

THE Bulletin



June 2015 Volume 99, Number 16



Review of Town Hall Meeting
on Collaborative Value Based
Medicine

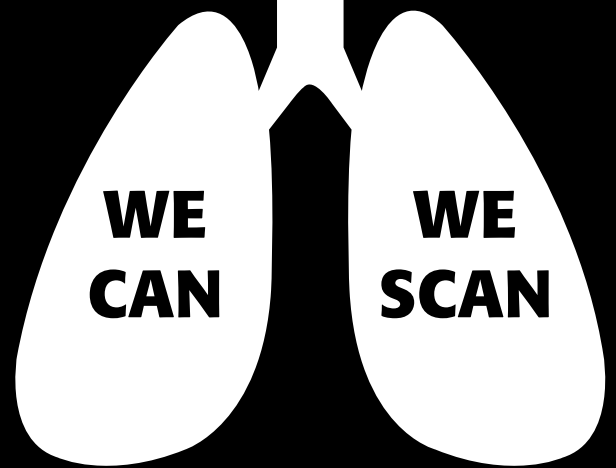
House of Delegates Recap

Meet Kristin McBride

Do I Have to Provide An
Interpreter?

GENESEE COUNTY MEDICAL SOCIETY
Organized Medicine's Leading Edge

**CAN YOU SEE
THEIR LUNGS?**



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SCREENING ELIGIBILITY:

- **55-77 years of age**
- **Current smoker or quit smoking within the last 15 years**
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(1 pack-year = smoking one pack (20 cigarettes) per day for 1 year)
- **No history or symptoms of lung cancer**

- **LDCT reduces lung cancer mortality rate 20% compared to chest x-ray**
- **RMI is ACR accredited for lung screening**
- **We manage patient follow-ups making your job easier**
- **CTLS program headed by Dr. Ehab Youssef, thoracic radiology fellowship trained at University of Michigan**



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2/15

CT screenings are offered at three of our six locations: Lennon Rd, Flint ▪ Fenton ▪ Grand Blanc

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THE Bulletin

Read by 96% of GCMS members.

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Our Vision

That the Genesee County Medical Society maintain its position as the premier medical society by advocating on behalf of its physician members and patients.

Our Mission

The mission of the Genesee County Medical Society is leadership, advocacy, education, and service on behalf of its members and their patients.

PLEASE NOTE

The GCMS Nominating Committee seeks input from members for nominations for the GCMS Presidential Citation for Lifetime Community Service. The Committee would like to be made aware of candidates for consideration.

THE BULLETIN

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GCMS & GCMSA SHINES!

This past month, I served as a delegate from Genesee County to the MSMS House of Delegates in Grand Rapids. This is the second time I have attended; and while I do not get as excited about it as Peter Levine does, I have had a great experience both times.

This year I was a member of the Legislative Issues Reference Committee. We reviewed proposals and heard arguments for and against many issues that members wanted MSMS to address with our state legislators. We supported a proposal that state medical licensing requirements remain separate from maintenance of certification and specialty board certification requirements. We supported a proposal to reform Michigan Medicaid GME funding, seeking to have teaching hospitals to be required to use GME funding for GME positions. The concern was that we have more medical schools and medical students in Michigan. But no increase in GME positions – so we risk losing those students to other states. Other proposals that were passed in the House included opposition to fracking in Michigan and opposition to the proposed Canadian



Deborah Duncan, MD

nuclear waste storage facility near Lake Huron, and proposals to ban sale of e-cigarettes to minors.

It was a productive and a busy two days, but we did find the time to get together for the Kentucky Derby party, which was well attended and lots of fun.

One of the highlights of the weekend was having Dr. Rao, Dr. Mukkamala, and Dr. Colone all in the dais as officers. We are very fortunate to have Dr. Colone as President Elect for GCMS – that man can REALLY run a meeting!!

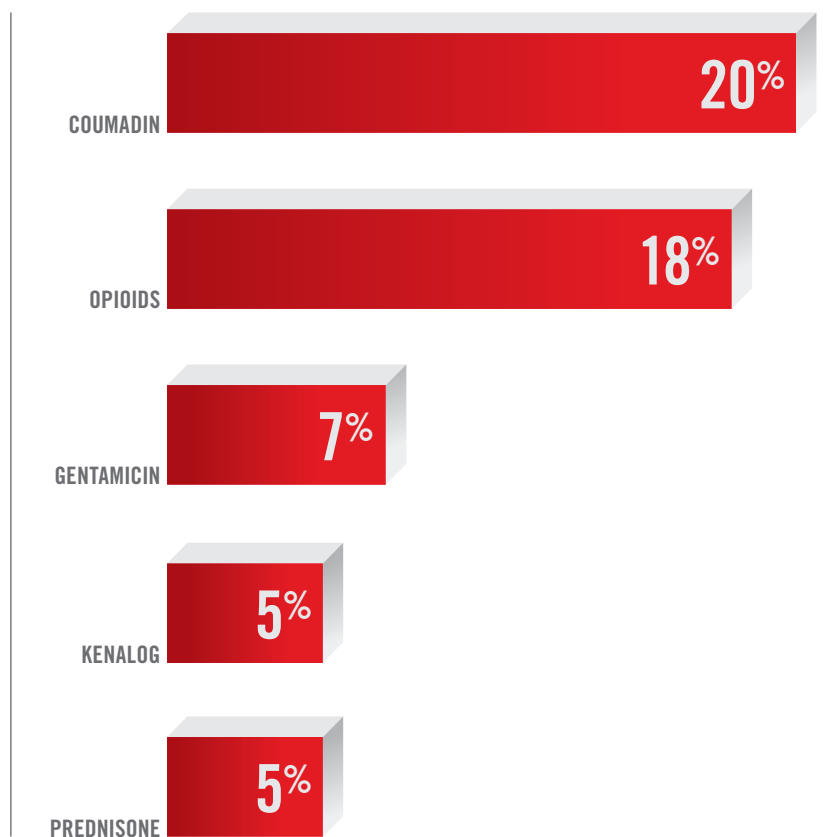
Finally, a shout-out to the GCMS Alliance who invited myself and the GCMS staff to their Geranium Luncheon on May 19th. I look forward to working with their new Co-Presidents Maria McCann and Raquel Yapchai. They are very impressive women. I will however, miss working with my friend Ruqsana Ahmed, out-going President, but I look forward to seeing her out at her farm where she takes loving care of my sweet horse. These women do great work and make all of us look good. Thank you!

Save The Date
2015 Presidents' Ball
November 7, 2015
6 o'clock pm
 at the
Warwick Hills Golf & Country Club

DOES YOUR MEDICAL MALPRACTICE INSURER KNOW WHICH DRUGS LEAD TO LAWSUITS IN INTERNAL MEDICINE?

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DRUGS MOST FREQUENTLY INVOLVED IN MEDICATION-RELATED MALPRACTICE CLAIMS AGAINST INTERNISTS

Source: The Doctors Company



MEDIA VIOLENCE IS BRUTALIZING

Violence is the last refuge of the incompetent.

Isaac Asimov (1920-1992)

Many of us grew up watching cartoons on Saturday mornings. Some of the most entertaining cartoons were often the most violent. It seems that Wylie E. Coyote always ended up holding the wrong end of a stick of dynamite or Elmer Fudd would meet a nasty end while trying to bag Bugs Bunny. Could it be that these shows were sowing the seeds of possible future violent behavior in millions of kids?

Psychologists at Iowa State University conducted studies that revealed that young men who are habitually aggressive may be vulnerable to the effects of repeated exposure to violent computer games, and that anyone can be temporarily more aggressive after even a short-term exposure to violent games. The aggressive behavior was measured by recording the length of time the study subjects punished an opponent by blasting them with loud noise. The researchers concluded that violent video games provide a forum for learning and practicing aggressive solutions to conflict situations. Violent video games seem to prime the pump of aggressive and violent thoughts.

Video games are rated by the industry's Entertainment Software Review Board. The games are rated on a scale similar to movie ratings but different enough to be confusing to parents. E is for everyone, T is for teen (13 years and older), M is for mature (similar to an R movie rating) and AO is adults only. The problem with this rating system is that stores and video rental outlets rarely adhere to or enforce them.

In 2000, four major organizations concerned with public health, especially related to children – the American Academy of Pediatrics, the American Medical Association, the American Psychological Association, and the American Academy of Child and Adolescent Psychiatry - issued a joint statement to Congress stating that viewing entertainment violence can lead to



Daniel Ryan, MD

increases in aggressive attitudes, values, and behavior, particularly in children. Its effects are measurable and long-lasting. Moreover, prolonged viewing of media violence can lead to emotional desensitization for violence in real life. Violent video games may be more harmful than television shows or films because they are interactive, requiring the player to identify with the aggressive character.

These conclusions are not particularly new. A study done in 1956 showed more aggressive behavior during play in children who watched a "violent" Woody Woodpecker cartoon

than those who watched a nonviolent program, The Little Red Hen. The critical period for lasting harm from exposure to depictions of violence appears to be in preteen adolescence. Children who view violent programming can come to see the world as more violent than it actually is, and a callous attitude toward violence can emerge. Parents need to be encouraged to limit their child's television and video game use. They should also keep these items out of the child's bedroom, and watch programs with kids instead of using them as a substitute baby sitter.

Exposure to violent television, computer games, music, and movies is unlikely to be the root cause and determining factor of crime and violent behavior. After all, the human race has a history of horrific violence long before any of these existed. But violence in our entertainment media can lead impressionable young people to be less trusting of others and perceive the world as a very hostile place, and behave in kind. Americans are fiercely protective of the right of free speech, but that does not mean we have to accept the entertainment industry's mantra that they are simply providing the public what it wants. We need to insist on accurate information about the level of violent content in television shows, computer games, music and movies.

April Practice Managers Meeting Report for June 2015 Bulletin

MANAGING DOCUMENTS IN PRACTICES

On April 23rd, Attorney Jonathan Hartman of Cline, Cline & Griffin, spoke with practice managers on managing documents, HIPAA, privacy, templates and other legal issues for practices. The meeting was free-wheeling with a lot of open discussion.

In advance of the meeting, Peter Levine reviewed legislative issues, including discussion of Senate Bill 68, relating to scope of practice for nurse practitioners, and the auto no-fault reform legislation. In addition, Levine solicited pilot sites for a program which would allow admit discharge and transfer notifications to be sent via push technology to practices by Great Lakes Health Connect.

The May session for Practice Managers focused on Meaningful Use 2, presented by Stacey Hettiger of the Michigan State Medical Society. Please look for a full meeting report to appear in the July issue of The Bulletin.

The June Practice Managers Meeting will feature “Grab the Cookie” a menu of programs which can aid a practice on PCMH, PGIP, Meaningful use and enhanced reimbursement!

The Greater Flint Health Coalition has several tools which can really make a difference in your practice including: an electronic ADT project in conjunction with Great Lakes Health Connect, a diabetes registry, shared medical appointments, and advance care planning.

Practices which are using these tools are glad that they are. Come and hear about these new resources and ideas!

Hurley Medical Center Pediatric Oncology Unit

The Only One of Its Kind in Genesee, Lapeer and Shiawassee Counties.



- Cutting-edge therapeutic protocol and drugs
- Latest diagnosis and treatment options
- Real-time decisions from national experts
- Advanced diagnostic testing
- Scholarly and scientific guidance to care

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SAVE THE DATE 11.7.15 @ 6:00

KEY ISSUES

It's summer! This is the time of year when people hope things will slow down, but things rarely do. ICD-10 is right around the corner. GCMS is in the process of planning an ICD-10 boot camp. Please let myself or Sherry know if you or your staff are interested in attending.

This issue of The Bulletin contains an article about the MSMS House of Delegates. It was a major success. You were represented exquisitely.

This issue of The Bulletin contains a photo and brief bio of Kristin McBride, MSW, a new staff person who has been hired to develop a Physician's Toolkit on Human Trafficking. She is being funded with money from the State of Michigan. Please welcome her when she contacts you about showing you the information that will make it easier to diagnose and refer patients who



Peter Levine, MPH

might be victims of human trafficking. The May Dinner Business Meeting revolved around HealthPlus-related issues. The slides for that presentation are available via a url, contained in the article. Do yourself a favor and avail yourself of them.

The September Dinner Business Meeting will center on Great Lakes Health Connect, the statewide data system which we will all have to become familiar with.

The 2015 Presidents' Ball will be held on November 7th at Warwick Hills Golf & Country Club. It will honor Dr. Deborah Duncan for her exaugural, but just as importantly, it will be a blast. Please reserve the date. The theme will be "The Queen's Royal Ball."

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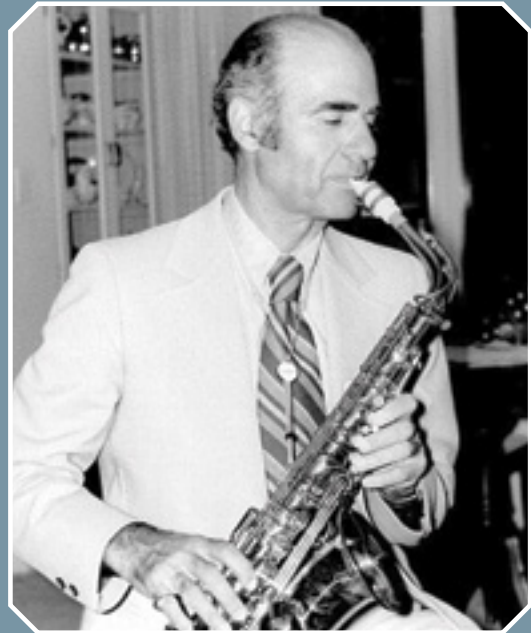
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*Meet Kristin McBride,
GCMS Human
Trafficking Program
Coordinator*



Meet Kristin McBride, GCMS Human Trafficking Program Coordinator. Kristin first came in contact with GCMS when she was working on her Bachelor of Social Work from University of Michigan-Flint. She helped draft a human trafficking resolution regarding reunification for the MSMS House of Delegates in 2014. That resolution passed. Kristin will graduate in July with a Master of Social Work from University of Michigan. She is currently serving on the National Association of Social Workers - Michigan Chapter's Board of Directors. Kristin has passions for women's studies, race relations, substance abuse treatment and policy work. She has experience with qualitative research in Flint, Detroit, and Ypsilanti, and has been involved in urban gardening, peace studies and human trafficking awareness. Kristin will be working with GCMS to create a toolkit that will enable physicians to identify human trafficking victims in Genesee County. The position is a seven-month contract. Further funding is being sought.

Do you recognize this
DOCTOR?



Look for the Answer inside!

Announcement

**GCMS members now entitled
to a 15% discount on automobile
and homeowners insurance.**

For details, contact:

**POTTER & ROOSE
INSURANCE**

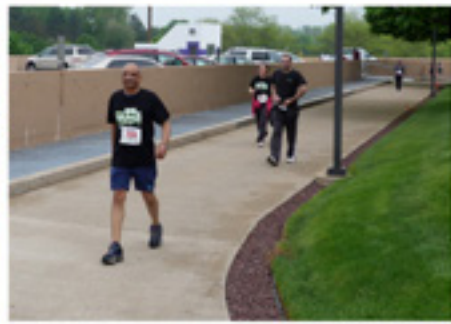
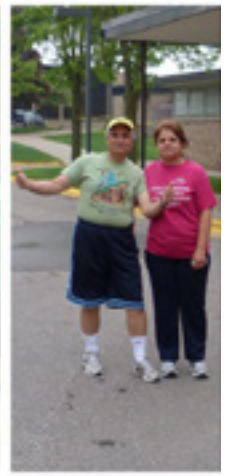
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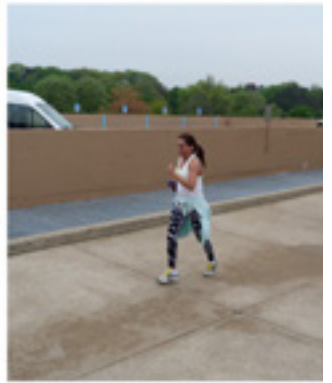
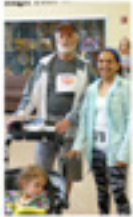
**Providers of insurance for the GCMS & its
members for 50 years.**

906 Mott Foundation Bld., Flint MI 48502

F R E E M E D I C A L C L I N I C

Healing Hands 5k Race





FREE! Commit to Fit! Class Schedule

Commit to Fit offers fitness classes and healthy cooking demonstrations at **no cost** to all individuals who live or work in Flint and Genesee County. Depending on the facility, participants may be asked to complete a brief registration form prior to attending a class. Class sizes are limited and are on a "first-come, first-served" basis. See back side for details.

JUNE 2015 CALENDAR



	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY						
JUNE 2015	1	Enhance Fitness Flint Farmers' Market 10:00 a.m. Healthy Cooking Demonstration Flint Farmers' Market 12:00 p.m. Enhance Fitness Carriage Town Ministries 2:30 p.m.	2	Senior Stretch YMCA - Downtown Flint 9:00am	3	Zumba Gold (Beginner) GAC 5:30 p.m.	4	Enhance Fitness Flint Farmers' Market 10:00 a.m. Basic Yoga IHFC 6:45 p.m. Walking Club McKinley Park 6:30 p.m.	5	Body PHIT UM-Flint Rec 5:30 p.m.	6	Fit Club at the Local 10:00 a.m. Healthy Cooking Demonstration Flint Farmers' Market 12:00 p.m. Walking Club Max Brandon Park 11:00 a.m.
	8	Enhance Fitness Flint Farmers' Market 10:00 a.m. Healthy Cooking Demonstration* Flint Farmers' Market 12:00 p.m. Enhance Fitness Carriage Town Ministries 2:30 p.m.	9	Senior Stretch YMCA - Downtown Flint 9:00am	10	Zumba Gold (Beginner) GAC 5:30 p.m.	11	Enhance Fitness Flint Farmers' Market 10:00 a.m. Basic Yoga IHFC 6:45 p.m. Walking Club McKinley Park 6:30 p.m.	12	Body PHIT UM-Flint Rec 5:30 p.m.	13	Fit Club at the Local 10:00 a.m. Walking Club Max Brandon Park 11:00 a.m.
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Class Descriptions & Locations

Basic Yoga (1 hour) - This class is a balanced flow of postures designed to build stamina, strength, and flexibility while promoting weight loss and general stress relief.

Insight Health & Fitness Center (IHFC)
Formerly Hurley Health & Fitness Center
4500 S. Saginaw St
Flint, MI 48507
(810) 893-6489



Zumba Gold (1 hour) - A less intense version of the classic Zumba. This class offers fun music to keep the excitement high while keeping the impact low.

Genesys Athletic Club (GAC)
801 Health Park Blvd
Grand Blanc, MI 48439
(810) 606-7300



Body PHIT – (1 hour) -The best of fitness is fused into an exhilarating boot camp that uses BOSU balls, resistance bands, blocks, and Pilates/yoga mat work to blast your traditional body weight sessions out of the box. You will gain strength, endurance, and flexibility. Manage your weight and look better. You will sweat, train tough, play rough, and HIT it! Join PHIT!

University of Michigan-Flint Recreation Center (UM-Flint Rec)

401 Mill Street (for mapping)
303 E. Kearsley
Flint, MI 48502
(810) 762-3441



Senior Stretch (1 hour) - This class will help improve overall strength and flexibility. The class is led by a certified senior fitness instructor who will guide you through the exercises at your own pace. This class is perfect for all ability levels.

YMCA Downtown Flint
411 E. 3rd Street
Flint, MI 48503
(810) 232-9622



Healthy Cooking Demonstration (30 minutes) - Learn how to cook a simple, healthy dish by a vendor at the Market and try a sample after!

Flint Farmers' Market
300 E. First St
Flint, MI 48502
(810) 232-1399



Enhance Fitness (1 hour) – A fun, energizing class geared toward improving overall functioning and well-being. Improve your cardiovascular fitness, strength, flexibility and balance!

Carriage Town Ministries
605 Garland Avenue
Flint, MI 48503
(810) 233-8787



Walking Club (1 hour) It's time to walk toward a healthier you! No matter your age or ability, it's easy to commit to meeting us for one hour a week for some lively conversation, a walk in the park, and prizes!

Max Brandon Park, Pavilion 2
3606 Dupont Street
Flint, MI 48505

McKinley Park
2999 Orville St.
Flint, MI 48503



Fit Club Workouts (45 minutes) – Join the Fit Club every Saturday at 10am for fun boot camp style workout videos. All ages are encouraged to attend! Check out their [Facebook](#) page for up-to-date information!

The Flint Local 432
124 W. 1st Street
Flint, MI 48503
(810) 813-4000



Questions?
Email
commit2fit@flint.org

Issues Of Serious Concern For Medical Practices!

Don't let your practice manager miss these important meetings!

June Topic: GRAB THE COOKIE!

Presenter: Lori Kunkel, MHSA
Vice President of Programs,
Greater Flint Health Coalition

Featuring a menu of programs, which can aid a practice with PCMH, PGIP, Meaningful use and enhanced reimbursement. The Greater Flint Health Coalition has several projects, which will make a difference in your practice, including an electronic ADT project in conjunction with Great Lakes Health Connect, a free diabetes registry, Shared Medical Appointments, and Advance Care Planning. Practices making use of these valuable tools are already glad that they are!

July Topic: **NO MEETING HELD IN JULY**
Enjoy your Summer!



Held 4th Thursday
of each month from
8am to 10am.

Genesee County Medical Society
Rapport Conference Room
4438 Oak Bridge Drive, Suite B
Flint, MI 48532

Light breakfast available
(coffee, tea, fruit cups, granola bars)

Geranium Luncheon

MAY 2015



DO I HAVE TO PROVIDE AN INTERPRETER?

Dealing With Hearing Impaired Patients

By R. Paul Vance



Do I have to provide a patient with an interpreter?

I have been receiving this question more and more frequently in recent years.

Unfortunately, there are no black-and-white or yes-or-no answers. The more pertinent question is whether or not you are providing ways to effectively communicate with deaf or hard-of-hearing patients.

Under both the Michigan Persons with Disabilities Civil Rights Act and the Americans with Disabilities Act (ADA), health care providers have a duty to ensure that communication with people who have a hearing loss is as effective as communication with others. 28 C.F.R. § 36.393(c).

According to state and federal law, means of effective communication can include using auxiliary aids and services, including listening devices, note takers, written materials, television decoders and telecommunications devices for the deaf. Still, a private practice physician must ensure that whatever accommodation is used results in effective communication for the deaf or hard-of-hearing individual. Thus, whether communication with a patient is effective should be carefully dealt with on a case-by-case basis. In this regard, a physician or other health care provider should consult with the patient and consider his self-assessed communication needs before using a particular aid or service. 56 Fed. Reg. 35,566.67.

When determining what accommodations are reasonable and necessary, a health care provider can choose among the auxiliary aids and services

noted above as long as the result is “effective communication.” However, a physician is not required to provide an auxiliary aid or service that would result in an undue burden or in a fundamental alteration in the nature of the goods and services provided by the physician. Nonetheless, a physician still has the duty to furnish an alternative auxiliary aid or service that would not result in an undue burden or fundamental alteration. Of course, this begs the question: What is an undue burden? Pursuant to the ADA, an undue burden is something that involves a significant difficulty or expense. Factors to consider include the cost of the aid or service, the overall financial resources of the health care provider, the number of employees working with the provider, legitimate/necessary safety requirements, the effect on the resources and operation of the provider and the difficulty in locating or providing the aid or service. 28 C.F.R. § 36.104. As long as the provision of the auxiliary aid or service does not impose an undue burden on the physician’s business and does not fundamentally alter the provider’s services, the health care provider is expected to pay for the auxiliary aid or service. However, health care providers should keep in mind that they may claim a tax credit “eligible access expenditures.” Eligible access expenditures include the costs of interpreters, or telecommunication devices for the deaf (TTYs) and providing other auxiliary aids and services. The Michigan Department of Civil Rights has also recognized that a physician can receive a tax credit and/or tax deductions for providing patients with accommodations, including interpreters or assistive devices.

More recently in Michigan, new regulations went into effect regarding the use of sign language by interpreters in hospitals and physician offices, as well as other public institutions. These rules govern the minimum education and certification required by interpreters and detail the use of video remote interpreting devices (VRIs). The new rules allow for

patients who are deaf or hard of hearing to refuse VRI services if they believe in good faith that the system is poor or does not meet their needs for effective communication.

Compliance with the various regulations regarding the use of interpreters and auxiliary aids and assistive devices should be taken seriously. For example, a violation of the Michigan Persons with Disabilities act may result in remedial actions, payment of damages for an injury or loss caused by the violation, including reasonable attorney fees. See MCL 37.2605 (2).

With this in mind, it is recommended that health care providers take the following actions to demonstrate their compliance with the law and ensure continued compliance in the future:

- Ensure that the determination of appropriate auxiliary aids or services (including interpreters) are made in consultation with the patient. In making these determinations, the physician should take into account the nature, length, complexity and importance of the communication at issue, the patient's communications skills and knowledge, as well as the patient's health status or changes thereto and the patient's request and/or need for an interpreter. When medical services involve lengthy or complex oral communications with patients, physicians are likely to be required to provide a qualified sign language interpreter and/or other auxiliary aids to the patient free of charge. It is recommended that determination of the appropriate auxiliary aids and services be made at the time an appointment is scheduled or at any time prior to the patient's scheduled appointment. When consulting with a patient regarding what types of communication are effective, courts will give great deference to whether or not the patient believes the communication is effective.

- Health care providers should maintain a written policy explaining that they will provide auxiliary aids and services, including qualified interpreters, where such auxiliary aids and services are needed to ensure effective communication with patients.

- Health care providers should post and maintain a sign in a conspicuous place that indicates that appropriate aids and services, are available free of charge to people who are deaf or hard of hearing. Health care providers should also maintain a list of qualified interpreters or interpreter agencies that employ or arrange the services of qualified interpreters to ensure that qualified interpreter services are available if needed.

- It is also recommended that health care providers make available training for employees and/or staff in regard to compliance with the ADA and Michigan Persons with Disabilities Act. In this regard, contact can be made with the Michigan Department of Civil Rights Division of Deaf and Hard of Hearing at (877) 499-6232.

The recommendations noted above are based upon the ADA and Michigan Persons with Disabilities Civil Rights Act. Implementation of these recommendations should go a long way toward minimizing risk and ensuring compliance with federal and state law, reducing the chances of litigation and/or administrative complaints filed by deaf or hard-of-hearing patients.

For specific questions or a consultation on the above issues, you may contact the author at pvance@ccglawyers.com or (810) 232-3141.



MAY LEGISLATIVE LIAISON COMMITTEE MEETING

On May 4th, the Legislative Liaison Committee met to discuss the deliberations of the Michigan State Medical Society House of Delegates. In attendance were Nicole Addington from Representative Faris' office, Clive Edwards from Representative Neeley's office, and Amy Hovey from Congressman Kildee's office.

Dr. Cathy Blight, Chair, reviewed key GCMS resolutions which might result in legislation. The first was a resolution opposing fracking until it can be determined to be without health hazards. The second was in response to a request from Congressman Kildee to introduce a resolution asking for legislation opposing a nuclear waste site in close proximity to Lake Huron, in Canada. Maintenance of certification was a major issue. MSMS's position is that Board Certification is not a primary indicator of quality.

Also discussed was a resolution which would have pharmacies report immunizations and testing to primary care physicians and a resolution which would treat e-cigarettes like tobacco.

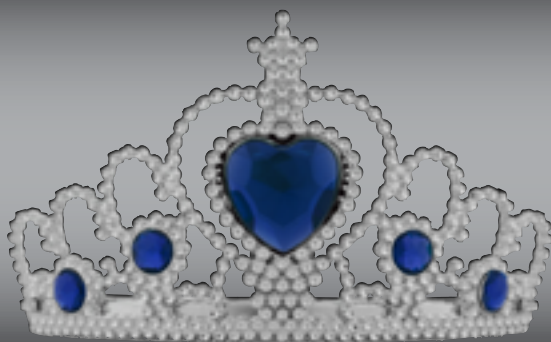
The Committee also reviewed Senate Bill 68, expanding nurse practitioners' scope of practice. Alternate legislation has been introduced which goes by the same number. The alternate legislation was



prepared by MSMS. It is patient-care-team focused. Nurse practitioners are now opposed to the bill and the Michigan Nurses Association is now neutral.

The Committee also reviewed the current situation with the auto no-fault legislation which is moving quickly.

It was noted that the SGR is repealed. A letter has been sent to Senators Stabenow and Peters, as well as Congressman Kildee, to thank them for repealing the SGR.



Save The Date
2015 Presidents' Ball
November 7, 2015
6 o'clock pm
at wthe
Warwick Hills Golf & Country Club





WE WANT YOU FOR THE LEGISLATIVE LIAISON COMMITTEE!

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bring GCMS and MSMS positions to the forefront?**

Become involved in the GCMS Legislative Liaison Committee!

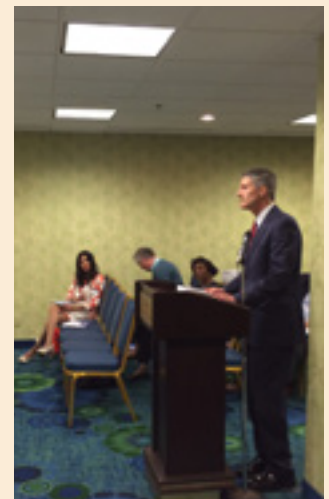
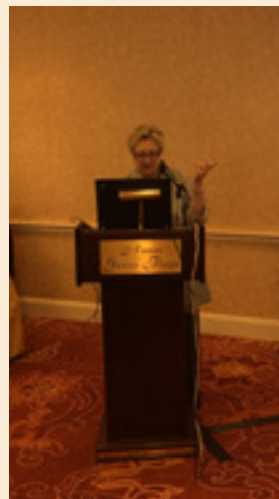
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You are invited to engage in conversation with your legislators on the first
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the GCMS office.

You may contact Pete Levine at plevine@gcms.org or call **810.733.9925**,
if you would like to participate.

This is a valuable opportunity; don't let it go to waste!

GCMS AGAIN LEADS THE WAY



GCMS had a remarkable MSMS House of Delegates. Our resolutions went beautifully, and our candidates were successful. In addition, our resolutions helped shape the future of medicine in the state of Michigan.

The Genesee County delegation included Drs. Shafi Ahmed, Cathy Blight (Chair), Laura Carravallah, Pino Colone (Speaker), Deborah Duncan, Mona Hardas, Gary Johnson, Nita Kulkarni, S. Bobby Mukkamala (District Director), Gerald Natzke, Rubin Raju, Rama Rao, Venkat Rao (Treasurer), Raymond Rudoni, John Waters (District Director), and Amanda Winston, staff was Pete Levine.

Dr. Cathy Blight received a Presidential Citation from outgoing President James Grant, MD, for her years of leadership of MSMS and the AMA delegation. In addition, Sen. Judy Emmons received a citation for legislative service to medicine for her superb work in passing a package of human trafficking bills. Sen. Emmons lauded Jay Kommareddi of the GCMS Alliance, as well as the GCMS for its spearheading work on human trafficking in Michigan.

Dr. Pino Colone was reelected to the position of Speaker. Drs. S. Bobby Mukkamala and Pino Colone were reelected as AMA Delegates. Dr. Mukkamala was

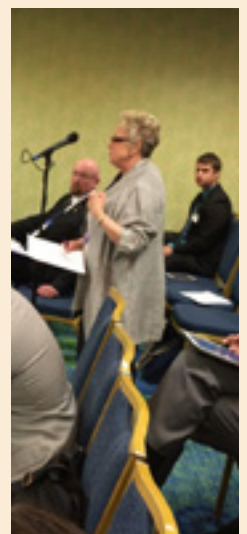
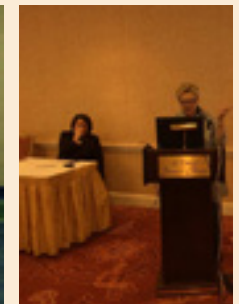
also reelected to the MSMS Board. Drs. Madhusdana Tummala, Edgardo Balde, Aftab Aftab and Kumbla Bhakta received their 50 year awards.

GCMS was well represented on the following committees:

- Reference Committee A - Medical Care Delivery, Gerald Natzke, DO
- Reference Committee B - Legislation, Deborah Duncan, MD
- Reference Committee C - Internal Affairs and Constitution & Bylaws, S. Bobby Mukkamala, Board Advisor, and Cathy Blight, AMA Advisor
- Reference Committee D - Public Health, Amanda Winston, MD and Gary Johnson, MD
- Reference Committee on Ways and Means, John Waters, MD, Board Advisor, and Venkat Rao, MD, Board Advisor
- Committee on Rules and Order of Business, Rama Rao, MD, and Pino Colone, MD, Ex-Officio Member, Speaker of the House

THE HOUSE

The GCMS-inspired resolutions fared well, with the exception of a resolution which would ask that multi-building apartment complexes dedicate smoke free spaces. That resolution was disapproved. The resolution which would establish physical activity requirements for all public school students was approved as amended. The resolution entitled Fracking in Michigan, was approved. The resolution entitled Report Immunizations to Primary Care Physicians, was approved. The resolution entitled Urge Action to Evaluate the Proposed Underground Nuclear Waste Repository in Ontario, was approved. The resolution to Provide Alternate Pathways to Continuing Board Certification, was approved as a substitute resolution, because there was so many resolutions discussing the same issue. The resolution entitled Reform Michigan Medicaid CME Funding, was approved.





MSMS PAST PRESIDENT CATHY O. BLIGHT, MD, RECEIVES MSMS PRESIDENTIAL CITATION

EAST LANSING – Cathy O. Blight, MD, past president of the Michigan State Medical Society, was presented with a Presidential Citation during the 150th annual meeting of the MSMS House of Delegates on May 2 in Grand Rapids.

The award was presented to Dr. Blight by outgoing MSMS president James D. Grant, MD, for her leadership in the medical profession.

“Doctor Blight has never stopped serving MSMS in leadership roles since joining long ago and I don’t think she will for any time in the near future,” Dr. Grant said in presenting the award.

Dr. Blight has served on the Michigan Delegation to the American Medical Association since 1987. In 2002 she was elected chair of the Delegation, a position she has held ever since. She served as MSMS president in 1998-99.

“The Michigan Delegation is held in high esteem at the AMA in large part because of her leadership,” Dr. Grant said.



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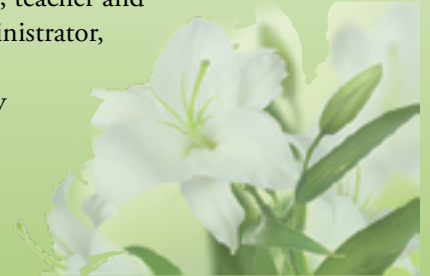
R. Roderic Abbott, MD

1928 - 2015

Dr. Roderic Abbott died in Sedona, Arizona on April 17, 2015 after a three year battle with cancer.

Dr. Abbott was born in 1928 in Chicago, Illinois. He graduated high school in 1945 and worked his way through Illinois State University before being accepted at Jefferson Medical College in Philadelphia, from which he received his Doctor of Medicine degree in 1952. He interned at Presbyterian Hospital of Chicago, and remained there for a residency in Pathology before moving to Buffalo, New York for a residency in Internal Medicine at E. J. Meyer Memorial Hospital. His residency was interrupted by two years' service as an officer in the U.S. Navy Medical Corps. He was a Fellow in Hematology and an Instructor of Medicine at the University of Buffalo. He was certified by the American Board of Internal Medicine, a Member of the American Society of Clinical Oncology, and a Fellow of the

American College of Physicians. Dr. Abbott had a forty year association with Hurley Medical Center, serving as Chief of Hematology and Oncology from 1964 until his retirement from active practice in 1997. Between 1968 and 1980 Dr. Abbott served as Chief of Hematology and Oncology at McLaren General Hospital. He served as an Instructor of Medicine at Wayne State University School of Medicine 1965-1984, and as a Clinical Professor of Medicine at Michigan State University College of Human Medicine 1983-1995. In addition to his duties as a practicing physician, teacher and medical center administrator, Dr. Abbott was published frequently in medical journals.



YOUR \$\$\$ AT WORK

- **Our delegation represented the Genesee County Medical Society at the MSMS House of Delegates. All candidates elected, and all resolutions went to pass**
- **GCMS held practice managers meeting on Meaningful Use**
- **GCMS worked with MSMS and the AMA for an SGR fix**
- **GCMS continued working with MSMS to oppose nurse practitioner expansion of scope of practice**
- **GCMS held Dinner Business Meeting on HealthPlus issues**
- **GCMS continued to represent patients interests with the Flint Water Technical Advisory Committee regarding water quality issues**

Genesee County Medical Society

Board of Directors

March 24, 2015 - Minutes

I. Call to Order

The meeting was called to order in the Rapport Conference Room at 6:00pm, by Deborah Duncan, MD, President.

Dr. Duncan introduced Rubin Raju, MD, a resident physician who will be attending the MSMS House of Delegates, and Xinyue “Cindy” Pan, MD, a pediatric resident. She also introduced Dr. David Krhovsky, of Kent County, Candidate for MSMS President Elect.

II. Review of Minutes

Motion: that the minutes of the February 27, 2015 Board of Directors meeting be approved as presented. The motion carried.

III. Reports

A) GCMS Alliance

Ruqšana Ahmed, President of GCMS Alliance, provided an overview of Alliance activities. She noted that the February program revolved around Legislative Day, where the Alliance lobbied against Senate Bill 68. In March, they held a Women’s Investment program, and in April, they will hold a fashion and style show.

B) Finance

1. Budget-to-Actual report for the period ending February 31, 2015

Motion: that the Budget-to-Actual report for the period ending February 31, 2015 be approved as presented. The motion carried.

C) Membership

1. NPD Members

Peter Levine reported that there are currently 68 NPD members for the 2015 fiscal year. This is normally a much higher number.

2. New/Reinstated GCMS Members

Levine reported on 27 new/reinstated GCMS members since the February Board meeting.

3. Non-Member & Former Member List Update Levine reported that Sherry Smith had sent out a concise list of non and former members by specialty, to each member of the Board, and asked them to review those lists by specialty, to determine who has left the community, passed away, or retired.

D) Legislative Liaison

1. March 2, 2015 Meeting.

Dr. Cathy Blight reported that the Legislative Liaison Committee met on March 2nd and reviewed Senate Bill 68, prescription drug abuse, SGR, and nuclear waste disposal issues. She noted that Congressman Kildee had specifically requested the Committee review the issue of a nuclear waste disposal dump being placed in Ontario, on the shores of Lake Huron. A Resolution was developed by the GCMS Community & Environmental Health Committee and Legislative Liaison Committee for submission to the MSMS House of Delegates.

2. Senate Bill 68 Hearing

Dr. Blight reported that the hearing on Senate Bill 68 was held with strong opposition from MSMS and local representatives.

E) Community & Environmental Health

Drs. Gary Johnson and Gerald Natzke reviewed the activities of the Community & Environmental Health Committee.

1. Flint Water Quality Update

Dr. Natzke noted that, as a member of the Mayors’ Water Quality Technical Advisory Committee, he and Mr. Levine are reviewing significant numbers of documents relating to Flint water quality. The issue of TTHM’s was the main topic of discussion at the last Technical Advisory Committee meeting. The Mayor has developed a letter to health care professionals with a FAQ sheet, which Dr. Natzke has reviewed and approved for submission to the membership. He noted that he perceives this to be a positive first step.

Genesee County Medical Society Board of Directors

March 24, 2015 - Minutes

2. Resolution Regarding Canadian Nuclear Waste Dump

It was noted that in the late 1980's, the Genesee County Medical Society beat back a low-level nuclear waste dump designed for the state of Michigan, for the same reason that it submitted the Resolution to oppose the Canadian nuclear waste dump near Lake Huron.

Motion: that the Resolution regarding physical activity in schools be approved as presented and forwarded to MSMS immediately. The motion carried.

F) Greater Flint Health Coalition Updates

1. Board of Directors

Dr. John Waters reviewed the activities of the GFHC Board of Directors, including presentations received on Flint Water Quality, and the effort to get ACO's to work together on a state health improvement grant.

2. Advance Care Planning

Dr. Laura Carravallah reported on Advance Care Planning. The roll-out has begun to the community as a whole.

3. Quality & Innovation

Dr. Carravallah reported that the Quality & Innovation Task Force is concentrating on health information exchange issues. She also reminded the Board that Mr. Doug Dietzman, Executive Director of Great Lakes Health Connect, will be the presenter at the GCMS General Membership Meeting in September.

4. CHAP

Dr. Waters noted that the Children's Healthcare Access Program materials are included in the Board packet.

G) District Directors

Drs. Bobby Mukkamala and John Waters reviewed the activities of the MSMS Board of Directors. They reported that Graduate Medical Education funding is a serious problem in the state of Michigan. A Membership Task Force has been convened.

The Board is focusing on Senate Bill 68, and has offered an alternate Bill to the Senate.

H) Presidents' Report

Dr. Deborah Duncan reported that the May 7th Dinner Business Meeting will focus on HealthPlus quality initiatives. Dr. Duncan also reported that GCMS received a small contract that will allow GCMS to hire a staff person to coordinate the development of a human trafficking toolkit for physicians and focus on physician practices.

IV. New Business

A) MSMS Proposal Regarding Discounts

Consensus: that GCMS maintain its current position of not offering discounts to groups.

V. Next Meeting

The next meeting of the GCMS Board of Directors will be April 28, 2015.

VI. Adjournment

No further business appearing, the meeting was adjourned at 8:00pm.

Respectfully submitted,
Peter Levine, MPH
Executive Director



TOWN HALL MEETING ON COLLABORATIVE VALUE BASED MEDICINE:

What Every Physician Needs to Know

On May 7th, the Genesee County Medical Society General Membership Meeting was convened at the Flint Golf Club. The evening featured a recap of the MSMS House of Delegates, at which most of the GCMS resolutions were passed, and candidates were all reelected. Three members of the GCMS serve as MSMS officers, Dr. Pino Colone, Speaker, Dr. Venkat Rao, Treasurer, and Dr. S. Bobby Mukkamala, Vice Chair. Dr. Cathy Blight was awarded a Presidential Citation for her leadership of MSMS, and of the AMA Delegation.

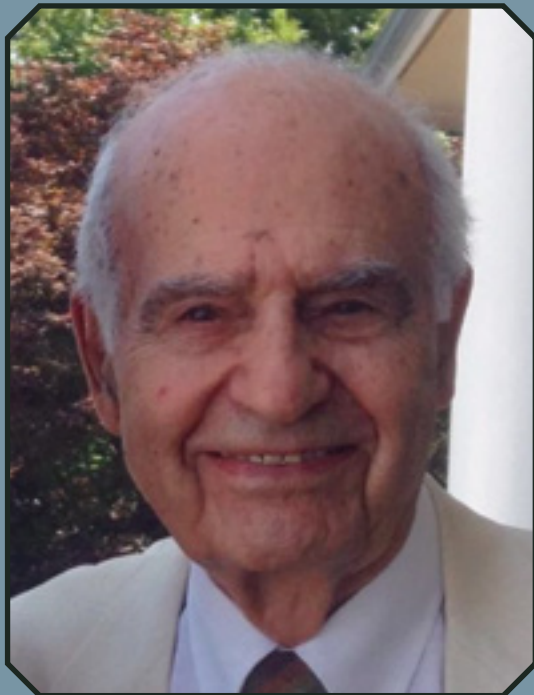
Dr. Gerald Natzke was presented with the MSMS Community Service Award for his involvement in Special Olympics and his leadership locally, statewide, and

nationally, in the field of environmental medicine.

Dr. Michael Genord, Senior Vice President of Strategic Development and Alignment and Chief Medical Officer of HealthPlus of Michigan, provided a presentation on Collaborative Value Based Medicine: What Every Physician Needs to Know. Dr. Genord engaged in an active question and answer period for quite a long time after his presentation was completed.

This was an extremely valuable meeting. The September General Membership Meeting will focus on Great Lakes Health Connect. This will be another important and highly valuable meeting that all members should plan to attend!

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 Dr. Miltich turned 100 on June 1, 2015!



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Contact Pete Levine at 810-733-9925.

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HAPPY BIRTHDAY DOCTOR

James Graham, MD	1
Siva Sankaran, MD	1
P. C. Shetty, MD	1
Anthony Miltich, MD.....	1
T. Trevor Singh, MD.....	3
Aftab Aftab, MD.....	3
My Le Shaw, MD.....	4
Vivekanand Palavali, MD.....	4
Yazdi Sidhwa, MD	4
Ernesto Duterte, MD.....	4
Sudarsan Misra, MD.....	4
Xinyue Pan, MD.....	6
Nitin Malhotra, MD.....	6
Brian Bhagat, MD.....	6
Edilberto Moreno, MD.....	7
Athar Baig, MD	8
Ravikumar Peddireddy, MD.....	10
C. Arch Brown, MD	10
Raouf Mikhail, MD	11
Tommy Stevens, MD	11
Edmund Louvar, MD	12
Sayed Osama, MD	12
Sudhir Arumanla, MD.....	12
Jitendra Katneni, MD	12
Marigowda Nagaraju, MD	14
Ronald Smalley, MD.....	14
Monee Rassolian, MD.....	15
Peter Mikelens, MD	16
John Macksood, MD	16
Lucille Saha, MD	17
Stephen Morris, MD.....	17
Madhusudana Tummala, MD	17
Ambreen Sattar, MD.....	18
J. Martin Ulrich, DO.....	19
Mohammad Alkotob, MD	20
Fayez Kotob, MD.....	20
Zain Alamarat, MD	21
Ronald Sparschu, MD.....	21
Ethiraj Raj, MD	22
John MacKenzie, MD	22
Madhavi Gadiraju, MD	23
Stacey McEwen, DO.....	25
Michael Kia, DO	25
Sasikala Vemuri, MD	26
Alan Rice, MD.....	26
Dale Wilson, MD	27
Conrad Reinhard, MD.....	28
Julio Badin, MD	28
Alice Platt, MD.....	28
Dorothea Carlis, MD.....	30

GCMS MEETINGS

— JUNE 2015 —

SAVE THESE DATES!!!

Legislative Liaison Committee, 6/1
8am, GCMS Office

Bulletin Committee, 6/3
7:30am, GCMS Office

2015 Presidents' Ball Committee, 6/3
12:00pm, GCMS Office

C-Section Task Force, 6/22
6pm, GCMS Office

Finance Committee, 6/23
5:30pm, GCMS Office

Board of Directors, 6/23
6pm, GCMS Office

**Community & Environmental
Health Committee, 6/24**
12:30pm, Sagano Japanese Bistro

Practice Managers, 6/25
"Grab the Cookie!"
Help in Meeting Your Practice Goals
8am, GCMS Office

MSF Fundraising Committee, 6/25
6pm, GCMS Office

2015 GCMS Presidents' Ball
November 7, 2015
6 o'clock pm
Warwick Hills Golf & Country Club



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State & County Medical Society Membership Application

Application Code:

- I am in my 1st year of practice post-residency.
- I am in my 2nd year of practice post-residency.
- I am in my 3rd year of practice post-residency.
- I have moved into Michigan, and this is my first year practicing in the state.
- I work 20 hours or less per week.
- I am currently in active military duty.
- I am in full-active practice.

Male Female

First (legal) Name: _____ Middle Name: _____ Last Name: _____ MD DO

Nickname or Preferred Form of Legal Name: _____ Maiden Name (if applicable): _____

Job Title: _____

W Phone: _____ W Fax: _____ H Phone: _____ H Fax: _____

Cell: _____ Email: _____

Office Address Preferred Mail Preferred Bill Preferred Mail and Bill

City: _____ State: _____ Zip: _____

Home Address Preferred Mail Preferred Bill Preferred Mail and Bill

City: _____ State: _____ Zip: _____

* Please base my county medical society membership on the county of my (if addresses are in different counties): Office Address Home Address

* Birth Date: ____ / ____ / ____ Birth Country: _____ MI Medical License #: _____ ME #: _____

Medical School: _____ Graduation Year: _____ ECFMG # (if applicable): _____

Residency Program: _____ Program Completion Year: _____

Fellowship Program: _____ Program Completion Year: _____

Hospital Affiliation: _____

• Primary Specialty: _____ Board Certified: Yes No

• Secondary Specialty: _____ Board Certified: Yes No

Marital Status: Single Married Divorced Spouse's First Name: _____ Spouse's Last Name: _____

Is your spouse a physician?: Yes No If yes, are they a member of MSMS?: Yes No

Within the last five years, have you been convicted of a felony crime?: Yes No If "yes", please provide full information: _____

Within the last five years, has your license to practice medicine in any jurisdiction been limited, suspended or revoked?: Yes No If "yes", please provide full information: _____

Within the last five years, have you been the subject of any disciplinary action by any medical society or hospital staff?: Yes No If "yes", please provide full information: _____

I agree to support the County Medical Society Constitution and Bylaws, the Michigan State Medical Society Constitution and Bylaws, and the Principles of Ethics of the American Medical Association as applied by the AMA and the MSMS Judicial Commission.

Signature: _____ Date: _____

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When completed, please mail to MSMS or Fax to (517) 336-5797. Thank you!