From our President and CEO, Dr. Jeff Heck

Over four decades, MAHEC has developed national models of care and a reputation for educational excellence. Our patients receive exceptional healthcare from providers who are highly qualified and extremely dedicated. Our faculty mentor and train the best and the brightest in medicine to become leaders in primary and Ob/Gyn care. Instilling not only a passion for learning and medical excellence, but a love for the mountains and the people who live here, many MAHEC graduates stay in WNC to become great physicians and dentists for you and your family.

The timing is perfect. Our nation’s healthcare is transforming, and for the first time, there is recognition that we must have a stronger primary care foundation. We are catching up with research that documents how an investment in primary care leads to a healthier community and cost-effective healthcare. MAHEC is poised as a leader in the center of these changes, and we remain committed to:

- high quality, compassionate healthcare;
- excellence in medical residencies, fellowships, and student education; and
- innovation and leadership for healthcare in WNC and beyond.

We are unique. As a medical teaching center, we embrace quality, creativity, and change. We celebrate 40 years since the incorporation of MAHEC, and our vision grows ever bolder. Enjoy this issue of Touchstone as a glimpse into the many ways our healthcare, education, and innovation impact lives.

Jeffery E. Heck, MD
President and CEO, MAHEC
Professor, UNC Chapel Hill
40 Years of Growth to Meet Western North Carolina’s Needs

Your doctor. Your teacher. Your advocate.

1974
MAHEC Founded

1975
Asheville Family Medicine Residency founded

1992
Obstetrics & Gynecology Residency founded

1995
Hendersonville Family Medicine Residency founded

2005
Geriatric Medicine Fellowship founded

2007
General Dentistry Residency founded

2009
UNC School of Medicine Asheville Campus founded

2010
Hospice and Palliative Medicine Fellowship founded

2012
Family Medicine Obstetrics Fellowship founded
Imagine a room filled with expectant mothers and fathers seated in a circle talking about their pregnancy, learning about nutrition or preterm labor, asking questions of each other and their doctor. A proud father tells other dads what it was like to be in the hospital with a crying newborn. A nurse asks a question about nutrition. Casual conversation and laughter mix with important medical information.

This is an empowering model for prenatal care called Centering Pregnancy® that combines prenatal assessments with peer support and education. Women learn about their changing bodies, and families form lasting relationships as they face one of the most transformative experiences of their lives: pregnancy.

MAHEC has long been at the forefront of healthcare for women in our region. Last year, our team of physicians, nurses, and midwives delivered 44 percent of the babies at Mission Hospital, which is more than 30 babies every week.

Amanda Murphy, CNM, is MAHEC’s Centering Pregnancy® Coordinator and Director. “The group has such a deep knowledge base, deeper than any of them realize,” Murphy says. “So when I’m sitting in group, and I hear mothers talking to other mothers about what they are experiencing and what they have found helps or doesn’t, that’s what it’s all about ... It should be women sharing with one another. It should not be about providers lecturing to them.”

The integrative model welcomes women who have had pregnancies before as well as first-time parents. This breadth of experience engenders sharing and understanding.

First-time mother Jolie Pegg agrees and would participate again in a heartbeat. “It was really helpful. It was great to be in a group with other moms who already have children, and to hear some of their stories, and to get helpful feedback.”

In addition to fostering learning and relationships, the model has proven to reduce rates of preterm birth, one of the leading causes of infant mortality in North Carolina. For infants who survive early deliveries, half of all pediatric neuro-developmental problems can be attributed to pre-term birth. Medical care for preterm babies is costly and many families struggle emotionally and financially as they cope with a lifetime of challenges and expenses in caring for a disabled child.

Through Centering Pregnancy®, women better understand the risks inherent to pregnancy while laying the foundation for a healthy family. “Centering Pregnancy® allows women and their families to take ownership of the health and well-being of the current pregnancy and the newborn and family after birth,” Murphy says. “Women are empowered to come and take part in their care.”

“I love it when I get to visit families after the baby is born. Centering creates such a close connection among all of us who have been part of the group for the entire pregnancy. It feels like I am visiting family members.” — Amanda Murphy, CNM
Primary care at MAHEC has always been at the forefront of best practices. Unique to most primary care settings, pharmacotherapy is an integrated part of family medicine at MAHEC, and our physicians work closely with the UNC Eshelman School of Pharmacy, Asheville campus. Residency-trained clinical pharmacists work in our primary care practices at Biltmore, Deerfield and Givens Estates to provide medication therapy management for patients with chronic diseases and assist with transitions of care for patients leaving the hospital. A recent study of the use of clinical pharmacists providing annual wellness visits for Medicare patients showed that clinical pharmacists provided more screening services and vaccines, and identified and corrected medication related problems more often than physicians conducting these visits. Recent funding from The Duke Endowment enables us to add clinical pharmacists to our primary care sites in Newbridge and Enka/Candler to expand this successful model of care.
MAHEC residents practice full-scope medicine

When asked to describe MAHEC, first-year family medicine resident Margarette Shegog, MD, likens the organization to a patchwork quilt. “MAHEC is lots of different pieces, colors, textures, and fabrics that come together to make this beautiful creation that also keeps you warm,” Dr. Shegog says.

It is MAHEC’s dedication to diverse points of view, stages of life and even different countries, that first attracted Shegog as a medical student assessing residency programs across the United States. “It’s an environment supportive of experience outside medical knowledge,” she says.

As a first-year resident, Dr. Shegog spends the majority of her time working in the hospital, rotating through adult medicine, pediatrics, and obstetrics. This intern year often is characterized as a rigorous introduction to inpatient medicine, while the following two years focus more on outpatient care. A rotating curriculum gives residents experience in both urban and rural settings, Dr. Shegog says, preparing young doctors for a range of clinical environments. “Here you get trained for everything.”

Before entering into medical school in her native Ohio, Dr. Shegog already had been a Peace Corps Volunteer in Namibia and southern Africa, where she firsthand saw the devastation of HIV in rural villages. She then continued on to travel India as an America-India Service Corps Fellow.

It’s no coincidence MAHEC has attracted many other former Peace Corps volunteers, as well as students who have volunteered abroad. At MAHEC and in our residency programs, service to the community is paramount. Dr. Shegog currently hopes to practice as a small-town family doctor once she has completed MAHEC’s three-year family medicine program.

“I want to go where the need is. The underserved deserve the best doctors possible.”

—Margarette Shegog, MD
MAHEC alumna and Ob/Gyn practitioner Jamie Ramsey, MD, joined Transylvania Regional Hospital full-time this past July, and is one of the first female Ob/Gyns in Brevard. Prior to her training at MAHEC, Dr. Ramsey worked as a registered nurse in labor and delivery, and today she promotes minimally invasive gynecological care, including complementary and alternative treatments, when possible. “Practicing Ob/Gyn in Brevard is a dream come true for me,” Dr. Ramsey says. “Having grown up in rural North Georgia, moving to Brevard was a natural fit. [My family and I] fell in love with Western North Carolina.”

This year, MAHEC’s Hendersonville Family Medicine residency program merged with Blue Ridge Community Health Center, one of the nation’s oldest migrant clinics, and also expanded its class to four residents a year. The Hendersonville residency program is one of only a few rural programs in the country that allows family medicine residents to work at the same clinic for three years, promoting patient continuity and encouraging community involvement. “Our faculty teaches residents how to deliver compassionate care to underserved and rural populations in an innovative way,” says Cristin O’Grady, MD, second-year chief.

MAHEC graduate: first female ob/gyn to practice full-time in Brevard

MAHEC alumna and Ob/Gyn practitioner Jamie Ramsey, MD, joined Transylvania Regional Hospital full-time this past July, and is one of the first female Ob/Gyns in Brevard. Prior to her training at MAHEC, Dr. Ramsey worked as a registered nurse in labor and delivery, and today she promotes minimally invasive gynecological care, including complementary and alternative treatments, when possible. “Practicing Ob/Gyn in Brevard is a dream come true for me,” Dr. Ramsey says. “Having grown up in rural North Georgia, moving to Brevard was a natural fit. [My family and I] fell in love with Western North Carolina.”

Hendersonville residency program expands

This year, MAHEC’s Hendersonville Family Medicine residency program merged with Blue Ridge Community Health Center, one of the nation’s oldest migrant clinics, and also expanded its class to four residents a year. The Hendersonville residency program is one of only a few rural programs in the country that allows family medicine residents to work at the same clinic for three years, promoting patient continuity and encouraging community involvement. “Our faculty teaches residents how to deliver compassionate care to underserved and rural populations in an innovative way,” says Cristin O’Grady, MD, second-year chief.

Allocating a year of my career as a dentist in MAHEC’s dental residency program has been invaluable. We serve a very broad demographic of patients. Because of this, we treat a myriad of different dental conditions, and it makes our ability to diagnose and treat much stronger.”—James Bush, DMD

413 family medicine, ob/gyn, geriatric medicine, hospice and palliative medicine physicians, and dentists have graduated from MAHEC programs.

Hendersonville residents at Jump Off Rock in Henderson County
During his summer internship with MAHEC, UNC Asheville senior Alex Green learned about the impact a great health professional can have on a community—not just by providing care, but also by displaying leadership.

“While in May, I really thought I’m going to be a dentist and nothing else, now [after this internship], I’m thinking I’m going to be a dentist who has his hand in, always trying to affect the community, to give back in a way that’s greater than just practicing medicine.”

Green is just one of many students for whom MAHEC annually provides invaluable experience en route to a lifelong healthcare profession.

MAHEC offers a K-12 program in Health Careers and Minority Mentoring, summer internships for undergraduates, clinical rotations for medical school students, as well as a Rural and Underserved Scholars Program.

All this amounts to an “educational pipeline” — a system of programs, internships, and clinical training that can support a future health professional from high school, through college, medical school, and residencies, to a healthcare profession in Western North Carolina.

Training the best health professionals to provide care to the many rural and underserved populations in Western North Carolina is central to MAHEC’s mission. This interest in cultivating more than just clinical knowledge — in fostering a better understanding of what it means to be a rural health professional in a changing healthcare landscape — is common among MAHEC students, many of whom come from a rural background or are interested in working in underserved areas.

Green was so inspired at MAHEC that he continued his work for credit at UNCA this past fall, speaking to high school students about the importance of returning to rural communities when they are first contemplating career paths, and encouraging them to follow in his footsteps.
More than 23,000 healthcare professionals receive continuing education at MAHEC.

Dedication to rural medicine

To encourage student interest and awareness of rural medicine, MAHEC and University of North Carolina Chapel Hill School of Medicine collaborated to create the Sarah Graham Kenan Rural and Underserved Medical Scholars Program, an internship that allows UNC Chapel Hill medical school students to shadow a rural preceptor for six weeks and then rotate in Asheville during their remaining time in medical school. Funded by the Sarah Graham Kenan Foundation, the program aims to increase the number of UNC SOM students seeking rural health careers in North Carolina.

Rural and Underserved Scholar Brittany Papworth is currently in her second year of medical school at UNC Chapel Hill. After rotating in Burnsville this past summer, Papworth’s desire to practice medicine in an underserved area was solidified. During her rotation with Dr. Scott Rogers, she observed firsthand a range of patients and clinical situations, including childbirth, that gave her a deeper understanding of what it means to be a rural doctor.

Papworth’s interest in medicine goes beyond clinical understanding. During her studies, she also has explored the systemic issues surrounding rural care.

“I talked to a lot of community stakeholders ... Everyone from politicians to chaplains to doctors to social workers about this problem [of access to rural healthcare], and what their ideas were for the future.”

Commitment to diversity

At MAHEC, we believe in encouraging students from a young age to pursue their interest in medicine. Started in 2005, the Minority Medical Mentoring Program was created for rising Buncombe County High School seniors who are underrepresented minorities and would like to pursue a healthcare profession. During one-semester internships, these students are paired with physicians, dentists, and other professionals for rotations in a range of healthcare disciplines.

Haeyoon “Michelle” Yang, currently a B.S. Biology major with a double minor in chemistry and medical anthropology at the University of North Carolina at Chapel Hill, Class of 2016, credits the internship as an important stepping stone on her path toward a healthcare career.

“This internship opportunity was everything I needed at the time I was in high school—it granted me long-lasting motivation, determination, and inspiration.”
innovation

Leading in primary care

While healthcare has become politicized, even contentious, there is agreement that improvement is needed. The health of our people ranks extremely low compared to other wealthy nations, yet our per capita healthcare spending is the highest in the world. Ideologies and strategies for change may divide our communities, but health systems are recognizing that a larger primary care sector is one important part of the solution. Soon we will also experience a sweeping change in the healthcare payment system with a shift to reimbursement based on measured results and health outcomes, rather than a fee-for-service model based on tests and procedures.

MAHEC is well poised to lead the primary care sector in WNC through this time of transformation in healthcare delivery and payment reform. Innovation is the fabric of a medical teaching center, and as we celebrate 40 years, we are proud to have:

- exceptional clinical models for primary and ob-gyn care;
- highly qualified and creative faculty;
- a network of well trained, committed graduates; and
- strong collaborative relationships with providers and hospitals.

Consider the implementation of electronic health records as an early phase in healthcare reform. For many rural and small practices in WNC, this transition is not easy, but it is critical to physicians who are now required to document and report health outcomes. MAHEC is dedicated to helping practices in the region as they adjust to new standards and implement technologies. With a current shortage of more than 140 family medicine physicians, WNC cannot afford to lose the physicians we currently have. Since July 2010, MAHEC’s Center for Quality Improvement has helped more than 120 practices and over 600 providers select, implement, and optimize electronic health records.

MAHEC will continue supporting physicians and practices in our region as part of our mission to help meet the need for primary care in WNC. In January 2014, we entered into an agreement with Mission Hospital to manage thirteen primary care practices of Mission Medical Associates. This represents one more step in our efforts to strengthen the primary care sector and improve the health of our communities from Buncombe to Mitchell and Graham County.


MAHEC faculty lead innovation

13 state & national publications:

MAHEC faculty and residents publish research on topics from heart disease and chronic pain, to current trends in community preceptors. Thirteen articles were published in the journals in 2012/13, including:

- Academic Medicine
- Capstone Pharmacy Review
- Journal of American Pharmacy Association

17 state & national presentations:

MAHEC residents and faculty presented at national associations and conferences across the U.S. in 2012/13, including:

- 46th Annual Society of Teachers of Family Medicine Spring Conference, MD
- Annual Clinical Genetics Meeting, AZ
- Annual Meeting of the American Geriatrics Society, TX
MAHEC consultant supports Peachtree practice

In the heart of Cherokee County is Peachtree Internal Medicine and Dr. Brian Mitchell—a dedicated solo practitioner for almost four decades who knows the challenges of rural medicine, from recruitment to reimbursement.

“We struggle in rural practice here in Murphy to maintain enough revenues to keep up with the cost of care,” Dr. Mitchell says. “Without [MAHEC’s Terri Roberts], it would have been very difficult for us in the past two years.”

Roberts is a MAHEC Senior Consultant who personally oversaw Peachtree’s transition to comply with the HITECH Act’s Meaningful Use 1 and 2 guidelines, which require clinics to enact Electronic Health Record (EHR) systems and reporting. Roberts met with the staff regularly, helped propagate patient records, streamlined referrals and computerized billing, and gave the staff suggestions for vetting the vendors necessary to provide software.

“She assisted us with all aspects of transition from paper to computer ... We are grateful for her overall skills and support of our practice in dealing with the complex and ever-changing healthcare environment in our region,” Dr. Mitchell says.

EHR systems aim to streamline care, lessen the likelihood of clinical error, and improve the ability of practices large and small to administer the best medicine possible.

The work Roberts does in these clinics is about more than meeting new technological standards and maximizing the potential for tracking and qualifying information—it also is about ensuring physicians and staff are empowered to provide the best care possible.

“My favorite part of the job is working with the physicians and other providers and staff and watching them succeed and gain confidence and get comfortable,” Roberts says. “Also, to see the improvement in our chronic care and complex patients and know that every step of the way, every level of improvement, saves a life and contributes to an improved healthcare environment.”

MAHEC Budget July 2012 – June 2013

Total Operating Income $33,402,687

- Net Generosity Income ($14,175,483)
- Safety Net/Charity Care ($5,094,280)
- Grants ($2,355,886)
- Health Service Contracts ($1,287,252)
- Graduate Medical Education Contracts ($1,129,514)
- MAHEC Contracts ($4,495,365)

Total Operating Expenses $33,996,371

- Facilities / Equipment / Computer ($2,625,866)
- Workshop and Other ($1,469,888)
- Supplies / Materials / Printing ($1,391,124)
- Professional Services and Insurance ($1,110,823)
- Salaries and Benefits ($25,178,670)

Income (Loss) From Operations ($593,684)
Save the date ...

Join us **Saturday, September 13, 2014**
to celebrate 40 years as a healthcare teaching center for the people of Western North Carolina.