too much time in my sphere. That philosophy has opened up a lot of space in my head and on my calendar.

Can you share your favorite "Life Lesson Quote"? Why does that resonate with you so much?

"The most common way people give up their power is by thinking they don't have any." — Alice Walker

It's natural to feel a loss of power when life hands us obstacles, or deals us an unexpected hand. But we often create that powerlessness within ourselves. All we have to do is believe we have the power to change it, and we can. Perhaps that change comes in only small ways, but we have so much more control than we let ourselves think we do.

What are some of the most interesting or exciting projects you are working on now? How do you think that might help people?

I have a couple projects in the works, but what I am most excited about is creating a community for burned-out women of color physicians. The US healthcare industry is currently valued at over \$800 billion dollars. But, currently most physicians feel like trapped pawns in a healthcare business run by government and Wall Street.

They are leaving at rates that will devastate our healthcare system sooner than we are prepared to deal with. The biggest growth demographic of physicians was originally WOC and now they have the highest burnout rate. Changing the entire system at this point is too big of a problem that we have little to no control over. But that doesn't mean we shouldn't empower ourselves. We can come together, share our journeys and obstacles, and support each other. A cohesive group always has power to make positive change.

Without saying any names could you share a particularly memorable success story from your coaching career?

This is a tough one, but the story that pops up first is a young woman — a physician — that was in the middle of making a tough decision on where to take her career. Decision fatigue was high and

the anxiety of her chronically understaffed place of work was really taking a toll on her health, mentally and physically. We had a few sessions where we slowly worked on her thought processes and ideas on how to build in more relaxing moments throughout the day. At the start of one of her sessions, she came to the video call with a huge smile. She told me how she had started a morning routine that involved exercise. She started packing her lunches. She made a formal plan of how she would handle her busy call nights. She sounded like a new person, full of life again and excitement. She had been doing this for 3 weeks already, long enough to call it a habit. Shortly after that, she even added in volunteer work which was so important to her. I was so inspired by her, and it really showed how much coaching can give back to a person. Especially to a community that's really been hit hard with burnout recently.

Ok, thank you for that. Let's now jump to the primary focus of our interview about coaching. How has your approach to coaching evolved over the years, and what personal learnings have you applied to your own development?

Starting out coaching with a medical background, it was really hard to transition to a place where I was not the one creating the assessments and plans. I sought effective listening techniques which really helped me create strong trusting relationships with my clients. I've slowly also incorporated evidence-based practices. There's more and more research coming out related to how helpful coaching can be, especially for the medical community.

How do you incorporate feedback into your coaching practice to continuously improve?

I try to do this in 3 different ways. After a series of sessions, I have a feedback form for the client. I ask them to be as honest as they feel comfortable and self-reflect on any growth or improvements they may have seen (or lack there-of) in their wellbeing during our time. Next, I perform my own self-reflections. I try not to do this after every single session as it can make me more self-critical than constructive. Every couple of weeks, I look at the past sessions and see if there were any issues I could have dealt with differently, any

times I felt my own judgments creep in or situations where I wasn't listening as intentionally as I should have.

Third, I constantly am trying to self-improve based on feedback from my own coaches or coaching workshops. This gives me the ability to see how I am doing from peers that have been doing it longer than I have or have slightly different philosophies. There's always more I can incorporate into my practice. Learning about it continuously keeps this work really exciting.

Can you discuss an innovation in coaching that you believe is currently underappreciated but has the potential to significantly impact the field?

Evidence-based practices and philosophies are finally being brought into the coaching space. There are so many research-based interventions based in positive psychology and neuroscience that have proven effects. Interventions such as strengths-based coaching, cognitive training exercises, and promoting emotional regulation all have foundations based in neuroscience and positive psychology principles that are proven to work. Not enough coaches use these currently, but these methods have real and sustainable impact on a variety of people. They will bring a lot of advancement and legitimacy to the coaching world.

In what ways can coaching address the evolving mental health needs of diverse populations in a digitally connected world?

The healthcare system has not and cannot keep up with the mental health crises out there. Although coaching is never a substitute for psychotherapy or any psychiatric care, it does have the ability to help people. When people are dealing with emotional dysregulation and automated thought processes that have become a hindrance to the life they are trying to leave, coaching can guide them to think outside the box and in more productive ways.

How do you foresee artificial intelligence and machine learning transforming the coaching industry in the next decade?

A lot of coaches are already using artificial intelligence in social media and with building their resources. I don't necessarily see this

as a bad thing if it's not over done or a substitute for actual knowledge. However, it can easily become that. There's a number of coaches out there without adequate training and the guides and resources they are selling are not rooted in any evidence.
But, Al has a lot to offer for coaches. Its ability to use data to predict trends and patterns could help coaches tailor their practices for more effective results. I wonder if Al could have predicted the high levels of burnout we are currently going through before the general population started noticing it. We could have saved millions of jobs, and billions of dollars. Perhaps it will be a good tool for major corporations, if done correctly, to predict what benefits their employees need for greater productivity. Right now, it feels like we are always a few years too late after major community mindset shifts.

What role do you believe ethical considerations and privacy concerns will play in the future of coaching, especially with the increased use of digital platforms?

Privacy is of the utmost importance for my clients. When health information is given out or recorded, you are dealing with HIPAA regulations. Coaches must have safety precautions in place that adhere to HIPAA guidelines. Built-in security into laptops and websites is a must.

Could you list and briefly explain "Top 5 Trends Shaping the Future of Coaching" based on your experiences and insights?

- 1. Visibility Coaching in some professions, such as medicine, is still not widely known or utilized. Some of us have utilized coaches but the vast majority do not yet understand the importance of coaching for leadership potential and self-resilience/burnout prevention. Many coaches are now on social media, and although this comes with scams, they are becoming more visible.
- 2 . Specialization Burnout prevention and recovery are becoming more and more necessary in this climate. Coaching will become more specialized and niche to better support their diverse clientele's needs. To do this, they'll also continue to invest in advanced training and learning to personalize their techniques.

- 3 . Legitimacy As many "coaching schools" exist on the internet, programs such as ICF and NBHWC are creating more rigorous criteria to become a coach, and call yourself certified. This will also help advance the profession in general.
- 4 . Accountability for businesses Burnout is becoming a well-defined topic that corporations and hospitals will have to address more appropriately, especially when it comes to increasing acceptance and openness regarding the discussions of burnout of high-achieving professionals.
- 5 . Increase in holistic approaches I think with the growth of wellbeing and burnout coaches, coaches will continue to focus on whole-person holistic approaches. Career and professional coaching may not need this as much, but when we discuss true wellness, it comes with being proficient in mental wellness as well as physical wellness, spiritual wellness and emotional wellness. Coaches will have to receive cohesive training in this to deliver effective, sustainable results.

How do you envision the integration of coaching within organizational cultures changing the landscape of leadership and employee development?

I hope that coaching will lead to a common language between current factions. In most corporations, there is a huge gap between the employees and the C-suite. I focus on coaching amongst healthcare professionals and have seen firsthand the language barrier between both parties. They will almost always have different priorities, but if you are depending on human beings to do heavy work for you, you need to learn how to speak their language. You also need to provide what they really need, not what you think they need. That's why terms like "resilience" have gotten such a bad rap when they come from administrators.

What do you see as the biggest challenge facing the coaching industry today, and how might we overcome it?

I think one of our biggest challenges is the legitimacy of coaching. There are two main factors to this: Not enough regulation and a skepticism around the word "coaching". They are part of the same issue, but there are a lot of coaches out there with no formal training.

There are proven ways to build real effective results, and these have been based in years of research. Coaches should be knowledgeable about these systems so they can execute real results for their clients who can go on to do big things.

What is one long-term goal you have for your coaching practice, and how are you working towards it?

I want to eventually bridge the gap between healthcare administrators and physicians to keep retention and passion alive.

This will lead to decreased health costs and burnout, while increasing retention of physicians. Physicians sacrifice a lot for their career, and currently, most do not see a way out once they feel dereated. They are begging for help, and I don't believe enough is

given to them in term bridge that gap and t going to see significa

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Thank you for offer coaching. We look reach new heights,

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PCOM South Georgia's Commencement Ceremony for the Class of 2024 will be held on Thursday, May 16, 2024, at the University of Georgia Tifton Campus Conference Center. Click for details & Livestream.

PCOM Georgia's Commencement Ceremony for the Class of 2024 will be held on Tuesday, May 21, 2024, at the Gas South District in Duluth. <u>Click for details & Livestream</u>.

Check out this article in *James Magazine* about PCOM Georgia & PCOM South Georgia's 100% residency placement rate for both Georgia campuses!

Join GOMA or Renew Your Membership Today!

National Two-Step CPR Event



It's true! PCOM Georgia medical students have been committed to participating in the annual National Two-Step CPR event for the past few years now. The event operates in partnership with the DO Council, Emergency Medicine Club, The President's Community Wellness Initiative and the National Two Step CPR Board. During five minute training sessions, participants learn how to act quickly during cardiac emergencies by calling 911 and by pushing hard and fast in the center of the chest until help arrives. Two step or "compression/hands only" CPR is designed to teach participants how to potentially save a life. Two modern songs to help with the temp according to the American Heart Association are: "The Tortured

Poets Department" by Taylor Swift and Beyoncé's "Jolene". In Other Words

"You are never too old to set another goal or to dream a new dream." – C. S. Lewis, author