

**THE
MICHIGAN CHAPTER
AMERICAN ACADEMY OF PEDIATRICS**

FIFTY YEARS OF PROGRESS

1949-1999

The Michigan Chapter
American Academy of Pediatrics
50 Years of Progress
1949-1999

Prepared by
The Seniors Committee, MCAAP

- George E. Bacon, M.D., FAAP, Chairman
- Howard T. Knobloch, M.D., FAAP
- Patricia O'Connor, M.D., FAAP
- Bernard H. Siebers, M.D., FAAP
- Thomas B. Wright, M.D., FAAP

CONTENTS

- I. In the Beginning
- II. Time Capsules: A summary of Events, Decade by Decade
- III. Some Notable Achievements and Challenges
- IV. The Numbers Game: Membership, Dues, and Finances
- V. Future Expectations: A Glance at the Crystal Ball

APPENDIX

- A. Officers of the MCAAP, 1949-2001
- B. Recipients of the William C. Montgomery Pediatrician of the Year Award
- C. Michigan Pediatricians who were Presidents of the AAP
- D. Alphabet Soup: a Guide to Acronyms and other Abbreviations
- E. MCAAP Budget for 1998
- F. By-Laws of the MCAAP

RESOURCES AND ACKNOWLEDGEMENTS

Material for this project was obtained from the following sources:

- Minutes of MCAAP meetings beginning in 1949 (although with some documents missing from early years), provided by Linda Long, Chapter Administrator.
- Chapter Newsletters, from 1970 to present, provided by Dr. Charles Wolf, Editor 1976-1991.
- MCAAP booklet (1984), commemorating the Chapter's 35th anniversary, provided by Dr. Natalia Tanner, President 1983-1986.
- The Seniors Committee, MCAAP.
- Personal interviews with the seven pediatricians who served as Chapter President during the past 22 years: Drs. Robert Holm, Natalia Tanner, Stanford Singer, Edward Cox, George Blum, Beatrice Murray, and Gerard Breitzer.

A very special thanks is due to Linda Long, for outstanding clerical and administrative support in the preparation of this manuscript.

Chapter I

IN THE BEGINNING

The Michigan Chapter of the American Academy of Pediatrics (MCAAP) was born, after a gestation of about two years, at the Pantlind Hotel (now the Amway Grand Plaza) in Grand Rapids, on September 22, 1949, at a meeting held in conjunction with the Michigan State Medical Society (MSMS). At this assembly, a set of by-laws was approved, and the first group of officers was elected. These included Dr. Frank Van Schoick as Chairman (he had already been elected, by mail, as State Chairman a year earlier); Dr. Rockwell Kempton, Alternate Chairman; Dr. Wilfred S. Nolting, Secretary; and Dr. Ernest Watson, Treasurer. Also elected were three “Fellows-at-Large” - Drs. Edgar Martmer (3 years), Edward Wishropp (2 years), and Leon De Vel (1 year).

The impetus for increased involvement at the state level had its origin at a meeting of the National AAP in Dallas in 1947, at which it was agreed that all AAP members (not just the leadership), should have a more intimate idea of the activities of the Academy. Apparently, however, there were some “growing pains”: an initial national “Committee on Reorganization” was disbanded for reasons which are not entirely clear, and the new committee subsequently came under attack for “hasty and arbitrary action in reorganizing the Central Office”, as well as other unpopular activities. This precipitated a letter from Dr. Van Schoick to the other state chairmen, protesting, among other things, the conduct of the nominating committee in presenting only one name for president of the Academy.

In any case, further refinement of the proposal for more representation at the regional and local levels occurred at the April 1949 meeting of the AAP in Atlanta, and a subsequent preliminary report from the Executive Board was distributed to all District and State Chairmen, recommending that each state should organize itself as a unit. Dr.

Van Schoick responded on September 9 with a letter addressed to Michigan pediatricians announcing the initial organizational meeting in Grand Rapids later that month; he also chaired a follow-up meeting in Detroit on November 2 for the purpose of acquainting Academy members in southeast Michigan with the transactions which had occurred at the Pantlind. Final approval of the report of the National Reorganization Committee occurred at the AAP meeting in San Francisco in November, 1949 (after presentation to the Executive Board, the State Chairmen, and the annual business meeting), and thus began the first half century of the Michigan Chapter of the American Academy of Pediatrics.

Chapter II

TIME CAPSULES: A SUMMARY OF EVENTS, DECADE BY DECADE

1950's

Minutes from the early years of this decade are missing, so information for this period is limited. However, we do know that the first Chapter president, Dr. Frank Van Schoick, served through 1951, followed by Drs. Harry Towsley and Phillip Howard, and that Dr. Edgar Martmer became the first MCAAP member to be elected president of the National AAP, 1956-57. (The first pediatrician so honored from the state of Michigan was Dr. Thomas Cooley, 1934-35.)

A sense of déjà vu is gained by noting some of the major MCAAP agenda issues of the day: e.g. accident prevention, perinatal mortality, facilities for the multiply handicapped, and immunization trends. It is easy to forget that many of the vaccines available today were either not invented or not in common use. Pediatricians were called upon to deal with such contagious diseases as varicella, and the more devastating poliomyelitis. Even though the Salk polio vaccine was first developed in 1950 and approved in 1955, followed by the oral Sabin product, the plethora of “iron lungs” still in use in major hospitals in the late 1950’s and early 1960’s were reminders of the pre-vaccination era.

Concerns involving medical economics did not loom as large as they do today for the MCAAP, but Dr. Wyman C.C. Cole, chair of the Pediatric Fees Committee, stated that “Payment of professional fees to physicians by pre-paid insurance carriers, and various government agencies, has been grossly inequitable.” A minimum fee schedule ranging from \$10 for a newborn exam to \$25 for a consultation was recommended.

Following the initial organizational gathering in Grand Rapids, it appears that essentially all MCAAP meetings during the rest of the 1950’s occurred in southeast Michigan, presumably irritating some members to the west; feelings were soothed when

the annual event was again held at the Pantlind in October, 1959, setting the stage for a wider variety of locations thereafter.

1960's

Immunization rates and accident prevention remained significant concerns for the Chapter. Dr. F.J. Margolis (1962) inquired, “How many children in Michigan were not immunized, and why?” and “Is there a program in Michigan where any child can be immunized?” Dr. George Lowrey (1963) foretold the increasing emphasis on automobile safety by recommending that pediatricians install seat belts in their own cars and use them!

Societal issues, such as juvenile delinquency and the battered child, became more visible during this decade: Dr. Harry Towsley, just completing his tenure as president of the AAP, was a speaker on these topics at the 1965 annual MCAAP conference. Agenda items also focused on screening and treatment of P.K.U., the therapeutic use of gamma globulin, and the controversial area of sex education. The Chapter sponsored the state-wide distribution of the AAP “Red Book”, a significant undertaking.

Chapter presidents during this decade were Drs. Lowrey, Robert Heavenrich, and Ruben Meyer.

1970's

As the Chapter grew in numbers and influence, the leadership faced some prickly issues in the arena of “bio-politics”. At one point, the well qualified Dr. Bruce Graham, (previously an MCAAP member but at this time Chairman of Pediatrics at Ohio State University) was expected to be elected handily as AAP president, but only narrowly survived the challenge of a write-in candidate, Dr. Leo Bell, a practicing pediatrician

from California. Dr. Bell's impressive showing was widely believed to represent a protest against current AAP leadership and policies, including the Academy's general support for a mandatory recertification exam. This prompted Chapter Chairman Dr. Bob Holm to survey all MCAAP members regarding their thoughts and concerns about these issues. The responses, while providing helpful suggestions, did not demand any major philosophical changes in direction at the local or national levels (unlike the Maryland Chapter, which apparently withdrew in protest.)

A project which ultimately served to disclose some of the divergent needs of the different regions of our Chapter involved an attempt to develop "minimum standards for the care of hospitalized children". Chaired by Dr. Lester Weiss of Detroit, other members (Drs. Ron Holmes, Alan La Reau, JoAnn Mertz, and Mike Nidiffer) represented southern Michigan, the northern lower peninsula, and the U.P. After much effort and thoughtful discussion, questions arose concerning "ideal" vs. "minimum" standards, and the significant differences between the availability of pediatric resources (physical and economic) in large urban centers vs. the suburbs vs. sparsely populated rural areas. Eventually, it was agreed that no single document could realistically be applied to all areas; it was suggested that "minimal standards" could be developed for southeast Michigan, but all other regions should follow the AAP guidelines for "Care of Children in Hospitals" (available by the summer of 1980).

Two other major events of this decade were the advent of the Chapter's newsletter in 1970 (Chapter III), and the incorporation of the MCAAP, believed to be necessary to decrease potential personal liability, and for future dealings with the IRS. The first meeting to this end, held July 12, 1978, included 28 pediatricians with Dr. Frank Van

Schoick as an emeritus member. The process was successfully completed with a new set of by-laws, published in 1979 (Appendix F).

The Chapter still had time to focus on the salient medical problems of the era, including learning disorders, nutrition, and screening for lead poisoning. Newborn screening for congenital hypothyroidism came of age and proved its worth, in spite of some early questions about its feasibility. Poisoning in children less than 5 years of age dropped by 60% between 1972-79.

The MCAAP's progress during this decade, and its' effectiveness in dealing with the major issues of the period, resulted in a singular honor: the Wyeth Outstanding Chapter Award, in 1977, during the presidency of Dr. William Montgomery; other Chapter presidents in this era were Drs. John Wilson and Thad Joos.

1980's

The question of recertification was still creating some anxiety, and a variety of responses, within the Chapter. To some, it was an issue that had "come and gone" (noting it would be expensive in dollars and time); to others, it was inevitable. Many proposals were offered, nationally and locally, but there was a consensus that any type of exam (whether involving multiple choice, office observation, computers, etc.), must at least be user friendly. In any case, a 1979 survey had indicated that the majority of MCAAP members were in favor of some form of recertification process.

Eventually the American Board of Pediatrics (ABP) did develop a standard test, which, however, was optional, and relatively few pediatricians responded. Finally, in 1987, the exam became mandatory every seven years. The open book format blunted

some of the protest, and the AAP decreed that membership would not be dependent on recertification, which by now, appropriately, was fully in the hands of the ABP.

Other troubling issues for the MCAAP during this decade involved increasing concerns regarding medical economics and liability (Chapter III), which was underscored by the financial woes being experienced by the state itself. However, the Chapter's response to these difficulties had at least one positive outcome: the formation of the Michigan Council for Maternal and Child Health (MCMCH), designed to protect and enhance children's programs within the state (Chapter III).

Immunization rates and child safety, in all its forms, continued to hold the Chapter's interest, and increasing attention was paid to adolescent suicide, the need for adequate day care, and access to medical care. A Chapter survey (1982) indicated the need to strengthen the role of protective services in matters of suspected child abuse and neglect (SCAN), which ultimately served to improve the effectiveness of these investigations. The MCAAP also endorsed House Bill 4708, which permitted minors to consent for their own pre-natal care (1984).

Dr. Bob Holm completed his tenure as the only two-term President of the MCAAP in 1983, having served at the time of our second Outstanding Chapter Award (1982). He was followed by Dr. Natalia Tanner (1983-86), the first woman, as well as the first African-American to hold this position; she was instrumental in encouraging Blue Cross Blue Shield to insure the ECMO procedure, in addition to serving on the Task Force for the Future of Pediatrics, and other national AAP committees.

Dr. Stan Singer held this office from 1986-89; he was also a member of the National Hospital Care Committee, and was later (1995) elected District V Chairman.

1990's

Providing optimum “access to care” for the pediatric population became a major issue for the MCAAP during this decade. Dr. Ed Cox, who served as Chapter President from 1989-92, spearheaded a successful resolution to the AAP, stipulating that every child should have access to high quality medical care. Barriers to achieving this objective fell into the areas of economics, transportation, education, and cultural differences. An integral part of this challenge was that each child should have an identifiable primary physician, e.g. a “medical home”. Toward this end, policy makers, insurers, and families themselves, are targets of the MCAAP's continuing efforts.

The Chapter's PROS (Pediatric Research in the Office Setting) program, a national initiative, made significant strides. From humble beginnings in the 1980's this project has thrived during the past eight years under the direction of Dr. Mary Lu Angelilli. Initially, four practices were included, of which only two were truly active. However, the program has now grown to involve 21 practices (with 63 pediatricians), who have accounted for 12 published articles and 40 abstracts, mostly in the past several years.

The MCAAP continued to be active in the campaign to provide appropriate “family centered” care for children with special needs. Initially, the state proposed to insure these patients through a capitation system, even though an advisory committee (funded by a grant from the Robert Wood Johnson Foundation) and a subsequent column in the Chapter Newsletter by Dr. Bea Murray, recommended a more flexible policy. As a result, even though capitation remains the basis of this coverage, important safeguards

have been added, including a provision for increased reimbursement, so that several major medical centers have now agreed to participate.

Members of the MCAAP were recipients of many awards and/or held important national offices during this decade. Dr. George Blum (Chapter President 1992-95) served on the National Nominating Committee for AAP President, as well as the Senior Planning Committee of the AAP. Dr. Murray (President 1995-98) received the AAP Special Achievement Award in 1998, for a variety of accomplishments including her efforts with the OBRA '89 issue (Chapter III). Other members so honored were Drs. Ratnakar Kini (1990) for his leadership of the popular Pediatric Board Review Course, Bradley Barnes (1993) for his work with the intricate CPT and ICD-9-CM coding systems, and Tom Peterson (1996) for vigorous opposition to the targeting of adolescents by tobacco companies.

Our current Chapter president, Dr. Gerry Breitzer, who earlier was instrumental in the development of the "Every Ride-Safe Ride" project (Chapter III) was elected to this office in 1998.

Chapter III

SOME NOTABLE ACHIEVEMENTS AND CHALLENGES

In Chapter II, we highlighted a number of the MCAAP's significant accomplishments, e.g. the PROS program, incorporation, advances in the care of children

with special needs, to name a few. Other major issues were also alluded to, but deserve more attention, and are therefore reviewed in greater detail in this chapter.

Medical Education

The MCAAP has a commendable record in supporting and providing educational opportunities for its members. Even in the early years, the Chapter was successful in attracting nationally renowned speakers for its scientific programs, for example: Drs. Waldo Nelson from Philadelphia; Virginia Apgar, L. Stanley James, Horace Hodes, and Jo Anne Brasel of Babies Hospital in New York; Sam Karelitz (Long Island Jewish Hospital); Bob Blizzard, then the new head of Pediatric Endocrinology at Johns Hopkins; Lytt Gardner from Syracuse; Robert Jackson of diabetes fame (St. Louis); and Saul Krugman, from New York City at the time.

More recent speakers included Drs. Norman Fost, medical ethicist from Wisconsin; Jack Paradise, Pittsburgh otolaryngologist; and GI specialists Joe Fitzgerald (Indiana) and John Vanderhoof (Nebraska). Some of these well-known guests were supported by the Harry A. Towsley professorship in post-graduate medicine, established in 1971. However, as our own teaching hospitals grew in size and national recognition, the Chapter began to rely more heavily on its own home-grown talent. By the late 1970's, the scientific program at the annual conference became the responsibility of the state's three medical schools on a rotating basis, and prizes were awarded for the best research projects by pediatric house officers. Although this format was ultimately discontinued after a successful run, it served to emphasize the Chapter's ability to produce high quality scientific programs from within its own ranks.

Further progress on the educational front occurred in the 1980's. During the presidential tenure of Dr. Stan Singer, the MCAAP strongly encouraged the University of Michigan to stage an annual Pediatric Board Review course, which is currently embarking on its 12th successful year. Likewise, enthusiasm for the Chapter's own annual conference was re-ignited (and attendance increased) by moving the event from fall to summer, and the location from medical centers to primarily resort areas, usually alternating between northern and down-state facilities.

Finally, the growing interest in social and economic issues led the MCAAP to include in its programs such speakers as Sam Flint from the AAP's central office of health care financing, as well as various state legislators and other administrative officials. Notable among these was Mrs. Connie Binsfeld, then Michigan's Lieutenant Governor, who spoke eloquently at the Chapter's 1998 Annual Meeting on the topic of the state's foster care system.

The Newsletter (and a few administrative footnotes)

The first newsletter in our possession is the October, 1970 issue, at that time known as the "Michigan Chapter Newsletter", although the name and format would change several times during the next 29 years. (There may well have been earlier publications of some kind, but we do not have any obvious record of such.)

The earliest issues were modest by current standards: 7" x 8 1/2", 8 pages (including front and back covers), with no advertising; however, the information provided was pertinent and concise. The October 1970 product, with Charles Coffman as Editor and also Executive Secretary, listed the officers as well as the standing

committees, of which there were only seven at the time. This was followed by a summary of the Annual Meeting (held that summer in Gaylord), a list of new members, a “Did you know that...” section, and other worthy news items.

In 1975, Mr. Coffman retired, and was replaced as Executive Secretary by Miles Tiernan (with help from his wife Greta) and (in 1976) by Dr. Charles Wolf as Editor of the newsletter. The May 1976 issue was noticeably expanded, to 32 pages and its current 8 ½” x 11” size. A perusal of the inside front cover records that the MCAAP now boasted 17 committees.

During the next decade, several format modifications occurred (including cover design), and the Autumn, 1985 issue also carried a new title, “Michigan Pediatrics”. Other changes included a reduction in pages (to four, presumably due to a loss of commercial funding), but with more modern printing techniques, allowing considerable information to be contained in a relatively small space. Likewise, what apparently was the first paid advertisement appeared on the back cover.

Miles Tiernan retired as Executive Secretary of the MCAAP (as well as staff for the newsletter) in 1989 after many years of faithful service, and regrettably died early the following year; he was replaced by Lynn Maxwell, with the new title of Chapter Administrator. Dr. Wolf, having navigated the newsletter through 15 very productive years, stepped down as editor in 1991, and was followed by Dr. Bryan Burke.

The first issue of the newsletter under its present format and title, “Michigan Pediatric Update”, appeared in January, 1994. By this time, Linda Long had become the Chapter Administrator, and Joyce Blum, the Executive Newsletter Editor (a new

position); by the next year Dr. George Blum had replaced Bryan Burke as Editor, and there have been no subsequent changes in the Chapter or newsletter staff.

As we all know, the current product is a very professional creation of 24 pages, using up-to-date printing methods (including photographs), which is published quarterly with a circulation of approximately 1800. The editors have been able to attract full and half-page advertisements, all appropriate for pediatricians, which have significantly defrayed the rising costs of printing and distribution. (The inside front cover of the most recent issue attests to the Chapter's growing infatuation with committees: there are now no less than 28 such assemblies, in addition to the officers and staff.)

Medical Economics and Liability

As early as the 1950's, concern was being expressed regarding apparent inequitable remuneration by insurance carriers and government agencies, and the MCAAP minutes of that era indicate that a "Pediatric Fees Committee" had already been established (Chapter II). However, during most of that decade and the next, it seems that pediatricians were able to spend most of their time doing what they were trained to do, i.e. attempt to prevent illness and take care of sick kids. But by the 1970's, it was noted that pediatrics had truly become a business; functioning groups within the MCAAP included the "Legislation", "Pediatric Practice", and "Third Party Pay" committees, formed to address these problems. Reimbursement issues were exacerbated by the fragile economic situation within the state of Michigan during the early 1980's, which prompted the MCAAP to enhance its activities at the level of state government.

Growing concern about professional liability paralleled the increasing relevance of reimbursement issues; this was a significant factor in the decision by the MCAAP to incorporate in 1978 (Chapter II), and the Chapter's urging of legislation to regulate legal contingency fees. A 1985 survey, conducted by Dr. Stan Singer, indicated that approximately 20% of Michigan pediatricians had been involved in a recent law suit, and that their malpractice premiums had escalated by 50%. The title of one presentation at the Annual Meeting in Traverse City that year was "Anatomy of a Malpractice Case". By the mid-1980's, the MCAAP was one of many chapters to encourage federal guidelines to minimize personal exposure for adverse reactions to vaccinations (see Immunizations, below).

Economic and liability issues obviously have not gone away, and continue to spawn important initiatives in the MCAAP's efforts to provide optimum patient care without regard to social status. Individual members (Drs. Bradley Barnes and Dan Wilhelm, among others) have worked diligently to improve our efficiency with DRG's and ICD-9 coding, including reimbursement for vaccinations. The Chapter currently has several pertinent standing committees (e.g., "Child Health Finance", "Medical Liability", "Pediatric Practice", and "State Legislative") as well as a major commitment to the MCMCH (described later in this chapter), all involved with the complex socio-economic problems of our times.

Immunizations

Dr. Bernie Siebers, former head of the Michigan Crippled Children's Commission (now called the Commission on Children with Special Health Care Needs), and also one

of the first pediatricians in Grand Rapids in the early 1950's, recalls the difficulties convincing the public of the efficacy of vaccinations in those years. A big concern was the incidence of untoward side effects at that time (Dr. Sieber's own four year old son had a severe febrile reaction to a pertussis vaccination), in spite of the very favorable risk/benefit ratio. When oral polio immunizations were offered free of charge to inner city children, the response was disappointingly low, presumably because of the few actual polio cases attributed to the vaccine. However, political pressure exerted by the MCAAP ultimately resulted in mandatory immunization of school children.

In spite of further improvement in the vaccines, accompanied by a decreased incidence of untoward reactions, the relatively few negative results still occurring culminated in a rather alarming number of law suits involving pediatricians nationwide.

In the mid-1980's, the MCAAP supported a federal "no-fault" program, the "National Childhood Vaccine Injury Compensation Act" (1984), primarily in response to legal actions related to the DPT vaccination. This bill apparently underwent several modifications, all designed as an alternative to litigation. However, the version which was finally passed in 1986 deleted all language establishing a monetary reserve fund, to protect the physician administering a vaccination, although nearly \$1 billion has been awarded nationally to adversely affected children and their families.

The Chapter also has actively supported the development of Michigan's "Comprehensive Statewide Immunization Registry". This initiative, anticipated to be fully operational by the year 2000, is able to track children (identified by birth certificates) even as they move from one location to another, with the physician required to notify the state within 72 hours of administering a vaccination.

With the persistent backing of the MCAAP, the state has been able to dramatically improve its immunization rate in recent years, with an increase from 74.1% to 79.8% between 1996 and 1997 alone. A standing committee on Infectious Diseases and Immunizations is headed by Dr. Dennis Murray, who is also a member of the AAP's Committee on Infectious Disease.

Michigan Council for Maternal and Child Health (MCMCH)

Apparently, the seeds of this council were sown in the early 1970's, when block grants to states resulted in a net loss of health care funding, with potential consequences for the pediatric population. Dr. Bill Montgomery, then District V Chairman, encouraged the individual states to take action. Vigorous lobbying, including a series of letters from Dr. Bob Holm to Governor William Milliken and other influential officials in Lansing, finally resulted in the development of the policies and by-laws for what was to become the MCMCH. Mr. Paul Shaheen became the full-time director in 1983, and still holds this position, frequently attending the Chapter's meetings. The MCAAP, along with seven other health care groups within the state, continues to be a major supporter of this program, which has exerted tangible pressure in Lansing as an advocate of children's welfare.

Child Safety

Child safety has been a major concern for the MCAAP for its entire half-century. Symbolic of efforts in this area was the advent of the "Every Ride-Safe Ride" program in

the early 1980's, in response to a growing number of motor vehicle injuries and fatalities involving young children. By 1984, there was sufficient interest in this issue to warrant the formation of an ad-hoc committee (First Ride Safe Ride) composed of Drs. Gerry Breitzer, Marshall Blondy, and Paul Hletko.

However, effective action had already been taken by Dr. Breitzer and his colleagues several years prior to the formal establishment of this committee. Supported by a grant from the state, initiatives included a survey of the frequency and methods of restraining newborns in their automobiles upon hospital discharge, development of a film depicting appropriate car seats for children up to four years of age, and lectures on this subject to approximately 40 hospitals statewide. A follow-up evaluation was planned, but, in the meantime, Michigan responded by enacting a child restraint law, the sixth state in the nation to do so. Soon thereafter, motor vehicle fatalities in this age group decreased by nearly 10%. The success of the "Safe Ride" program (which has been re-energized in recent years), along with the formation of the MCMCH (see above) were significant factors in the MCAAP being chosen for the Wyeth Outstanding Chapter Award in 1982.

Other safety issues under consideration are the feasibility of seat belts in school buses, restraints for children 0-6 years in airplanes, and head protection for toddlers.

The Early and Periodic Screening and Treatment (EPSDT) Program and the Omnibus Budget Reconciliation Act (OBRA-89)

The Federal OBRA-89 was enacted ten years ago in an effort to strengthen state requirements for Medicaid funding, e.g. to provide adequate well-baby checks, encourage enhanced primary care, and provide physicians with adequate reimbursement for these

services; in other words, to achieve the objectives of the EPSDT program. However, in many states, including Michigan, there was concern that the OBRA-89 guidelines were not being followed as effectively as anticipated; in fact, in 1990 the Pennsylvania Chapter of the AAP actually mounted a successful legal action against the state over this issue.

Our own Chapter also became actively involved in dealing with this problem. Dr. Bea Murray (then President-Elect) urged the MCAAP to set up a special contingency fund to be used to help enforce adherence to OBRA-89 mandates if necessary. Therefore, in 1993, each member was asked to make a one-time contribution of \$100 toward the formation of a “war chest”; by this means, over \$22,000 was raised, later increasing to \$30,000 via accrued interest.

Concern about this issue abated somewhat during First Lady Hillary Clinton’s efforts at health care reform, but when these initiatives fell short, the MCAAP’s interest was re-ignited. At the present time, Dr. Murray and other members are continuing to have productive dialogue with representatives of the governor’s office in an effort to resolve the OBRA-89/EPSDT problems in a manner satisfactory to all parties involved. However, as of this writing, a final solution has not yet been reached.

Chapter IV

THE NUMBERS GAME - MEMBERSHIP, DUES, AND FINANCES

Membership and Dues

Adequate records are not available for the first decade of the Chapter. However, by 1958 the membership numbered 263, all paying the minuscule amount of \$5 per year

for dues. By 1963, there had been a decrease to 230 members representing approximately 85% of Michigan Pediatricians. Although dues were still only \$5 (admittedly about \$25 in today's economy), it was noted in the minutes that four members refused to pay!

By the late 1970's, there were about 500 members, now divided into several categories, active, affiliate, candidate, and emeritus, as defined in the By-Laws (Appendix F). By 1983, the number had jumped to 799; some of this increase was attributed to the billing process being transferred from the MCAAP to the national AAP, thereby identifying potential members who were previously only on AAP lists. In 1987, membership reached the 1,000 mark for the first time, and was over 1,300 by the early 1990,s. By 1999, the Chapter had 1444 members: Active-1,052; Affiliate- 5; Candidate- 257; and Emeritus-130.

As everyone knows, annual dues are no longer \$5. They had increased to \$25 in 1973, \$35 in 1983, \$50 in 1988, \$60 in 1992, and to the current \$75 by 1994 (dues are not required of candidate or emeritus members).

Finances (Where's the Money?)

As with the membership figures, the financial status of the MCAAP during the early years is unclear, but the Chapter was obviously solvent enough to survive. In 1958, the minutes recorded a balance of \$1,663, as reported by the treasurer, Dr. Robert Mason; five years later it had increased by another \$1,000.

Further increments occurred into the 1970's, so that in 1978, with Dr. Natalia Tanner as treasurer, it was agreed that a savings account (in addition to the usual checking account) should be established. As a result, about half of the Chapter's assets of \$10,000 that year were deposited in an interest bearing account. Although the positioning of these funds has changed over the years, this policy has continued to serve the Chapter well and helped to maintain its solvency.

During the 1980's, the percentage of assets in savings accounts increased markedly, and by 1992, about 90% of the Chapter's total balance of \$40,000 was earning interest in a money market fund. The next year, in response to concerns about the state's compliance with the Federal OBRA-89 regulations, an additional "war chest" was established through voluntary contributions (Chapter III). By 1994, \$30,000 had been raised by this means, and this amount has remained constant to the present time.

The working budget for 1998 was \$93,100, with about two-thirds of the income generated by membership dues. After expenses, it was projected that \$10,000 could be allocated to reserves (Appendix E). Quarterly reports generated by the Chapter's Treasurer reflect the expected variability in the cash on hand balance, depending on such factors as the timing of dues collections, the annual meeting, billing for the newsletter, etc. However, in early 1999, the checking account contained approximately \$76,000, with an additional \$77,000 in the Chapter's interest bearing reserve account, and (as noted earlier) \$30,000 in the "Advocacy" fund.

Chapter V

FUTURE EXPECTATIONS: A GLANCE AT THE CRYSTAL BALL

Where do we go from here? To some extent, this depends upon the future of pediatrics at the national level, which is not always easy to predict. For example, the report, Future of Pediatric Education II, compiled by representatives of the AAP, the

Pediatric academic societies, and Pediatric department chairmen, required considerable dialogue to resolve differences of opinion among its various contributors.

Nonetheless, discussions with our own past Chapter presidents and others resulted in several recurring themes which will most likely require the MCAAP's attention in the coming years. Among these is the issue of health care advocacy for children (which was also a major agenda item at the 1999 AAP Legislative Conference in Washington D.C.). One element of this topic at the local level involves the durability of the State Children's Health Insurance Program (SCHIP), which is supported by the MCAAP, but still requires increased involvement of clients and providers. A step in the right direction was the August 1998 approval by Governor John Engler of "MI Child", which provides routine examinations and immunizations to qualified underserved families who do not have adequate health insurance.

In addition to other social issues such as gun control, and the current impediments to universal access to quality care and a "medical home" for each child, the MCAAP will continue to face logistical problems resulting from changes in the way pediatrics is practiced. Examples include the complex interface between the physician, managed care, third party carriers, government regulations, and the patient; increased use of computers and electronic medical records (confidentiality a problem?); improvement in resources for the child with special health care needs; the well-intentioned Federal CLIA guidelines, which continue to stress the budgets of some of the smaller laboratories (although recent exceptions for a few basic tests have been welcomed); further emphasis on ambulatory vs. inpatient care; development of interactive television for conferences

and consultation; and the beneficial effect of new and improved immunizations, which may allow the pediatrician more time to focus on learning and behavioral problems.

In any case, the MCAAP approaches the next century as a viable body which will continue to address these issues in an appropriate and effective manner.

Appendix A

Officers of the Michigan Chapter of the American Academy of Pediatrics

<i>Date</i>	<i>Chairman/ President</i>	<i>Vice-Chairman/ President-Elect</i>	<i>Secretary</i>	<i>Treasurer</i>	<i>Executive Members at Large/Alternates at Large</i>
1949-1951	Frank Van Schoick	Rockwell Kempton	Wilfred Nolting	Ernest Watson	Edgar Martmer Edward Wishropp Leon De Vel
1952-1957	Harry A. Towsley	Phillip J. Howard	Charles F. Payton	Robert Heavenrich	Donald C. Johns Frederick M. Adams Glen E. House
1957-1960	Phillip J. Howard	Robert M. Heavenrich	Leon De Vel	Robert J. Mason	Glen E. House Ethon L. Stone Park J. Bradshaw
1960-1963	Robert M. Heavenrich	Ruben Meyer	J. Hugh Lewis	Louis E. Heideman	Park J. Bradshaw Robert E. Dew Benjamin J. Stone
1963-1966	Ruben Meyer	J. Hugh Lewis	Jerome E. Webber	Robert E. Dew	John C. Montgomery Benjamin J. Stone Robert Nicholson
1966-1969	George Lowrey	Frederick Adams	John C. Montgomery	Thad Joos	S. Sprigg Jacob Robert Trimby Robert Nicholson
1969-1972	John R. Wilson	Thad H. Joos	John C. Montgomery	E. Dalton Black	Robert Nicholson John L. Doyle
1972-1975	Thad H. Joos	John L. Doyle	Joanne E. Mertz	E. Dalton Black	John C. Montgomery David Transue
1975-1977	William Montgomery	Wallace Nichols, Jr.	E. Dalton Black	Daniel F. Rearson	John C. Montgomery Thomas B. Wright
1977-1980	Robert S. Holm	Gordon R. Rady	E. Dalton Black	Natalia Tanner William J. Venema	Wallace Nichols, Jr.
1980-1983	Robert S. Holm	Marshall Blondy	Natalia M. Tanner	Juan E. Alejos	Wallace Nichols, Jr. William J. Venema
1983-1986	Natalia M. Tanner	Stanford Singer	Juan E. Alejos	George E. Bacon	Wallace Nichols, Jr.

1986-1989	Stanford Singer	Edward O. Cox	George L. Blum	Dietrich W. Roloff	Irving M. Miller Charles N. Inniss Daniel A. Schnaar
1989-1992	Edward O. Cox	George L. Blum	Beatrice A. Murray	Dietrich W. Roloff	Daniel A. Schnaar Sheldon Brenner
1992-1995	George L. Blum	Beatrice A. Murray	Gerard M. Breitzer	Dietrich W. Roloff	Daniel A. Schnaar Sheldon Brenner Gary Johnson
1995-1998	Beatrice A. Murray	Gerard M. Breitzer	Gary K. Johnson	David S. Rosen	Dietrich W. Roloff George E. Bacon
1998-2001	Gerard M. Breitzer	Gary K. Johnson	Molly D. O'Shea	Jay Mitchell	George E. Bacon David S. Rosen

- Alternates-at-Large terms do not always coincide with terms of other officers, and may overlap in years of service.

Appendix B

Recipients of the
William C. Montgomery Pediatrician of the Year Award,
Michigan Chapter

1991	William C. Montgomery (received by his wife.)
1992	Robert S. Holm
1993	Regina Aranow
1994	Lester Weiss
1995	Stanford Singer
1996	Howard Knobloch
1997	Daniel Wilhelm
1998	Dietrich W. Roloff

Appendix C

Michigan Pediatricians who were Presidents of
The American Academy of Pediatrics

Thomas B. Cooley	1934-1935
Edgar E. Martmer	1956-1957
Harry A. Towsley	1964-1965*
Robert M. Heavenrich	1972-1973*
William C. Montgomery	1986-1987*

**Also served as President of the Michigan Chapter.*

Appendix D

Alphabet Soup: A Guide to Acronyms and other Abbreviations

AIM: Alliance for Immunization

CATCH: Community Access to Child Health

CHIRP: Child Health Insurance Reform Plan

CLIA: Clinical Laboratory Improvement Act

CSHCN: Children with Special Health Care Needs

EPSDT: Early and Periodic Screening, Diagnosis, and Treatment

MCMCH: Michigan Council for Maternal and Child Health

OBRA '89: Omnibus Budget Reconciliation Act, 1989

PROS: Pediatric Research in the Office Setting

PSRO: Professional Standards Review Organization

SCHIP: State Children's Health Insurance Program

WIC: Women, Infants, and Children

Appendix E
MCAAP 1998 Budget

IMCOME

Membership Dues	\$61,000.00
Annual Meeting Registration	\$12,100.00
Annual Meeting Displays	\$ 7,000.00
Interest	\$ 4,500.00

TOTAL INCOME	\$93,100.00
---------------------	--------------------

<u>EXPENSES</u>	<u>Q1 98</u>	<u>Q2 98</u>	<u>Q3 98</u>	<u>Q4 98</u>	<u>FY 98</u>
Annual Meeting					\$12,00.00
Board Meeting	\$ 300.00	\$ 300.00	\$ 300.00	\$ 300.00	\$ 1,200.00
Misc. Office Expenses	\$ 750.00	\$ 750.00	\$ 750.00	\$ 750.00	\$ 3,000.00
Newsletter	\$ 4,000.00	\$ 4,000.00	\$ 4,000.00	\$ 4,000.00	\$16,000.00
Staff	\$ 4,000.00	\$ 4,000.00	\$ 4,000.00	\$ 4,000.00	\$16,000.00
Quarterly Tax	\$ 628.00	\$ 628.00	\$ 628.00	\$ 616.00	\$ 2,500.00
Supplies	\$ 125.00	\$ 125.00	\$ 125.00	\$ 125.00	\$ 500.00
MCMCH Dues					\$14,000.00
Advocacy Committee	\$ 250.00	\$ 250.00	\$ 250.00	\$ 250.00	\$ 1,000.00
Pres. Discretionary Fund					\$ 2,000.00
Annual Focus Funds					\$ 5,000.00
Computer/Equipment					\$ 1,500.00
Committee Expenses					\$ 1,000.00
Accountant					\$ 2,400.00
Travel					\$ 3,000.00
Postage					\$ 2,000.00
To Reserves					\$10,000.00

TOTAL EXPENSES	\$93,100.00
-----------------------	--------------------