

GENESEE COUNTY MEDICAL SOCIETY

Organized Medicine's Leading Edge

RMI leads the way, being the FIRST to bring 3D Mammography (Tomosynthesis) to Genesee County

RMI now offers 3D mammography (tomosynthesis)

The newest breast imaging technology is available for your patient's screening. Offered at our Lennon Road, Flint location.

About 3D mammography (tomosynthesis)

3D mammogram (tomosynthesis) is an optional mammogram service for patients at RMI. Although 2D mammograms are the common standard for women's breast imaging, 3D mammograms (tomosynthesis) may be a more applicable screening exam. As with mammograms, breast screenings should start at age 40 on an annual basis.

What is 3D mammography?

Like a 2D mammogram, a 3D mammogram (tomosynthesis) uses x-rays to image the breast. However, it takes a set of image "slices" at various angles to produce a 3D view. It is generally performed in addition to a 2D mammogram.

What makes 3D mammography (tomosynthesis) useful

- The detailed, thin slices of the breast produced by tomosynthesis allows for improved detection of problems within the breast.
- For women with dense breast tissue, detection rates are improved.
- The 3D view allows better determination of the size and shape of abnormal tissue.
- Reduced callbacks due to better reading.
- Not affected by hormone replacement or menstrual cycles.

Cost to the patient

Annual 2D mammograms are a covered benefit with insurances. Most insurance providers will cover 3D mammography (tomosynthesis), but for those that do not, or for patients without insurance, the additional cost for tomosynthesis is \$60 in addition to the standard fee for our UltimateMamm® (2D mammogram).

We also provide CESM (Contrast Enhanced Spectral Mammography) for patients who've had an inconclusive mammogram or abnormal ultrasound. Our radiologist will determine if CESM is recommended. CESM uses an injection of iodinized contrast (similar to CT) to highlight areas with suspicious lesions using subtracted imaging. The resulting image shows only where contrast has pooled, indicating areas that are potentially cancerous. CESM is especially useful for patients at high risk or who have dense breast tissue.

Click here to download a mobile flyer about CESM

Why RMI?

We see ourselves as your partner for your patient's healthcare, and our specialized radiologists are here to meet your needs. Our team of seven women's imaging specialists bring decades of experience and are trained in 3D mammography (tomosynthesis). Our newest member, Dr. Yilmaz, comes to us from the department of radiology at Karmanos Cancer Institute in Detroit, where she was medical director for breast imaging since 2016.

Click here to download a mobile flyer about 3D mammography (tomosynthesis)

For more information, visit rmipc.net/tomosynthesis



2/18

The Genesee County Medical Society.

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May 2018 Volume 95, Number 5



Read by 96% of GCMS members.

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Cover Photo: Glen Lake, Leelanau County by Peter Levine

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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THE BULLETIN are always welcome. Forward news extracts or material of interest to the staff before the 5th of the month. All statements or comments in THE BULLETIN are the statements or opinions of the writers and are not necessarily the opinion of the Genesee County Medical Society.

PRESIDENT'S MESSAGE

Why an Opioid Crisis?

On Jan. 11, 2018 President Trump declared a National Health Emergency regarding the Opioid crisis. Prior to this, the State of Michigan, realizing that this country and this administration had too long neglected action on rampant opioid addiction and deaths, enacted legislation of its own to begin the process of better protecting its citizens. The reasons are multiple and the need crucial. The death toll due to opioid abuse is staggering, with over 64,000 people dying in 2016 alone. The numbers reportedly have continued to escalate. To give some breadth to this statistic, the mortality rate is greater than all vehicle and gun-related deaths combined. To add to this, the CDC estimates that the total 'economic burden' of just the prescription opioid misuse was \$78.5 billion. Presently, prescription opioid drug deaths kill more Americans than any illegal drug. The problem has become unimaginable in magnitude. It has taken this country about thirty years to create this health crisis and now the question emerges, 'what has lead us to this sordid result and how fast can we correct it'?

One of the primary incitants of this crisis according to the National Institute of Drug Abuse is the pharmaceutical industry itself. Companies such as Purdue, Janssen, Mylan, Depomed, and Insys are considered the top five pharmaceutical companies accused of spending at least \$10 million apiece to encourage the use of addictive drugs per a US Senate Committee investigating drug company practices, chaired by Senator Claire McCaskill. In the late 1990's, big pharma was reassuring the medical community that patients would not become addicted to opioid pain relievers. This strategy fanned the flame of medical provider over-utilization and concomitant patient confidence in use of these pain medications. It didn't hurt that 'pill mills' popped up to make them easier and less expensive to obtain. The problem grew ever more rapidly.

Like many mental health disorders in this country, the physical causes of drug addiction are poorly understood. The Mayo Clinic states that environmental factors such as family and peer group attitudes as well



Gerald D. Natzke, DO, FAAEM, DIBEM

as genetic predilection contribute to its development. Early use in one's life is understood to also cause changes in a developing brain and increase its likelihood of progression.

Then there are the synthetic opioids such as fentanyl and heroin. These chemicals are easier to be abused when a person has used a prescription opioid prior. Heroin became inexpensive to obtain about the same time the scripted drugs were gaining popularity. In about 2014, Fentanyl entered the drug market in large supplies. It could be ordered even on the dark web often coming

from China or Mexico. It is an extremely potent drug requiring very small

amounts to produce desired effects. Coupled with near impossible specific chemical markers to indicate where the product was produced, Fentanyl became extremely challenging to detect. These two opioid forms are considered even more likely to heighten potential addiction resulting in greater death rates.

It is a daunting task to regulate the opioid industry's proper use. One of the most challenging reasons for this is that prescription opioid drugs are still very much needed—to control pain. So, this class of medication with all of its inherent pitfalls still is required during the necessary transition period to create healthier modalities. There is some encouraging work that is being done on other suitable and effective products and procedures that control pain and suffering as well, if not better then opioids. Until these are ready for mainstream use, the war on opioid abuse must be thoroughly engaged. Healthcare providers need to be fully cognizant of this issue. Burdensome as the new regulations may be, they offer a starting point for handling one of the most serious problems in the medical world today.

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The Genesee County Medical Society cordially invites you to a Quarterly Dinner Business Meeting

and a Medical Community Town Hall

sponsored by the United Way of Genesee County and the Greater Flint Health Coalition

May 3, 2018

Suboxone and Opioid Issues for Physicians and Health Care Professionals

There are many components to the opioid crisis. This session will provide input on Suboxone certification, how physicians and other health professionals fit into the opioid crisis, and what resources exist in Genesee County as part of an emerging community-wide strategy to address the opioid epidemic.

- \$40.00 GCMS Members, Spouses, Practice Managers, Staff, & Guests
- \$75.00 All Non-Member Physicians, Practice Managers, & Staff
- \$25.00 Residents & Students

GCMS Physicians, spouses, GCMSA, family members, practice staff and other interested professionals are encouraged to attend!

Chris Flores

VP for Business Development, Sacred **Heart Rehabilitation Center** An Introduction to the Opioid **Crisis in Genesee County**

S. Bobby Mukkamala. MD

GCMS Board Member The Current & Future Importance of Suboxone Certification

Asif Ishaque. MD

GCMS Board Member Physician Specific Prescribing Data & MiOpen Tools

Paul Musson, MD

Suboxone Certified Physician What to do with **Chronically Dependent Patients**

Aaron Rubio

Member of the FAN Board An Overview of Local Resources

Meeting Location

Flint Golf Club 3100 Lakewood Drive Flint, MI 48507

Evening Schedule

6 pm, Registration & Social Hour 6:30 pm, Dinner 7 pm, Meeting 7:15 pm, Presentations

Space is limited!

Please register by April 26, 2018

Please mail your reservation payment to:

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

Email Sherry at **ssmith@gcms.org** to register your attendance or call **810-733-9923** for more information.

Please invite your fellow physicians, practice managers, and health care professionals to this meeting!



News Release

U.S. Department of Health & Human Services

FOR IMMEDIATE RELEASE

Thursday, April 5, 2018

ASH Media Office 202-205-0143 ashmedia@hhs.gov www.hhs.gov/news

Surgeon General Releases Advisory on Naloxone, an Opioid Overdose-Reversing Drug

Urges more individuals to carry life-saving medication

Today, U.S. Surgeon General Jerome M. Adams, M.D., M.P.H., urged more Americans to carry a lifesaving medication that can reverse the effects of an opioid overdose.

The medication, naloxone, is already carried by many first responders, such as EMTs and police officers. The Surgeon General is now recommending that more individuals, including family, friends and those who are personally at risk for an opioid overdose, also keep the drug on hand.

An estimated 2.1 million people in the U.S. struggle with an opioid use disorder. Rates of opioid overdose deaths are rapidly increasing. Since 2010, the number of opioid overdose deaths has doubled from more than 21,000 to more than 42,000 in 2016, with the sharpest increase occurring among deaths related to illicitly made fentanyl and fentanyl analogs (synthetic opioids).

Opioids are a class of drugs that include medications, such as oxycodone, hydrocodone and methadone, which are commonly prescribed to treat pain. Pharmaceutical fentanyl is a synthetic opioid which is 50 times more potent than heroin and 100 times more potent than morphine. It is approved for treating severe pain, typically post-surgical or advanced cancer pain. However, most recent cases of fentanyl-related harms are a result of illicitly made fentanyl.

"Each day we lose 115 Americans to an opioid overdose – that's one person every 12.5 minutes," said Surgeon General Adams. "It is time to make sure more people have access to this lifesaving medication, because 77 percent of opioid overdose deaths occur outside of a medical setting and more than half occur at home."

Naloxone, an FDA-approved medication that can be delivered via nasal mist or injection, is not a long-term solution, but it can temporarily suspend the effects of the overdose until emergency responders arrive.

"To manage opioid addiction and prevent future overdoses, increased naloxone availability must occur in conjunction with expanded access to evidence-based treatment for opioid use disorder," the Surgeon General said.

All states have passed laws to increase access to naloxone and, in most states, you can walk into a pharmacy and request naloxone even if you don't already have a prescription. In addition, most states

have laws designed to protect health care professionals for prescribing and dispensing naloxone from civil and criminal liabilities as well as Good Samaritan laws to protect people who administer naloxone or call for help during an opioid overdose emergency.

Naloxone is covered by most insurance plans and, for those without coverage, may be available at low or no cost through local public health programs or through retailer and manufacturer discounts. It is easy to use, safe to administer and widely available.

Today's Surgeon General advisory on naloxone is part of the administration's ongoing effort to respond to the sharp increase among drug overdose deaths. Just last month, the Centers for Disease Control and Prevention released new data showing a rise in emergency department visits for opioid overdoses. From July 2016 through September 2017, opioid overdoses increased 30 percent in all parts of the U.S.

Expanding the use of the overdose-reversing drug naloxone is a key part of the public health response to the opioid crisis, along with effective prevention, treatment and recovery programs for opioid use disorder. Research shows a combination of medication, counseling and behavioral therapy, also known as Medication Assisted Treatment, or MAT, can help people achieve long-term recovery.

For more information on how to get help, call SAMHSA's National Helpline at 1-800-662-HELP (4357) or go to https://www.findtreatment.samhsa.gov to find a treatment center.

To learn more about how individuals can recognize and respond to an opioid overdose, visit www.surgeongeneral.gov to read more.



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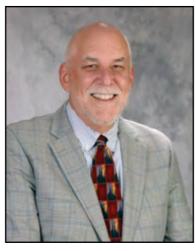


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EXECUTIVE DIRECTOR'S MESSAGE

GCMS Town Hall on Suboxone and the Opioid Crisis

The May 3 Town Hall on Suboxone and other issues of importance to physicians, will be packed with information. Topics will include: an overview of the opioid crisis specific to Genesee County, the types of data that is available relating to individual provider prescribing patterns of opioids. (You might be surprised by what other folks know about each physicians' prescribing patterns): The importance of becoming Suboxone certified, and an overview of community resources will also be covered. Community-based



Peter Levine, MPH

organizations will have resources to share, and MiOpen opioid prescribing guidelines will be available. So, come, participate and learn with your peers. Please bring your staff and your colleagues.

As we put this issue of The Bulletin to bed, your delegation to the MSMS House of Delegates will be spending the weekend working hard on your behalf. Their work shapes the future of the medical profession in Michigan. The June issue will feature a report on the House of Delegates. Stay tuned.

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Combatting the Opioid Epidemic: What You Need to Know as a Physician — Part Two

By Megan R. Mulder, Attorney, at Cline, Cline & Griffin

This article is a continuation of last month's article discussing new legislation regarding the prescription of opioids. The new legislation incorporated a number of bills, three of which will be discussed below. The first provision of the new legislation details steps for prescribing opioids to adults and minors. The second provision details when a physician is required to use Michigan Automated Prescription System (MAPS). The third provision details certain restrictions on the quantity of opioids that may be prescribed.

The first provision is House Bill 4408 (PA 246), which takes effect on June 1, 2018. House Bill 4408 details what must occur prior to a physician prescribing an opioid. This provision has slightly different rules for minors and adults. The pertinent parts are as follows:

When dealing with minor patients, prior to the first prescription of an opioid or other controlled substance, a physician must discuss the following:

- (1) risks of addiction and overdose:
- (2) increased risk of addiction for patients suffering from mental disorders and substance abuse disorders;
- (3) dangers of taking an opioid with a benzodiazepine, alcohol, or other central nervous system depressant; and
- (4) any other information contained in the controlled substance's patient counseling information section of the label.

Additionally, the minor's parent or guardian must sign a "start talking consent form" which should include the name, quantity, and number of refills of the opioid being prescribed, a

statement that the medication has a potential for abuse, and a statement certifying the physician has discussed the addictive nature of the substance with the minor patient and his/her parent/guardian. The consent form must be kept as part of the minor patient's medical record.

When dealing with adult patients, prior to the prescription of an opioid, the physician shall discuss the dangers of addiction, proper disposal of

unused medication, and that the delivery of a controlled substance is a felony. If the patient is a female in the reproductive stage, the physician must also discuss the short and long-term effects of exposing a fetus to a controlled substance. The adult patient must then sign a consent form indicating this information was discussed. The consent form must be a form prescribed by the Michigan Department of Health and Human Services. The Michigan Department of Health and Human Services should have a prescribed consent form posted to their website prior to June 1, 2018.

Notably, House Bill 4408 provides for several scenarios which will trigger an investigation by LARA. As such, there is a high probability that if consent forms are not utilized by physicians, and physicians do not discuss the addictive nature of opioids and other controlled substances, LARA will launch an investigation.

Also going into effect on June 1, 2018 is Senate Bill



166 (PA 248). This legislation not only requires physicians to register for MAPS, but also requires the physician run all patients through MAPS prior to prescribing more than a three day supply of an opioid or other controlled substance. If the prescription of the opioid or controlled substance is equal to or less than a three day supply, a physician does not need to run the patient through MAPS prior to writing the prescription. Further, consulting MAPS would not be required in a hospital setting. Senate Bill 167 (PA 249) lists grounds for disciplinary action and possible sanctions for violating the requirements of Senate Bill 166.

Another important provision of the new opioid legislation, Senate Bill 274 (PA 251), becomes effective on July 1, 2018. This bill limits the quantity of opioids which may be prescribed for patients suffering from acute pain. Acute pain is defined in PA 251 as: "pain that is the normal, psychological response to a noxious chemical or a thermal or mechanical stimulus and is typically associated with invasive procedures, trauma, and disease and usually lasts for a limited amount of time." If a patient is suffering from acute pain, the physician cannot prescribe more than a 7-day supply of an opioid to the patient within a 7-day period.

Prior to the newly enacted legislation surrounding opioid prescriptions, investigations by LARA had been consistently increasing. Given the above legislation, especially considering the fact that it specifically provides LARA with authority to investigate violations, it is very likely that LARA will continue to actively investigate the prescription of controlled substances, especially opioids. The full text of House Bill 4408, Senate Bills 166 and

Do you recognize this DOCTOR?



Look for the Answer inside!

167, and Senate Bill 274 can be found on the Michigan Legislature website.

If you have any questions or concerns regarding the information contained within this article, please contact the author, Megan R. Mulder of Cline, Cline & Griffin, P.C. at mmulder@ccglawyers.com or by calling the office at 810-232-3141

YOUR *\$\$\$* AT WORK

- GCMS continue to work with payers on issues of responsiveness, prior authorizations, and call center issues
- GCMS continues to work with MSMS to increase membership
- GCMS represents the physician community on the Regional Opioid Task Force
- GCMS prepared to provide the physician community with a special town hall on Suboxone and the Opioid Situation and What Physicians Can Do
- GCMS in coordination with MSMS continues to work with legislators on various bills which could impact physician practices

Issues of Serious Concern for Medical Practices!

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



The following topics are tentatively scheduled and subject to change

May 26, 2018 Presenter(s):

June 28, 2018 Presenter(s):

July 26, 2018 Presenter(s):

August 28, 2018Presenter(s):

"Molina Health Care Updates & Feedback"

Julie Hurst, Director Provider Contracting Services Molina Healthcare

"BCBSM Updates & Feedback"

Donna LaGosh, Director of Provider Outreach Blue Cross Blue Shield of Michigan

No Meeting

Enjoy your summer!

"Meridian Health Plan Updates & Feedback"

Jacqueline R. Kirejczyk, Director of Network Development Kristen Gasieski, Manager Network Development

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

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THE MORE THINGS CHANGE...THE MORE THEY STAY THE SAME

Russell Sandberg And His Old Buick

Submitted by Walter W. Theuerle, MD, Associate Editor, Original printing March 1973 Bulletin, page 58

A new 1932 Buick, purchased in that year would have cost between \$1,200 and \$1,500. Today the same car and reasonable condition sells for about \$1,000. Dr. Sandberg probably bought his 1932 Buick 14 years ago at the bargain price of \$650.

His Victoria Model Buick was manufactured in Flint and included to spare tires as original equipment colon one is mounted on the front fender, the other on the trunk. The engine developed 103 hp and gets 15 miles per gallon on regular gasoline.

A unique feature of this car is the adjustable shock absorber, operated by small lever inside the car, and which can make the cars ride soft or firm.

The car also has a special red button mounted on the clutch pedal. When the button is pushed, the clutch plates disengaged the gears without the clutch pedal having to be depressed. This idea was Forerunner to the present automatic transmission.

Dr. Sandberg's Buick is registered as a historical vehicle and must be licensed as an antique. His license plates were purchased in 1959 for \$13 and will never expire.

Even small repairs on such an old car pose special problems. After lengthy searching, Russell found some old AC tires on an old Chevrolet truck, which were perfect for his 1932 Buick.

Dr. Sandburg's' Buick showed over 93,000 miles on the odometer, when he acquired the car. Since then, he has driven his antique car and additional 5,000 miles.

Naturally, he drives the car only in good weather, and avoids mud, rain and salty winter roads. The body was repainted in 1955;



Russell Sandberg, MD

has very few flaws or rust spots, and is in better shape despite its 40 years, then many of today's cars after only three or four years of driving.

This car was originally a retirement gift presented to Mr. Strong, who retired in 1932 as manager of the Flint Buick plant.

Dr. Sandberg is a member of the Old Buicks Owner Association. At a recent meeting in Flint, the old Buicks were displayed on the parking lot of the Buick Administration Building. Members of this antique Club exhibit their automobiles throughout the country. Some of the

old Buicks are driven from as far away as California.

Antique automobile collecting, and restoration is not only an interesting and practical hobby, but you always have a spare tire in your garage.







HURLEY MEDICAL CENTER PEDIATRIC ONCOLOGY UNIT

Coordinated Care, Close to Home

was a 12-year-old girl living in Ontario, Canada with her father. Her parents were divorced and her mother moved to Pinconning, Michigan. KH was diagnosed with cerebellar Medullobastoma in 2011. She received her brain radiation at Victoria Children's Hospital and needed to start chemotherapy. It was agreed that her mother in Michigan could provide the most supportive care throughout her treatment so KH moved to Pinconning. She was registered on the Children's Oncology Group (COG) Protocol and that is how she came to be treated at Hurley Medical Center and counseled periodically by a child psychologist. KH received the same level of quality care much closer to her new home.

hurleychildrens.com



Blue Cross Blue Shield of Michigan Servicing Model Update and Focus Group

The March practice managers meeting featured a session on Blue Cross Blue Shield of Michigan Servicing Model Update and Focus Group. Present at the meeting were Donna LaGosh, the new Director of Provider Outreach, Blue Cross Blue Shield of Michigan (BCBSM), as well as BJ Byers and Tina Gach from the BCBSM Provider Outreach staff.

Pete Levine noted that Ms. LaGosh is an interesting choice for this position, because of her 20-year career representing physicians at the Michigan State Medical Society and the Oakland County Medical Society. He noted that she has also worked for Blue Cross for the past three years on their PGIP program.

Ms. LaGosh noted that she is very familiar with the problems of physician practices from the inside and will advocate for changes. She will be coming back on June 28 to hear feedback from practices regarding the new servicing model implementation, and to report on what changes have been made as a result of the concerns expressed at this meeting.

Donna noted that she is at this meeting looking for pain points between practices and Blue Cross Blue Shield and Blue Care Network. She also reviewed the reorganization of the Provider Outreach Department. She explained the framework of the new servicing model for Blue Cross and Blue Care Network. It is designed to be helpful in the long run, in terms of really making process is more provider friendly and results oriented. The new service model will begin in May and will be described in detail in the Blue Cross Focus, as well as other vehicles. Her goal is to get things fixed with accountable systems and to let physicians know how the problems have been fixed. There will be internal accountability.

The practices in attendance at this meeting were very diverse. The problems outlined were both practice specific and endemic. Ms. LaGosh received a variety of issues to respond to. The practice managers are looking forward to hearing her report in June.

The lineup of future meetings was radically altered at this session. A future session will involve reports from the Health Alliance Plan on Focus Group results and follow up on what's been accomplished. Other future sessions will revolve around the Medicaid drug formulary, updates from Molina Healthcare and Meridian Health Plan. Dates for the future meetings will be emailed out as they are scheduled.













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Greater Flint Health Coalition Social Determinants of Health Standardized Screening Efforts



The Greater Flint Health Coalition (GFHC) is one of five organizations chosen by the Michigan Department of Health and Human Services (MDHHS) to lead the implementation of the State Innovation Model (SIM) within their community. The SIM initiative focuses on the development and testing of multi-payer healthcare payment and service delivery models in order to achieve better care coordination, lower costs, and improve health outcomes for Michigan residents. As the backbone organization for the Genesee Community Health Innovation Region (CHIR), the GFHC is working to leverage cross-sector partnerships that address population health and connect patients with relevant community and social services that address the social determinants of health (SDoH).

Development of a Standard Social Determinants of Health Screening Tool

According to the Robert Wood Johnson Foundation's County Health Rankings initiative, approximately 80% of the factors affecting health outcomes fall outside traditional healthcare delivery, such as health behaviors, social & economic factors, and environmental factors. The GFHC's SIM Steering Committee determined that one of the initial steps in addressing this issue was to develop a standardized process for screening patients in Genesee County to identify their individual SDoH needs and begin to address more upstream factors of individual health outcomes.

As a result, the Genesee CHIR "Health Needs Screening Tool" was developed. The screening tool utilizes an evidence-based strategy to assess and engage residents sourced from materials provided by Health Leads while incorporating local input from area residents on the factors impacting their health. Patients are asked questions related to the domains of food, utilities, housing, child care, healthcare access and cost, transportation, literacy, safety, substance use, depression, and clean water access.

Implementation within Genesee County Physician Practices

The screening tool has been adopted and is currently being administered by 27 physician practices, encompassing a total of 94 individual providers, in Genesee County and has been incorporated into practice workflows. As a result of screening efforts by physicians, practice embedded care managers, and community health workers, over 4,000 individual patients in Genesee County have been screened to date. Information gathered from screens allows physicians to gain a clearer picture of the patient's health status as well as guide care coordination activities in the practice setting and direct the strategy of the SIM Clinical Community Linkage Initiative in how to most effectively connect individuals to necessary resources.

Additionally, through a partnership with Great Lakes Health Connect, all screening results are submitted to a community data repository where they are aggregated into monthly reports. Insights gathered from this unique collection of data on Genesee County residents informs the SIM Project through identifying areas of greatest need in our community as well as gaps in resources and barriers to access.

The physician partner organizations that are involved in this project include Professional Medical Corporation, McLaren Physician Partners, and the Genesee Community Health Center. For more information regarding the State Innovation Model work in Genesee County, or how your practice can get involved, please contact Lori Kunkel, Vice President of Programs, Greater Flint Health Coalition by email at lkunkel@flint.org

In future issues of *The Bulletin*, look for more detailed information on SIM activities and tools within the Flint and Genesee County region. Also, visit www.gfhc.org, for more information.

SIM-4 GCMS.Article.SDOH.032718.BM

Genesee Community Health Innovation Region Health Needs Screening Tool

Name: Today's Date:				
Address:	Phone Number:ldress:			
Date of Birth:		te of Birth: Gender	:	
_	Rad	ce/Ethnicity:		
Physician	n/Provider: He	Health Insurance:		
Preferred	Language:	Medicaid Commerc	cial Medicare	
			YES / NO	
Š	In the last 12 months, did you ever eat less than you there wasn't enough money for food?	ı felt you should because	YN	
	In the last 12 months, has your utility company shu ffor not paying your bills?	t off your service	Y	
	Are you worried that in the next 2 months, you may n	ot have stable housing?	Y	
<u></u>	Do problems getting child care make it difficult for study? (leave blank if you do not have children)	you to work or	Y	
\$	In the last 12 months, have you needed to see a doc of cost?	ctor, but could not because	Y	
	In the last 12 months, has lack of transportation kep Has it kept you from meetings, work or getting things n		Y N	
	Do you ever need help reading information from yo	our doctor?	Y	
4	Are you afraid you might be hurt in your apartment	building or house?	Y	
	Are you interested in information on alcohol and/or d prescription drugs)?	rug misuse (including	Y	
1	Have you felt sad or depressed much of the time in t	the past year?	Y	
\Diamond	Do you need help with access to clean water, or have water since April 2014?	ve you used Flint	YN	
	If you checked YES to any boxes above, would you lik with any of these needs?	ce to receive assistance	Y	
	Are any of your needs urgent? For example: I don't have food tonight, I don't have a p	place to sleep tonight	Y	

This screening tool has been sourced from materials provided by Health Leads.

Declined to answer screen.

The Genesee County Medical Society cordially invites you to a Quarterly Dinner Business Meeting

and a Medical Community Town Hall

sponsored by the United Way of Genesee County and the Greater Flint Health Coalition

May 3, 2018

Suboxone and Opioid Issues for Physicians and Health Care Professionals

There are many components to the opioid crisis. This session will provide input on Suboxone certification, how physicians and other health professionals fit into the opioid crisis, and what resources exist in Genesee County as part of an emerging community-wide strategy to address the opioid epidemic.

- \$40.00 GCMS Members, Spouses, Practice Managers, Staff, & Guests
- \$75.00 All Non-Member Physicians, Practice Managers, & Staff
- \$25.00 Residents & Students

GCMS Physicians, spouses, GCMSA, family members, practice staff and other interested professionals are encouraged to attend!

Chris Flores

VP for Business Development, Sacred **Heart Rehabilitation Center** An Introduction to the Opioid **Crisis in Genesee County**

S. Bobby Mukkamala. MD

GCMS Board Member The Current & Future Importance of Suboxone Certification

Asif Ishaque. MD

GCMS Board Member Physician Specific Prescribing Data & MiOpen Tools

Paul Musson, MD

Suboxone Certified Physician What to do with **Chronically Dependent Patients**

Aaron Rubio

Member of the FAN Board An Overview of Local Resources

Meeting Location

Flint Golf Club 3100 Lakewood Drive Flint, MI 48507

Evening Schedule

6 pm, Registration & Social Hour 6:30 pm, Dinner 7 pm, Meeting 7:15 pm, Presentations

Space is limited!

Please register by April 26, 2018

Please mail your reservation payment to:

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

Email Sherry at **ssmith@gcms.org** to register your attendance or call **810-733-9923** for more information.

Please invite your fellow physicians, practice managers, and health care professionals to this meeting!

20

Did you recognize... Rabbi Salimi, MD



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Custom designed physician office. Available for rent or purchase in Stone Bridge office complex off Linden Rd. across from Genesee County Medical Society. New roof and heating/cooling.

Contact 810-610-0965

AUTOCLAVE NEEDED

by not-for-profit urgent care center. Please contact Brenda at bcraft@gcms.org or call (810) 232-2710.

PHYSICIANS 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 Mon, Wed: 10am-9pm, Tue, Thur, Fri, Sat: 12pm-9pm, closed on major holidays Located at 2284 S. Ballenger Hwy., Suite 2, Flint, 48503.

Contact Pete Levine at 810-733-9925.

Check Out Our Website www.gcms.org

LETTER TO THE EDITOR

Editor - The Bulletin,

I am writing to thank the Genesee County Medical Society for its support and commitment to help physicians connect with payers when claim related denials arise. The monthly GCMS Practice Managers Meetings are invaluable when payers are presenters. I really appreciate Pete's recent personal involvement in connecting me with a local payer when I needed help resolving a payment issue.

Thanks again for all your effort helping our medical practices. We are truly grateful for your support and willingness to get involved

Best regards, Jacqueline Boskovich Business Administrator Michigan Retina-Vitreous Institute

Announcement

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

For details, contact:

POTTER & ROOSE INSURANCE

810-767-8590

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

906 Mott Foundation Bld., Flint MI 48502





HAPPY BIRTHDAY DOCTOR

Mustafa Akpinar, MD	16
Babatunde Almaroof, MD	16
Michael Danic, DO	16
Gerald Fulton, MD	17
Alicia Franco-Imperial, MD	18
Crumsan Nundkumar, MD	18
Christopher Tykocki, DO	18
Matthew McKenna, MD	18
Paul Adams, MD	19
James Walter, MD	19
Michael Giacalone, Jr., MD	24
Manisha Naran-Kia, DO	26
Virgilio Bonet, MD	29
Barry DeWitt, MD	29
James Aills, MD	30
Ashweena Gonuguntla, MD	30
Sami Khan, MD	30
Nestor Tomycz, MD	31
Caroline Mathew, MD	
	Babatunde Almaroof, MD Michael Danic, DO Gerald Fulton, MD Alicia Franco-Imperial, MD Crumsan Nundkumar, MD Christopher Tykocki, DO Matthew McKenna, MD Paul Adams, MD James Walter, MD Michael Giacalone, Jr., MD Manisha Naran-Kia, DO Virgilio Bonet, MD Barry DeWitt, MD James Aills, MD Ashweena Gonuguntla, MD Sami Khan, MD Nestor Tomycz, MD

and Healthcare!

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Our members provide high quality educational services and exceptional healthcare to our community. We help them keep more of their hard earned money! As a member of FASECU you can expect:

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- Access to a nationwide network of 30,000 surcharge free ATMs.
- Online banking and mobile banking (app for smartphone and tablet).
- Business accounts and business lending.

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Call a Member Services Representative at: (800) 369-2786, (810) 720-8300 or (810) 664-5351

Open your account online at: www.fasecu.org

Visit one of our offices:

Main Office 4411 Calkins Rd. Flint, MI 48532

Branch Office 5399 E. Court St. N. Burton, MI 48509

Branch Office 1005 University Ave. Flint, MI 48504



3400 Regency Park Dr. Grand Blanc, MI 48439

Branch Office 168 N. Saginaw St. Lapeer, MI 48446





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GCMS MEETINGS — May 2018 —

Suboxone and Opioid Issues for Physicians and Health Care Professionals

> GCMS Town Hall, 5/3 6:00pm, Flint Golf Club

Legislative Liaison Committee, 5/7 8:00am, GCMS Office

Community & Environmental Health Committee, TBD

12:30pm, GCMS Office

Finance Committee, 5/22 5:15pm, GCMS Office

Board of Directors, 5/22 6:00pm, GCMS Office

Practice Managers, 5/24 8:00am, GCMS Office

2017 Ball Committee, 5/24 3:30pm, GCMS Office



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Wachler & Associates represents healthcare providers, suppliers, and other individuals in Michigan and nationally in all areas of health care law, including:

- Provider Contracting
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- Billing and Reimbursement
- Stark Law, Anti-Kickback Statute, and Fraud & Abuse Compliance
- Licensure, Staff Privilege and Credentialing
- Physician and Physician Group Issues
- Corporate and Transactional Matters
- Regulatory Compliance
- Healthcare Litigation
- Healthcare Investigations
- Fraud and False Claims Defense
- Provider Participation/ Termination Matters
- HIPAA and HITECH Compliance



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May 2018 Fitness Calendar FREE! Commit to Fit! Class Schedule



Commit to Fit offers fitness classes at no cost to all individuals who live or work in Flint and Genesee County. Fitness Centers require participants to be age 18 and older, other locations are open to all ages. See back side for details. Click HERE to Access the Nutrition Education & Resources Calendar

	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SAT
MARCH 2018	Finhance Fitness Hasselbring Senior Center 9:00 a.m. Senior Stretch YMCA Downtown 10am Pound GAC 10:15am Aqua Fitness U of M-Flint Rec 5:30-6:30 pm	Enhance Fitness Flint Farmers' Market 10:00 a.m. Arthritis Foundation Exercise Program Grand Blanc Senior Center 10:00-11:00am Splash Bash U of M-Flint Rec 11:00 am Enhance Fitness Flint Farmers' Market 10:00 a.m. Arthritis Foundation Exercise Program Grand Blanc Senior Center 10:00-11:00am Splash Bash U of M-Flint Rec 11:00 am	Enhance Fitness Hasselbring Senior Center 9:00 a.m. Arthritis Foundation Exercise Program Forest Township Senior Center 12:30–1:30pm Community Yoga 5:15 PM - 6:15 PM Crim Fitness Foundation Enhance Fitness Hamilton Main Clinic 5:30 pm Zumba GAC 5:30 p.m Penhance Fitness Hasselbring Senior Center 9:00 a.m. Arthritis Foundation Exercise Program Forest Township Senior Center 12:30–1:30pm Community Yoga 5:15 PM - 6:15 PM Crim Fitness Foundation Enhance Fitness Hamilton Main Clinic 5:30 pm Zumba GAC 5:30 p.m.	Enhance Fitness Flint Farmers' Market 10:00 a.m. Arthritis Foundation Exercise Program Grand Blanc Senior Center 10-11:00am Basic Yoga IHFC 6:45 p.m. Enhance Fitness Flint Farmers' Market 10:00 a.m. Arthritis Foundation Exercise Program Grand Blanc Senior Center 10-11:00am Basic Yoga IHFC 6:45 p.m.	Enhance Fitness Hasselbring Senior Center 9:00 a.m. Arthritis Foundation Exercise Program Swartz Creek Senior Center 11am-12pm 11 Enhance Fitness Hasselbring Senior Center 9:00 a.m. Arthritis Foundation Exercise Program Swartz Creek Senior Center 11am-12pm	12
	Hasselbring Senior Center 9:00 a.m. Senior Stretch YMCA Downtown 10:00 a.m. Pound GAC 10:15am Aqua Fitness U of M-Flint 5:30pm	Enhance Fitness Flint Farmers' Market 10:00 a.m. Arthritis Foundation Exercise Program Grand Blanc Senior Center 10:00-11:00am Splash Bash U of M-Flint Rec 11:00 am	Enhance Fitness Hasselbring Senior Center 9:00 a.m. Arthritis Foundation Exercise Program Forest Township Senior Center 12:30– 1:30pm Zumba (Beginner) GAC 5:30 p.m. Enhance Fitness Hamilton Main Clinic 5:30 pm	Enhance Fitness Flint Farmers' Market 10:00 a.m. Arthritis Foundation Exercise Program Grand Blanc Senior Center 10:00-11:00am Basic Yoga IHFC 6:45 p.m.	Enhance Fitness Hasselbring Senior Center 9:00 a.m. Arthritis Foundation Exercise Program Swartz Creek Senior Center 11am-12pm	19

MIC-6C3 Mayl.Fitness.Class.Calendar.040418.TW

May 2018 Fitness Calendar

FREE! Commit to Fit! Class Schedule

		TELL COMMITTEE		0=	
Enhance Fitness Hasselbring Senior Center 9:00 am Senior Stretch YMCA Downtown 10:00 Pound GAC 10:15am Aqua Fitness U of M-Flint 5:30pm	Enhance Fitness Flint Farmers' Market 10:00 a.m. Arthritis Foundation Exercise Program Grand Blanc Senior Center 10:00-11:00am Splash Bash U of M-Flint Rec 11:00 am	Enhance Fitness Hasselbring Senior Center 9:00 a.m. Arthritis Foundation Exercise Program Forest Township Senior Center 12:30–1:30pm Zumba (Beginner) GAC 5:30 p.m. Enhance Fitness Hamilton Main Clinic	Enhance Fitness Flint Farmers' Market 10:00 a.m. Arthritis Foundation Exercise Program Grand Blanc Senior Center 10:00-11:00am Basic Yoga IHFC 6:45 p.m.	Enhance Fitness Hasselbring Senior Center 9:00 a.m. Arthritis Foundation Exercise Program Swartz Creek Senior Center 11am-12pm	26
28 Enhance Fitness Hasselbring Senior Center 9:00 am Senior Stretch YMCA Downtown 10:00 Pound GAC 10:15am Aqua Fitness U of M-Flint 5:30pm	Enhance Fitness Flint Farmers' Market 10:00 a.m. Arthritis Foundation Exercise Program Grand Blanc Senior Center 10:00-11:00am Splash Bash U of M-Flint Rec 11:00 am	Arthritis Foundation Exercise Program Forest Township Senior Center 12:30–1:30pm Community Yoga 5:15 PM - 6:15 PM Crim Fitness Foundation Enhance Fitness Hamilton Main Clinic 5:30 pm Zumba GAC 5:30 p.m	Basic Yoga IHFC 6:45 p.m.		



May 2018 Fitness Calendar

FREE! Commit to Fit! Class Schedule

Class Descriptions & Locations

Basic Yoqa (1 hour)

This class is a balanced flow of postures designed to build stamina, strength, and flexibility while promoting weight loss and general stress relief.

Insight Health & Fitness Center (IHFC)

Formerly Hurley Health & Fitness Center

4500 S. Saginaw St Flint. MI 48507 (810) 893-6489



Community Yoga (1 hour) – This is a yoga class for all levels. Please wear comfortable and loose-fitting clothing. Some yoga mats will be available to borrow as well

Mindfulness@crim.org (810)-235-7461



Crim Fitness Foundation

452 Saginaw Street Downtown Flint

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

YMCA Downtown Flint

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



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

POUND® transforms drumming into an incredibly effective way of working out. Instead of listening to music, you become the music in this exhilarating full-body workout that combines cardio, conditioning, and strength training.

Genesys Athletic Club (GAC)

801 Health Park Blvd Grand Blanc, MI 48439 (810) 606-7300





Aquafitness/Splash Bash- An invigorating water workout. Ideal for all fitness levels. No swimming required

University of Michigan-Flint Rec Center

401 Mill Street, Flint, MI 48502 (810) 762-3441



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

TIMES & LOCATIONS:

Hasselbring Senior Center

1002 Home Ave. Flint, MI (810) 766-7128 Mon, Weds, & Fri 9-10 am

Flint Farmers' Market- Tuesdays & Thursdays 10:00-11:00 am 300 E. First St Flint, MI (810) 232-1399



North Pointe Clinic - Demonstration site

5710 Clio Road

Flint. MI 48504

Tuesdays starting February 13, 5:30 - 6:30pm

Main Clinic

2900 N. Saginaw Street Flint. MI 48505

Wednesdays starting February 14, 5:30 - 6:30pm

Genesee County Parks and Rec

Visit the calendar at: http://geneseecountyparks.org/ to learn more about fun family events in Genesee County Parks! GENESEE COUNTY PARKS

of-motion exercises that are suitable for every fitness

Arthritis Foundation Exercise Program (1 hour) A lowimpact physical activity program proven to reduce pain and decrease stiffness. The routines include gentle range-

Grand Blanc Senior Center:

Tuesday & Thursdays 10am - 11am

Swartz Creek Senior Center:

Fridays 11am – 12pm

level!



Get away. Right away.

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.

Please feel free to contact Peter Levine, Executive Director at 810-733-9925 or plevine@gcms.org.



Genesee County Medical Society **Board of Directors** January 23, 2017- Minutes

I. Call to Order

The meeting was called to order in the Rapport Conference Room at 6:00 pm, by Gerald Natzke, DO, President.

II. Review of Minutes

Motion: that the minutes of November 28, 2017, Board of Directors meeting be approved as presented. The motion carried.

III. Reports

A) Community & Environmental Health

1) Flint Adult Chelation Trial (FACT) Update

Dr. Natzke reported that the GCMS Community & Environmental Health Committee is looking for funds. The study may have to rely on a very small pilot to get funds flowing.

2) Resolution Regarding Closing Lead and Copper Rules Loop Holes Relating to Schools

Motion: that the resolution regarding Closing Lead and Copper Rules Loop Holes Relating to Schools be approved with the following edits -

In the second resolved, the word regulation is replaced by federal guidelines in the third result, the word rules is replaced by the word guidelines.

Once changes are made, the resolution is to be sent to MSMS

The motion carried.

3) 3/29/17 Press Release re. GCMS Flint Water Recommendations

Motion: that recommendations to update the GCMS March 29, 2017, Press Release on Flint Water be approved as presented. The motion carried.

B) Finance

Motion: that the budget to actual report for the period ending December 31, 2017, be approved as presented. The motion carried.

C) Membership

Levine reviewed the updated trend report for the period ending January 4, 2018. Discussion ensued regarding resident members. Drs. Hebert and Blight agreed to revisit the membership issue for residents at Hurley Medical Center. Dr. Khan suggested re-engagement with the physician organizations.

D) AMA Update

Dr. S. Bobby Mukkamala reported on a study that describes economic impact of physicians in the overall United States economy. \$2.3 trillion Is the estimated total dollars attributable to physicians. He also reported that there are two mega insurance mergers that the American Medical Association opposed, and both mergers were blocked. AMA is also working on streamlining prior authorization.

E) MSMS Update

Drs. Waters and Mukkamala reported that MSMS is pursuing a new legislative director. MSMS is still envisioning restructuring of the states' relationship with county's. An update will be provided at the House of Delegates.

F) House of Delegates

- 1. Drafted Resolutions
- A. Concierge-Based Medicine Practices

30

Genesee County Medical Society Board of Directors November 28, 2017- Minutes

Motion: that the Concierge-Based Medicine Practices resolution be approved as presented with Dr. Blight being listed as the introducer and the author. The motion carried.

B. rev. Resolution entitled Facilitate Transfer of 3rd and 4th Yr. Student Memberships

Motion: that the resolution regarding facilitation of transfer of third and fourth-year student memberships be approved as amended. The motion carried.

VII. Legislative Liaison

On behalf of Dr. Blight, Dr. Duncan reviewed the January Legislative Liaison Committee meeting discussions which covered areas including the MAPS issues, no-fault auto reform, maintenance of certification, and opioid diversion.

VIII. Greater Flint Health Coalition

1. GFHC Board of Directors

Drs. Reynolds and Waters reviewed the recent activities of the Board of Directors of the Health Coalition which included discussions of the State Innovation Model, the Children's Health Access Project, and other initiatives.

2. State Innovation Model Update

Dr. Farhan Khan provided an update on the status of State Innovation Model project. He noted that case management is embedded in practices. McLaren, Genesee Health System, and PMC are actively engaged. The focus is on high ED utilizers. He said one of the keys is performance of a health-needs assessment by practices. This is a very helpful tool. In addition, an electronic referral-monitoring system is in place, which allows practices to make referrals and check the efficacy of those referrals to medical and social service agencies. Dealing with the social determinants of health are absolutely critical to the success of this project, to bend the cost curve on high resource utilizers of the Emergency Department.

3. Community Opioid Plan and Analysis of Data

Dr. Natzke reported that the Greater Flint Health Coalition Mental Health and Substance Abuse Task Force has accessed CMS data relating to opioid prescribing practices by provider. The desirable outcome is to create positive changes in patterns of practice.

Dr. Natzke reported that he has asked Drs. Farhan Khan, Asif Ishaque, Edward Christy, Raymond Rudoni, and Deborah Duncan to serve on that special Task Force.

Discussion ensued regarding the need to develop a program to get physician certified for Suboxone. There was discussion of holding a GCMS Town Hall on the issue of expanding Suboxone certification. Staff was directed to work with Drs. Mukkamala and Natzke on developing a meeting on the Suboxone issue.

IX. Other Business

1. Genesee Health Plan Millage Steering Committee

Consensus: that Peter Levine is to serve on the Genesee Health Plan Millage Steering Committee.

Adjournment

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

Respectfully submitted,

Peter Levine, MPH

Executive Director



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 – really means to you.

The Medical Society Foundation funds have been used to support the charitable activities of the Genesee County Medical Society.

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

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.

Mail your donations to:

Medical Society Foundation 4438 Oak Bridge Drive, Suite B Flint, MI 48532-5467

