

# THE Bulletin

July 2018 Volume 95, Number 7



## Annual GCMSA Issue!

Special Section on MSMS Opioid Alert  
Invitation to Congressman Kildee's  
Annual Washington Update

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# THE Bulletin

*Read by 96% of GCMS members.*

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### Our Vision

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

### Our Mission

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

### PLEASE NOTE

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

### THE BULLETIN

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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.

## Healing Organized Medicine

Organized medicine is almost as important to the profession of healthcare as are patients to a medical practice. Over the many years of its existence its respect and influence has greatly vacillated. Between fifty and one hundred years ago organized medicine held great power in the deliberation and determination of US healthcare policymaking. The majority of all physicians were simultaneously members of national, state and county medical societies. They were active in many aspects of medicine, making a singular voice heard both by policymakers and the people they served. Presently, physicians do not hold those same attachments required to be that unbridled force of yesteryear, but they are gradually reforming.

The reasons for change are many and not always positive. "The AMA used to be the unifying voice of the profession but now that voice is split between the AMA, and all of the specialty societies in Washington", according to Dean West, president of Association Laboratory, a consulting firm for medical and other professional organizations. Specialty societies now hold a greater percentage of members than does the AMA or State Societies. Because of this, physician voices separate thought, money and power into greater parts with less momentum toward desired change. In the last few decades the command of healthcare dollars has fallen more to large corporations than to physicians. It should be noted that politicians particularly recognize who the money is controlled by.

"Baby boomers are the greatest group of joiners, but younger generations have less of a natural inclination to join anything-not just medicine," according to the Texas Medical Association's vice president for communications, Steve Levine. Google and the rest of the internet have reduced the need for meetings and direct interaction affecting more personal physician engagement. To add to these troubles the AMA has not always been looked on favorably by its constituents with just over 17% of the total of US physicians as members. It occasionally will endorse controversial subjects dividing its members views such as what happened with the Affordable Care Act. Also, the AMA faced accusations by two pediatric residents from Michigan for deriving no more than



*Gerald D. Natzke,  
DO, FAAEM, DIBEM*

14% of its revenue from membership dues. Increasingly, the AMA obtains its income from commercial ventures like selling the rights for its Current Procedural Terminology (CPT) system, according to a report in *The Hill*. Leigh Page from *Medscape* suggests that older male physicians dominate the House of Delegates (HOD) and it does not reflect the demographics of all physicians. All of these points and more have taken their toll and weakened that common voice.

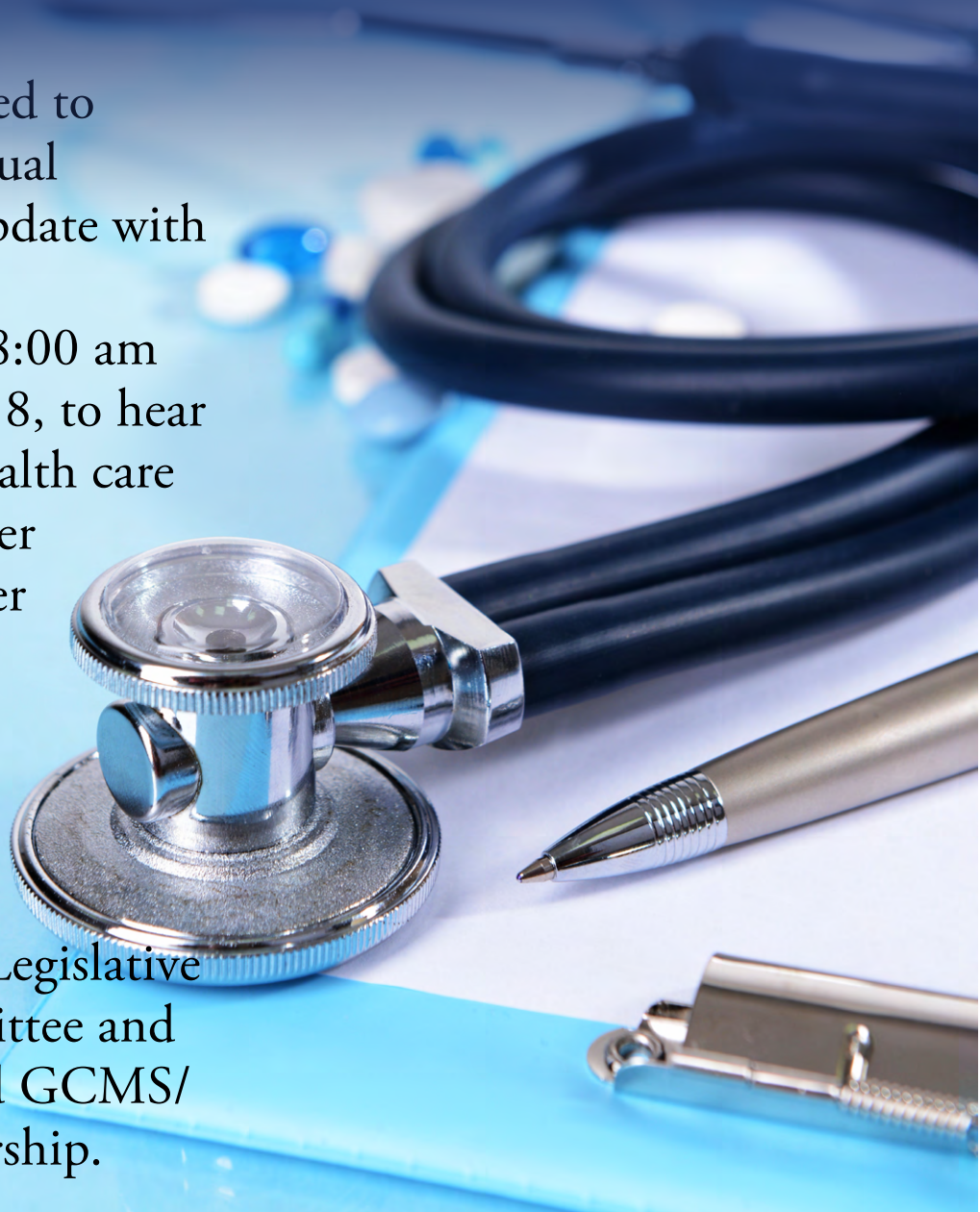
To that end it is felt that Medical Societies need to become more relevant to their constituency. They must find improved ways to maintain their connection to their 'grassroots.'

Medical Societies need to be a part of the solutions to problems facing the profession by engaging activism and encouraging the opinions of its members. A California-based consultant Ed Rigsbee who advises a variety of medical societies wrote a book called *The ROI (return on investment) of Membership, Today's Missing Link for Explosive Growth*. In it, he mentions that many medical societies don't have a clue how to recruit. The old offerings, such as continuing medical education (CME) and informational bulletins, are not enough. He recommends putting together enticements that are valuable to the members and potential recruits. There must be a feeling of connection that encourages all of the member physicians to speak with one voice in their most important matters and those matters have to be vetted by the society's membership.

Organized medicine is far from disappearing. Quite the opposite, it is growing in many areas around the country. There is a growing realization of its importance and what improvements in function are required to accomplish it. What we are witnessing with physician organizations is the transition to better comprehension of what really makes them relevant. Ultimately, the greatest voice physicians will wield is that of advocacy for the patients they serve as it is they who hold true power and influence. Physicians give them a voice and Medical Societies give physicians their voice. That hierarchy will always be an absolute and positive change occurs most thoroughly in health care when this algorithm is understood and embraced.

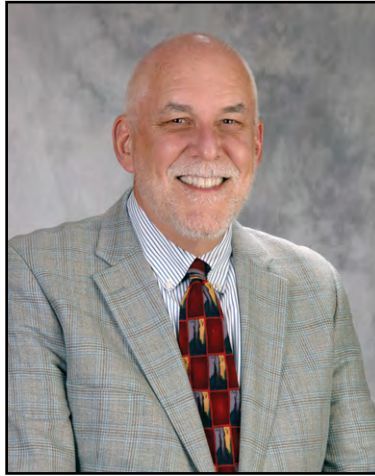
# *Annual* WASHINGTON UPDATE *with Congressman Dan Kildee*

You are invited to attend the Annual Washington Update with Congressman Dan Kildee at 8:00 am on July 23, 2018, to hear the latest on health care reform and other pertinent insider information. Congressman Kildee will provide this annual update to the GCMS Legislative Liaison Committee and other interested GCMS/ GCMSA leadership.



## GCMSA: A Balance of Leadership and Friendship

The annual July issue of *The Bulletin* is always a treat. It reflects the year of friendship, work and service provided by the Genesee County Medical Society Alliance. It is an organization that has been around for longer than any of us have been alive. Over the course of those years, it has performed countless wonderful deeds on behalf of this community and this state. The Genesee County Medical Society Alliance has provided presidents to the Michigan State Medical Society Alliance. It has provided leadership in arenas as diverse as human trafficking, and the Genesee County Free Medical Clinic. It has provided fellowship, friendship, and support to medical families and the families of the patients served by member physicians.



*Peter Levine, MPH*

The articles in this issue of *The Bulletin* reflect a spectrum of Alliance activities. There's something for everyone. I would encourage any GCMS member, to buy a membership for his or her spouse. It goes to a great cause and will provide one's spouse with a lifetime of new relationships, while making physicians and their families a positive component of our community.

### New Prescribing Laws in Effect

This issue of *The Bulletin* contains a list of material from MSMS and other organizations regarding the new laws relating to schedule drugs. These articles have links that practices will find beneficial. More is likely to be coming,

but at the moment, this material is the most complete and cogent.

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# Issues of Serious Concern for Medical Practices!

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



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

**The following topics are tentatively scheduled and subject to change**

**July 26, 2018**  
Presenter(s):

**No Meeting**  
Enjoy your summer!

**August 28, 2018**  
Presenter(s):

**“Meridian Health Plan Updates & Feedback”**  
Jacqueline R. Kirejczyk, Director of Network Development  
Kristen Gasieski, Manager Network Development

**September 27 2018**  
Presenter(s):

**“Compliance”**  
Lindsay Anderson, Chief Compliance Officer/Applications Administrator  
Jessica Thomas, Billing Manager  
Regional Medical Imaging

**October 25, 2018**  
Presenter(s):

**“Molna Follow-Up from May Session”**  
Julie Hurst, Director Provider Contracting Services  
Molina Healthcare

**Genesee County Medical Society | Rapport Conference Room  
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# The Business of Practicing Medicine

By Timothy H. Knecht, Esq., Cline, Cline & Griffin, P.C.

Like it or not, the practice of medicine is a business. There are many twists and turns which you, the physician, need to be aware of in navigating the day-to-day business of practicing medicine. Here are several items to think about.

In 2016, the Michigan Legislature enacted a significant statute related to Physician's Assistants which gives greater autonomy to Physician's Assistants to perform health care services under the terms of a Practice Agreement. The expanded health care services include:

- The ability to make rounds and house calls.
- The ability to prescribe drugs.
- The ability to perform routine visual screening or testing, post-operative care, or assistance in the care of medical diseases of the eye.
- Importantly, the statute eliminates the requirement that Physician's Assistants be supervised at all times by a Physician.

The catch is that for Physician's Assistants to be able to provide these expanded health care services, the Physician's Assistants must enter into a Practice Agreement with the participating Physician. That Practice Agreement must include very specific terms. In general, those terms include a process for communication, availability and decision making between the Physician and the Physician's Assistant when providing medical treatment to a patient. In all cases, Physician's Assistants are only allowed to provide care within the scope of their license.

The agreement must include a protocol for designating an alternative for consultation when the participating Physician is unavailable. The agreement must include a termination provision allowing either party to terminate upon 30 days' written notice to provide for continuity of care.

In all cases, the Physician is responsible for verifying the Physician's Assistant's credentials and the Practice Agreement must be in writing and signed by both the Physician and the Physician's Assistant.

In early 2017, the State of Michigan updated its midwifery legislation. Midwifery is now a part of the public health code and there are new license requirements for the practice of

midwifery. A midwife needs to be licensed, may directly obtain supplies and devices and obtain screening tests and receive verbal and written reports on those tests, must obtain informed consent from the patient and must establish a protocol for transfer of care to a Physician or a hospital. There are certain prohibitions on what a midwife can or cannot do. If your practice involves a midwife, it is important to be aware of this new legislation.

Many medical offices employ Nurse Practitioners as well as or instead of Physician's Assistants. Specific contracts for Nurse Practitioners and Physician's Assistants are different and must be differently written as Nurse Practitioners and Physician's Assistants have different legal responsibilities and different legal, though perhaps not practical, responsibilities.

Take a moment to look at your contracts. If the contract language for Physician's Assistants predates 2016, or for midwives predates 2017, it's time for review and an update.

As always, if you have questions, please feel free to contact the undersigned at [tknecht@ccglawyers.com](mailto:tknecht@ccglawyers.com) or by phone at (810) 232-3141 for more detailed information.

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# June Legislative Liaison Committee Meeting

Present were Nicole Derusha Mackay, Nicole Nohner, Chris Flores, Beth Schumacher, Gary Paavola, Clyde Edwards, Drs. Cathy Blight, Ed Christy, Deborah Duncan, Paul Lazar, Venkat Rao, and Pete Levine.

The Committee welcomed Nicole Nohner, new Government Relations Director at the Michigan State Medical Society. The Committee welcomed Chris Flores, the new District Director for Congressman Dan Kildee.

The Committee reviewed legislation relating to sexual assaults, which was brought about by the Larry Nassar catastrophe. MSMS has been heavily involved with the House and the Senate, expressing concerns about components of these bills.

The Committee also reviewed legislation that would change the statute of limitations for sexual assault. The new statute of limitations for civil issues involving minors is 10 years, or until a minor reaches 28 years of age. Physicians will need to keep records for a longer period of time as a result of this legislation. MSMS will be issuing an updated guidance on this issue.

Ms. Nohner noted that the budget has no surprises on medical issues and graduate medical education.

The Committee discussed the impact of the new opioid legislation at length. MSMS is advocating for a last-minute push for public information on the laws. It is also working hard on the issue of bona fide patient-doctor relationships as it relates to opioids.

Dr. Blight reported that there will be no meeting until Oct. 1 except for the Washington Update from Congressman Kildee at a date to be determined.



# GCMSA President, 2018-19, Feroza Raffee

I am excited and honored to introduce myself to the medical community as the new GCMSA President. First and foremost, I would like to say that I'm humbled to be taking the helm of this outstanding organization. I am flattered by the confidence that you all have placed in me. I can ensure you that I will do my very best to exceed your expectations. I have been a member of this organization for many years and value the diverse medical community, having made lots of lasting friendships.

I would especially like to thank my husband, Abdullah, and my kids for always being so supportive of my extra-curricular activities.

I would like to thank Maria McCann for doing an outstanding job for the past few years. She has lent her support to the Alliance at a time when it was needed most, by filling the role of President when it was vacant last year. We have a very dedicated Executive Board that sacrifices their time in order to make this organization viable. I am grateful to be surrounded by so many smart and hardworking women, which is as motivating as it is inspiring.

Every year, we have a chance to reevaluate the goals of the Alliance. That being said, I think it is important to adapt to changing times while keeping sight of our goals. I would urge everyone to invest in the GCMS as well as the Alliance so that we can continue to make a difference in our community. Additionally, as a branch of the GCMS, I believe it's essential that we continue to support not only the GCMS, but also the Michigan State Medical Society.

I am pleased to announce that our membership has increased as a result of our mailing campaign, with a special thank you to Cheryl Thoms. Furthermore, the Geranium Luncheon/fashion show was well attended in May, thanks to the hard work of Beth Schumacher, Carol, and Cheryl.

I have a few goals that with the help of the board and the members, I would like to achieve this upcoming year. Firstly, the Reach out and Read project is dear to my heart. Childhood literacy is an essential tool for future success and an important investment in future generations.

The Doctors and their Families program has been well received in the past, and I hope to



*Feroza Raffee*

continue its success and efficacy. Furthermore, we will continue to support the Healing Hands 5k Run/Walk. Its success is imperative to the continued survival of the Genesee County Free Medical Clinic, which benefits the community greatly.

The Children's Program is another wonderful way that we can help our community. It is so heartwarming when we distribute gifts to underprivileged children during the holiday season, and a perfect time of year to give back.

Some upcoming social events that I hope to realize include the International Luncheon in September, the President's Ball in November, High Tea, a Book Club, a fashion show, the Friendship Group and lastly the Geranium Luncheon with dates and venues to be announced.

I am looking forward to working with all of our dedicated members during the upcoming year, and I would like to urge everyone to continue to participate, as we are strongest when we all work together. Every little bit helps, whether it is just paying your dues or giving your most valuable asset, your time. If you have any new ideas, please don't hesitate to contact me. I would love to hear from you!

To quote a great leader, Nelson Mandela: "What counts is not the fact that we have lived. It is what difference we have made in the lives of others that will determine the significance of the life we lead."

Visit our website at [www.gcmsalliance.org](http://www.gcmsalliance.org)



*Save the date*  
**November 10th**  
**2018 GCMS/GCMSA**  
**President's Ball**

**GCMS MEETINGS**

— July 2018 —

**Legislative Liaison Committee**

Recessed (until October 1st)

**Community & Environmental Health  
Committee, TBD**

12:30pm, GCMS Office

**2017 Ball Committee, TBD**

3:30pm, GCMS Office

**Annual Washington Update with  
Congressman Kildee. 7/23**

8:00am, GCMS Office

**Practice Managers**

Recessed (until August 23rd)

**Finance Committee**

Recessed (until September 25th)

**Board of Directors**

Recessed (until September 25th)

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*Save  
the date**November 10<sup>th</sup>*

2018 GCMS/GCMSA

**President's  
Ball**

## GCMSA 2018-19 Treasurer, Rosa Wang

Rosa Wang was born and raised in Taipei, the capital and business center of Taiwan. After graduating with a B.A. degree in Western Language and Literature (Majoring in English) in Taiwan, she earned an M.A. degree in Communication Arts from the University of Wisconsin-Madison.

She has a loving husband, Stephen Wang who is a Urologist working along with partners at Urological Services. With Stephen's busy practice he has no time to be involved with investments. Rosa has become a successful venture capitalist for her family in real estate and equity investment. She is also very involved in whatever her volunteer work. The Wangs have three adult children who all live far away with successful careers. Rosa feels fortunate to have the time to focus on the things she wants to achieve, and to give back to the community.

Her passions are helping others to live a better life, including both humans and animals. Her volunteer activities include serving on the Genesee County Human Trafficking Public Awareness Committee, animal shelters, and the humane society, the women's shelter, orphanages, and animal



*Rosa Wang*

protection groups. However, above all, her greatest passion is classical music. She loves to bring people back to the classical music. She believes by loving and listening to music we can achieve harmony.

Rosa is currently a Trustee of the Flint Institute of Music. She served as the Chair of the FIM Development Committee for two years and on the FIM CEO Search Committee in 2015. She is a member of the Flint Symphony Chorus and St. Christopher Episcopal Church Choir.

Rosa has enjoyed the many activities GCMSA has offered for physicians' spouses, and she continues to believe in the importance of volunteering her time to help strengthen this organization. Rosa has been actively involved with the Genesee County Medical Society Alliance for many years and has served on the Board, as Web Master for seven years, and as the President in the year of 2011-12. Besides volunteering for GCMSA, she also picked up the Web Liaison position at the Michigan State Medical Society Alliance from 2008 to 2012. Rosa is very excited to have a chance to serve as the Treasurer for the GCMSA this year.

### Lunch at Rumana Rashid's Home

New member, Rumana Rashid, invited friends in the GCMSA for a "casual lunch" at her lovely home in Grand Blanc. There was nothing casual about it. She had a great spread from scrumptious appetizers to delicious entrees and topped it off with delectable desserts. Thank you, Rumana, for a great time!



*Save the date*

*November 10<sup>th</sup>*

2018

GCMS/GCMSA

*President's  
Ball*





## This Alliance is Special

By Cheryl Thoms

The past year has been a difficult one for the Alliance because we did not have a president. Maria McCann graciously agreed to preside over our monthly Board meetings. Because of the co-operative spirit, we worked as a team to plan the programs to maintain the vitality of our Alliance.

The traditional events all took place including the International Luncheon, our Children's Christmas project, the Friendship Group, the Book Club, the Doctors and Their Families Make a Difference drive, the Healing Hands 5k Run/Walk, and the final event the Geranium Luncheon

which included a fashion show.

Additionally, we arranged a trip to tour Meadowbrook Hall followed by a drive through Rochester to see the phenomenal Christmas Lights Display. The Hall, a magnificent opulent "palace," was lit up with their traditional Christmas decorations.

But the pleasure of experiencing all of this together with Alliance friends made the evening extra special.

Our monthly Book Club is an event which several of us always look forward to. From several suggestions we pick a book to review, then over a simple lunch hosted by one of us, we engage in discussion about what we read. We would encourage joiners. The fellowship is just a bonus to our lives.

Our Friendship Group originally consisted of members who had drifted apart because of a lack of any organized gathering event. It primarily consisted of older women who were widowed or whose husbands had

retired. Meetings are for lunch at a local restaurant and planned sporadically. There is no agenda. The intention is just to be refreshed by meeting with other physician wives. Join us for your pleasure and ours.

The pictures on the following pages hopefully will be the evidence of the fun we have in gathering and doing, both of which are integral parts of who we are. If you are not in the photos, change that this year. Your dues help us function. Your presence makes it special.

The coming year is already shaping up to be a banner year. Feroza Raffee, as our new President, she will keep us focused. She will be helped by Rula Ali-Bakr, our Secretary, and Rosa Wang, our Treasurer. Additionally, there are others who fulfill various functions but the real key to success is having each member participate in the many activities, and inviting other physician spouses to join our Alliance.

The Genesee County Medical Society Alliance (GCMSA) is an important entity of our society augmenting what the Medical Society promotes. And because of the importance of the interdigitation of our two organizations we serve each other and lend mutual support.

We thank Peter Levine and Sherry Smith for their help to our organization.







## The Genesee County Medical Society Alliance Geranium Luncheon

Another Alliance year came to an end with the Annual Geranium Luncheon held at Warwick Hills Golf and Country Club. Cheryl Thoms, and Rula Ali, greeted the members. The program started with an invocation by Liesbeth Fernandez. A brief moment of silence was observed for members lost during this past year with Carol Hassan and Beth Schumacher offering a rose for each in their memory. Immediate Past President, Maria McCann, gave a report on the past year's activities. Pete Levine, Executive Director of the Genesee County Medical Society and Sherry Smith, Executive Administrative Assistant, were thanked for their continued support of GCMSA.

A light and delicious lunch of healthy green salad, crusty rolls with butter and turkey wraps followed. It was topped off with decadent chocolate cake for dessert. It was then time for the eagerly awaited GCMSA Fashion Show with the Alliance members

modeling today's latest fashion. Beth Schumacher, Carol Hassan, Liesbeth Fernandez and Rula Ali did the catwalk donning chic clothing from Cabi's and Kim Rose of Grand Blanc.

The program ended with Lakshmi Tummala installing officers for 2018-2019. Feroza Raffee, Rula Ali and Rosa Wang took oath to serve as President, Secretary and Treasurer, respectively. Thank you, ladies, for stepping up to the plate to give of your time to serve the Alliance.

Past presidents, Judy McLeod, Kathy Cox, Bobbie Schoolfield, Lila Esfahani, Beth Schumacher, Vibha Kaushal, Rula Ali, Liesbeth Fernandez, Elizabeth Jordan, Cheryl Thomas and Lakshmi Tummala, were recognized for their service with a beautiful pot of geraniums.







ANNUAL GCMSA  
*Geranium Luncheon*

AT WARWICK HILLS GOLF AND COUNTRY CLUB



# Healing Hands 2018!

The 2018 Healing Hands Run/Walk benefiting the Genesee County Free Medical Clinic was another major success. Over 200 runners and walkers assembled to support the clinic and engage in healthy behavior. The Run/Walk is beautifully organized annually by the Genesee County Medical Society Alliance, and the Pi Delta Chapter Nursing Honor Society.

The Free Clinic's biggest fundraiser and promotional activity raised \$118000! The Genesee County Free Medical Clinic is always in need to volunteers: Physicians, pharmacists, nurses, MAs, clerical professionals.

The clinic is also in need of donations of services, such as building maintenance.

This is a community jewel without which, a significant portion of the population would have reduced access to health care.





# International Luncheon

hosted by *Dr. & Mrs. Shafi Ahmed*



The GCMSA is in hiatus during summer. We kick off our fiscal year with the ever-popular International Luncheon. This year, it was held at the beautiful home of Dr. and Mrs. Shafi Ahmed. The house is located on a ranch on the outskirts of Otisville. As always, attendance was great. The unity in diversity was evident in the representation of members hailing from countries far and wide, including Bangladesh, Canada, Egypt, India, Peru and South Korea. Since this was a potluck, we had a chance to sample ethnic foods from various countries, prepared with love and care by many of our members.



We had time to catch up with our current members and welcomed new ones. Past President, Maria McAnn, gave a brief report on the organizations membership status and urged all to get actively involved. Sue Lauber and Rosa Wang spoke about the documentary on human trafficking, which is a major issue of concern in our community. Our lovely hostess, Ruqsana, treated us to a couple of Bollywood songs that enthralled the audience. A BIG thank you to the Ahmed's.



# GCMSA ANNUAL CHILDREN'S PROGRAM

The annual Children's Program for last year was Weiss House Children's Advocacy Center.

After touring the House and talking with the director about what they do there, and the kinds of things that they need, I felt like it would be a good program for our Alliance. The Director suggested that we could help out with Christmas gifts for the families that they were working with. These families that take in displaced children are given very little allowance to provide for these children and it can be difficult to provide a Christmas for them. This is where organizations like our Alliance can be of great help. We were given a "wish list" of Christmas requests from the families. Despite the short shopping time and specific, sometimes hard to find items, the ladies of the Genesee County Medical Society Alliance came through. We were able complete the entire list of 27



children.

I am so thankful to our members and their hard work during a busy and hectic time of the year. Everyone did an amazing job, and we were able hopefully make a Merry Christmas for these children that have been through so much.

Save the date

2018 GCMS/GCMSA

President's Ball

November 10<sup>th</sup>

# “Ring of Silence” A Feature-Length Film

Submitted by Sue Lauber



The Genesee County Medical Society Alliance is proud to sponsor the film: “Ring of Silence”, a feature-length film to help raise awareness of sexual human trafficking for teens, parents and teachers.

“Ring of Silence” was filmed in Genesee County last fall, with a cast and crew of nearly 500 people, (many from the GCMSA), including three teen celebrities from L.A.

Award-winning, Michigan-based NBW Films produced the film, which tells a passionate story of a love gone wrong. “The script is based on real stories from the FBI so that teens can learn how human trafficking starts. A handsome young man finds a young girl on the internet – so many ways to do this on social media. The grooming takes time. There is trust, but the predator is smart; he knows young women want love and acceptance. It starts with compliments, caring and gifts and evolves to drugs and sexual slavery,” says Nicole Wallace, President of NBW Films.

“Ring of Silence” was shot with locations that can represent Anytown, U.S.A. “Human Trafficking

happens in small towns to large cities, everywhere,” says Sue Lauber, one of the four producers of the film and member of the GCMSA.

“This is a woman driven film, female film director, four female film producers (Patti Higgins, Kimberly Gray, Rosa Wang and Sue Lauber) and 80% female sponsors. This is a huge statement the women of our community are making as they are taking a stand against human trafficking”.

The film team hopes that once the teens know the realities of human trafficking they will be better prepared to walk away and start taking action.

You can view the movie trailer on the “Ring of Silence” Facebook page. Be sure and check the FB page often for updates and like and share to your FB friends.

-or- go to YouTube “Ring of Silence” movie trailer – I thought he loved me.

<https://www.youtube.com/watch?v=HdJkwzYPiz4>  
(control-click to open)

The film is currently in editing. A Flint premier is being planned.

## HAPPY BIRTHDAY DOCTOR

JULY

Katikuti Dutt, MD .....	1	Frederick VanDuyne, MD .....	15
Barina Zado, MD .....	1	Koteswara Vemuri, MD .....	15
Louise Desgranges, MD .....	1	Peter Rydesky, MD .....	17
Tarik Wasfie, MD .....	1	Melinda Wheatley, MD.....	19
John Hebert, III, MD .....	1	Christopher Goltz, MD .....	19
Leo Mercer, MD .....	2	Orestes Iung, MD .....	22
Abdul Moqtadir Hasnie, MD.....	2	Farhan Khan, MD .....	22
John Morrison, MD.....	2	Allen Turcke, MD .....	24
John Waters, MD.....	3	Jae Kim, MD .....	25
Karen Moses, MD.....	4	Jon Santiago, MD .....	25
Glen Sullenger, MD .....	6	Dong Whan Oh, MD .....	25
Purushottam Naik, MD .....	7	Lauren O'Connell, MD .....	25
Kamal Hasan, MD.....	7	Robert Cross, MD .....	26
James Gibbons, MD .....	8	James Knaggs, MD .....	26
Fikria Hassan, MD.....	9	David Strahle, MD .....	27
Bhadrabala Ganatra, MD.....	9	Edward Holden, MD .....	27
Niketa Dani, MD .....	9	Eyassu Habte-Gabr, MD .....	28
Katie Nolen, MD .....	11	Seann Willson, MD .....	28
AppaRao Mukkamala, MD .....	14	Rachel Young, DO .....	31



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[sovitacu.org](http://sovitacu.org)



# OPIOID

# Alert



UPDATED APRIL 2018

On December 27, 2017, the Lieutenant Governor signed into law several new requirements aimed at combating the opioid epidemic. On the following pages is an objective analysis of the new laws that could have direct implications for physicians and medical practices.



# PRESCRIBING OPIOIDS TO A MINOR – REQUIREMENT FOR INFORMED CONSENT

(House Bill 4408, Public Act 246 of 2017)

Effective June 1, 2018, before issuing an initial prescription for an opioid in a single course of treatment to a minor, a prescriber must discuss all of the following with the minor and the minor's parent or guardian:

- The risks of addiction and overdose
- The increased risks of addiction for patients with underlying mental health or existing substance use disorders
- The danger of taking an opioid along with a benzodiazepine, alcohol or other central nervous system depressant
- Any other information in the patient counseling information section of the label for the controlled substance that is required under federal law (21 CFR 201.57(c) (18))
- The prescriber must document the informed consent on a "Start Talking Consent Form," which must contain:
  - » *The name and quantity of the controlled substance being prescribed for the minor and the amount of the initial dose*
  - » *A statement indicating that a controlled substance is a drug or other substance that the United States Drug Enforcement Administration has identified as having a potential for abuse*
  - » *A statement certifying that the prescriber discussed with the minor, and with the minor's parent or guardian or with another adult authorized to consent to the minor's medical treatment, the topics outlined in the bill*
  - » *The number of refills, if any, that are authorized by the prescription*
  - » *A space for the signature of the minor's parent or guardian or the signature of another adult authorized to consent to the minor's medical treatment, and a space to indicate the date that the minor's parent or guardian or another adult authorized to consent to the minor's medical treatment signed the form*

## Exceptions to the informed consent include:

- If the minor's treatment is associated with or incident to a medical emergency
- If the minor's treatment is associated with or incident to a surgery, regardless of whether the surgery is performed on an inpatient or outpatient basis
- If, in the prescriber's professional judgment, fulfilling the requirements of the bill would be detrimental to the minor's health or safety
- If the minor's treatment is rendered in a hospice or oncology department of a hospital that is licensed by the state
- If the prescriber is issuing the prescription for the minor at the time of discharge from hospice
- If the consent of the minor's parent or guardian is not legally required for the minor to obtain treatment

## ENFORCEMENT

Failure to comply with this section could result in the following disciplinary actions against a physician's license: probation, limitation, denial, fine, suspension, revocation or permanent revocation.



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## PATIENT INFORMATION ON OPIOID RISKS – REQUIREMENT FOR INFORMED CONSENT

(House Bill 4408, Public Act 246 of 2017)

Effective June 1, 2018, before an opioid is prescribed to a patient by a physician (and/or any other prescribers licensed with the state), the physician will be required to obtain the patient's informed consent on a form prescribed by the Michigan Department of Health and Human Services that they have received from the physician, the following information:

- The danger of opioid addiction
- How to properly dispose of an expired, unused or unwanted controlled substance
- That the delivery of a controlled substance is a felony under Michigan law
- If the patient is pregnant or is a female of reproductive age, the short- and long-term effects of exposing a fetus to a controlled substance, including neonatal abstinence syndrome

### Exception:

If the opioid is prescribed for inpatient use.

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### ENFORCEMENT

Failure to comply with this section could result in disciplinary action by the Michigan Board of Medicine.

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## MANDATORY MICHIGAN AUTOMATED PRESCRIPTION SYSTEM (MAPS) CHECKS

(Senate Bills 166 & 167, Public Act (PA) 248 of 2017, and PA 249 of 2017)

Effective June 1, 2018, all licensed prescribers in Michigan will be required to query the Michigan Automated Prescription System (MAPS) when prescribing controlled substances to any patient.

### Exceptions include the following:

- Prescriptions written for quantities less than or equal to a 3-day supply
- If dispensing occurs in hospital or surgical freestanding outpatient facility and is administered in the facility
- If the patient is an animal and the controlled substance is administered in a veterinary hospital or clinic
- If the controlled substance is prescribed by a veterinarian and dispensed by a pharmacist

Beginning **June 1, 2018**, all licensed prescribers in Michigan must be registered with MAPS before prescribing or dispensing a controlled substance to a patient.

### ENFORCEMENT

Prescribing or dispensing a controlled substance on or after **June 1, 2018**, without first registering with MAPS could result in the following disciplinary actions against a physician's license: denial, fine, reprimand, probation, limitation, suspension, revocation, or permanent revocation.

Failure to query MAPS when prescribing controlled substances to any patient, starting June 1, 2018, could result in the following disciplinary actions against a physician's license: denial, fine, reprimand, probation, limitation, suspension, revocation, or permanent revocation.

If a physician has violated the requirement to check or register with MAPS, the Department of Licensing and Regulatory Affairs may issue a letter to the licensee notifying the licensee that he or she may be in violation. A letter would not be considered discipline.

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## LIMITATION ON OPIOID PRESCRIBING: 7-DAYS FOR ACUTE PAIN

(Senate Bill 274, Public Act 251 of 2017)

Beginning July 1, 2018, if a licensed prescriber is treating a patient for acute pain, the prescriber shall not prescribe the patient more than a 7-day supply of an opioid within a 7-day period.

“Acute pain” is defined as pain that is the normal, predicted physiological response to a noxious chemical or thermal or mechanical stimulus and is typically associated with invasive procedures, trauma, and disease and usually lasts for a limited amount of time.

### ENFORCEMENT

Non-compliance could result in disciplinary action by the Michigan Board of Medicine.

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## BONA FIDE PRESCRIBER-PATIENT RELATIONSHIP

(Senate Bill 270, Public Act 247 of 2017)

Beginning March 31, 2018, a licensed prescriber shall not prescribe a controlled substance listed in schedules 2 to 5 unless the prescriber is in a “bona fide prescriber-patient relationship.” **(Note: Pursuant to Public Act 101 of 2018 signed by the Governor on April 2, 2018, the effective date of this provision has been extended to March 31, 2019, or upon the promulgation of administrative rules if before March 31, 2019.)**

If a licensed prescriber prescribes a controlled substance, he or she must provide follow-up care to the patient to monitor the efficacy of the use of the controlled substance. If a licensed prescriber is not able to provide follow-up care, the prescriber shall refer the patient to the patient’s primary care provider for follow-up care or, if the patient does not have a primary care provider, the physician must refer the patient to another geographically accessible primary care provider.

“Bona fide prescriber-patient relationship” is defined as treatment or counseling relationship between a prescriber and a patient in which both of the following are present:

- The prescriber has reviewed the patient’s relevant medical or clinical records and completed a full assessment of the patient’s medical history and current medical conditions, including a relevant medical evaluation of the patient conducted in person or via telehealth
- The prescriber has created and maintained records of the patient’s condition in accordance with medically accepted standards

### ENFORCEMENT

Failure to comply with this section could result in the following disciplinary actions against a physician’s license: probation, limitation, denial, fine, suspension, revocation, or permanent revocation.

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## PHYSICIAN REFERRAL FOR SUBSTANCE USE DISORDER

(Senate Bill 273, Public Act 250 of 2017)

Effective March 27, 2018, a physician who treats a patient for an opioid-related overdose is required to provide information to the patient on “substance use disorder services.”

“Substance use disorder treatment and rehabilitative services” is defined under the Michigan Mental Health Code as including:

- Early intervention and crisis intervention counseling services for individuals who are current or former individuals with substance use disorder
- Referral services for individuals with substance use disorder, their families, and the general public
- Planned treatment services, including chemotherapy, counseling, or rehabilitation for individuals physiologically or psychologically dependent upon or abusing alcohol or drugs

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## DIRECT ADMINISTRATION OF A CONTROLLED SUBSTANCE & MEDICATION ASSISTED TREATMENT

(Senate Bill 47, Public Act 252 of 2017)

Effective March 27, 2018, when dispensing a controlled substance a dispensing prescriber is required to report the dispensing of the controlled substance to MAPS. Public Act 252 of 2017 also rescinded Rule 338.3162e of the Administrative Code, which exempted from mandatory MAPS reporting a controlled substance administered directly to a patient . **(Note: On April 3, 2018, The Michigan Department of Licensing and Regulatory Affairs, Bureau of Professional Licensing, clarified with MSMS that it is the agency's position that the legislatures repeal of the exemption does not require reporting to MAPS when a controlled substance is administered directly to a patient.)**

Moreover, physician offices that prescribe buprenorphine or methadone as part of an approved substance use disorder program, must query MAPS prior to prescribing. Physicians who dispense buprenorphine or methadone on premises, as part of an approved substance use disorder program, are required to query and report data associated with the encounter to MAPS so long as federal law does not prohibit the reporting of data concerning the patient.

**Exceptions to the MAPS reporting requirement when dispensing a controlled substance include the following circumstances:**

- A hospital that is licensed under article 17 that administers the controlled substance to an individual who is an inpatient.
- A health facility or agency licensed under article 17 if the controlled substance is dispensed by a dispensing prescriber in a quantity adequate to treat the patient for not more than 48 hours.
- A veterinary hospital or clinic that administers the controlled substance to an animal that is an inpatient.

# Drug Schedules

Drugs, substances, and certain chemicals used to make drugs are classified into five (5) distinct categories or schedules depending upon the drug's acceptable medical use and the drug's abuse or dependency potential. The abuse rate is a determinate factor in the scheduling of the drug; for example, Schedule I drugs have a high potential for abuse and the potential to create severe psychological and/or physical dependence. As the drug schedule changes-- Schedule II, Schedule III, etc., so does the abuse potential-- Schedule V drugs represents the least potential for abuse. A Listing of drugs and their schedule are located at Controlled Substance Act (CSA) Scheduling or CSA Scheduling by Alphabetical Order. These lists describes the basic or parent chemical and do not necessarily describe the salts, isomers and salts of isomers, esters, ethers and derivatives which may also be

classified as controlled substances. These lists are intended as general references and are not comprehensive listings of all controlled substances.



Please note that a substance need not be listed as a controlled substance to be treated as a Schedule I substance for criminal prosecution. A controlled substance analogue is a substance which is intended for human consumption and is structurally or pharmacologically substantially similar to or is represented as being similar to a Schedule I or Schedule II substance and is not an approved medication in the United States. (See 21 U.S.C. §802(32)(A) for the definition of a controlled substance analogue and 21 U.S.C. §813 for the schedule.)

## Schedule I

Schedule I drugs, substances, or chemicals are defined as drugs with no currently accepted medical use and a high potential for abuse. Some examples of Schedule I drugs are:

heroin, lysergic acid diethylamide (LSD), marijuana (cannabis), 3,4-methylenedioxymethamphetamine (ecstasy), methaqualone, and peyote

## Schedule II

Schedule II drugs, substances, or chemicals are defined as drugs with a high potential for abuse, with use potentially leading to severe psychological or physical dependence. These drugs are also considered dangerous. Some examples of Schedule II drugs are:

Combination products with less than 15 milligrams of hydrocodone per dosage unit (Vicodin), cocaine, methamphetamine, methadone, hydromorphone (Dilaudid), meperidine (Demerol), oxycodone (OxyContin), fentanyl, Dexedrine, Adderall, and Ritalin

## Schedule III

Schedule III drugs, substances, or chemicals are defined as drugs with a moderate to low potential for physical and psychological dependence. Schedule III drugs abuse potential is less than Schedule I and Schedule II drugs but more than Schedule IV. Some examples of Schedule III drugs are:

Products containing less than 90 milligrams of codeine per dosage unit (Tylenol with codeine), ketamine, anabolic steroids, testosterone

## Schedule IV

Schedule IV drugs, substances, or chemicals are defined as drugs with a low potential for abuse and low risk of dependence. Some examples of Schedule IV drugs are:

Xanax, Soma, Darvon, Darvocet, Valium, Ativan, Talwin, Ambien, Tramadol

## Schedule V

Schedule V drugs, substances, or chemicals are defined as drugs with lower potential for abuse than Schedule IV and consist of preparations containing limited quantities of certain narcotics. Schedule V drugs are generally used for antidiarrheal, antitussive, and analgesic purposes. Some examples of Schedule V drugs are:

cough preparations with less than 200 milligrams of codeine or per 100 milliliters (Robitussin AC), Lomotil, Motofen, Lyrica, Parepectolin

And an alphabetical listing of Controlled Substances here:

[https://www.deadiversion.usdoj.gov/schedules/orangebook/c\\_cs\\_alpha.pdf](https://www.deadiversion.usdoj.gov/schedules/orangebook/c_cs_alpha.pdf)

# 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](mailto:plevine@gcms.org).**



**Don't  
Forget!**  
**Donations  
are tax  
deductible!**

**Please feel free to contact Peter Levine, Executive Director  
at 810-733-9925 or [plevine@gcms.org](mailto:plevine@gcms.org).**

**Genesee County Medical Society**  
**Board of Directors**  
**March 27, 2018 - 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.

Dr. Natzke introduce Dr. Mohamed Arsiwalla from Wayne County, candidate for MSMS President Elect.

Dr. Arsiwalla presented his background and credentials and asked for GCMS support.

**II. Review of Minutes**

**Motion: that the minutes of February 27, 2018, 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 a meeting was held with the Community Foundation of Greater Flint (CFGF) which appears to have been positive, although no firm commitments were made. There is a possibility that they would help fund a pilot. The committee will follow up with community foundation staff. Dr. Natzke also noted that discussions have been held with Senator Ananich's staff regarding putting something in the state budget to support a pilot.

**B) Finance**

**Motion: that the budget to actual report for the period ending February 28, 2018, be approved as presented. The motion carried.**

**C) Membership**

Directive: staff was directed to determine what the 10% discount reflects in the MSMS trend report. (staff later determined that it reflects full dues for GCMS and a 10% discount for MSMS dues).

**D) AMA Update**

Dr. S. Bobby Mukkamala reported that the AMA is advocating the lifting of the federal ban on CDC gun research. The AMA is also working on mental health funding and banning high-capacity gun magazines. It is also working to block mergers like that between CVS pharmacy and Aetna Insurance company. It is working closely with CMS on meaningful use incentives to make them more rational. It is working with HHS on the opioid issue.

**E) MSMS Update**

Dr. Mukkamala reported that MSMS is working on a legislative fix for the definition of "bona fide relationships" relating to scheduled drugs. The implementation of this law will be delayed until March 2019.

**F) House of Delegates**

Levine reported that all 10 resolutions approved by the Board, have been sent to MSMS for the House of Delegates.

**G) Legislative Liaison**

The next meeting of the Legislative Liaison Committee meeting will take place on May 7th at 8 AM. Dr. Blight reviewed several political fundraisers that are being held. Information on those events will be communicated to the membership.

**Genesee County Medical Society**  
**Board of Directors**  
**March 27, 2018 - Minutes**

**H) Greater Flint Health Coalition**

Dr. John Waters reported on the Greater Flint Health Coalition Board of Directors meetings and provided more specificity on the State Innovation Model and the community opioid plan.

Dr. Farhan Khan reported that the State Innovation Model is going forward. PMC and MPP are heavily involved. He noted the importance of the community referral system that will allow electronic referrals to community-based organizations, and to monitor their effectiveness. He also said that case managers are the future of medicine, and that this project provides resources to integrate them into practices. He said that the social determinants of health questionnaire that is being used as part of the State Innovation Model shows that food, depression, and transportation are the prime impediments to health among the patients seen.

Dr. Khan and Pete Levine reviewed the community opioid plan and analysis of data. It was noted that this is a good project. Every effort is being made to make sure that the physician specific data is accurate. Levine noted that Dr. Ishaque already has plans to meet with a practice which has numbers beyond the norm.

**I) Presidents' Report**

The Board reviewed and discussed specific components for the May 3rd General Membership Meeting on Suboxone and opioid issues. First priority is a presentation by a Suboxone certified physician.

1. Introduction to the Opioid Crisis in Genesee County – TBD
2. The Importance of Suboxone Certification, Drs. Pyatt or Musson
3. Physician Specific Describing Data Availability, Dr. Ishaque
4. What to do with Chronically Dependent Patients, Drs. Musson or Pyatt
5. Update on MAPS Laws, Stacey Hettiger or Bryanna McGarry
6. An Overview of Local Resources (input from the Task Force will be requested)

**IV. IV. New Business**

Pete Levine reported the Genesee Health System has been selected to coordinate physical and behavioral health for Medicaid managed care patients in Genesee County under section 298 of the public health code. He said that the health plans in Genesee Health System will be meeting to determine how to move forward. They currently have no idea what they will be doing.

**V. V. Other Business**

Peter Levine reported on the March 22nd practice managers meeting. It featured interaction between practice managers and the new Director of Provider Outreach from Blue Cross Blue Shield and Blue Care Network, Donna LaGosh. Ms. LaGosh was the Executive Director of the Oakland County Medical Society for many years and is coming to her position with a desire to make her department more functional for the provider community and for Blue Cross. She will be reporting back to the practice managers on June 28th regarding the outcomes of the issues presented by practice managers.

**VI. VI. Adjournment**

No further business appearing, the meeting was adjourned at 7:30 pm.


Respectfully submitted,  
Peter Levine, MPH  
Executive Director



# July 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.

	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SAT
JULY 2018	2 <b>Enhance Fitness</b> Hasselbring Senior Center 9:00 a.m.  <b>Senior Stretch</b> YMCA Downtown 10am  <b>Pound</b> GAC 10:15am  <b>Arthritis Foundation Exercise Program</b> Loose Senior Center 2:00-3:00pm  <b>Aqua Fitness</b> U of M-Flint Rec 5:30-6:30 pm	3 <b>Enhance Fitness</b> Flint Farmers' Market 10:00 a.m.  <b>Arthritis Foundation Exercise Program</b> Grand Blanc Senior Center 10:00-11:00am  <b>Splash Bash</b> U of M-Flint Rec 11:00 am  <b>Enhance Fitness</b> Hamilton Health Clinic 12:00 pm	4 	5 <b>Enhance Fitness</b> Berston Field House 10:00 a.m.  <b>Arthritis Foundation Exercise Program</b> Grand Blanc Senior Center 10-11:00am  <b>Basic Yoga</b> Insight Health & Fitness center 6:45 p.m.	6 <b>Enhance Fitness</b> Hasselbring Senior Center 9:00 a.m.  <b>Arthritis Foundation Exercise Program</b> Burton Senior Center 9:00-10:00am  <b>Arthritis Foundation Exercise Program</b> Swartz Creek Senior Center 11am-12pm	7
	9 <b>Enhance Fitness</b> Hasselbring Senior Center 9:00 a.m.  <b>Senior Stretch</b> YMCA Downtown 10am  <b>Pound</b> GAC 10:15am  <b>Arthritis Foundation Exercise Program</b> Loose Senior Center 2:00-3:00pm  <b>Aqua Fitness</b> U of M-Flint Rec 5:30-6:30 pm	10 <b>Enhance Fitness</b> Flint Farmers' Market 10:00 a.m.  <b>Arthritis Foundation Exercise Program</b> Grand Blanc Senior Center 10:00-11:00am  <b>Splash Bash</b> U of M-Flint Rec 11:00 am  <b>Enhance Fitness</b> Hamilton Health Clinic 12:00 pm	11 <b>Enhance Fitness</b> Hasselbring Senior Center 9:00 a.m.  <b>Arthritis Foundation Exercise Program</b> Davison Area Senior Center 10:00-11:00am  <b>Arthritis Foundation Exercise Program</b> Forest Township Senior Center 12:15-1:00pm  <b>Community Yoga</b> 5:15 PM - 6:15 PM Crim Fitness Foundation  <b>Enhance Fitness</b> Hamilton Main Clinic 5:30 pm  <b>Zumba</b> GAC 5:30 p.m.	12 <b>Enhance Fitness</b> Berston Field House 10:00 a.m.  <b>Arthritis Foundation Exercise Program</b> Grand Blanc Senior Center 10-11:00am  <b>Basic Yoga</b> Insight Health & Fitness center 6:45 p.m.	13 <b>Enhance Fitness</b> Hasselbring Senior Center 9:00 a.m.  <b>Arthritis Foundation Exercise Program</b> Burton Senior Center 9:00-10:00am  <b>Arthritis Foundation Exercise Program</b> Swartz Creek Senior Center 11am-12pm	14
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# July 2018 Fitness Calendar

**FREE! Commit to Fit! Class Schedule**

<p style="text-align: right;">23</p> <p><b>Enhance Fitness</b> Hasselbring Senior Center 9:00 am</p> <p><b>Senior Stretch</b> YMCA Downtown 10:00</p> <p><b>Pound</b> GAC 10:15am</p> <p><b>Arthritis Foundation Exercise Program</b> Loose Senior Center 2:00-3:00pm</p> <p><b>Aqua Fitness</b> U of M-Flint 5:30pm</p>	<p style="text-align: right;">24</p> <p><b>Enhance Fitness</b> Flint Farmers' Market 10:00 a.m.</p> <p><b>Arthritis Foundation Exercise Program</b> Grand Blanc Senior Center 10:00-11:00am</p> <p><b>Splash Bash</b> U of M-Flint Rec 11:00 am</p> <p><b>Enhance Fitness</b> Hamilton Health Clinic 12:00 pm</p>	<p style="text-align: right;">25</p> <p><b>Enhance Fitness</b> Hasselbring Senior Center 9:00 a.m.</p> <p><b>Arthritis Foundation Exercise Program</b> Davison Area Senior Center 10:00-11:00am</p> <p><b>Arthritis Foundation Exercise Program</b> Forest Township Senior Center 12:15-1:00pm</p> <p><b>Enhance Fitness</b> Hamilton Main Clinic 5:30 pm</p> <p><b>Zumba</b> GAC 5:30 p.m</p>	<p style="text-align: right;">26</p> <p><b>Enhance Fitness</b> Berston Field House 10:00 a.m.</p> <p><b>Arthritis Foundation Exercise Program</b> Grand Blanc Senior Center 10-11:00am</p> <p><b>Basic Yoga</b> Insight Health &amp; Fitness center 6:45 p.m.</p>	<p style="text-align: right;">27</p> <p><b>Enhance Fitness</b> Hasselbring Senior Center 9:00 a.m</p> <p><b>Arthritis Foundation Exercise Program</b> Burton Senior Center 9:00-10:00am</p> <p><b>Arthritis Foundation Exercise Program</b> Swartz Creek Senior Center 11am-12pm</p>	<p style="text-align: right;">28</p>
<p style="text-align: right;">30</p> <p><b>Enhance Fitness</b> Hasselbring Senior Center 9:00 am</p> <p><b>Senior Stretch</b> YMCA Downtown 10:00</p> <p><b>Pound</b> GAC 10:15am</p> <p><b>Arthritis Foundation Exercise Program</b> Loose Senior Center 2:00-3:00pm</p> <p><b>Aqua Fitness</b> U of M-Flint 5:30pm</p>	<p style="text-align: right;">31</p> <p><b>Enhance Fitness</b> Flint Farmers' Market 10:00 a.m.</p> <p><b>Arthritis Foundation Exercise Program</b> Grand Blanc Senior Center 10:00-11:00am</p> <p><b>Splash Bash</b> U of M-Flint Rec 11:00 am</p> <p><b>Enhance Fitness</b> Hamilton Health Clinic 12:00 pm</p>				

*Save the date*

**November 10<sup>th</sup>**

**2018 GCMS/GCMSA  
President's Ball**

# July 2018 Fitness Calendar

FREE! Commit to Fit! Class Schedule

## Class Descriptions & Locations

### Basic Yoga (1 hour)

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

#### Insight Health & Fitness Center (IHFC)

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



**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. 3<sup>rd</sup> 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



Questions?  
Email [commit2fit@flint.org](mailto:commit2fit@flint.org)

**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



#### Berston Field House

3300 Saginaw St.  
Flint, MI 48505  
Thursdays, 10:00am

#### Main Clinic

2900 N. Saginaw Street  
Flint, MI 48505  
Wednesdays, 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!



**Arthritis Foundation Exercise Program (1 hour)** A low-impact physical activity program proven to reduce pain and decrease stiffness. The routines include gentle range-of-motion exercises that are suitable for every fitness level!

#### Grand Blanc Senior Center:

Tuesday & Thursdays 10am – 11am

#### Swartz Creek Senior Center:

Fridays 11am – 12pm





## MEMBERSHIP APPLICATION & RENEWAL FORM 2018-2019 GENESEE COUNTY MEDICAL SOCIETY ALLIANCE

Alliance Member's Full Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Home Phone # \_\_\_\_\_

\*Cell Phone if desired \_\_\_\_\_

\*E-Mail Address: \_\_\_\_\_

Physicians Full Name: \_\_\_\_\_

Annual Dues:

GCMS Alliance \$30.00 NO DISCOUNT ON COUNTY DUES

MSMS Alliance \$32.00 -(\$25 State dues ONLY if retired)

**IMPORTANT: Check payable to GCMSA**

Total Remittance: \_\_\_\_\_

Mail to: Cheryl Thoms  
GCMS Alliance Membership  
1213 Carter Dr.  
Flint, MI 48532  
Phone # 732-7719 if you have any questions



*Save the date*  
**November 10th**  
**2018 GCMS/GCMSA**  
**President's Ball**

*Did you recognize...*  
**Cyrus Farrehi, MD**  
 Past President



*Your*  
**HEALTH CARE LAW FIRM**



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- **RAC, Medicare, Medicaid and Commercial Payor Audits**
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- **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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please give

## 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](mailto: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

Join  
GCMS/MSMS