

THE Bulletin

NOVEMBER 2011 Volume 87, Number 11

**WELCOME NEW PRESIDENT –
DR. LAURA CARRAVALLAH**

**PRESIDENTS' BALL –
NOV. 19TH, RIVERFRONT BANQUET CENTER**

L.D.

*Laura Carravallah
Combi*

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The Genesee County Medical Society.

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GENESEE COUNTY

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NOVEMBER 2011 Volume 87, Number 11

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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UNDER THE RAINBOW

Genesee County has had a number of spectacular rainbows bestowed upon it recently. In the past few months, almost every thunderstorm that rumbles through has been followed by a gorgeous rainbow – sometimes even a double.

While the rainbows in the sky may be the most notable, we are also gifted with other types of remarkable rainbows – specifically in the diversity and richness of our Society's membership. In my inaugural message to you, I am deeply honored to note that Our Rainbow Coalition reflects more than our obvious specialty spectrum: we have a richly diverse house of medicine – diverse



Laura A. Carravallah, MD,

in political persuasion, experience, practice style, background, culture – and we need all of it.

We are all aware that we are rapidly approaching a crossroads in the redesign both of the broad shape, and also the fine detail of our practice environment. A number of critical decisions will soon be made – with or without our participation. The issues are complex, and stemming from our rich diversity, we have a gamut of perspectives. The public does listen to us, but only when we are

able to articulate our message in a consistent fashion. I believe the prism through which we can focus all of our multihued views into a coherent beam of light is Patient Welfare.

It is easy to see the direct patient benefit in most of the public health and scientific policies that we promote. These are usually designed to address a particular disease or risk factor. What is more difficult is to deal with some of the conflicting forces which influence



Raymond Diggs, MD passed away September 7, 2011. He had been a member of GCMS since 1963. He attended medical school at Meharry Medical School, Nashville, Tennessee. His residency was performed at Hurley Medical Center. He was preceded in death by his wife Johnella.

the health of our practices. There are certainly conflicts of interests and values active in these debates, but the truth remains that if we are not able to keep an appropriate mix of viable practices, there will not be anyone available to treat our patients. That is the connection that needs to be better understood by all. In this changing landscape, each suggested legislative and regulatory change has a number of both predictable and also unanticipated effects – many of which affect different types of practices in disparate ways. This threatens to divide and scatter our focus on the big picture – the vigor and longevity of our profession

and its ability to effect our shared goal of keeping our patients healthy and minimizing the effects of disease. If we can keep this goal foremost and measure the effect of each proposed policy – separately, but also in the context of the collective package – against this goal, then we may be able to articulate a path that will be convincing to the rest of our fellow citizens.

We need a forum for all physicians on this polychromatic continuum to have the opportunity for serious discussion and debate around these crucial issues and, when possible, to speak with a lucid voice. We need this, and our patients need it.

In Genesee County, our Society is in the best position to provide this type of forum – after all, this is what we have been doing for decades. What we need is for all physicians to be members, and to actively participate in this discourse.

Yes, we need their dues, but even more we need their full participation: their ideas, their energy and their Voice. Please, talk to your colleagues, your trainees, your students. Go out and recruit one more person (or even two) to join us under our Rainbow. Please do it today.

Figure 2

Anatomy of MSMS Physicians Insurance Agency

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HEALING ART

True art is the intermediary between man's ordinary nature and his higher personalities.
 – E.F. Schumacher (1911 - 1977)

It is very likely that you never encountered, during psychiatry training as a medical student or resident, a branch of mental health treatment that has been around for many decades called Art Therapy. It is defined as an expressive form of therapy that uses creative processes to create a positive effect on the patient's sense of mental, physical, and emotional well-being. A painter, Adrian Hill, suggested to his fellow patients at a tuberculosis sanitarium that they may be better able to cope with the demands of their disease by passing their days working in various artistic media. This led to his 1945 book, *Art Versus Illness*. Art Therapy has its roots in art education and developmental psychology and has been characterized as a link to psychoanalytic therapy, a sort of symbolic speech.

Engagement in the creative process can help patients resolve internal conflicts as well as develop and manage behavior and feelings associated with disease. It can help reduce stress, build self-esteem, and improve coping skills. Art Therapy uses traditional art media such as painting, drawing, photography, and sculpture. Patients are not required to have previous art training or possess any innate artistic talent. Expressing oneself through art is often initially awkward but can become very rewarding for the patient as they become more comfortable.

Art Therapists work as individual practitioners or as part of a clinical team of mental health professionals. They deal with all ages; individuals, couples, families, larger groups, and even whole communities. They work in schools, nursing homes, mental institutions, community



Daniel Ryan, MD

centers, studios, and private offices. Common initial assessment methods include an exercise where patients are asked to draw a house, a tree, and a person. The patient is asked specific questions about the drawings by the therapist. Another exercise involves drawing a road which can serve as a metaphor for the patient's road in life and give insight to their current emotional state as well as indicate a capacity for change and rejuvenation.

Art Therapists are mental health professionals who integrate the visual arts and creative process with counseling and/or psychotherapy. Most are trained in art and psychology. They generally are required to have at least a master's degree and can be registered or board certified.

Some states require licensure in order to be eligible for reimbursement as an independent practitioner. Since the field is still developing, many other countries do not regulate the practice of art therapy at all. Therapists are governed by a code of ethics similar to a physician as regards patient confidentiality. They are not allowed to display or publish patients' artwork without written permission. Therapists are required to explain the format and expectations of treatment before beginning. Therapy should continue only if the patient perceives they are receiving benefit and it is against governing board principles to retain patients strictly for profit.

Art Therapy can be a useful adjunct treatment for those suffering from all sorts of mental and emotional diseases and can be a rewarding field for those who are artistically gifted and have a desire to help others.

Genesee County Medical Society *Presidents' Ball* November 19, 2011

\$85 per ticket

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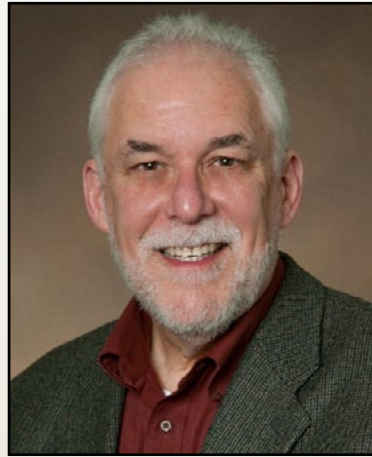
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WELCOME DR. CARRAVALLAH

Welcome Dr. Carravallah. As I said last month, each year Presidents are selected for very well thought out reasons by our nominating committee. Dr. Carravallah is a strong leader who has a rich academic, public health, and clinical background. Most of all her instincts like each of our Presidents are remarkably good. It is a pleasure to welcome her as President because, like our previous President, Dr. Mukkamala, I remember her as a resident. Even back then, she was interested in quality and public health issues. I look forward to working with her.



Peter Levine, MPH

It is fun to watch Presidents' skills as they are exercised. Each President's skills become the strength of this organization. While the strategic plan determines direction, the Presidents determine the ease of accomplishment of the organization's goals. If I was to synopsise the changes that are taking place culturally and systematically, it is a shift to doing things much more efficiently with a real focus on bang for the buck.

There is no room for us to waste time, money, or human resources. Our soon to be immediate past President, S. Bobby Mukkamala, MD, is a true multi-tasker, using every electronic medium for communication simultaneously. It is one of the secrets for getting multiple things done at a time. Our incoming President is equally adept at these methods, and surprisingly it results in staff actually accomplishing more than we ever thought possible.

We hope you will all come to the Ball. It's going to be a major blast this

year. We expect this to be the event of the year for the entire county not just the medical society. Please see the ad in this issue of the Bulletin. Please also note that many organizations and individuals are sponsoring the Ball. Please thank these individuals and organizations when you see them. As all of you know, at this point dues are a smaller and smaller portion of operating revenue, and these sponsorships are quite important when it comes to having the resources to deliver your message.

Please also note that the SGR issue relating to Medicare is becoming more complicated not less. You will be receiving emails from us asking you to correspond with elected officials in an effort to solve this long-standing problem of the impending Medicare cuts. Please pay attention to these emails when you receive them.

Thank you all for making up the most aggressive Medical Society around. Together we are accomplishing a lot.

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IT NEVER HURTS TO LOOK AT THE COMPASS TO MAKE SURE WE ARE ON OUR CHARTED COURSE

I learned a lesson this past month in Lansing. While the MSMS continued its efforts in the capital around issues like streamlining the preauthorization process for prescription drugs, another issue that I thought was in the past crept up again: the "Helmet Law."

The lesson was simply that as much tenacity as our own organization has for the things we feel strongly about, so does someone else with the opposite perspective. In this case the motorcyclist lobby.

Even our state no-fault automobile accident laws, that we as providers have come to take for granted, are now under fire in a big way.

Listening to the radio, the opponents of current no fault laws make it seem so logical that the current system is fatally flawed; that the grass is greener on the other side. All we have to do is go back to what we had before the existing laws and see what a mess it was to have every



S. Bobby Mukkamala, MD
District VI Director

auto injury litigated and we as providers wondering who was going to pick up the tab for the work that was done in the middle of the night, long before any fault was found.

MSMS continues to stay vigilant on these fronts but also is being pro-active in furthering its strategic priorities: Childhood Obesity, Promoting Primary Care, Improving Health Care Quality and Safety, and being better stewards of health care resources. These four main areas of focus were pulled directly out of the brainstorming that was the Future of Medicine effort of several years ago.

In fact, it is become my privilege to chair the task force that has been assigned to review the current plan and modify it as necessary. This exercise, while considered painful by some, its actually a very useful one to make sure the trajectory of our efforts at MSMS is in line with current issues.

GCMS MEETINGS

– NOVEMBER 2011 –

11/2, 7:30 a.m. – Bulletin Committee @ GCMS

11/7, 8 a.m. – Legislative Liaison @ GCMS

11/19, 6 p.m. – Presidents' Ball

11/21, 12 Noon – Membership Committee

11/22, 5:15 p.m. – Finance Committee @ GCMS

11/22, 6 p.m. – GCMS Board of Directors @ GCMS

11/23, 12:30 p.m. – Community & Environmental Health Committee @ GCMS

Recessed until January – 8 a.m. Practice Managers @ GCMS

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Laura A. Carravallah, MD, GCMS President 2011-2012



There has been much written about the ethnic diversity of this community. We have people of every nation, religion, ethnic group, race, and language. But rarely do you see so much of it expressed in one person. Dr. Laura Carravallah is awfully interesting. Dr. Carravallah's great-great-grandfather, Isadore Carravallah, MD, was the first Jewish physician in Detroit. Some conversions took place over time, and Dr. Laura Carravallah was born and baptized a Catholic. She was then confirmed as a Methodist. Now she finds herself married to a Muslim. That is probably why she says that she strives to be a "realistic optimist."

A conversation with Dr. Carravallah revolves around community service, medical quality, education, medical ethics, her son Danyal and her husband Asif Ishaque, MD. She refers to her husband as her chief advisor and to her son as her teacher in humility and love, noting that there is "nothing like a child to make you humble."

When discussing her focus for her presidential year she is very clear that the medical profession has to be economically sustainable. "While economics are critical, this is not a pocketbook issue as much as a reflection of the fact that we need physicians to train other physicians. We need to align incentives to make it easy to do the right thing. Once the incentives are in place we must infuse values so that people will want to do right action. But this is an uphill battle if people feel that they are somehow punished – economically or otherwise – for good deeds."

Dr. Carravallah states emphatically "if we do the right things for patients, we will do the right things for our profession. The profession must be vibrant and healthy so that there will always be someone for the patients to come to for their medical needs. Economics are a part of this, but also the re-generation of our future



physicians. Medicine is a sacred trust. Teaching is a sacred trust. In both one deals with a vulnerable population which submits itself to us as physicians and teachers for our knowledge. We dare not violate that trust. The anger generated by the violation of the trust is potentially enormous. From a self benefit standpoint, physicians need to preserve the ethical underpinnings of the profession so that our entire system doesn't crash. Uwe Reinhart, PhD said, "Medicine differs from business in that the emptor cannot caveat – the buyer cannot beware. This is perhaps the most perfect synopsis of the medical situation. We are stewards of trust."

Dr. Carravallah strives to be constructive in all of her dealings with students, peers, and patients, and hopes to be constructive in her stewardship of the Society during her presidency.

Dr. Carravallah was raised in Milford, Michigan. She attended Michigan State University for undergraduate studies and MSU College of Human Medicine, where she received her MD degree. She completed her Combined Internal Medicine – Pediatrics (Med-Peds) residency at Hurley Medical Center where she served as chief resident. She also served as President to the Hurley Housestaff Association (the resident union). "I came here as a medical student. Flint has been known for years as the best campus in the Michigan State system to get an outstanding clinical education. It is also known by many outside the system. This place immediately felt real to me. It was real people with real problems."

She serves as the program director for the Med-Peds residency at Hurley Medical Center, which is affiliated with Michigan State University's College of Human Medicine. She is an associate professor in the Department of Pediatrics and Human Development and the Department of Medicine at MSU. She has served as principal investigator on several research projects and is a frequent presenter at peer reviewed workshops and seminars. *Continued on pg. 14.*

Dr. Carravallah continued.

Dr. Carravallah has a curriculum vitae replete with refereed journal articles and awards. In 2010 she received the Ruben E. Russell Brotherhood Award and the Athena Award. Hurley Medical Center awarded her with the Pinnacle Award, its highest award for physicians. She is a fellow of the American College of Physicians and the American Academy of Pediatrics, and a recipient of the Governors Award for the American College of Physicians, Michigan Chapter. She received the YWCA Woman of Achievement Award and innumerable academic and teaching related awards and honors.

She has served as a delegate for the Michigan Chapter of the American College of Physicians to the Michigan State Medical Society House of Delegates for several years, and now serves as a Delegate from Genesee County. She currently serves on the GCMS Peer Review Committee and the Ethics Committee and on the GCMS Board of Directors. The list of activities that she has been involved with at the community level are simply too diverse to begin to mention.

Her interests include theater, opera, science fiction and fantasy, needlework, jewelry making, and gardening.

Please welcome Dr. Laura Carravallah to her new role as President of the Genesee County Medical Society.

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PRACTICE MANAGERS

On September 22, the practice managers met with credentialing experts from BCBS and Blue Care Network of Michigan to discuss provider enrollment and data used from the CAHQ database. The presentation actually resulted in very substantial requests for information from the practice managers present which were agreed to by the Blue Cross and Blue Care Network representatives. Copies of that information relating to their presentation will be emailed to all physicians whom we have email addresses and their practice managers of whom we have email addresses. Presenters included Sandy Brady and Tina Gach. The January practice managers session will revolve around Meaningful Use and HIPAA 5010. The October session will revolve around the PGIP and PCMH programs of Blue Cross and Blue Shield of Michigan. Please ask your practice managers to reserve early as both are likely to be very well attended meetings.



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Alliance International Luncheon



We had a great turnout at the International Luncheon at the beautiful house of Drs. Rama and Venkat Rao on September 27, 2011. Dr. Rama not only graciously provided their house for the Alliance members to hold their first event of this year, but also prepared many tables with elegant, iridescent tablecloths which covered all the way to the floor. The matching napkins, and bright, colorful daisies accented this fall gathering.

Thank you so much, Drs. Rama and Venkat Rao. We had a great time celebrating the beginning of our year, with about 16 different dishes from all over the world, including Indian, Chinese, Vietnamese, Singapore, German and Southern American food. Out of the 38 attendees, many members brought in their specialty dishes to share with everyone. Also a special thanks to Lakshmi Tummala for making this event a great success. This is an annual event that most members love to attend. We hope you will encourage your spouses to join us next year.



We are going to have another great program coming on Tuesday, November 1 at 11:30 a.m. the "Art of Food Presentation," at Dr. Paul and Sue Lauber's house at 1385 Highland Meadows, Flint, 48532. Please visit our website for details at: www.gcmsalliance.com.

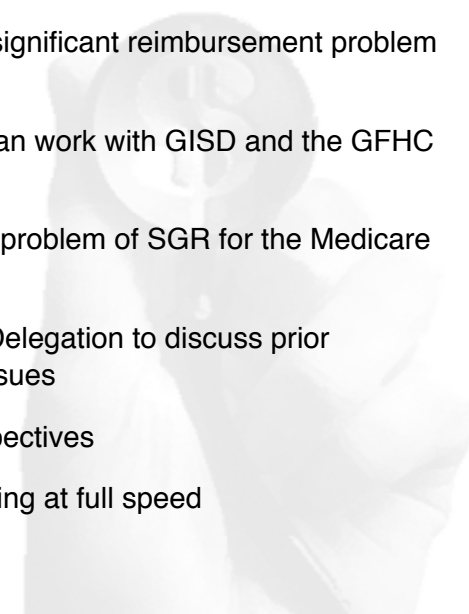
You will not want to miss the annual spectacular event, the Presidents' Ball to honor outgoing president Srinivas (Bobby) Mukkamala, MD and the incoming president, Dr. Laura Carravallah. I am sure most of you already have received the invitation. Please do not hesitate to call the GCMS office if you need more information. The Event is prepared by GCMS Alliance under the talented chairperson, Mona Sahouri.



Thank you for your support.
Rosa Wang, President
Genesee County Medical Society Alliance

YOUR \$\$\$ AT WORK

- S** GCMS intervened with a third-party payer to help with recertification of members
- S** GCMS was able to work with a third-party payer to solve a significant reimbursement problem for a member
- S** GCMS Community & Environmental Health Committee began work with GISD and the GFHC on nutritional issues in the schools
- S** GCMS, MSMS, and AMA coordinated attempts to solve the problem of SGR for the Medicare program
- S** GCMS Legislative Liaison Committee met with Legislative Delegation to discuss prior authorization, as well as budgetary and scope of practice issues
- S** GCMS staff met with candidates regarding physicians perspectives
- S** GCMS transition from Marcia Gzym to Sheree Ayres operating at full speed



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JOINT ANNOUNCEMENT
from
GENESYS HEALTH SYSTEM, McLAREN HEALTH CARE
& HURLEY MEDICAL CENTER

Genesee County Hospitals announce a shared Regional Health Information Exchange Strategy in partnership with Michigan Health Connect & Medicity

BACKGROUND

Exciting things are happening in Michigan, where a broad, regional health information exchange, or HIE, has been steadily evolving. The benefits will soon accrue to the health care providers and residents of Genesee County, as well as those from neighboring counties.

The state of Michigan, going back a few years, had provided multiple planning grants to explore the development of regional HIEs throughout Michigan. The counties of Genesee, Lapeer, and Shiawassee were designated as one of nine regions, also known as medical trading areas. Since mid-2007, regional leaders from Genesys Health System, Hurley Medical Center, McLaren Regional Medical Center, Lapeer Regional Medical Center, and Memorial Healthcare have come together via the Greater Flint Health Coalition to investigate the best local strategy to establish HIE.

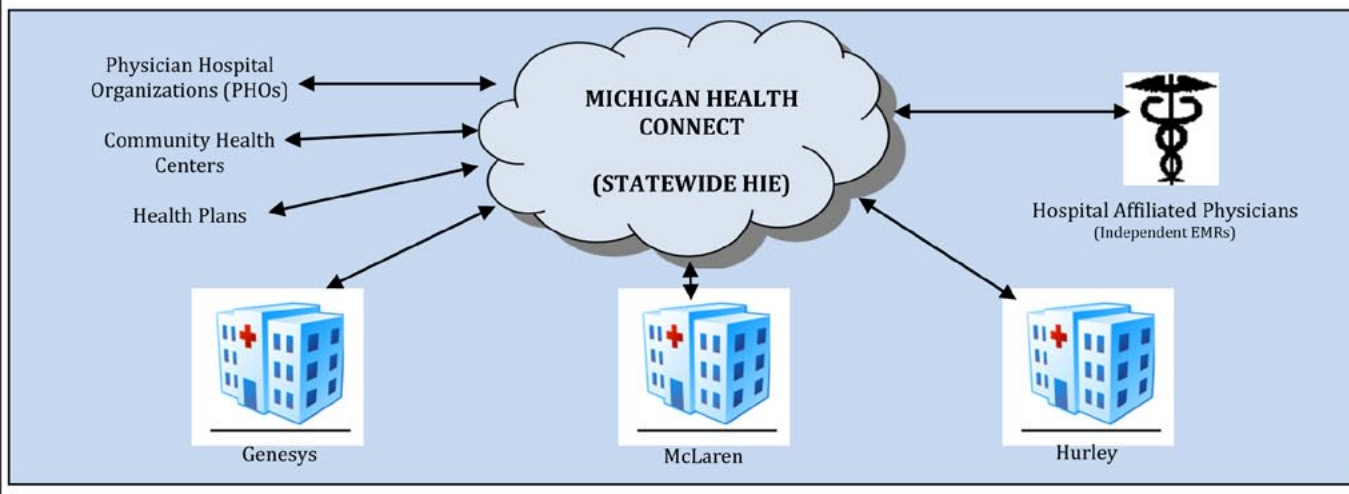
While a lengthy process of planning and evaluation has transpired in the midst of an ever-changing landscape related to federal requirements for health information technology, electronic medical records, and meaningful use, the three Genesee County hospitals and the Greater Flint Health Coalition are pleased to announce a shared regional Health Information Exchange strategy in partnership with Michigan Health Connect.

ABOUT MICHIGAN HEALTH CONNECT

Michigan Health Connect (MHC) seeks to advance the delivery of patient-focused health care by collaboratively leveraging information technology and clinical data exchange. It also encourages the adoption of EMR systems across the provider community and facilitates their meaningful use. MHC is led by a collaborative of 8 prominent health systems and currently consists of 47 hospital facilities whose service area spans over 80% of the counties in Michigan's Lower Peninsula.

In partnership with Medicity (a leading HIE vendor), MHC has deployed results delivery, laboratory and radiology ordering and EMR interfaces to hundreds of physician practices statewide, including technology to enable referrals between practices.

By adopting Medicity's full HIE infrastructure, MHC will have the ability to aggregate and match patient data to create longitudinal patient records while enabling the participating health systems and their physician partners to maintain ownership of their own data. Via its growing clinical messaging platform, MHC has over 640 physician offices connected to receive results. These include EMR offices as well as paper-based offices whose results are placed into an electronic "drop-box", replacing inefficient fax delivery.



ARE DIFFERENT ELECTRONIC MEDICAL RECORD (EMR) SYSTEMS CAPABLE OF WORKING WITH THIS HEALTH INFORMATION EXCHANGE STRATEGY? IF SO, WHAT EMR's DO THE REGION'S HOSPITALS ENDORSE OR RECOMMEND?

Yes. To date, Michigan Health Connect has developed 48 discrete interfaces representing 22 different health information technology vendor systems. MHC doesn't endorse any but will work with all EMR systems.

In our region, our local hospitals have also selected different EMR vendors to achieve "meaningful use" requirements. Each regional hospital's selected EMR system for employed physicians is noted below. We fully endorse and encourage your use of these EMR systems if your practice is in the process of making such a decision.



Genesys Health System

Allscripts
Enterprise
EMR



McLaren Health Care

Allscripts
Enterprise or Professional or
MyWay EMR



Hurley Medical Center

Epic
EMR

FOR HOSPITAL AFFILIATED PHYSICIANS (NON-EMPLOYED), NUMEROUS OTHER EMR SYSTEMS WILL WORK WITH THE MICHIGAN HEALTH CONNECT HEALTH INFORMATION EXCHANGE, HOWEVER, INTERFACING COSTS FROM THOSE EMR VENDORS SHOULD BE ANTICIPATED.

WHERE CAN YOU LEARN MORE ON HOW TO PARTICIPATE?

Below please find the contact information for the Chief Information Officer of the region's hospitals. Their team is prepared to answer your questions and refer you to the necessary steps to take advantage of the forthcoming regional health information exchange strategy as it is implemented in 2012 and beyond...

Daniel Stross
Chief Information Officer
Genesys Health System
Ascension Health Information Services
(810) 606-6607
daniel.stross@genesys.org

Gayle Consiglio
Chief Information Officer
McLaren Health Care
(810) 342-1169
gaylec@mcclaren.org

Gary Townsend
Chief Information Officer
Hurley Medical Center
(810) 262-4955
GTownse1@hurleymc.com

In partnership,

Elizabeth L. Aderholdt

Elizabeth Aderholdt
President & CEO
GENESYS

Donald Kooy

Donald Kooy
President & CEO
McLAREN
REGIONAL MEDICAL CENTER
A McLAREN HEALTH SERVICE

Patrick D. Wardell

Patrick Wardell
President & CEO
HURLEY
MEDICAL CENTER

REG-18 MHCannouncement.flint.101311ks

Genesee County Medical Society Board Meeting

September 27, 2011 - MINUTES

CALL TO ORDER:

The meeting was called to order at 6 p.m. by S. Bobby Mukkamala, MD, President in the Rapport Conference Room.

Review of Minutes:

Motion: That the minutes of June 28, 2011 Board of Directors meeting be approved as presented. The Motion Carried.

Motion: That the July 28, 2011 caucus of Executive Committee Members regarding GFHC Board seat be approved as presented. The Motion Carried.

Motion: That the minutes of the caucus of the GCMS Board of Directors regarding dues on August 16, 2011 be approved as presented. The Motion Carried.

Motion: That the caucus of the Executive Committee on September 13, 2011 regarding MSMS Community Service Award be approved as presented. The Motion Carried.

Motion: That the caucus of the Board of Directors on September 13, 2011 regarding the MSMS Community Service Award be approved as presented. The Motion Carried.

Motion: That Pete Levine inform the MSMS that Dr. Rima Kudish is the GCMS nominee for the Community Service Award. The Motion Carried.

Reports:

A) Alliance Report

Rosa Wang, President of GCMSA, noted that the international luncheon was held today at the home of Venkat and Rama Rao. 40 people attended. On November 1, 2011, a lunch will be held at Sue Lauber's home. Dr. Mukkamala distributed a list to the Board of those who spouses are not members. Mrs. Wang reported that Peace Day is coming up to honor Mahatma Gandhi and encouraged all to attend. She also asked people to bring their contributions for doctors and their families "Make a Difference Day." She reminded everyone that the Presidents' Ball is on November 19, 2011 and asked that the GCMS Board share the profits of the Ball with the Alliance.

B) Finance Committee Report

Peter Levine reviewed the Budget to Actual Report for the period ending August 31, 2011. He thanked the Board for its hard work and difficult choices made of over the course of the last couple of years, noting the difficulty that each of the last several Presidents had experienced in making tough decisions relating to finances.

Pete Levine noted that the Finance Committee had reviewed the budget in advance of the meeting and then felt that it was an appropriate budget.

Motion: That the proposed budget be approved with the modifications recommended to the Board resulting in total

income of \$268,546.84 and total expenses of \$231,025.83. The Motion Carried.

Motion: That \$100 be solicited from members during Fiscal Year 2011-2012 using a request similar to last year. The Motion Carried.

Motion: That Peter Levine be able to carry forward his vacation time into the next fiscal year and to use that vacation time to offset Friday work dates to essentially create a 4 day week. The Motion Carried.

Dr. S. Bobby Mukkamala thanked Pete Levine for his service over the years after Pete Levine thanked the Board for their hard work on the finances of the organization.

C) Community & Environmental Health Committee

Dr. Lawrence Reynolds reported that the Community Health Committee is extremely active at this point working on several issues to "Commit to Fit" and developing some plans for communicating on new issues with the Committee will bring to the Board in the near future.

E) Membership Committee Report

Motion: That a letter be sent to Dr. Linda Hotchkiss at Genesys signed by all members of the GCMS Board asking Dr. Hotchkiss to pay for all their residents to join the society just like all of the other hospitals do and copy the letter to Elizabeth Aderholdt who is the CEO of Genesys Health System.

Motion: That the following requests for membership be approved:

Requesting Membership:

Ann Burton, MD – Inspirits of MI Med. Serv. - IM

Requesting Reinstatement:

Elizabeth Hale, MD – Infectious Disease –HMC

Mona Hanna-Attisha, MD – Pediatrics - HMC

Olugbemiga Jegede, MD – IM – HMC

Kavitha Kesari, MD – IM

Ramon Raneses, Jr., MD – Reg. Cardiology

MSU Students Requesting Membership:

Lynn Baca, MD – MSU

Justin Lockwood, MD – MSU

Erin Lorencz, MD - MSU

McLaren Residents Requesting Membership:

Tessa Antalan, MD Bineela Bandrupalli, MD

Chenyi Chenyi, MD Nikolas Dimovski, MD

Sohaib Elsayed, MD Brian Flanagan, MD

Varun Golla, MD Vamsi Korrapati, MD

Al-Marie Logrono, MD Jeremiah Lopez, MD

David Mayor, MD Ridhwi Mukerji, MD

Omer Nour, MD Sandeep Padala, MD

Shruti Pathak, MD Indeevar Peram, MD

Silpa Ramireddy, MD Marcello Santos Schmidt, MD

Rajitha Valsan, MD

seasoned
seasoned
attained distinctive quality.
to make fit by experience.

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Hurley Residents Requesting Membership:

Firas Abed, MD	Delshad Ahmad, MD	Atinuke Akinpeloye, MD
Ahmad AlNajjar, MD	Omar Alkharabsheh, MD	Srtranjani Bajjuri, MD
Oluwamliyiwa Boloduro, MD	Junaid Farooq, MD	Sasikanth Gorantia, MD
Rajani Gundluri, MD	Amani Hassan, MD	Deepak Kalra, MD
Israa Khan, MD	Poonam Mahajan, MD	Achenef Melese, MD
Naveen Minumula, MD	Rasha Nakhleh, MD	Faisal Niazi, MD
Nieveen Peter, MD	Haamid Syed, MD	Shaïd Tabrez, MD

The Motion Carried.

G) President's Report

Dr. S. Bobby Mukkamala reported that the Dinner Business Meeting held on "Meaningful Use" was a very productive one. He said that the speakers were remarkably well informed and that the discussion was vigorous.

Dr. S. Bobby Mukkamala reported that 2 GCMS Members have been recertified by a major payer following intervention by GCMS Staff. Both individuals were decertified after they dropped their board certification, and will recertify following commitments to re-take their Boards.

Dr. S. Bobby Mukkamala reported that he has asked Dr. Laura Carravallah to serve on the MSU Public Health Advisory Board if we are requested to provide a nominee. The Board congratulated Dr. Carravallah on this appointment.

H) District Directors Report

Dr. S. Bobby Mukkamala reported that MSMS did update their strategic plan. He also noted that Dr. Colone will be running for re-election as Vice-Speaker and Dr. Blight will be up for re-election as an AMA Delegate at the meeting in Dearborn. Dr. Mukkamala reported that the House of Delegates will take place at The Henry Hotel, April 27-29.

I) Old Business

Dr. S. Bobby Mukkamala reported that the Blue Care Network tiering issue has been addressed by Dr. Ray Rudoni who sits on the MSMS task force which is looking at it. He provided a report that Dr. Rudoni had submitted to the Medical Society on the issue noting that at this time this does not impact Genesee County but could well in the near future.

New Business:

1) Draft of employee policies and procedures manual

Pete Levine reported that he has drafted a policy and procedures manual for the Society. He noted that there never has been one but that it is time to establish one. It has been submitted to Walt Griffin who has provided his comments and will be submitted to the Board in the near future.

Motion: That a zero tolerance policy be established relating to violence and threats with the following process: should a threat be made against a physician or staff member, that physician or staff member should be contacted to inform them that it is our policy to contact the police for all threats of violence against physicians or staff. The Motion was tabled pending the review of the AMA White Paper on file regarding violence against physicians.

Motion: That the GFHC be asked to consider whether the issue concerning shortages of providers in various specialties falls under its purview. An example might be the need for a greater GYN Oncology presence in the community. The Motion Carried.



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Contact Joanne Pratt, RN at 810-232-6101 or
Pete Levine at 810-733-9925

GCMS/MSMS
NEW MEMBER
APPLICATIONS

GCMS NEW MEMBERS

Christopher Papp, MD

Ophthalmology
Michigan Vision Institute
4281 Lennon Rd.
Flint, MI 48507
Ph: (810) 720-9111
Fx: (810) 720-9119

Dr. Papp received his medical degree from University of Toledo, Ohio in 2002. He did his residency at St. Luke's – Roosevelt Hospital, New York, New York. Dr. Papp is sponsored by Amitabha Banerjee, MD and S. Bobby Mukkamala, MD.

Ezequiel Marrtinez-Madrigal

Family Practice
McLaren Family Practice
3230 Beecher Rd., Suite 1
Flint, MI 48532
Ph: (810) 342-5656
Fx: (810) 342-5600

Dr. Martinez-Madrigal received his medical degree from Universidad Autonoma de Guadalajara, Mexico in 2005. He did his residency at McLaren Regional Medical Center. Dr. Martinez-Madrigal is sponsored by Amitabha Banerjee, MD and S. Bobby Mukkamala, MD.



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Check Out Our Website
www.gcms.org

Dear Governor Snyder:

If a proposed bill to radically weaken Michigan's universal motorcycle helmet law reaches your desk, a Coalition of County Medical Societies led by the Washtenaw County Medical Society, with the support of hospitals, physicians, and medical groups from across Michigan, urge you to veto it.

The proposed changes to Michigan's 42-year-old law fly in the face of medical research showing helmets save lives and prevent serious injuries; it would result in higher financial burdens on taxpayers and motorists; and can't be effectively enforced.

The federal Centers for Disease Control and Prevention, the nation's preeminent medical authority, has concluded, "The single most effective way for states to save lives and save money is a universal helmet law."

Helmet use reduces the risk of death by 37 percent and the risk of head injury by 69 percent, according to the CDC.

Other states that have eliminated mandatory helmet laws have seen a sharp decline in use. When Florida repealed its law in 2000, use fell from 99 percent to 53 percent, the CDC notes.

You have previously said that you would support changes to Michigan's mandatory helmet law "only if other motorists don't pay more as a result." But research indicates taxpayers and motorists would pay more.

The National Highway Traffic Safety Administration (NHTSA) cites research that found only slightly more than half of motorcycle crash victims have private insurance. For patients without private insurance, medical costs are borne by the government, and thus ultimately by the taxpayers.

Moreover, helmet laws have been shown to save money. After California's universal helmet law went into effect in 1992, hospital costs for motorcycle-related head injuries fell by more than half, from \$36.6 million the previous year to \$15.9 million, according to the NHTSA.

In Michigan, about 50 lives are saved each year, along with \$86 million, under our current helmet law, according to the CDC. This makes Michigan a leader among neighboring states with partial or no helmet laws. Why would we want to take a step backwards?

Based on conversations with members of the insurance industry, we are also concerned that changes to the law would drive up insurance costs for all motorists. How can you guarantee that rates will not rise to cover increased injury payouts?

Lastly, the proposed law would be completely unenforceable.

Right now, it's easy for a police officer to tell if someone is in violation, either they're wearing a helmet or they're not.

But the proposed law would exempt motorcyclists who are over 21 and who carry additional insurance. This would make it impossible for police to determine whether a rider was in violation without conducting a traffic stop. With roughly 200,000 registered motorcycles in the state, do we really want to allocate limited law enforcement resources to

double checking riders' ages and whether they are carrying the appropriate additional coverage? How would we enforce the coverage requirements on out-of-state motorcyclists?

Again, we urge you to stand up for Michigan taxpayers and motorists and for smart public health policy by keeping Michigan's mandatory helmet law intact.

Sincerely,

Cynthia H. Krueger, MD, Washtenaw County Medical Society (WCMS) President

William J. Meurer, MD, MS, Chair, WCMS Task Force on Helmet Law Legislation

Co-signed by:

Calhoun County Medical Society
Genesee County Medical Society
Ingham County Medical Society
Jackson County Medical Society
Kalamazoo Academy of Medicine
Kent County Medical Society
Macomb County Medical Society
Marquette/Alger County Medical Society
Michigan College of Emergency Medical Physicians
Michigan Health & Hospital Association
Michigan State Medical Society
Muskegon County Medical Society
Oakland County Medical Society
Saginaw County Medical Society
Saint Joseph Mercy Health System
University of Michigan Health System
Washtenaw County Medical Society
Wayne County Medical Society of Southeast Michigan



****** Announcement******
INFORMATIONAL MEETING ON...

- Community HIE
- Clinical Integration
- Meaningful Use
- EHR Incentive Program

Thurs. Nov 17th @ 6pm
Location: INSIGHT INSTITUTE OF NEUROLOGY & NEUROSCIENCE
Community-Wide HIE is here today!!! To Learn more...reserve your spot, e-mail rsvp to: info@mobiuser.net or call 810-347-5005

MEDICAL SOCIETY FOUNDATION

Consider a donation to the Medical Society Foundation for all of your holiday giving. What a wonderful way of expressing your holiday sentiments while supporting important health related causes.

The Medical Society Foundation has been coordinating physician giving in Genesee County since 1987. This holiday season, why not use the Foundation to make sure your gifts to family, friends and colleagues help to improve the health and well-being of our community.

By giving to the Medical Society Foundation, you receive a great year-end tax benefit at the same time that you tell others how much their health - and the health of those who are most vulnerable in our community - really means to you.

In the past, the Medical Society Foundation funds have been used to support specific public television programs, support of HIV programs, Reach Out and Read, Michigan State Medical Society Alliance, continuing medical education programs, Greater Flint Health Coalition, Turkish Red Crescent Society, Orissa Relief Fund, Sloan Museum's health exhibits, The Genesee County Free Medical Clinic and the Richard A. Rapport Memorial Conference Room.

Contributions can also be made in memory of an individual or to honor someone.

If you want to designate your gift(s) to a special cause, please indicate your choice on your check. A holiday card will be sent to the person(s) of your choice acknowledging your gift. (We will deduct only 10% from the amount of your check to cover expenses).

Mail your donations to:
Medical Society Foundation
4438 Oak Bridge Drive, Suite B, Flint, MI 48532-5467

For questions or information on how your gift can help support the charitable activities of your Medical Society Foundation contact Peter A. Levine, MPH at (810) 733-9925 or at plevine@gcms.org.

Medical Society Foundation Mission Statement:
The Medical Society Foundation is organized and does operate for the purpose of supporting continuing medical education and health-related charitable activities that further the cause of medicine.

Legislative Liaison

On October 3, the GCMS Legislative Liaison Committee met with our legislative delegation to discuss a wide range of topics of interest to physicians and their patients. Topics covered included: The Health Care Claims Tax designed to fill out the Medicaid budget, proposed changes to the Auto No-Fault Laws (which would dramatically affect physicians and which MSMS has opposed.) Also discussed was the proposed repeal of the Motorcycle Helmet Law which GCMS and MSMS have been aggressive about opposing. There were two prior authorization bills, these are in response to GCMS resolutions which were approved by the MSMS House of Delegates. The bills are designed to simplify the prior authorization process. Also discussed was medical marijuana reform and a senate bill designed to protect physicians in health care settings from threats.

Finally, a bill authored by Representative James Ananich, designed to retain physicians was discussed and enthusiastically supported pending further information about its contents. The committee then received a presentation from the GFHC on its Commit to Fit program and overall work plan.



GCMS COMMITTEES 2011-2012

Any physician volunteering for any committee was placed on the committee(s) of their choice.

Physicians still wishing to volunteer for committees are encouraged to do so.

Bulletin Committee

Dan Ryan, MD, Editor
Peter Thoms, MD, Associate Editor

Community and Environmental Health Committee

Gary Johnson, MD, Co-Chair
Gerald Natzke, DO, Co-Chair
Qazi Azher, MD
Donald Canada, MD
Eyassu Habte-Gabr, MD
John Hebert, III, MD
Eve Hood – MSU Student
Rima Jibaly, MD
Michael Kia, DO
Justin Lockwood – MSU Student
Erin Lorencz – MSU Student
Velynda Makhene
Nanci Mercer, MD
Russell Sandberg, MD
Mahesh Shaman, MD
Rama Rao, MD
Lawrence Reynolds, MD
Tarik Wasfie, MD

Constitution & Bylaws Committee

Edwin Gullekson, MD, Chair
Cyrus Farrehi, MD
Venkat Rao, MD
Larry Reynolds, MD

Finance Committee

Suresh Anné, MD, Chair
John Waters, MD
AppaRao Mukkamala, MD
Deborah Duncan, MD
Shafi Ahmed, MD, Treasurer

Legislative Liaison Committee

Cathy Blight, MD, Chair
Abd Alghanem, MD, Vice Chair
Maurice Chapin, MD
Sreen Mannam, MD
Raymond Rudoni, MD
Venkat Rao, MD
Ibrahim Dahbour, MD
Peter Thoms, MD
Edwin Gullekson, MD
Beth Schumacher
Ayman Haidar, MD
Paul Lazar, MD

Political Action Strike Force

(Subcommittee of Legislative Liaison)

Dr. Abd & Fadwa Alghanem
Dr. Peter & Marianne Almeida
Dr. Cathy Blight
Dr. Fritz & Tammy Bruening
Dr. Maurice Chapin
Kathy Cox
Dr. George and Sunny Dass

Dr. Ali & Lila Esfahani
Dr. Venkat Rao
Dr. Edwin and Rosemarie Gullekson
Dr. Ayman Haidar

Dr. Shawky Hassan

Brian Hayes

Kee Kang

Dr. Sunil & Vibha Kaushal

Dr. Prasad & Jay Kommareddi

Dr. Paul & Sue Lauber

James Long, Jr.

Dr. Ramotsumi & Velynda Makhene

Pete Levine & Marion Day

Dr. Sreen & Anita Mannam

Mary Lou Mathias

Drs. AppaRao & Sumathi Mukkamala

Dr. Sunil & Sumita Nagpal

Drs. Bobby Mukkamala & Nita Kulkarni

Gary Paavola

Dr. Vivekanand Palavali

Dr. Vikram & Samira Rao

Dr. Seif Saeed

Dr. Saed and Mona Sahouri

Betty Salimi

Drs. Mona Hardas &

Samasandrapalaya Kiran

Dr. Randy & Beth Schumacher

Dr. Robert & Sue Soderstrom

Dr. Peter & Laura Stoyanoff

Dr. Peter & Cheryl Thoms

Dr. Jawahar & Lakshmi Tummala

Membership Committee

Amitabha Banerjee, MD, Co-Chair
Bobby Mukkamala, MD, Co-Chair
Shafi Ahmed, MD
Walid Abuhammour, MD
Peter Thoms, MD

Nominating Committee

Syed Ahmed, MD
Brenda Rogers-Grays, DO
Cathy Blight, MD
Lawrence Reynolds, MD
Paul Dake, MD, Chair
Koteswara Vemuri, MD
Niketa Dani, MD

Peer Review Committee

Laura Carravallah, MD, Chair
Paul Musson, MD
Rima Jibaly, MD

Aid to Impaired Physicians

(Subcommittee of Peer Review)

Paul Musson, MD, Chair
Allen Ebert, DO, Co-Chair
Laura Carravallah, MD
Samuel Dismond, Jr., MD
Sunil Kaushal, MD
Michael Kia, DO

Seif Saeed, MD

Mike Zarr, MD

Rama Rao, MD

Ethics (Subcommittee of Peer Review)

Laura Carravallah, MD, Chair

Suresh Anné, MD

Walt Griffin, Attorney

Ronald Hunt, MD

Linda Norrell, MD

Ravikumar Peddireddy, MD

Rabbi Salimi, MD

Jagdish Shah, MD

Tommy Stevens, MD

Michael Zarr, MD

Rima Jibaly, MD

Mediation

(Subcommittee of Peer Review)

Rima Jibaly, MD, Chair

Jagdish Shah, MD, Co-Chair

Shafi Ahmed, MD

Abd Alghanem, MD

Suresh Anné, MD

Laura Carravallah, MD

Leonard Dias, MD

Ali Esfahani, MD

Walt Griffin, Attorney

Sunil Kaushal, MD

Harvey Olds, MD

Ravikumar Peddireddy, MD

Venkat Rao, MD

Elmahdi Saeed, MD

Tommy Stevens, MD

Tarik Wasfie, MD

Barina Zado, MD

Michael Zarr, MD

Michael Kia, MD

Special Bioethics Committee

Alan Weamer, MD, Chair

Linda Norrell, MD, Vice Chair

Paul Adams, MD

Orlando Benedict, MD

Maurice Chapin, MD

Laura Carravallah, MD

Rizwan Danish, MD

Samuel Dismond, MD

Sreen Mannam, MD

Basim Towfiq, MD

James Walter, MD

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Allen Turcke, MD, President

Robert Soderstrom, MD

Edwin Gullekson, MD

Shafi Ahmed, MD

Samasandrapalya Kiran, MD

Walter Griffin, Attorney

Cheryl Thoms

AMA Foundation 2011

WHERE DOES THE MONEY GO?

– The Fund for Better Health provides grants to support community - based public health service projects in areas such as substance abuse prevention, violence prevention and healthy lifestyles.

– The Development Fund is an unrestricted fund that allows the AMA Foundation to respond quickly to issues as they arise or provide support in areas of greatest need.

– The Scholars Fund distributes approximately \$500,000 annually in tuition assistance to medical students across the country. Gifts to this fund can be designated to specific U.S. medical schools.

GENESEEE COUNTY MEDICAL SOCIETY ALLIANCE

• AMA Foundation Holiday Greeting 2011 •

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Amount of Contribution \$ _____

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(Medical School Name, City, State)

Fund for Better Health _____

Development Fund _____

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Carlton Dettman	2	Phyllis Helcher	15	Mark Trudell	22
Rosie Lumaque	2	Nikhil Vora	15	Cecilia Lopez	22
Pacita Li Tanhehco	2	Peter Stoyanoff	15	Heinz Schwarz	23
Michael Zarr	2	David Ojeda	16	J Bernard Sloan	23
Yong Seup Chung	2	Larry Pack	16	John Frederick	23
Sania Zainuddin	3	Gerald Natzke Jr	16	Myriam Edwards-Miller	23
Punam Sharman	4	Manulal Lala	17	John McIlduff	24
Manmeet Dhillon	4	Mona Hardas	17	Juanito Boado	24
Ayman Haidar	5	Shady Megala	17	Aram Minasian	24
Jolanta Sobotka-Czarnecki	6	Vishwas Vaniawala	18	Mostafa Abuzeid	25
JD Wheeler	7	Brenda Rogers-Grays	19	Daniel Anbe	26
Maurice Robitaille	9	Michael Macksood	19	Linda Hotchkiss	26
Daniel Walter	9	Jamal Farhan	19	Robert Joynt	27
Minoo Chinoy	9	A. George Dass	19	Stephen Wang	27
James Culver	10	Sara Pendleton	19	Gurkan Ege	27
Ranjan Monga	12	Chandler Veenhuis	19	Ali Mohammed	28
Barbara Mercer	14	Charles Thompson	20	Alan Hartz	29
		Dennis Pank	20	K V Mathew	30

NOVEMBER

CLASSIFIEDS

OFFICE SPACE AVAILABLE

Small office located by front door of Genesee County Medical Society suite. Great exposure for businesses seeking visibility with physicians. Conference room availability possible. Office size 100 sq. ft. at \$12 per sq. ft. triple-net. Additional office space available. Contact Pete Levine at (810) 733-9925 for details.

EMC SHIFTS AVAILABLE

for doctors wishing to work in urgent care setting. Call Joanne Pratt at (810) 516-2891.

FULL-TIME PHYSICIAN NEEDED

at the Emergency Medical Center of Flint Various shifts available for part-time, as well. Must be willing to do minor stitches, infants & children, splinting, and minor eye & ear procedures. This is a classic urgent care much like family practice. Hours of operation 9:30am – 9pm, 7 days a week, closed on major holidays Located at 2284 S. Ballenger Hwy., Suite 2, Flint, 48503 Contact Joanne Pratt, RN at 810-232-6101 or Pete Levine at 810-733-9925.

ATTENTION!!!

The new GCMS hours will be 8 a.m. to 4:30 p.m. Mon– Thurs
The GCMS offices will be closed on Fridays.

GCMS MEMBERS

If you are interested in having access to the "Members Only" section on the GCMS.org website please call or email your password to Sheree at sayres@gcms.org or call 733-9923. Thank you.



**MICHIGAN STATE
MEDICAL SOCIETY**
120 W. Saginaw, Lansing, MI 48823
msms@msms.org • www.msms.org
517-336-5762

**State and County Medical Society
Membership Application**

**GENESEE COUNTY
MEDICAL SOCIETY**
4438 Oak Bridge Dr., Suite B
Flint, MI 48532
810-733-9923



Please PRINT or TYPE

FULL NAME _____ MD or DO (Circle One)
Last First Middle Initial

HOME ADDRESS, CITY & ZIP _____
Area Code & Telephone Number

OFFICE ADDRESS, CITY & ZIP _____
Area Code & Telephone Number

PRACTICE NAME _____
Office Fax Number

EMAIL ADDRESS _____ For mailing, please use (check one): Office address Home address

BIOGRAPHICAL DATA Sex: Male Female Birth Place _____ Date of Birth _____
Month Day Year

Maiden Name _____ Spouse's Name _____

Languages Spoken _____

Government Service (check one): Military National Health Service Beginning Date _____ Completion Date _____

EDUCATION (please complete or attach CV)

INSTITUTION	LOCATION	DEGREE	YEAR GRADUATED	
			Beginning	Ending
College/University _____	_____	_____	_____	_____
Medical School _____	_____	_____	_____	_____

INTERNSHIP, RESIDENCY, AND FELLOWSHIPS	SPECIALTY	COMPLETION DATE
_____	_____	_____
_____	_____	_____

License: MI # _____ Date Issued _____ ECFMG # _____

License held in other states/countries (list states or countries) _____

PROFESSIONAL DATA

Present Type of Practice (check appropriately):

OFFICE BASED: Solo Hospital Based Teaching Research Government
 Group Practice Name _____ Other (specify) _____

Specialty(ies) _____

Board Certifications (list specialties & dates) _____

Present Hospital Appointments (list dates) _____

Practice History _____

Previous Medical Society Membership (list dates) _____

Specialty Society Memberships _____

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 GENESEE 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 _____



WHEN COMPLETED, please mail to MSMS or Genesee County Medical Society, or FAX to 517-336-5797. THANK YOU!