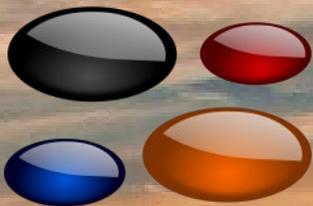


THE BULLETIN

JULY 2025 VOLUME 102 NUMBER 7



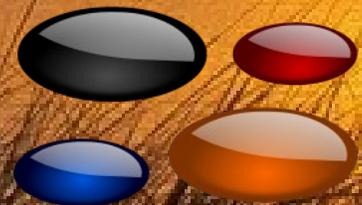
TOWN HALL

SEPTEMBER 17 TH 2025 MARK YOUR CALENDER

TOBACCO RETAIL LICENSURE: PROVEN TOOL TO
REDUCE YOUTH TOBACCO USE



*IMPORTANT GCMSA
INFORMATION INSIDE!!!!!!*



Organized Medicine's Leading Edge

*THE BULLETIN is published monthly by:
The Genesee County Medical Society*

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THE BULLETIN

FEATURE ARTICLES

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

Published by the Genesee County Medical Society Publication Office
4438 Oak Bridge Drive, Suite B, Flint, Michigan 48532
Phone (810) 733-9923

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GCMS Meetings

Recessed July and August

Practice Manager Meeting

September 11th, 2025

9:00A.M

Town Hall Meeting

September 17th 2025

6:00-8:30 P.M

(Details inside)

Board of Directors

September 23rd ,2025

6:00 P.M.

Legislative Meeting

October 6th

Medical Society Foundation Board Meeting

Announcement

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

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A MESSAGE FROM OUR PRESIDENT & EXECUTIVE DIRECTOR

Summers is a popular time for taking vacations and taking stock of the past half year. Rapid changes have happened on the federal level with the significant potential to impact the state level including decreased funding especially regarding Medicaid cuts. At the State level, the health policy committees, according to the MSMS Medigram, are reviewing a range of bills. include packages addressing barriers for those seeking care for opioid use disorder, and a bill that requires reporting a seizure episode with a Secretary of State. The House Health Policy Committee did not take up a bill that would allow unsupervised practice of medicine by nurse practitioners, House Bill 4399. Genesee County Medical Society GCMS, supports the Michigan State Medical Society's emphasis on the importance of position lead care teams. Physicians, nurse practitioners, physician's assistants, and other advanced practice providers, have all been grouped as providers of medical care, despite the very real difference in intensity and duration of training that physicians have over other providers. There is a risk that competency will suffer if there is no differentiation for physicians versus other providers. The Hattiesburg study published in the Journal of the Mississippi State Medical Association reported the results of 15 years of hiring more physician's assistant and nurse practitioners and other advanced practice providers in a large multispecialty facility with 300 physicians and concluded that replacing physicians led to increasing costs and did not meet the criteria for an equivalent value based experience.

From physician's perspective, this is a very likely outcome. For physicians, there are years of grueling training that is part of a typical residency program. After that there may be 1-4 additional years of training in a subspecialty. The typical subspecialty training for an advanced practice provider may be as little as 3 months, with the intensity being as low as just an online course. The problem is that short changing the knowledge base often leads to not knowing what you do not know. This may lead to incorrect diagnoses and ordering inappropriate tests. However, there is reasonable evidence that as part of a more comprehensive physician led team, quality and safety can be maintained. In my view, quality of care may deteriorate if advanced practice providers are operating with no supervision by physicians who generally possess a much larger and more rigorously tested knowledge base. At the GCMS quarterly legislative meetings that are held in conjunction with the Saginaw County medical Society, we I tried to emphasize to our legislators that making all providers equal would likely lead to deterioration of quality of care. Hospitals and other facilities would likely hire cheaper providers of care, keeping their sites on short-term profits and goals without considering the increasing cost of care long-term.

I would certainly urge all of our members who are able to attend our Virtual Legislative Meeting and bring up issues that are relevant to our practice in Genesee County. We have several law makers provide input and address our concerns. We also have a few meetings coming up that we believe will foster our ability to meet and discuss our concerns. Since we have the fortune of having the next President of the AMA, Bobby Mukkamala MD, as a member of GCMS, we are having a Meet the President of the AMA event on 9/17/25. The President's Ball, this time fostering a meeting with the GCMS President is scheduled for 11/22/25.

Physicians suffer from having our voice diluted in a number of ways including subspecialty societies. The AMA is recognized as an umbrella society, by less than 20% of doctors are paying members. Our inability to join together and focus on issues that matter have created problems for us. The Hospital lobbies have been able to keep their reimbursements ahead of inflation while physician reimbursements have declined relative to inflation. This in my view is due to not supporting our lobbies and politicians financially. We have funded poorly compared to hospitals or other provider organizations. In an era where practice costs have been increasing, we are facing decreased reimbursement at the Federal level. This has led to the decline of the independent practicing doctor. The ranks of employed physicians are increasing. Venture capitalists have formed large national practices that try to use economies of scale to manage declining reimbursement. However, profit driven venture capitalists may end up short changing medical care. In a time where leadership is critical, medical society membership is on the decline statewide and nationwide. GCMS is one of the few county societies that has not had a recent decline in membership. Our leadership for medical care is critical. Without physician leadership, medical care will suffer. This may be due to corporate medicine making short sighted financial decisions or legislators acting in the interests of others over physicians. As the most trained and educated providers in health care, we need to lead. We need to make sure our voices are heard. We also need to support our medical societies and politicians and encourage them to make the right choices for patients and their care.



DAVID HOFF, MA, CCP GCMS EXECUTIVE DIRECTOR



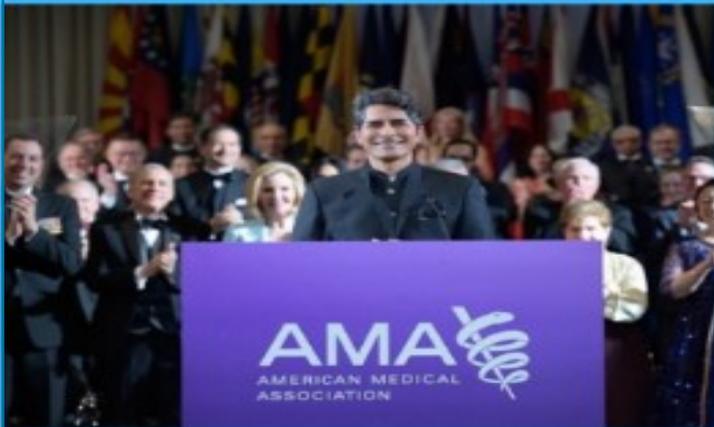
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**Genesee County Medical Society Proudly Presents:
A Town Hall Meeting
September 17, 2025
6:00pm - 8:30pm**

**“Come Meet The President of the AMA”
AMA President and Past GCMS President
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To make a positive difference in the lives of Genesee County residents by promoting healthy life styles and education through partnerships with GCMS and local community organizations, as well as providing a supportive network to medical families.



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- Provides supplies to the YWCA women's shelter
- Raises funds for Peace Day & scholarships
- Organize social events such as international luncheons, book clubs, friendship gatherings, and more!



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[The.Alliance.GCMSA](#)

Tobacco Retail Licensure: A Proven Tool To Reduce Youth Tobacco Use

IMPACT AREAS



Establish Tobacco
Retail Licensure



Eliminate Ineffective
Youth Penalties



Tax E-Cigarettes &
Vaping Products



Invest Funding to
Reduce Tobacco Use

Updated 5/19/25

Tobacco retail licensing (TRL) is an effective tobacco prevention measure that requires stores to obtain a state-issued license to sell tobacco products.

The Problem:

Michigan is one of only nine states that does not require tobacco retailers to have a state license. Without a state license requirement, Michigan cannot effectively enforce existing state laws including our current law prohibiting tobacco sales to minors. During the past three years, 26% of Michigan tobacco retailers failed federal compliance checks and sold tobacco products to an underage purchaser. 95% of youth who attempted to buy e-cigarettes were not turned away because of their age according to the most recent Michigan Youth Tobacco Survey.

Proposed Policy Change:

- Establish a tobacco retail licensing (TRL) program within Michigan's Department of Licensing and Regulatory Affairs (LARA).
- Require retailers to obtain a state-issued license to sell tobacco products, including e-cigarettes.
- Specify the process by which a retailer applies for, receives and maintains permission to sell tobacco products (e.g., annual renewal process, filing fees and the consequences of failing to meet these requirements).
- Set the initial licensing fee and the renewal fee that will help cover the cost of enforcement and administration.
- Set the penalties for violations, including a graduated system of penalties, starting with fines and escalating to license suspension or revocation for repeated offenses.
- Specify that LARA's enforcement actions include compliance checks.
- Stores are not required to obtain a tobacco license to sell smoking cessation products approved by the U.S. Food and Drug Administration.

The Facts:

- Michigan requires retailers to obtain a state-issued license to sell alcohol and marijuana but not tobacco products. Michigan is one of nine states that does not require tobacco retailers to obtain a state license.
- Research shows that strong TRL policies can decrease youth initiation and usage rates and reduce the sale of tobacco products to underage persons.

How We Match Up: Michigan is one of only nine states without TRL in place



Orange =
states without
TRL in place

Tobacco in this document refers specifically to commercial tobacco products that are made and sold by tobacco companies. It does not include traditional tobacco used by Indigenous groups for ceremonial purposes.

IMPACT AREAS



Establish Tobacco
Retail Licensing



Eliminate Ineffective
Youth Penalties



Tax E-Cigarettes &
Vaping Products



Invest Funding to
Reduce Tobacco Use

Updated 5/19/25

Repeal Ineffective Penalties on Youth for Purchasing, Using or Possessing Tobacco Products

For decades, the tobacco industry has targeted young people with highly addictive tobacco products including cigarettes, e-cigarettes, smokeless tobacco and nicotine pouches. To prevent youth initiation and reduce the overall harm of tobacco use, federal law and Michigan state law prohibit the sale of tobacco products to persons younger than 21 years of age (Tobacco 21).

The Problem:

The federal Tobacco 21 law holds retailers responsible for selling tobacco products to individuals under 21; however, Michigan state law targets youth and imposes penalties for the purchase, use or possession of tobacco products (“PUP” penalties).

Proposed Policy Change:

- Repeal provisions in the Youth Tobacco Act that impose civil and criminal penalties on minors for tobacco purchase, use or possession.
- Repealing Michigan PUP laws complements our tobacco retail licensing (TRL) policy proposal requiring retailers to obtain a license to sell tobacco products.
- Tobacco retailers and those benefiting financially from tobacco sales should be held accountable and bear the consequences – not minors.

The Facts:

- PUP laws are ineffective, counterproductive and criminalize youth behavior that is largely driven by tobacco and nicotine addiction. PUP penalties:
 - Shift the focus (and resources) away from the tobacco industry’s predatory tactics and instead place the burden on young people targeted by an industry that profits from their addiction.
 - Hinder cessation because young people fear punishment and conceal their tobacco addiction and desire for quitting help.
 - Are often enforced inequitably and can result in an increased likelihood of negative encounters with law enforcement.



Learn more at KeepMIKidsTobaccoFree.com

Tobacco in this document refers specifically to commercial tobacco products that are made and sold by tobacco companies. It does not include traditional tobacco used by Indigenous groups for ceremonial purposes.

IMPACT AREAS



Establish Tobacco
Retail Licensing



Eliminate Ineffective
Youth Penalties



Tax E-Cigarettes &
Vaping Products



Invest Funding to
Reduce Tobacco Use

Updated 5/19/25

Tax E-Cigarettes As Tobacco Products To Help Lower Youth Vaping Rates

The Problem:

While fewer kids smoke combustible cigarettes, tobacco companies continue to lure them in with sweet-flavored tobacco products, especially electronic cigarettes (“vapes”). Candy and fruit-flavored products have put a new generation of kids at risk of nicotine addiction and the serious health harms that result from tobacco use.

Today, more than one and a half million middle and high school students nationwide admit to using e-cigarettes or vapes even though it’s illegal for them to buy them. Youth e-cigarette use continues to be a significant public health problem for Michigan communities, schools and families. Michigan does not tax e-cigarettes as tobacco products. Increasing tobacco taxes, particularly taxing e-cigarettes as tobacco products, will reduce youth initiation and use.

Proposed Policy Change:

- Close the tax loophole on vapes. Establish an excise tax on e-cigarettes that is equivalent to the tax on combustible cigarettes and other tobacco products.
- Increase the tax on all tobacco products to prevent youth initiation, reduce health care costs, help current users quit and save lives.
- Dedicate a portion of the new revenue to tobacco prevention, cessation and enforcement.

The Facts:

- Research shows that increasing the price of tobacco products is one of the most effective ways to reduce and prevent tobacco use, particularly among youth.
- Michigan does not tax e-cigarettes as tobacco products. For example, Michigan-made Breeze Smoke, which is the second most popular brand reported by youth who use e-cigarettes, is currently untaxed.
- Currently, 34 states and DC have an excise tax on e-cigarettes like other tobacco products, including all of Michigan’s neighbors (Ohio, Wisconsin, Illinois and Indiana) and Canada.
- Reputable federal sources, including the 2016 Surgeon General’s Report on E-Cigarette Use Among Youth and Young Adults, have suggested the lower cost of some e-cigarettes as one of the factors that has contributed to high levels of youth use of e-cigarettes.

Learn more at KeepMIKidsTobaccoFree.com

Tobacco in this document refers specifically to commercial tobacco products that are made and sold by tobacco companies. It does not include traditional tobacco used by Indigenous groups for ceremonial purposes.

IMPACT AREAS



Establish Tobacco
Retail Licensing



Eliminate Ineffective
Youth Penalties



Tax E-Cigarettes &
Vaping Products



Invest Funding to
Reduce Tobacco Use

Updated 6/2/25

Invest in Tobacco Prevention: Reduce Youth Use. Lower Health Care Costs. Save Lives.

The Problem:

Commercial tobacco use remains the leading cause of preventable disease, disability and death in the United States and in Michigan. Tobacco product use in Michigan kills over 16,200 people and costs Michigan \$5.33 billion in health care costs and another \$11.3 billion in lost productivity costs each year.

In addition, new products like e-cigarettes and nicotine pouches are addicting a new generation of youth and threatening to reverse the progress the state has made in reducing tobacco use. Over 15% of Michigan high school students use e-cigarettes.

Despite this, Michigan spends less than \$5 million per year on tobacco prevention and cessation. This is just 4.2% of the CDC's recommendation, ranking Michigan 44th in the nation in tobacco control spending. Last year, Michigan received an additional \$2.3 million from CDC's Office on Smoking and Health, but these funds—which make up one-third of the funding for Michigan's tobacco control program—have been eliminated, making state funding more important than ever.

Proposed Policy Change:

- Increase state funding for youth prevention efforts, stop smoking services and create a tobacco retail licensing program.
- Allocate more funds from the state's general fund or dedicate funds from increasing the tax on all tobacco products, including e-cigarettes, to fund evidence-based prevention and cessation efforts.

The Facts:

- Comprehensive tobacco prevention and cessation programs are a proven method of preventing kids from starting to smoke, preventing e-cigarettes from addicting a new generation of kids and helping adults quit smoking.
- Research shows that for every \$1 spent on strong tobacco control programs, states can achieve up to \$55 return on investment, mostly in averted health care costs to treat smoking-related illness.
- Each year, the tobacco industry spends over \$300 million marketing its deadly products in Michigan. That means that for every dollar that Michigan spends on tobacco prevention, the tobacco industry is spending \$67 to market its products.
- Last year, Michigan received over \$900 million from state tobacco taxes and the 1998 tobacco settlement yet spent less than one percent of this revenue on programs to prevent kids from smoking and help smokers quit.

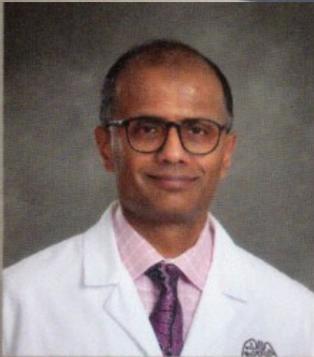
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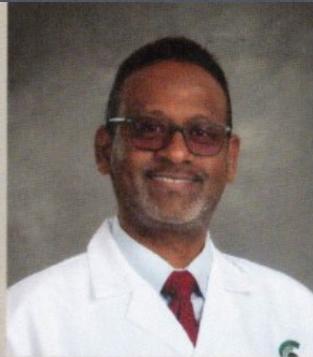
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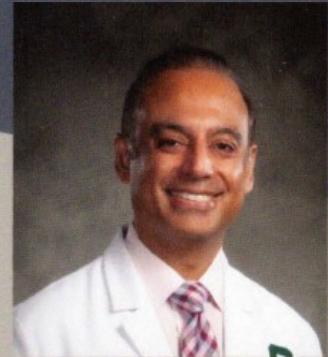
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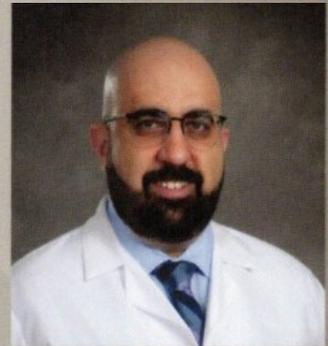
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2025 Genesee Health Plan Health Care Hall of Fame Dinner & Awards Ceremony

Thursday, August 7th, 2025

The Genesee Health Plan (GHP) awards dinner is an opportunity to recognize the individuals and organizations in Genesee County who have supported the Health Plan in providing health services to Genesee County residents, and vital community resources.



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From the **AMA** 

HEALTH DAY was 7/22/25

Fewer than one-third of U.S. public schools screen students for psychological problems

[HealthDay](#) (7/22, Thompson) reports research found that “fewer than one-third of American public schools are screening students for psychological problems, years after the U.S. Surgeon General declared a mental health crisis among the nation’s youth.” Investigators found that “by late 2024, just under 31% of principals surveyed said their school conducts screening for mental health issues.” Furthermore, “about 40% said it was difficult to ensure that students receive appropriate care if kids do speak up about feelings of anxiety or depression, results show.”

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**For information on sponsoring this years
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NOVEMBER 22ND, 2025
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2025 PRESIDENT'S BALL***

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Flint, MI 48507

Monday – Friday
8 A.M. – 5 P.M.

(810) 257-3740

TTY: (810) 232-6310

24 HOUR CRISIS LINE

7 days a week, 24 hours a day

(810) 257-3740

TTY: (810) 232-6310

CUSTOMER SERVICES

Monday – Friday 8 A.M. – 5 P.M.

(810) 257-3705

TTY: (810) 257-1346

**BEHAVIORAL HEALTH
URGENT CARE**

422 W. 4th Avenue • Flint, MI 48503

(810) 496-5500

TTY: (810) 232-6310

Walk-In Services:

7 days a week - extended hours

Video Chat Services:

7 days a week, 24 hours a day

Mobile Crisis Services:

7 days a week, 24 hours a day

www.genhs.org







3/4/2025

Important Update: MMR Vaccination Guidelines

We are deeply saddened by the recent death of a child in Texas due to measles, a disease that can be prevented through vaccination. This loss reminds us how important it is to protect our communities.

Texas is currently facing a measles outbreak with 146 confirmed cases as of February 28th. This situation is a stark reminder that measles is still a serious threat, even though it was thought to be eliminated in the U.S. in 2000.

Vaccines are our best defense against measles. The MMR vaccine, when given in two doses at the appropriate time, stops over 97% of measles infections. Our community is vulnerable, with an [81% MMR vaccination](#) rate which is significantly lower than recommended rate for community immunity. This makes it one of our most powerful tools to keep people healthy.

To help our healthcare teams respond to this situation, we are sharing an important update on vaccination guidelines. This information will help us better serve and protect our community during this challenging time.

MMR Vaccination Guidelines

Presumed Immunity and Vaccination Recommendations:

- Adults born before 1957 are generally presumed to have immunity to measles, mumps, and rubella.
- Healthcare workers should receive 2 doses of MMR vaccine.
- Certain medical conditions may require 2 doses of MMR as per CDC guidelines.
- The minimum spacing is 28 days.

Special Considerations:

- Adults vaccinated in the 1960s with an inactivated or unknown type of measles vaccine should receive at least one dose of MMR.

Current Childhood Immunization Schedule:

- One dose of the MMR vaccine is 93% protective against measles.
- There is currently no need to deviate from the current recommended childhood immunization schedule.
- Children can wait until age 4 for the second dose, especially given no evidence of transmission in our community.
- One dose will also help protect against severe disease if infected.

Early Vaccination for Infants:

- There is no need to start vaccination earlier than age 1 given the current state of the outbreak. We will notify you immediately if this recommendation changes.



- CDC recommends that infants >6 months and <12 years who are **traveling internationally** should receive a dose of MMR vaccine prior to travel.
- Given the current outbreak, we recommend this dose for infants **traveling** with their parents to **West Texas**.
- Any dose given before 12 months does **NOT** count toward the MMR series (0 dose).
- Children will still need two doses following the normal childhood immunizations schedule.

Contraindications:

MMR and other live vaccines should NOT be given to individuals with:

- Pregnancy
- HIV infection with CD4 count <15% or <200m
- Severe immunodeficiency (consult with healthcare provider)
- Certain immunosuppressant medications, including:
 - High-dose steroids (≥2 weeks of daily 20 mg or 2 mg/kg body weight of prednisone or equivalent)
 - Specific biologics (e.g., Humira)
 - Chemotherapy
- Recent receipt of antibody-containing blood products (within past 11 months)

Additional Resources:

- [Measles, Mumps, and Rubella \(MMR\) Vaccination | CDC](#)
- [Measles Preparedness Toolkit](#)

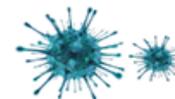
We will continue to monitor the situation closely and provide updates as necessary. For comprehensive information on contraindications and precautions, please consult our [immunizations team](#) or refer to official [CDC guidelines](#).

Sincerely,

A handwritten signature in black ink, appearing to read 'Michela Corsi'.

Michela Corsi, MD, MPH, MA
Medical Director, Genesee County Health Department

Measles Preparedness Toolkit



Genesee County Health Department created a measles preparedness toolkit. The health care providers guide to in-office testing and prevention guidelines include information regarding:

Toolkit Contents:

- Infection control and prevention
- Post-exposure prophylaxis
- How to report cases to the health department
- Tips for phone screening in your office
- Best practices for infection prevention
- Testing, procedures, and reporting assistance
- Sources/helpful links to fact sheets and more

Email jherman@geneseecountymi.gov to request an electronic toolkit, or download it directly from the Genesee County Health Department website using the link and QR code below.

Measles is a highly contagious, acute viral illness that begins with fever, cough, runny nose, and conjunctivitis lasting 2-4 days prior to rash onset. The rash typically occurs 3-5 days after symptoms begin and appears first on the face and spreads down the body.

The fact that 5.9% of school-aged children in Genesee County have vaccination waivers, coupled with 28% of eligible children being unvaccinated, puts us at risk of a measles outbreak.

Strongly recommend that eligible patients get vaccinated. If you don't offer vaccinations, advise them to make an appointment with the Genesee County Health Department or, for those over age 3, to visit their local pharmacy.

WEBSITE:

www.Genesee County Michigan

Contact Us

Genesee County Health Department:

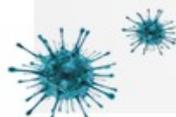
Communicable Disease Department

Phone: 810-257-1017

Fax: 810-257-3247

Email: GCHD-CD@geneseecountymi.gov

Scan the QR code for provider resources, the measles preparedness toolkit, and more



GENESEEE COUNTY
HEALTH DEPARTMENT

A graphic featuring a red, distressed rectangular sign with the word "ATTENTION" in white, bold, sans-serif capital letters. The sign is centered within a circular emblem that has a dark background and several small red stars around its perimeter.

ATTENTION

A bright yellow, multi-pointed starburst graphic with a jagged, sun-like edge.

9:00 A.M.

****Via
Zoom**

**ATTENTION: PRACTICE MANAGERS
AND OFFICE STAFF!**

**Genesee County Medical Society addresses issues of concern
for medical professionals!**

Please join GCMS and SOVITA in monthly meetings for
practice managers and office staff of *all member physicians*.

Please email executivedirector@gcms.org to RSVP,

YOU WILL RECEIVE A ZOOM INVITE

NEXT MEETING DATE:

September 11th, 2025— 9:00 A.M.

*You do not want your Practice Manager to miss out
on these valuable meetings!*

The logo for Sovita Credit Union. The word "Sovita" is written in a large, red, sans-serif font with a registered trademark symbol. Below it, the words "CREDIT UNION" are written in a smaller, gold, sans-serif font.

Sovita[®]
CREDIT UNION



DAVID HOFF
CEO

(810) 407-4921
hoffshealthybooks@gmail.com

hoffshealthybooks.com

Certified QuickBooks
Online ProAdvisor

- Provide bookkeeping and general ledger entry input for QuickBooks Online.
- Generate income reports as needed.
- Perform budgeting and fixed cost analysis.
- Offer payroll services.
- Provide QuickBooks Online set up and consulting.

Your Membership at Work

- ◆ GCMS hosts monthly Practice Manager's meeting discussing complicated insurance issues in round table discussions with various insurance companies. If you find on-going insurance issues, please reach out to GCMS staff at executivedirector@gcms.org and we can connect that insurance company representative with our hard working Practice Managers.
- ◆ GCMS staff helped Genesee County residents with contacts, resources and explanations.
- ◆ GCMS Membership Committee has collaborated and has a plan in place to reach out to and meet with various practices in Genesee County. If you have colleagues that are not yet GCMS members, please connect with them!
**** A flyer of GCMS benefits can be provided to you.



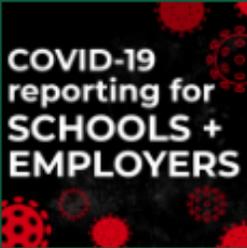
CLICK HERE

For Daily Genesee County Covid-19 Numbers

[Coronavirus \(COVID-19\) Data Dashboard for Genesee County](#)

CLICK HERE

For Reporting



EMPLOYERS + SCHOOL ADMINISTRATORS:

Do you need to report a laboratory-confirmed positive COVID-19 case?

Click the button to email the Communicable Disease team at GCHD-CD@gchd.us or call (810) 257-1017

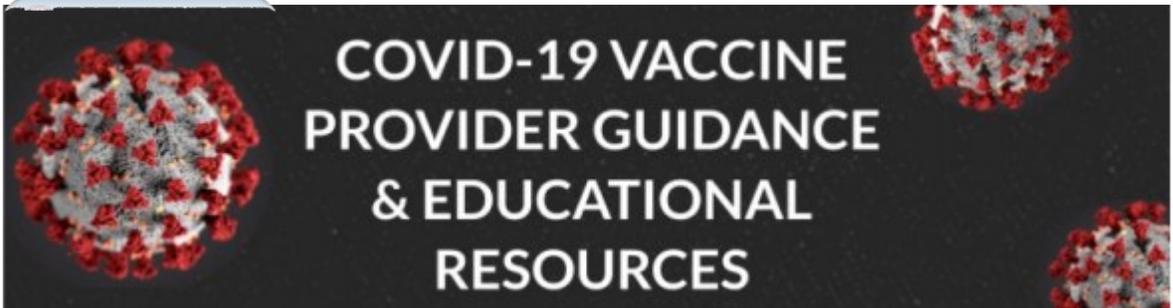
CLICK HERE

For State of Michigan Covid-19 Information





 [CLICK HERE](#)

A dark grey banner with the text "COVID-19 VACCINE PROVIDER GUIDANCE & EDUCATIONAL RESOURCES" in white, bold, sans-serif font. The banner is decorated with several 3D models of the COVID-19 virus particle, which are red and white spherical structures with protruding spikes.

COVID-19 VACCINE

The COVID-19 pandemic demonstrates how diseases without vaccines can devastate economic and public health. Vaccines have reduced and, in some cases, eliminated many diseases. In the U.S., there is currently no approved vaccine to prevent COVID-19. MDHHS is working with the CDC and Michigan stakeholders to prepare and plan for when the vaccine is available. The initial draft of our state's plan is now available and will be updated often in the coming months. Visit regularly for the most recent information on the COVID-19 vaccine and Michigan's preparations.

[COVID-19 VACCINE PLAN](#)

 [CLICK HERE](#)

[COVID-19 VACCINE RESOURCES](#)

[IMMUNIZATIONS DURING COVID-19](#)

[CDC FAQs](#)

[PROVIDER GUIDANCE & EDUCATION](#)

NEW BENEFIT
FOR
MEMBERS!

*GCMS can help YOUR PRACTICE
meet the ADA requirements
and provide impeccable services to your patients
at a DISCOUNTED price!*

GCMS is very pleased to announce a relationship with Luna Language Services. Luna offers a number of different virtual options to assist physician offices with language interpretation services. As an added benefit to your GCMS Membership, a discount is now offered to all GCMS members utilizing

Luna Virtual Language Services.

Please contact **David Hoff** Executive Director to register your office for discounted services.

*Genesee County Medical Society Members
receive a discount for language services!*



**Interpreting
Services**

- On-site Interpreting
- Virtual Interpreting
- Phone Interpreting
- Video Remote Interpreting (VRI)
- Conference & Event Interpreting

LUNA
Language
Services

To become a GCMS member,
or to receive details about
this discounted service

Please contact :

ExecutiveDirector@GCMS.org

Easy Ways to Donate to the Medical Society Foundation:

The Medical Society Foundation is engaged in a Capitol Campaign. The purpose of the Campaign is to grow the corpus to support the charitable activities of the Genesee County Medical Society. Those activities include public and community health, support for the underserved, and wellness initiatives.

To continue its good work, the Medical Society Foundation is asking you to consider leaving a legacy gift to the Foundation. If all, or even a significant portion of our membership left just a small part of our estates to the Foundation, the Foundation could continue helping this community in so many ways, by supporting the Medical Society.

To make a gift, simply use these words:

In your Trust, "Grantor directs Trustee to distribute ___% of all assets then held in Trust or later added to this Trust to the Medical Society Foundation, to be held in an endowed fund and used in the discretion of its then existing board of directors in furtherance of the purposes of the Foundation."

In your Will, "I give, devise and bequeath ___% of my Estate to the Medical Society Foundation, to be held in an endowed fund and used in the discretion of its then existing Board of Directors in furtherance of the purposes of the Foundation."

While this is not a subject that is comfortable to broach, it is an opportunity to support the Foundation which supports the Medical Society's charitable activities on behalf of the membership. Please give. You can give via a trust or will. You can give from your IRA. You can give appreciated stock, and you can give cash. Please support the organization which does so much on behalf of the medical community and the patients we serve.



Don't Forget!
Donations are tax deductible!

Please contact GCMS at 733-9923 or email executivedirector@gcms.org

MEDICAL SOCIETY FOUNDATION



Did you know that all donations made to the **Medical Society Foundation** are 100% Tax-deductible? If you are interested in donating, or if you have any further questions, please contact

executivedirector@gcms.org Thank you!





Do you have an advertising NEED?

- Are you a Physician **and** you are a member of GCMS and you have a new practice in Michigan?
- Do you have a medical practice **and** you are a member of GCMS and your office has relocated?
- Do you have a business that serves Michigan and business slow?

Let Genesee County Medical Society help!

Genesee County Medical Society Bulletin

(ONLINE MAGAZINE)

Your ad will be featured in the Genesee County Medical Society monthly bulletin that is provided to 1,500+ viewers. The Bulletin can also be found on the GCMS website, and is also published through Calameo virtual magazine. ([HTTPS://En.Calameo.com/](https://en.calameo.com/))

1/2-page ad \$195/month

3/4-page ad \$290/month

Full page ad \$350/month

A link to the business website or email can be added for **NO** additional fee.

[Click here](#)

to connect with GCMS, we can provide your advertising needs!



**all ads placed by Physicians or Medical Practices must have a GCMS membership.



safe haven™
CONFIDENTIAL SUPPORT

SAFEHAVEN™ PHYSICIAN AND PROVIDER WELL BEING PROGRAM

Rediscover meaning, joy, and purpose in medicine.

SafeHaven™ ensures that physicians and health care providers can seek confidential assistance and support for burnout, career fatigue, and mental health reasons.



In-the-moment telephonic support by a licensed counselor, 24/7



Legal and financial consultations and resources, available 24/7



Peer Coaching—talk with someone who has walked in your shoes that can help you grow both personally and professionally

- Six sessions per incident
- Physician or provider chooses coach from a panel of coaches



Counseling, available in either face-to-face or virtual sessions; addressing stress, relationships, eldercare, grief, and more

- Six sessions per incident
- Available to all extended family members



WorkLife Concierge, a virtual assistant to help with every day and special occasion tasks, 24/7



VITAL WorkLife App—Mobile access to resources, well being assessments, insights, and more

RESOURCES FOR YOU AND YOUR FAMILY MEMBERS

SafeHaven™ includes Well Being Resources from VITAL WorkLife—confidential and discreet resources designed to reduce stress and burnout, promote work/life integration and support well being for you and your family.

TO LEARN MORE, VISIT
www.MSMS.org/SafeHaven

To support the needs of physicians and health care providers struggling with stress, burnout, and the effects of COVID-19, the Michigan State Medical Society (MSMS) and VITAL WorkLife have partnered to offer a comprehensive set of well being resources and confidential counseling services for their use, SafeHaven™.





Commit to Fit provides nutrition, physical activity, and healthy food access programming throughout Flint and Genesee County with a focus on disadvantaged communities and a commitment to forging strong relationships with community-based organizations (CBOs) and residents. Its nutrition education combines the SNAP-Ed Fork and the Road and The Learning Kitchen interventions with the Cooking with Kids program, which demonstrates to residents of all ages how to eat healthily on a budget, how to incorporate produce unique to Michigan into their diets, and how small changes in what they eat can make huge differences in their health.

Resource Calendars



<https://gfhc.org/programs/c2f/>



**GREATER FLINT
HEALTH COALITION**

Mainstreaming Addiction Treatment Act/Medication Access and Training Expansion Act and Corresponding State Modifications

June 21, 2023

To all controlled substance licensees:

Most practitioners are now aware that Congress has passed the Mainstreaming Addiction Treatment (MAT) Act that removed the federal "DATA 2000" or "DATA-Waiver Program," and the Medication Access and Training Expansion (MATE) Act that established a one-time training on substance use disorder for practitioners who prescribe controlled substances when they obtain or renew their Drug Enforcement Administration (DEA) registration. In light of these changes, which are intended to educate practitioners and reduce barriers to obtaining medications for opioid use disorder (OUD) by eliminating burdens on providers who currently prescribe medications and new providers who wish to treat patients with OUD, the Bureau of Professional Licensing (BPL) would like to convey the following corresponding changes at the state level:

- The new DEA one-time 8-hour training requirement is effective June 27, 2023. Effective on this date, or the date on which the DEA requires the 8-hour training in the event the effective date is delayed, and until further notice, a practitioner required to attend a one-time opioid and controlled substances awareness training by the state's Controlled Substances Rules, may use the 8 hours of training that is accepted by the DEA for their controlled substances registration to also meet the state's required one-time training on opioids and other controlled substances awareness.
- In addition, R 338.3163 that limits prescribing, dispensing and administering a controlled substance to an individual with a substance use disorder will not be enforced by BPL until the rule is either modified or rescinded. This rule limited the circumstances under which a practitioner could treat an individual with substance use disorder, as well as the number of individuals that could be treated. All other laws and rules, both federal and state, must still be followed.

For more information about the elimination of the DATA-Waiver Program, and DEA's 8-hour substance disorder training, please refer to the following websites:

<https://www.samhsa.gov/medications-substance-use-disorders/removal-data-waiver-requirement>

https://www.deadiversion.usdoj.gov/pubs/docs/MATE_training.html

! [MATE Training Letter Final.pdf \(usdoj.gov\)](#)

Questions may be sent to : BPLHelp@michigan.gov.

Thank you,

Bureau of Professional Licensing
Licensing Division



CONNECT WITH US..

[Genesee County Medical Society \(GCMS\) | Flint MI | Facebook](#)



[Wix | LinkedIn](#)

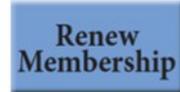


WWW.GCMS.ORG

Application Code:

State and County Medical Society MEMBERSHIP APPLICATION

Join MSMS and your County Medical Society online at www.joinmsms.org



- I am in my first year of practice post-residency.
- I am in my second year of practice post-residency.
- I am in my third year of practice post-residency.
- I have moved into Michigan; 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.
- I am a resident/fellow.

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 _____

Mobile: _____ Email Address _____

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, 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: _____

County Medical Society Use Only
Reviewed and Approved by: _____