



GEORGIA OSTEOPATHIC  
MEDICAL ASSOCIATION  
— 1902 —

## Your monthly GOMA news & update

Welcome to GOMA's monthly newsletter where you can stay up-to-date on the latest osteopathic news and happenings in the GOMA community.

### Following Your Path: A DO Profile

#### Cory Barrows, DO's Winding Path to Becoming an Osteopathic Pediatrician



Cory Barrows, DO has just become a pediatric resident at the Medical College of Georgia (Augusta University), and her matter of fact account of how she came to this point after her winding path of life is fascinating. She was born in Las Vegas to parents that she describes as “free spirits”, but they moved her and her siblings to Memphis when she was 6 years old to be closer to her maternal grandparents. After spending her entire pre-college years in Memphis, the family moved to Naples, Florida where she found herself as a high school upperclassman.

Dr. Barrows graduated from the University of South Florida in Tampa in 2011 with a major of English Literature and a goal of becoming an English Professor, however she added a second major in Russian after realizing that her foreign language requirement was only a few classes short of accomplishing the dual degrees. During the summers, she dabbled in taking pre-med classes as well as working summer camps as a counselor or doing nanny work. “Half way through undergrad, I decided that academia was not for me,” she recalls. Before long, her route to medicine would become very clear.

While her older sister became a teacher and eventually a Vice Principal in Memphis and her younger brother has a career in computer work also in Memphis, Dr. Barrows moved to New York City. She worked for a printing press there, but that business was going through tough times. Dr. Barrows continued the career path she had started on as a teenager, which working in fine dining establishments. While Dr. Barrows was working in the evenings at the restaurants, she felt most fulfilled when she was volunteering in the ICU of New York Presbyterian's 270-bed Morgan Stanley Children's Hospital. Dr. Barrows returned to Florida to work on her pre-med requirements and then moved to Georgia to enroll in Agnes Scott College's Post Baccalaureate Pre-Medical Program in 2013. The thirty student program was very suited to her needs, and included pre-med counselors that introduced Dr. Barrows to the osteopathic profession and PCOM Georgia.

Dr. Barrows only applied to osteopathic programs because “I felt like DO schools were more open to non-traditional students, and it was very important to me to be with other students who had an eclectic background with varied interests”. She matriculated in PCOM Georgia's Suwanee campus in 2016 fully

expecting to pursue General Surgery including being active in the surgery club at the school. It was during a third year pediatrics rotation with an M.D. in Titusville, Florida that Dr. Barrows became inspired to think that pediatrics was more of a natural fit for her.

Dr. Barrows and Brant Barron, DO (profiled last month) started out as classmates at PCOM Georgia that frequently found themselves in close proximity by virtue of their last names. The two became engaged when he proposed with a ring last summer, but then came the challenge of making sure their residencies were in the same city. The couples match produced a slot in MCG's pediatrics residency for her and family practice for him. Dr. Barrows feels that the first two years of medical school had a tremendous osteopathic influence on her. "I feel at home with patient care, talking to people, listening to people and touching people" because of the intimacy of the OMM lab, she notes.

Her aspiration to subspecialize in critical care pediatrics and palliative care echo her volunteer days in New York City's children's hospital, but right now Dr. Barrows is perfecting her milestones of development by raising her 9 month-old daughter Lucinda as well as her 7 year-old stepdaughter Caroline. Her holistic philosophy rings true as she speaks about her sub-specialty goal: "my main hope is to work with kids with chronic disease and make their quality of life as high as it can possibly be".

## Legally Speaking...



### Surprise Billing Consumer Protection Act (HB 888) Is signed Into Law

"The passage of H.B. 888 will have tremendous positive implications for patients across Georgia," said Georgia College of Emergency Physicians (GCEP) President John Sy, DO "As physicians, patients have always been our top priority. This law will give our patients the certainty they need to seek medical care without fear of receiving a surprise medical bill."



The dignitaries that were on hand for the H.B. 888 bill signing were (from the left) Rep. Richard Smith, Sen. Kay Kirkpatrick, M.D., Rep. Lee Hawkins, Gov. Brian Kemp, and Sen. Chuck Hufstetter.

H.B. 888 will ensure that patients are not left in the middle of insurance disputes between providers and insurers by creating an independent dispute resolution (IDR) process. Not only does this bill limit out-of-pocket expenses to in-network cost-sharing requirements, but it is also a fair and balanced approach that preserves access to care.

This bill signed by Gov. Brian Kemp on July 16th becomes effective on January 1, 2021 and features **strong patient protections**:

- Patients' cost-sharing for unanticipated out-of-network (OON) services will be the same as required when they receive in-network services.
- Patients will not have to participate in billing discussions for unanticipated OON services. Instead, negotiations will be between the clinician and the health insurance plan.
- Physicians will be banned from balance billing patients who receive unanticipated OON services.
- Patients are protected from the financial impact resulting from narrow networks, retroactive denials, and cost-shifting trends within health insurance plans. Prior authorization is not required.
- Clinicians will give information to patients and discuss their OON fees before any services are provided, except when it is not possible (e.g., emergency services or unanticipated OON care situations).
- Non-participating providers are prohibited from reporting any patient to a credit reporting agency for failure to pay any amount above that would be required on an in-network basis.

#### Fair Reimbursement:

- Reimbursement for OON care or services will be set at the median in-network amount paid in 2017 for emergency or non-emergency services and annually adjusted for inflation using the Consumer Price Index.
- Health insurance plans will pay all reimbursements directly to clinicians and will be prohibited from sending the reimbursement to the patient, even if the clinician is OON.

#### Independent Dispute Resolution:

- If it is decided that payment for a claim is not sufficient given the complexity and circumstances of the service or services provided, the provider or facility may request arbitration within 30 days of receipt of payment. Claims may be bundled.
- Once the office of the commissioner of insurance receives a request for arbitration, an additional 30 days will be allowed for negotiation. If there is no agreement, a resolution organization will be notified within five days to begin the arbitration process.

- “Baseball-style” arbitration where each party submits a proposed payment and the arbitrator chooses one.
- The fees associated with arbitration and any arbitrator expenses shall be paid by the party whose offer was not accepted.

**Improved Transparency:**

- The Georgia Department of Insurance will be required to provide access to verifiable data from a claims database and ensure such information is annually updated and maintained on the department’s website.
- The Georgia Commissioner of the Department of Insurance will submit an annual report to the legislature beginning on July 1, 2022. They will also be required to post a summary on the department’s website that addresses arbitrations filed, settled, arbitrated, defaulted, and dismissed, as well as a description of the decisions made – whether they were in favor of the insurer or the provider.

## From the Field

### Doctor of the Day for Georgia Legislators

Each legislative session, doctors in Georgia volunteer their time to provide free minor medical care to legislators and their staff for one or more days during the “forty-day” session. Among the 2020 doctors was GOMA President-elect Karen Turner, DO. Volunteers were each recognized in the House and the Senate on the day they served.



Dr. Turner reports that when she served, COVID-19 was still an unknown to many of the legislators, and she took the opportunity of speaking on the floor of each chamber to educate the legislators about the importance of masks, washing hands and isolation of those with the virus. In the picture above, Dr. Turner is on the podium of the Georgia Senate after speaking to the body. She is pictured with Lt. Gov Geoff Duncan and her state senator Sen. Ben Watson, MD. Paul L. Mefferd, DO also volunteered this year.

### Back To School Multiple Choice: In-person, Online, Both?



Most of the schools in Georgia have developed a fall game plan that involves returning to school in person, at least in part, after a spring shutdown in response to the COVID-19 crisis. The switch from classroom instruction to virtual education at home halfway through the semester helped slow down the number of COVID-19 cases, but since early July, the number of cases has started to increase in frequency. GOMA interviewed osteopathic pediatricians from around the state to get their opinions on the debate revolving around the children returning to campus to start the new semester.

Laura A. Babcock, DO, FAAP answered questions as she drove home from DeKalb Pediatric Center where she has worked since August 2013. She is a graduate of LECOM-Brandenton and did her pediatric residency at Emory for the three years prior to starting in her job just a few miles away. Awaiting her at home was her husband Tristan and their three children (Lucas 8 year-old son; Kelsey 5 ½ y/o daughter and Ashley one year and nine month-old daughter). At the office of 11 providers (7 doctors), they have started doing COVID-19 testing three weeks ago. Most of the positive cases had exposure from the home and about fifty percent of the kids had mild symptoms.



When asked about how she felt schools should handle the opening of the school year, Dr. Babcock responded, “I think it is so important to have kids in school.” She then countered that with “opening and closing is not good for kids.” She commented that her kids will be starting second grade and kindergarten in Gwinnett County which is having a surge of cases. “There is no way to have kids in class” until county wide cases are consistently decreasing for at least two weeks” She realizes that each parent is balancing multiple factors in their decision to send their kids to school this fall semester. Some parents may need the schools to act as a child care facility while others may realize that sending the kids brings risk to others in the household that

may be immune compromised or older. She feel the schools would be best to offer options to the parents. Dr. Babcock has made note that she is seeing more headache and belly pain complaints that she feels are a manifestation of the stress that kids are feeling during this pandemic. Teens are exhibiting more mental health problems which she theorizes is due to a lack of socializing with their peers.

Dr. Babcock feels fortunate that she can keep her kids at home with her neighborhood developing a "Pod" that has hired a teacher to help the kids stay on task.

Daniel B. Collipp, DO, has practiced pediatrics for 16 years in Jesup, Georgia which is in the southeast corner of the state approximately sixty miles southwest of Savannah. He graduated from Touro University in California with a DO degree in 2001, and completed a three-year pediatrics residency at Doctors Hospital in Columbus, Ohio. He moved to Jesup to join his father P. Jack Collip, MD at Jesup Pediatrics. Dr. Collipp reports that he has about twenty patients with COVID-19, but that none of them required hospitalization. His response to the school opening question is long but well thought out, and is included in its entirety:



*I believe schools should open.*

*Primarily, school officials have to be very vigilant, as well as flexible. If their situation changes significantly they need to change their policy accordingly.*

*All parents should be advised that school officials will not be able to provide a 100% covid-19 safe environment. Some children will be infected, certainly.*

*Younger children cannot wear masks reliably. Middle school children may succeed at wearing masks in between classes. High school students may succeed at wearing masks for most of the day. Consequently I believe masks should be encouraged, but should be optional, especially for younger kids.*

*Hand-washing and hand-sanitizing should be encouraged also. I recommend every hour, or between classes for older children. Also, prior to eating.*

*Schools should sanitize commonly used interior areas daily. Exterior areas should not be sanitized. Children should hand-sanitize before and after going outside to play, or learn.*

*Field trips should be suspended indefinitely.*

*Visitors should not be permitted whenever possible.*

*School assemblies, or other large gatherings should be suspended indefinitely.*

*Children in younger grades should be cohorted. Children in older grades should practice social distancing while traveling from class to class. Various grades can have altered schedules in order to reduce the number of students traveling in the hallway from class to class.*

*If possible children should eat their lunch in a classroom, or at least in as small a group as possible. Cohorted children can eat lunch together.*

*Parents should be advised to keep their children home if they believe their child is ill, regardless of fever, as greater than 50% of children do not have a fever when infected with covid-19.*

*Since fever is absent in such a large percentage of ill children I would not spend a lot of money checking the entire student body for fever prior to entering the school every morning. Schools might arrange for a rapid, inexpensive infrared temperature monitor, which would check large numbers of students efficiently and quickly. A fever is 100.4 degrees.*

*Schools should advise families with persons who are at a higher risk living at home to make a plan. Pregnant moms are at a higher risk, for example. Perhaps they can provide virtual school as an option. Kids will get infected and they will take it home and infect family members. Perhaps an elderly person can go to live with someone else for the time being. Families need to know they should make a plan.*

*A doctor's note should not be required for a parent to keep their child out of school for covid-19 concerns. The schools should make arrangements for virtual or homeschooling options at the parent's or legal guardian's request.*

*Children who have asthma or allergies are fine to go to school. Children who have a history of intubation for asthma, or being admitted to an ICU for asthma should not go to school. Children*

*with cystic fibrosis, or any other severe medical condition should also make other arrangements such as virtual or homeschooling.*

*When a child tests positive, this information should be shared with the school. The school should then notify parents (without identifying the individual child) when children test positive so parents can better make decisions. It is helpful for parents to know the grade of the child who tests positive.*

*Exposures should be left up to the parents. There many variations of exposures. I believe we need to require the parents to use their judgement.*

*Testing students until they test negative is not necessary. A student who tests positive should stay out of school for ten days. After that, if they are without fever (assuming they did not take fever reducing medicine) they can return to school.*

*The school should make arrangements for home study for children who are absent due to covid-19. Most children who test positive do not get particularly ill, most can benefit from home assignments. Children should keep up to the educational standards for their grade.*

*Schools should put their absentee policy on hold for this year.*

*School administrators also need to plan ahead for increased teacher absences as well as increased teacher responsibilities (managing home or virtual learning in addition to classroom learning).*

*Children (and parents) should be strongly encouraged to get an influenza vaccine.*

*Hope this is helpful,*

*Sincerely, Dr. Collipp*

## Law Adds Protection for Seniors

**They Never Die** by A.T. Still (b 8/6/1828 – d 12/12/1917)

Kind words, like rivers of life, are the odors of thought, the dews and muscles of durability, the stay and comfort of the worrying man or woman who tries to reason or travel a road that runs through the forest of darkness, that must be crossed by all who see the lights beyond the brush of the untrodden paths of faith and logical truth. A kind word lightens the weighted and sinking heart until it can run to the harbor of rest. One kind word is water to the fast wilting tree of hope. There are a few in my heart whose duration has been many years, and are cherished today as rivers of joy, on whose surface float great streams loaded with unspeakable thanks for him, or her, or whoever gave me a smile and held even a lamp on shore to guide my boat to the stoneless channels of safe delivery. Those mites from a friend dropped in my cup which I drank as a famishing being, relished, as none other could, but he who had cruised in seas great and small for truth. I think of all those smiles and cheering words as the brightest stars and gems of all my days. Our great word "love" fails to express my feelings to those that said, "Merit is the choicest jewel of all lives," and will attend all funerals of opposition because it cannot die, no never! Give me your kind words and keep all else, and when I am dead and my tongue loses its power, I will ask the bones of my tomb to thank you for them.



## New DO Residents in Georgia (as of July 1, 2020\*)

## New Residents in Georgia (continuation from last month)\*:

### Naviscent Health in Macon

Nicholas Koulias, DO	Alabama COM	General Surgery
Joseph Roberts, DO	GA-PCOM	Pediatrics

### MCG/Augusta University

Andrew Dunaway, DO	PCOM-Philly	Anesthesiology
Philip Bucur, DO	Ohio University	Internal Medicine
Mycal Casey, DO	Michigan State	Internal Medicine
Robert Kennedy, DO	Lincoln Univ	Internal Medicine
Maja Magazin, DO	Nova SECOM	Internal Medicine
Pooja Mude, DO	Lincoln Univ	Internal Medicine
Cory Smithe, DO	Lincoln Univ	Internal Medicine
Neil Thackar, DO	Nova SECOM	Internal Medicine
Shannon Philipps, DO		Neurology
Emily Grandprey, DO	VCOM-Auburn	OB/GYN

### Phoebe Medical

Joshua Kinsey, DO	WVSOM	Family Practice
Juan Serna-Gonzalez, DO	VCOM-Auburn	Family Practice
Joseph Sonntag, DO	VCOM-Auburn	Family Practice
Memorial – Savannah		
Alexis Brown, DO	GA-PCOM	Family Practice

### Redmond – Rome

William T. Chang, DO	Marian Univ COM	Transitional
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### WellStar Atlanta Med Ctr

Tom John Mayuga, DO	GA-PCOM	Family Practice
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### Colquitt – South Georgia

Hyder Naqvi, DO	GA-PCOM	Family Practice
William Seemer, DO	GA-PCOM	Family Practice

### GA-PCOM Goodman Dermatology

Ashley Ahlquist, DO	LECOM-Bradenton	Dermatology
Heather Ivy, DO	Oklahoma	Dermatology
Kevin Pennycook, DO	Michigan State	Dermatology

\* = this list is incomplete, and will be updated as more information is available



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## Support GOMA!

*Helping your professional society,  
and the osteopathic community weather these  
uncertain times.*

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**GOMA's Fall CME**  
is  
*Virtually*  
**COMING SOON**  
Check for website updates  
**14 hours of AOA Category 1-A Credit**  
**November 6-8, 2020**

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**Physician Support Line**  
Free Confidential Peer Support Line by  
Volunteer Psychiatrists for US Physician Colleagues  
during the COVID19 Pandemic  
**1-888-409-0141**  
NOW LIVE  
7 days a week  
8am - 12am EST  
[www.physiciansupportline.com](http://www.physiciansupportline.com)

On April 6, 2020, a free confidential peer support line by volunteer psychiatrists was started. It is supported 8 AM to Midnight seven days a week. **(See left)**

Mona Masood, DO is a general adult psychiatrist in the greater Philadelphia area is the founder and chief organizer of the Physician Support Line.

[Visit our website](#)

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