

THE Bulletin

MARCH 2011 Volume 87, Number 3

**GCMS MEMBERS
ON MSMS COMMITTEES**

**PROPOSED BYLAWS
REVISIONS**

**DINNER BUSINESS MEETING
MINUTES OF FEBRUARY**

GENESEE COUNTY MEDICAL SOCIETY
Organized Medicine's Leading Edge



Richard E. Anderson, MD, FACP
Chairman and CEO, The Doctors Company

We proudly announce that **American Physicians** and **The Doctors Company** have **united**.

Together, we set a higher standard. We aggressively **defend** your name. We **protect** good medicine. We **reward** doctors for their loyalty. We ensure members benefit from our combined strength. We are not just any insurer. We are the **largest national insurer** of physician and surgeon medical liability.

On October 22, 2010, The Doctors Company and American Physicians officially joined forces. With the addition of American Physicians, we have grown in numbers, talent, and perspective—strengthening our ability to relentlessly defend, protect, and reward our nearly 55,000 members nationwide. To learn more about how we can protect your livelihood and reputation with our medical professional liability program, call (800) 748-0465, or visit us at www.thedoctors.com.

We relentlessly defend, protect, and reward the practice of good medicine.



www.thedoctors.com

Exclusively endorsed by the Michigan State Medical Society ■ A preferred partner of the Michigan Osteopathic Association

THE BULLETIN is published monthly by
The Genesee County Medical Society.

EDITOR

Daniel J. Ryan, MD

ASSOCIATE EDITOR

Peter Thoms, MD

GENESEE COUNTY

MEDICAL SOCIETY OFFICERS 2009-2010

President – S. Bobby Mukkamala, MD
President Elect – Laura Carravallah, MD
Immed. Past Pres. – Venkat Rao, MD
Secretary – Jagdish Shah, MD
Treasurer – Shafi Ahmed, MD

DELEGATES

Shafi Ahmed, MD
Abd Alghanem, MD
Suresh Anné, MD
Amitabha Banerjee, MD
Cathy Blight, MD
Michael Boucree, MD
Edward Christy, MD
Pino Colone, MD
Hesham Gayar, MD
John Hebert III, MD
Michael Jaggi, DO
Paul Lazar, MD
Sreen Mannam, MD
Raymond Rudoni, MD
Daniel J. Ryan, MD
Jagdish Shah, MD
Tarik Wasfie, MD
John Waters, MD

ALTERNATE DELEGATES

Qazi Azher, MD
Laura Carravallah, MD
Deborah Duncan, MD
Mona Hardas, MD
Rima Jibaly, MD
Samasandrapalya Kiran, MD
Nita Kulkarni, MD
AppaRao Mukkamala, MD
Gerald Natzke, DO
Larry Reynolds, MD
Jawad Shah, MD
Robert Soderstrom, MD
Peter Thoms, MD

DISTRICT DIRECTOR VI

S. Bobby Mukkamala, MD
Venkat Rao, MD

OTHER BOARD MEMBERS

Jagdish Bhagat, MD
Gary Johnson, MD
Jitendra Katneni, MD
Kenneth Steibel, MD

Executive Director – Peter A. Levine, MPH
Executive Secretary – Marcia Gzym

This publication designed and edited by 
www.natinskypublishing.com (248) 547-9749

MARCH 2011 Volume 87, Number 3

THE Bulletin

Read by 96% of GCMS members.

FEATURE ARTICLES

ACOs Will Change the Game	12
GCMS Dinner Business Meeting	14
GCMS Bylaws Changes	16
MSMS 2010-2011 Committees	18
GCMS Members on MSMS Committees	22
Legislative Liaison Committee	28

REGULAR FEATURES

President's Message	4
Editorially Speaking	6
Director's Message	8
MSMS District Update	10
Board Meeting Minutes	26
GCMS Meetings	28
Your \$\$ At Work	30
Happy Birthday, Doctor	31
Classifieds	31

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 (USPS 552-820)

Published by the Genesee County Medical Society Publication Office
4438 Oakridge Drive, Suite B, Flint, Michigan 48532
Phone (810) 733-6260 Fax (810) 230-3737

By subscription \$60 per year. Member subscription included with Society dues. Contributions to 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.

WE ARE THE CONSTANT - ALL OF US



S. Bobby Mukkamala, MD

This past month witnessed yet another transition in hospital leadership here in town. As Mark Taylor moves on to his next position in Milwaukee, Genesys Hospital will be in the capable hands of Betsy Aderholdt and Chris Palazzolo. While much of the adjustment that happens with this change will be within administration, some will definitely impact us as practicing physicians.

I feel much the same when residents who we train and get to know during their time here in Flint, graduate and move on to their next position. We remain to meet the new class and begin the cycle yet again.

When I look for what remains constant, here in our medical landscape, I realize that it is not the administrative staff, whose upward mobility relies heavily on a series of "lateral and upward moves" from one place to another. Even the physical structure of our hospitals changes before our eyes, with relocations to sprawling suburban acreage, and the construction of architecturally marvelous emergency departments.

In fact, what remains most constant is all of us, the physicians and our patients. We have made this place

our home, as have our patients. In this my 11th year in practice, I feel rooted in Flint. I have patients who have known me from the first months of my practice. We have weathered changes in our town, our state, our country and world TOGETHER. It is a bond that has great value to both parties.

I think it is important that we keep this in mind as the landscape around us changes. We should focus on keeping our patients, who are often

our friends and neighbors, healthy. Now, as that landscape seems to be changing at a faster pace than I can ever recall, let us make sure that we are rooted in our doctor-patient relationships. This relationship should serve as a lighthouse of sorts to guide us as we make decisions about the structure and delivery of care, be it via ACOs, PHOS, POs, etc.

So while the personnel and structures around us change, we will say goodbye to the old and hello to the new. We will stay engaged with the newcomers on behalf of our patients, to ensure that good care will keep being delivered.

Changing Lives

through a lifelong continuum of music, dance and theatre



The Flint Institute of Music has a proud history of providing incredible performance and education programs that significantly enhance the lives of *all* members of our community.

Through continued effort and awareness, the FIM strives to be a leading catalyst for individual and community cultural enrichment through the performing arts.

Join us for these upcoming events ... *you're invited!*



FlintInstituteofMusic.org

810.238.1350

**THE PRESIDENTS' BALL
WILL BE HELD ON
NOVEMBER 5, 2011 AT THE
RIVERFRONT BALLROOM.**

Please put this date on your calendar and plan to attend.

 **FLINT SYMPHONY ORCHESTRA**

Classical Concert
March 19, 2011 ■ 8 PM

 **FLINT SCHOOL OF PERFORMING ARTS**

Flint Youth Symphony
Orchestra Concert
March 12, 2011 ■ 3 PM

 **FLINT YOUTH THEATRE**

Our Town
April 8 - 23, 2011

MAINTENANCE OF CERTIFICATION IS HERE TO STAY

Ours is a world in which knowledge accumulates and wisdom decays.

Aldous Huxley (1894 - 1963)

Once upon a time, and not really so long ago, a physician who met the qualifications, passed required examinations, and paid the proper fees, was ordained into the club of board certification in their particular specialty and held that designation for life. No need for re-testing or re-qualifying. You were tenured like a Supreme Court justice, good for life. Those days are long gone. Now, maintenance of certification (MOC) is a fact of life for all newly minted physicians, and is strongly encouraged for those who hold lifetime board certification and are technically exempt from having to re-certify (the grandfathers). There are a lot of good reasons for MOC and also some legitimate griping from some quarters regarding the process.

From 2001 until 2005, all 24 major medical specialty boards phased in programs that require physicians to update their certificate every six to 10 years. One argument in favor of MOC is that a doctor certified for life after completing residency training has little incentive to stay abreast of current literature and clinical practice guidelines. Of course, this is professional suicide and is highly unlikely. Health plans are embracing MOC in hopes that it will pay off in more cost effective care by shortening the time that new knowledge gleaned from clinical trials and studies becomes incorporated into standard clinical practice. In other words, more targeted and up-to-date care. Also, there is language in the recently passed health care reform legislation that indicates that physicians who complete MOC approved activity prior to participating in the Physician Quality Reporting Initiative (PQRI) will get additional payments from Medicare. There is a definite trend toward higher expectations of transparency



Daniel Ryan, MD

and accountability from both the public and third-party payers regarding physicians' credentials.

There is more to MOC than just taking a written test every few years to prove one is aware of current medical knowledge and practice parameters. Hoops to jump through include proving completion of a minimum number of hours of continuing medical education, a practice improvement module that usually includes some form of critical review of one's own patient charts to compare practice

patterns and outcomes with peers, and a secured, closed-book examination.

Many physicians object to MOC because of the time needed to satisfy requirements, the expense, which can be substantial, and the fact that older physicians are not required to participate. After all, as long as one possesses a valid medical license, board certification is not required to practice medicine. But studies have shown that board certified doctors tend to have better outcomes and are more likely to use recommended preventive care services than non-board certified doctors. Most physicians who complete MOC programs do so for positive professional reasons rather than for the financial incentives. Three-quarters of the physicians report that they changed something in their usual practice pattern after completing the practice improvement module.

As a rule, physicians are dedicated to lifelong learning, competency in their specialty, and improved patient outcomes. We want fewer medical errors and better communication with patients and colleagues. Participating in MOC programs, despite their imperfections, can hopefully lead to adherence to higher standards while improving efficiency in the system.



LET ME HELP YOU SELL YOUR EXISTING HOUSE OR FIND YOUR DREAM HOME

Velynda Makhene, REALTOR®
Great Lakes Realty
536 Perry Road
Grand Blanc, MI 48439



Bus 810-695-1990 Ext 190
Cell 810-813-1407
Fax 810-695-5677
vmakhene@pglr.com



M MAP
Michigan Medicare/Medicaid
Assistance Program



225 E Fifth Street
Suite 200
Flint, MI 48502

Tel: 810.239.7671
Fax: 810.239.8869
www.valleyaaa.org

The Valley Area Agency on Aging Region 5 Medicare Medicaid Assistance Program (M MAP is screening any Medicare beneficiaries with limited income and resources who may be eligible for Low Income Subsidies or extra help to pay the cost of monthly premiums, annual deductibles and lower your co-payments related to a Medicare Prescription Drug Program.

Please contact Region 5 M MAP at **1-800-803-7174** to find out if you are eligible for assistance from the Federal or State government.

M MAP is funded by a grant from the Michigan Office of Services to the Aging through funding received from the Centers for Medicare and Medicaid Services, the Medicare agency and a grant from the Administration on Aging.

PREVENTION - THE MOST EFFECTIVE COST CONTAINER

There is no question that cost containment initiatives on a local basis have impacted cost. Genesee County is no longer among the highest cost centers for health care in the region, the state, or the country. This is due to the concerted efforts of health care providers at all levels working in a unified fashion, and individually. The big changes that we will see in the cost of health care will come when the public at large decides that costs are too high. It is the public that controls demand. Ultimately, it will control utilization. The best way to get at cost issues would be for the public at large to get healthy; coalesce around ethics issues associated with resource allocation, control their demand for services which may not be "necessary," and get healthy.

The public has come close to making decisions on how to allocate scarce resources. One would have hoped that the recently passed federal health system reforms would have reflected a broad-based consensus on how to proceed with allocating the resources required by the public to maintain their health in a medical sense. Clearly, that is not the case as this legislation is still a political hot potato, parts of which may be repealed via the courts or by Congress. Even if nothing is repealed, it is clear that there is no broad consensus regarding the allocation of scarce resources, especially when associated with one's own family and loved ones.

However, in terms of getting healthy, there is no question that this community is not near coming to grips with the fact that health behaviors impact morbidity and mortality, which in turn impact cost. To drive down the cost of illness, the easiest thing to do it is to prevent preventable diseases. Preventable illnesses



Peter Levine, MPH

are those which are the most prevalent including diseases of the heart, diabetes, hypertension, and some cancers. By losing weight on a community wide level, the community risk factors for diabetes and heart disease would drop dramatically. Imagine what could be saved in terms of costs for insulin, needles, amputations, physical therapy, rehabilitation, dialysis, etc., etc.

The time has come for all of us, not just those in the medical fields to take responsibility for the cost of health care, by paying attention to our own behaviors.

Auto accidents, violence, verbal abuse, are all causes of injury and death which are also preventable. It is just something to think about and maybe something to work together on. If we improve outcomes, we should improve net revenues and improve the overall health not just of the community, but of the medical community. There will be myriad opportunities to work together on endeavors relating to the overall health of the community via the Medical Society, and the Greater Flint Health Coalition and via other organizations in conjunction with the Medical Society in the near future. Here's to a healthier tomorrow!

**THE PRESIDENTS' BALL
WILL BE HELD ON
NOVEMBER 5, 2011 AT THE
RIVERFRONT BALLROOM.**

Please put this date on your calendar and plan to attend.

Experience the Difference



For Physicians

- Accurate reporting & timely communication
- Consult with a radiologist at any time
- Online access to studies & reports
- Patient focused approach to care aids in diagnosis and prompt treatment



For Your Staff

- Friendly, helpful scheduling staff to improve efficiencies
- Ability to work patients in quickly
- Physician relations specialist to answer questions & resolve issues
- Educational materials for use with your patients



(810) 732-1919
www.rmipc.net

For Your Patients

- Five convenient locations offering a full range of imaging studies
- Daytime, evening & weekend appointments
- Prompt appointment scheduling
- Team oriented approach to providing an accurate diagnosis



Our Experience

- Mid-Michigan's imaging leader for 25 years
- Always at the forefront of imaging technology
- Comprehensive women's imaging services
- ACR Breast Imaging Center of Excellence



Flint ■ Fenton ■ Grand Blanc ■ Villa Linde ■ Davison

DISTRICT DIRECTORS

Hello from your district directors. Since I last wrote, we have had another MSMS board meeting. The topics included dealing with the predictable, unintended consequences of the medical marijuana laws and the clinics that are popping up across the state to meet the incredible demand for medical authorizations.

We also got an update from legal counsel on amicus briefs being filed in various law suits that seek to preserve our tort reforms.

We crafted language to address the issue of transporting patients displaying stroke symptoms to centers that are best equipped to evaluate and treat them. This came from a resolution brought to the House of Delegates last year.

The board is also examining the issue of bad debt that is being carried on our office books from patient non payment. I think that after the problem is assessed,



S. Bobby Mukkamala, MD
District VI Director

there will be discussion on how best to work with insurers in decreasing this problem that has gotten much worse lately given the state of the economy.

So, in summary, it was business as usual in East Lansing. In the coming months you will likely hear from our two candidates for president-elect as well, Dr. Bizon and Dr. Sprague. Once again we are faced with a choice between two qualified candidates.

Finally, now is the time to do an internal questionnaire about issues that are bothering you that you would like to see addressed by MSMS. The deadline for resolutions is in March

which gives us a month to put out ideas on paper and submit them. We in this district are lucky to have seasoned resolution writers to help, so all you have to do is jot some bullet points in an email and send it on over to GCMS (www.gcms.org) and we will take it from there!

Announcement

GCMS members now entitled to 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

ATTENTION!!!
The new GCMS hours
will be
8 a.m. to 4:30 p.m.
Monday - Thursday
The GCMS offices
will be closed on
Fridays.



**Your life-saving practice
could use a life-saving
messaging service.**

Your very first call should be to Physicians Programs, Inc. PPI works for you 24/7 year round. For more about our telemessaging services, just call. You'll find our competitive, low prices have a nice ring to them, too.

Phone 810.733.6260

4438 Oak Bridge Dr. • Suite B • Flint, MI 48532

www.ppicom.com



ACOs Will 'Change The Game,' With Or Without Reform

By Paul Natinsky

They give hospital executives sleepless nights, leave physicians scratching their heads and no one even knows what they'll eventually look like. But without a doubt, accountable care organizations are coming to a health system near you, Medical Advantage Group President & CEO Larry Schwartz told physicians and guests at the Feb. 3 GCMS Dinner Business Meeting.

One definition describes ACOs this way: "an organization of providers that takes collective responsibility for improving patient care." What exactly that means in terms of structure, membership, payment methodology and service delivery is not entirely clear.

In the Patient Protection and Affordable Care Act (the main federal health care reform bill), ACOs will be established Jan. 1, 2012 as part of Medicare's Shared Savings Program. The skeletal outline of ACO structure so far calls for three-year contracts with the Department of Health and Human

Services in which ACO providers must provide care for at least 5,000 Medicare beneficiaries, must be "patient centric," use evidence-based medicine and provide reporting on quality and cost measures, among other provisions.

The act specifies that the ACO must be made up of health care professionals in a group practice, networks of practices, hospitals working with physicians and "others that the Secretary (of HHS) approves."

While the ACO concept outlined in the health care reform law is short on specifics, a key element of the ACO provisions of the PPACA is a sharing of "savings" achieved by the organization's activities. This is paired with the reform law's proscription on reimbursement for hospital readmissions. Schwartz said that unless hospitals can "give an ironclad reason" why a patient is readmitted within 30 days of being discharged, no reimbursement will be paid to the

hospital for that patient. With readmission rates as high as 26 percent this could end up being a real problem for hospitals. But if hospitals group with other providers to form ACOs, they can share in savings achieved by the group and mitigate some of these losses.

Still, said Schwartz, hospitals "are scared to death" of this arrangement and will be feeling forced to form ACOs; a pressure that could result in hospitals pushing physicians and physicians groups to join. Schwartz said physicians should be out front in the formation of these groups, but should not feel time pressure to join. Rather, they should evaluate the benefits and pitfalls of such opportunities and participate in their leadership and design.

"(In anticipation of the need to form ACOs), (t)here is a great flurry of (Physician Hospital Organization) activity—every hospital is forming one," said Robert Jackson, MD, medical director, Oakwood Primary



"Health care has become hospital-centric. It needs to change. It needs to be patient-centric."



Care Physicians, in his commentary following Schwartz's presentation.

While court challenges to the new health care reform law have populated recent headlines, Schwartz said the "payment reform" embodied by the ACO concept is likely to move forward regardless of the fate of other aspects of reform. He cited the long history of adopted innovation through federal programs, including HMO-enabling legislation in the 1970s, the conversion to Diagnosis Related Groups to replace the expensive "cost-plus" Medicare reimbursement system in the 1980s, the Resource-Based Relative Value Scale designed to give primary care a boost in the 1990s, the Health Insurance Portability and Accountability Act dealing largely with privacy measures in the 2000s

and now the PPACA with its emphasis on ACOs.

If Medicare payment methods change, all payors will eventually emulate the new method, said Schwartz. "History tells us this."

Schwartz, who has worked as a hospital CEO, said hospital executives focus on "the preservation and growth of assets." He said hospitals understand that they have to get costs under control. However, "it's hard to turn an aircraft carrier around."

Schwartz said hospitals are feeling the squeeze, have dialed up competition with one another and will increase pressure on physicians.

"There isn't anyone you do business with that doesn't want to be the last man standing," he said. Likely the result will be fewer hospitals and smaller hospitals.

"Health care has become hospital-centric. It needs to change. It needs to be patient-centric," said Dr. Jackson.

Dr. Jackson told a joke that

emphasized the point. He spoke of two hunters being chased by a bear. One said he was going to run to the nearest tree and climb; the other said he was just going to run as fast as he could. The first hunter said, "are you crazy, you can't outrun a bear." The second said, "I don't have to; I just have to outrun you."

"Consequences for hospitals will be very bad and they'll be acting out," said Schwartz. "Don't let the institutions that are afraid themselves right now divide and conquer. "Primary care physicians will never lose leverage; keep using it. People will threaten you, but you will never lose it. Don't be in a hurry."

In his parting comments, Schwartz urged physicians to support and work cooperatively with those of their ranks who work in hospital administration. He also said that more physicians need to serve in health system CEO roles, not just as heads of medical staffs. And doctors need to stop ostracizing those who do occupy executive roles.

ACOS

Genesee County Medical Society Dinner Business Meeting

February 3, 2011 - MINUTES

Call to order:

The meeting was called to order at 6:45 p.m. by S. Bobby Mukkamala, MD in the Flint Golf Club dining-room.

Introduction of Guests:

Dr. Mukkamala introduced guests for the evening including Larry Schwartz, President & CEO of the Medical Advantage Group and Robert J. Jackson, MD Medical Director of the Oakwood Primary Care Physicians and the Medical Advantage Group. He also introduced sponsors for the evening including; the MSMS Insurance Agency, ProAssurance, Saginaw Bay Underwriters, Medical Protective, and The Doctors Company. He invited each of the sponsors to speak for a minute.

Review of Minutes of Previous Meeting:

Motion:

That the minutes of the September 16, 2010, September 29 and October 26, 2010 Board of Directors meeting be approved as published in the Bulletin. The Motion Carried.

New Business:

A) Election of a Nominating Committee

Motion:

That Drs. Lawrence Reynolds, Cathy Blight be elected to the GCMS Nominating Committee from the Board of Directors.

The Motion Carried.

Motion:

That Drs. Koteswara Vemuri, Niketa Dani, Brenda Rogers-Grays, Paul Dake, and Syed Ahmed be elected to the Nominating Committee from the general members. The Motion Carried.

B) Proposed Bylaws Changes:

Dr. S. Bobby Mukkamala reviewed the proposed Bylaws changes brought by the GCMS Board of Directors. The first Bylaws change is to Chapter 2, Section 3, changing the dues exempt category to require an individual to have paid dues until the end of the preceding calendar year to qualify for dues exempt status. The second Bylaws change is to Chapter 5, Section 3, which changes the quorum for a general membership meeting to 4% from 5%. The next change is to Chapter 7, Section 4, which would add the Treasurer to the Finance Committee. The proposed change to Chapter 8, Section E would also add the Treasurer to the Finance Committee. The proposed change to Chapter 9, Section 4 would amend the quorum for the Board of Directors to 33% of the members of the Board. The final proposed Bylaws change would be to Chapter 12, which would change the rules of order used from Roberts to Sturgis.

Awards:

Dr. S. Bobby Mukkamala announced that Dr. Norman Carter would be receiving this year's GCMS Presidential Citation Award. He noted that Dr. Carter is one of our senior members and a pediatrician. The Presidential Citation Award is being presented to Dr. Carter for his years of service to the community, not only as a pediatrician but also for his work in the creation of the Children's Sexual Abuse Clinic, serving as a pioneer in the Emergency Services at Hurley Medical Center and for his work at the Mott Children's Health Center, and service to the medically indigent in general in the community.

Membership Applications:

Motion:

That the following requests for membership be approved:

Requesting Membership:

Linda Hotchkiss, MD	Zahanna Levashkevich, MD	Sara Pendleton, MD
Janese Reynolds, MD	Matthew Sardelli, MD	Allan Vrable, DO

Requesting change from A to Retired:

Marvin Latchana, MD



ACOS

Requesting Reinstatement:

Paul Telehowski, MD

Request change from A-PIT to A:

Shailesh Basani, MD	Martinique Kling MD	Waleed Khan, MD
Ajay Srivastava, MD	Vishwas Vaniawala, MD	

Genesys Resident Requesting Membership:

Adam Franson, DO

McLaren Residents Requesting Membership:

Leeda Radhid, MD	Manas R. Sarangi, MD
------------------	----------------------

The Motion Carried.

Announcements:

Dr. Mukkamala reported that the House of Delegates meeting will take place April 29-May 1, 2011 at the Radisson Hotel in Kalamazoo. He also requested ideas for the GCMS Presidential Citation Award in advance of the middle of May so that the Nominating Committee would have time to review them.

Introduction of Accountable Care Organizations:

Dr. Mukkamala introduced Mr. Larry Schwartz of the Medical Advantage Group, and Robert Jackson, MD of the Oakwood Primary Care Physicians Organization. An engaged audience participated in the question and answer period following the stimulating presentations by both facility members.

GCMS Bylaws Changes Read at the February Meeting

The following are Bylaws changes proposed to the membership by the GCMS Board of Directors. The proposed Bylaws changes were generated by the Constitution & Bylaws Committee at the request of the GCMS Board. The Board approved them at its January meeting. According to the GCMS Bylaws, the proposed changes must be read twice to the membership and published in the Genesee County Medical Society Bulletin. They were read at the February Dinner Business meeting for the first time, and will be read again at the May Dinner Business meeting. At the May Dinner Business meeting a vote will be held to affirm those Bylaws changes.

The proposed Bylaws changes would accomplish the following:

- In order to receive full or partial dues exempt status one would have to pay membership dues to the end of the preceding calendar year
- The required membership for a quorum at a Dinner Business meeting would be 4% instead of the current 5% requirement.
- The quorum required for the Board of Directors would be 33% of the members of the Board of Directors as opposed to 50% plus one
- The Treasurer would be made a member of the Finance Committee, which would require changes to two sections of the Bylaws
- That Genesee County Medical Society bring itself in line with the Michigan State Medical Society and the American Medical Association by functioning according to Sturgis Rules of Order replacing Roberts Rules of Order

The wording for the proposed changes is below. Thank you for your attention to this matter.

That Bylaws Chapter 2 Section 3 Active Members - dues Exempt section be amended to read as follows:

A hardship - A member for whom the payment of dues would be a financial hardship by reason of physical disability or illness, or other reason approved by the governing board of the society, may be excused fully or partially from payment of dues, providing that his/her membership dues have been paid to the end of the preceding calendar year.

**That the Genesee County Medical Society Bylaws be amended in Chapter 5 section 3 to read as follows:
4% of the active membership shall constitute a quorum.**

**Check Out Our Website
www.gcms.org**

Chapter 9 - The Board of Directors, Section 4 be amended to read:

33% of the members of the Board of Directors shall constitute a quorum.

That Chapter 7 Duties of Officers Section 4. Treasurer: shall be amended to read:

The Treasurer shall give bond to the trust imposed in him/her as fixed by the Board of Directors and shall have the authority to sign checks in the absence of the secretary. He/she shall serve as a member of the GCMS Finance Committee. The rest of section 4 will remain the same.

That Chapter 8. Committees, Section E be amended to read:

Finance Committee - There shall be a permanent Finance Committee consisting of four members elected for a term of two years, two members shall be elected each year. A senior member in terms of length of service on the committee shall be the chairman of the committee and report monthly to the Board of Directors. The additional section should read:

The Treasurer shall also serve as a member of the Finance Committee. The rest remains the same.

Due to the fact that the Michigan State Medical Society and the American Medical Association have switched from Roberts Rules of Order to Sturgis Rules of Order for running their meeting, that the Genesee County Medical Society Bylaws be changed in Chapter 12 "Rules of Order be changed to read: The deliberations of this Society shall be governed by parliamentary usage as contained in Sturgis Rules of Order unless otherwise provided for in these Bylaws".


**THE PRESIDENTS' BALL
WILL BE HELD ON
NOVEMBER 5, 2011 AT THE
RIVERFRONT BALLROOM.**
Please put this date on your calendar
and plan to attend.



Leadership for Physicians, Advocacy for Patients

2010-2011 Committees

The mission of the Michigan State Medical Society is to promote a health care environment which supports physicians in caring for and enhancing the health of Michigan citizens through science, quality and ethics in the practice of medicine.

COMMITTEE ON AGING

Adrian J. Christie, MD, Chair

This Committee provides physicians with an overview of the medical, social and psychological needs of the aged patient. Activities include examining the health status of the older patient, advocating preventative medicine programs, discussing Medicare financing, and exploring long-term care options for the elderly. The Committee works with many community organizations and the Michigan Office of Services to the Aging.

Staff: **Joshua C. Richmond**
517-336-5788
jrichmond@msms.org

COMMITTEE ON BIOETHICS

Evangeline J. Spindler, MD, Chair

This Committee considers ethical issues related to medical practice, education, research and public policy. It issues advisory opinions and sends recommendations for action to the MSMS Board of Directors. Furthermore, this Committee is actively engaged in bioethics educational and outreach activities through its annual conference and other forums. This Committee meets four to six times a year.

Staff: **Caryl S. Markzon**
517-336-7575
cmarkzon@msms.org

PLANNING COMMITTEE FOR MSMS ANNUAL SCIENTIFIC MEETING

Sandro K. Cinti, MD, Chair

This Committee coordinates and plans the MSMS Annual Scientific Meeting, the organization's largest event of the year. The ASM offers over 36 clinical courses during the three-day event in October. The Committee meets six times a year by phone.

Staff: **Marianne J. BenHamza**
517-336-7581
mbenhamza@msms.org

COMMITTEE ON CME ACCREDITATION

Steven E. Minnick, MD, Chair

This Committee assures that quality CME activities are available to Michigan physicians through review, evaluation, and accreditation of Category I continuing medical education providers in the state. The Committee meets quarterly at MSMS Headquarters in East Lansing.

Staff: **Brenda J. Marenich**
517-336-7580
bmarenich@msms.org

COMMITTEE ON CME PROGRAMMING

Dorothy M. Kahkonen, MD, Chair

This Committee develops, conducts, and supervises Category I programs in Michigan to serve the continuing medical education needs and interests of physicians. The Committee meets once a year at MSMS Headquarters in East Lansing and reviews program applications monthly by mail or email.

Staff: **Rebecca J. Blake**
517-336-5729
rblake@msms.org

COMMITTEE ON HEALTH CARE QUALITY, EFFICIENCY AND ECONOMICS

(Formerly the Advisory Committee on Medical Economics)

John E. Billi, MD, Chair

The charge to the Committee is 1) to define principles and outline the appropriate role for MSMS in promoting quality, safety, efficiency and appropriateness in health care delivery; 2) to monitor trends and lead collaborative improvement efforts in health care quality management, financing and insurance; 3) to foster collaboration with health plans, regulators and employers to promote quality and efficiency; 4) to assist MSMS in setting priorities related to socioeconomic factors that influence the practice of medicine.

Areas of responsibility include physician payment models, performance-based reimbursement, physician accountability and public reporting, quality assessment and evidence-based medicine, value, practice guidelines, access, physician credentialing and profiling, practical technology applications in health care delivery, and employer and payer needs and expectations. The Committee will collaborate with other relevant committees where there are overlapping issues. The Committee will also help MSMS identify opportunities to educate members about these issues.

Staff: **Rebecca J. Blake**
517-336-5729
rblake@msms.org

MSMS INFORMATION TECHNOLOGY COMMITTEE

Peter T. Muller, MD, Co-Chair

Michael H. Zaroukian, MD, Co-Chair

This Committee's purpose is to review and propose recommendations regarding the consideration and implementation of policies, guidelines, and pay-for-performance programs where information technology can improve the well being of the patients and vitality of the health care workforce in the state of Michigan. This Committee meets quarterly in East Lansing.

Staff: **Jody L. Roethele**
517-336-5734
jroethele@msms.org

COMMITTEE ON MATERNAL AND PERINATAL HEALTH

Federico G. Mariona, MD, Chair

This Committee strives to improve the care of the obstetrical patient and her newborn and to provide means for physicians, nurses, and others interested in maternal, perinatal, and neonatal health to discuss mutual problems, share ideas, and develop content for annual meeting. It works closely with state agencies and medical specialty organizations.

Staff: **Jody L. Roethele**
517-336-5734
jroethele@msms.org

COMMITTEE ON MEDICAL LICENSURE AND DISCIPLINE

Philip M. Margolis, MD, Chair

This Committee serves as a liaison to the Michigan Department of Commerce's Bureau of Occupational and Professional Relations and the Michigan Board of Medicine, and seeks and supports measures that will promote a fully effective Board of Medicine.

Staff: **Colin J. Ford**
517-336-5737
cford@msms.org

COMMITTEE ON MEMBERSHIP RECRUITMENT AND RETENTION

Michael W. Smith, MD, Chair

This Committee guides all recruitment efforts aimed at non-member physicians, residents, and students. It develops membership goals, makes recommendations to the MSMS Board of Directors and conducts personal recruiting efforts when needed.

Staff: *David K. Fox*
517-336-5731
dkfox@msms.org

LIAISON COMMITTEE WITH MICHIGAN'S PUBLIC HEALTH

David A. Share, MD, Chair

This Committee works to improve information and communication channels among public health officers, practicing physicians, and the public on environmental and public health issues of mutual concern. The Committee also advises the MSMS Board on key issues pertaining to public health policy and community well being in Michigan. This Committee meets quarterly at MSMS Headquarters in East Lansing.

Staff: *Andrew R. Schepers*
517-336-7579
aschepers@msms.org

COMMITTEE ON STATE LEGISLATION AND REGULATIONS

Raymond R. Rudoni, MD, Chair

This Committee monitors and influences Michigan legislation related to health care. The Committee works to enhance physician participation in the state legislative process.

Staff: *Colin J. Ford*
517-336-5737
cford@msms.org

LIAISON COMMITTEE WITH THIRD PARTY PAYERS

Donald B. Muenk, MD, Co-Chair
Paul A. Cullis, MD, Co-Chair

The Liaison Committee serves as a communication link between Michigan physicians and third party payers, including managed care programs, commercial insurance companies, Blue Cross Blue Shield of Michigan and Wisconsin Physician Services (WPS). The Committee provides input to payers on policy issues and new programs; works to resolve payment and policy issues raised by individual members; identifies and reports on trends related to payment and new programs; and seeks unified approaches to issues affecting particular specialties.

Staff: *Stacie J. Saylor, CPC*
517-336-5722
ssaylor@msms.org

TASK FORCE ON THE FUTURE OF MEDICINE

David A. Share, MD, Chair

The Task Force will monitor the activities resulting from the MSMS *Future of Medicine* study and make recommendations about how MSMS can be proactive in implementing changes to the health care system.

Staff: *Rebecca J. Blake*
517-336-5729
rblake@msms.org

TASK FORCE ON A PATIENT FOCUSED COMPENSATION SYSTEM

Robert M. Soderstrom, MD, Chair

The Task Force will research existing no-fault models in order to determine if the concept of no-fault medical malpractice insurance would be an improvement over the existing tort system in Michigan.

Staff: *Colin J. Ford*
517-336-5737
cford@msms.org

TASK FORCE ON PHYSICIAN EXTENDERS

Scott M. Monteith, MD, Chair

This Task Force on Physician Extenders will focus on compiling resources to be made available to physicians to make educated decisions regarding the use of physician extenders. Initial topics to be reviewed will be the liability concerns and risk management, review of the current regulatory structure, and existing literature from medical specialty societies regarding use of physician extenders.

Staff: *Colin J. Ford*
517-336-5737
cford@msms.org

If you are interested in serving on an MSMS committee or want more information, please contact Heather Hill at 517-336-5772 or hhill@msms.org



GCMS Members on MSMS Committees

The following is a list of GCMS members serving on MSMS Committees. If you are interested in serving on an MSMS Committee or task force, please let your District Directors, S. Bobby Mukkamala, MD and Venkat Rao, MD know or Peter Levine.

Walid M. Abuhammour, MD - Liaison Committee with Michigan's Public Health Planning Committee for MSMS ASM

Suresh Anne, MD - MSMS Information Technology Committee

Frederick R. Armenti, MD - Committee on Health Care Quality, Efficiency and Economics Liaison Committee with Third Party Payers

Cathy O. Blight, MD - Committee on State Legislation and Regulations

Michael C. Boucree, MD - Committee on CME Accreditation

Edward Christy, MD - Planning Committee for MSMS ASM Task Force on a Patient Focused Compensation System

James D. Forshee, MD, CMD - Committee on Health Care Quality, Efficiency and Economics

Ayman Y. Haidar, MD - MSMS Information Technology Committee

Mona Hardas, MD - Liaison Committee with Michigan's Public Health Task Force on the Future of Medicine

Jay C. Holmes, MD - Committee on Maternal and Perinatal Health

Gary K. Johnson, MD - Liaison Committee with Michigan's Public Health

Michael A. Kia, DO - Committee on State Legislation and Regulations

Samasandrapalya R. Kiran, MD - Committee on State Legislation and Regulations

Nita M. Kulkarni, MD - Task Force on the Future of Medicine

Peter A. Levine, MPH, Consultant - Committee on Health Care Quality, Efficiency and Economics MSMS Information Technology Committee, Committee on Membership Recruitment and Retention, Task Force on a Patient Focused Compensation System

Mary Lou D. Mathias, RN, Alliance - Committee on Aging, Liaison Committee with Michigan's Public Health

Bharat A. Mehta, MD - Committee on CME Programming, Committee on Medical Licensure and Discipline

Vickey Morrissey, RN, Consultant - Committee on Maternal and Perinatal Health

Srinivas B. Mukkamala, MD - Committee on Medical Licensure and Discipline Task Force on the Future of Medicine

Venkat K. Rao, MD - Committee on State Legislation and Regulations Task Force on the Future of Medicine

Raymond R. Rudoni, MD - Committee on State Legislation and Regulations Liaison Committee with Third Party Payer

Mona Sahouri, Alliance - Committee on State Legislation and Regulations

Randolph E. Schumacher, MD - Committee on Aging

Robert M. Soderstrom, MD - Task Force on a Patient Focused Compensation System

Laura Stoyanoff, Alliance - Committee on State Legislation and Regulations

Lakshmi K Tummala, Alliance - Planning Committee for MSMS ASM

Venu Vadlamudi, MD - Committee on Membership Recruitment and Retention Committee on State Legislation and Regulations

John A. Waters, MD - Committee on Health Care Quality, Efficiency and Economics

Alan P. Weamer, MD - Committee on Bioethics



We place your interests first and strive for your success and satisfaction above all.

Trust us to provide payment solutions to your payment challenges.

810.750.6822
mktg@TheRybarGroup.com
www.TheRybarGroup.com

THE
RYBAR
GROUP
HEALTHCARE FINANCIAL CONSULTANTS



URGENT Medical Centre of Flint

The Doctor Is Always In

...with quality, affordable, convenient medical care...without appointments...with little or no waiting in a comfortable seating area

- Experienced doctor and licensed nurse always on duty
- Treatment for minor emergencies, work-related injuries and common illnesses
- Lab, X-ray & EKG available
- Most insurances accepted, including HMO
- We bill most insurance companies directly
- Worker's Compensation accepted
- School, sports and employment physicals performed
- Free blood pressure checks daily
- Major Credit Cards accepted

OPEN 7 DAYS A WEEK 9 AM - 9 PM

(810) **232-6101**

2284 South Ballenger Highway • Suite 2

(Ballenger Pointe near corner of Ballenger and Miller Rd.)

Northbank Center BUSINESS EVENTS SPECIAL ~ \$250

- Grand Ballroom
- Park Place available for \$85
- Up to four (4) hours of use, Monday - Friday, between 8 a.m. & 5 p.m.
- Registration, buffet, display tables
- Catering from University Catering Service at additional fee
- Sound System

For reservations
and information:
810.762.3436



www.umflint.edu/ebs



SAVE THE DATE

Hurley Medical Center, Genesys Regional Medical Center, McLaren Regional Medical Center, Genesee County Mental Health Department, Genesee County Prosecutor's Office, and the Genesee District Dental Society present:

“Responsible Prescribing Practices from Morphine to Marijuana”

Wednesday, May 18, 2011

7:30am-4:00pm, Flint Golf Club

This activity has been approved for AMA Category 1 Credit (TM), ADA CERP Credit, and Anticipated being Approved for AOA CME Category 2-A Credit Hours pending approval by AOA CCME.

Digital Medics
WWW.DIGITALMEDICS.COM
YOUR TECH TO THE RESCUE
Servicing all brands of desktops & laptops

810.496.1903 or Toll-free **877.61.MEDIC**
112 MAIN STREET • DOWNTOWN FLUSHING

- Networks
- Wireless Networks
- Upgrades
- Computer Setup & Repair
- VOIP
- Diagnostics
- Phone Systems
- Virus Cleanup
- Popup/Spyware Removal
- Backup Solutions
- Custom Built Computers
- Internet & E-mail Setup
- Data Recovery
- Training
- Website Design & Development
- Mac/Apple

Commercial & Residential ONSITE Sales & Service

Apple Authorized Service Provider Apple Authorized Reseller

COMPUTER & NETWORK SPECIALISTS!

seasoned

seasoned
attained distinctive quality.
to make fit by experience.

**TRUE DEFINITIONS
ARE HARD TO BEAT...**

**WITH SCW,
THE
DEFINITION
IS CLEAR!**

TRUST THE SEASONED PROFESSIONALS AT SCW

Professional Liability • Personal • Commercial • Life & Disability Insurance

SCW Agency Group, Inc. Call Today!
Insurance Across America® 1-800-968-4929

Check Out Our Website: www.gcms.org
Call Marcia to give her your password (810) 733-9923.

Genesee County Medical Society Board of Directors Meeting

November 23, 2010 - MINUTES

Membership Committee:

Motion:

That a letter be sent to Dr. Rajani Aravapalli noting that the Committee has reviewed her request for dues consideration, offering 1/2 dues as a spousal member.

Motion:

That Bylaws Chapter 2 Section 3 Active Members - dues exempt section be amendment to read as follows:

Motion as Amended:

A hardship - A member for whom the payment of dues would be a financial hardship by reason of physical disability or illness, or other reason approved by the governing board of the society, may be excused fully or partially from payment of dues, providing that his/her membership dues have been paid to the end of the preceding calendar year. The Motion Carried.

Finance Committee:

Motion:

That the Year End Budget to Actual Report for the period ending October 31, 2010, be approved as presented, understanding that there may be some accounting changes yet to come.

Motion:

That Peter Levine's hours be revised to departing the Society offices at 1:15 p.m. on Thursday's in recognition of the temporary pay cut.

Motion:

That a letter be sent to the Alliance noting that the Finance Committee thanks them for their letter requesting funding but at the present there are no current funds to do that with. The Finance Committee hopes that in the future the financial condition of the Society will change to allow funding of the Alliance again.

Motion:

That the date of the Finance Committee meeting be returned to the fourth Tuesday of the month at 5 p.m. If it proves necessary to hold an extended meeting which would conflict with the time of the following Board meeting, a special meeting should be convened.


The Motion Carried.

Motion:

That the nomination of Dr. Laura Carravallah as President-elect be approved and reported to the membership.

The Motion Carried.

TRUST EXPERIENCE. COUNT ON COMMITMENT.



CC&G
CLINE, CLINE & GRIFFIN

Malpractice Real Estate & Business Litigation Licensing Wills & Trusts Probate Family Personal Injury Criminal Defense Corporate	Walter P. Griffin Timothy H. Knecht Jonathan M. Hartman Glenn M. Simmington J. Brian MacDonald Jose T. Brown R. Paul Vance
---	---

Attorneys at Law | Since 1928 | www.cclawyers.com | 810.232.3141



No Better Deal than MSMS!

We're not just anybody's insurer

True or False

1. **MSMS insures all types of groups.**
MSMS insures only physician groups. While other agents insure grocery stores and muffler shops, MSMS specializes in the needs of physicians. True False

2. **MSMS has higher rates than other agents for Blue Cross Blue Shield.**
Absolutely false. BCBSM rates are the same for all chamber and association groups. If someone shows you a lower rate, it is for less coverage. True False

3. **MSMS has no advantages over other agents.**
Among other advantages, MSMS can offer your spouse a group-like product (spousal continuation) if a member passes away. Other agents offer only individual policies with little or no prescription drug coverage. MSMS can also offer physicians a separate plan for employees in small groups. True False

4. **MSMS groups must call BCBSM directly to solve claims issues.**
MSMS has a staff of dedicated customer service representatives who will act as your advocate in issues of claims and billings. True False

5. **MSMS does not offer benefits management services.**
MSMS has qualified benefits managers to handle all of your needs in HRA, HSA and FSA. MSMS offers FREE COBRA administration to its groups of 20 or more. True False

6. **There is no better deal than MSMS.**
Nobody can give you the service, the choices and the expertise that MSMS gives its members. True False

Support your professional association!



877-PIA-ASK-US (742-2758) • www.msmsinsurance.org • msmsagency@msms.org

Legislation Liaison Committee

In early February, the GCMS Legislative Liaison Committee met with new legislators, Senator Dave Robertson, and Representatives Jim Ananich, Charles Smiley, as well as State Representative Woodrow Stanley, and Senator John Gleason. Chris Hennesy from Senator Stabenow's staff, Andrew Leavitt from Congressman Dale Kildee's office, and Tim Sneller from Representative Smiley's office also attended. Drs. Andrew Duda, Paul Lazar, Ed Gullekson, Maurice Chapin, Abd Alghanem, Practice Managers, Cynthia Duncanson, and Gary Paavola, Andrew Schepers from MSMS and Peter Levine.

The Committee reviewed the state budget elements which will impact medical practices. Each legislator reviewed his committee appointments. Legislation which would allow physician's to apologize or say they are sorry to patients and their families will be reviewed by the Senate later in the week.

Other liability reform related legislation which will be coming up in the Senate after the budget is completed will be bills related to economic caps, changing the standard to gross negligence from pure negligence, and loss of opportunity.

Chris Hennesy reported that Senator Stabenow had offered a legislative amendment which would exempt physicians from having to file 1099's for purchases over \$600.

All were invited to the New Legislators Reception at MSMS on February 16, 2011.

GCMS MEETINGS

– MARCH 2011 –

3/7, 8 a.m. - Legislative Liaison @ GCMS

3/2, 7:30 a.m. - Bulletin Committee @ GCMS

3/14, 12 Noon - Membership Committee @

GCMS meets every other month

3/22, 5:15 p.m. - Finance Committee @ GCMS

3/22, 6 p.m. - GCMS Board of Directors @ GCMS

3/23, 12:30 p.m. - Community & Environmental Health

Committee @ GCMS

3/24, 8 a.m. - Practice Managers @ GCMS

**"As physicians,
we have so
many unknowns
coming our way..."**

**One thing I am
certain about
is my malpractice
protection."**

Medicine is feeling the effects of regulatory and legislative changes, increasing risk, and profitability demands—all contributing to an atmosphere of uncertainty and lack of control.

What we do control as physicians:
our choice of a liability partner.

I selected ProAssurance because they stand behind my good medicine. In spite of the maelstrom of change, I am protected, respected, and heard.

I believe in fair treatment—and I get it.

PROASSURANCE.
Treated Fairly

Professional Liability Insurance & Risk Management Services
ProAssurance Group is rated **A (Excellent)** by A.M. Best.
www.ProAssurance.com • 800.292.1036



Mott Children's Health Center

Meeting the health needs of Genesee County's children

Child & Adolescent Psychiatry

- Medication Management
- Psychiatric Consultation
- Mental Health Treatment, Screenings
- Mental Health Support

Child & Adolescent Health

- Pediatrics
- School-Based Clinics
- Audiology
- Nutrition Education
- Teen Wellness Center

Child & Adolescent Dentistry

- Examinations
- Cleanings & Fillings
- Infant Cavity Prevention
- School Fluoride Programs

Services provided at no cost to eligible families

806 Tuuri Place • Flint, Michigan 48503 • (810) 767-5750 • fax (810) 768-7511 • www.mottchc.org

Count On

Anita Abrol

Anita Abrol, CPA

As the Managing Principal at Lewis & Knopf, Anita is passionate about undertaking careful planning for her clients. She focuses her practice on providing quality, hands-on service to clients in a variety of industries. This is accomplished by providing prompt, expert advice with a high degree of professionalism and personal service. Anita's comprehensive approach to client service allows her to not only meet the needs of each client, but to serve as a partner in their business and ultimately, their success.

**Lewis
& Knopf**
CPAs, PC

For professional services and
advice you can count on, call
Anita Abrol at 810-238-4617.

www.lewis-knopf.com

YOUR \$\$\$ AT WORK

- § GCMS met with representatives from two insurance companies to sort issues relating to timely payments for physician practices
- § GCMS coordinated efforts to communicate with the Legislature and Congress on Medicare and Medicaid related issues
- § GCMS held Legislative Liaison Committee meeting with new and returning legislators to explain the MSMS and GCMS Legislative agenda
- § GCMS continued the process of controlling costs and providing maximum bang for the buck to GCMS members
- § GCMS and MSMS staff visited several non-members in an effort to recruit them to membership
- § GCMS leaders recruited several new members
- § GCMS met with Practice Managers to discuss myriad issues of import, individual and collective practices
- § GCMS held the Dinner Business meeting on Accountable Care Organizations



Happy Birthday Doctor - MARCH

S. Bobby Mukkamala	1	Charles Hennessy	13	R. Roderick Abbott	24
Joseph Varghese	2	Virgilio Villarreal	13	Nicholas Velarde	25
Sascha Nicolai Knoblich	2	Suresh Anne	14	Clinton Dowd	26
Gianina Cazan-London	2	Cory Cookingham, Sr.	14	Venkata Kilaru	26
Wendy Lawton	4	Paul Karr, Sr.	14	Shagufta Ali	26
Rama Devi Rao	4	Bruce Troutman	15	Harold Rutila	26
Rizwan Danish	5	James Neubeck	16	James Vanbrocklin	26
Vijay Naraparaju	5	Christie Samuels	16	Chang Lee	27
Scott Huffaker	6	Russell Sandberg	17	Jamal Hammoud	27
Ghassan Bachuwa	8	Silva Doyle	19	Joseph Batdorf	28
George Zureikat	8	Robert House	19	Vikram Rao	28
Dilip Desai	9	William Liekweg Jr	20	Jawad Shah	28
Robert Rosenbaum	9	Yaseen Hashish	20	Sweetie Srivastava	28
Madan Arora	10	Asif Ishaque	21	Tomy Kalapparambath	28
Fengxia Qiao	11	Parrish Sadeghi	21	Roy Diggs Jr	29
Frank Cook	12	Abdul Alawwa	22	Elfateh Seedahmed	30
John Brady	13	Tjin Lie Lim	22		
Karsten Fliegner	13	David Lee	22		

CLASSIFIEDS

OFFICE AVAILABLE

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

DIEBOLD INSURANCE AGENCY

specializes in Malpractice Insurance. For your Professional Coverage needs throughout Michigan and beyond, Call Kevin Elliott of Diebold Insurance Agency. (888) 343-2667.

EMC SHIFTS AVAILABLE

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

ATTENTION:

Address change for the Roster:

Dong-Wha Ohm, MD

1085 S. Linden Rd. Ste. 100
Flint, MI 48532
Ph: (810) 262-2008
Fax: (810) 230-3366

If you know of potential sponsors or advertisers to support the Genesee County Medical Society please contact Marcia at 810-733-9923.

**Check Out Our Website:
www.gcms.org**

VALLEY AREA AGENCY ON AGING We're Here to Help!

If you're an older adult, a caregiver or a friend concerned about the well being of an older adult, the Valley Area Agency on Aging is here to help. The Valley Area Agency on Aging is a non-profit agency serving persons age 60 and older, and/or disabled individuals in Genesee, Lapeer and Shiawassee Counties. VAAA is able to assist you with the following services:

- Information & Assistance
- MI Choice Waiver Program
- Care Management
- Crisis Intervention Program
- Medicare Medicaid Assistance Program
- Adult Day Care
- Health Screenings
- Legal Assistance
- Nutrition Programs

For more information on programs and services available, please call the
Valley Area Agency on Aging
at (810) 239-7671 or visit our website at www.valleyaaa.org.

GCMS MEMBERS

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