



THE Bulletin

April 2017 Volume 112, Number 37

***May 4th Town Hall Meeting:
Avoiding Fraud & Abuse***

Physician Alert System Update

***Press Release: In Grateful Recognition
of Foreign Born Physicians***

AMA Statement on ACHA

***See April - September Topics for
Practice Managers Meetings!***

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THE Bulletin

Read by 96% of GCMS members.

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Cover Photo, Cyrus Farrehi, MD

Our Vision

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

Our Mission

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

PLEASE NOTE

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

THE BULLETIN

Published by the Genesee County Medical Society Publication Office

4438 Oak Bridge Drive, Suite B, Flint, Michigan 48532
Phone (810) 733-6260 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.

This publication
designed and
edited by



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CLINICAL EXPERIENCE AND EDUCATIONAL WORK

In the new Accreditation Council for Graduate Medical Education (ACGME) Common Program Requirements, effective July 1, 2017, "Clinical Experience and Educational Work" replace the term "duty hours." These changes have been made in response to concerns that the previous use of the term "duty" in reference to the number of hours worked may have led some to conclude that residents' duty to leave work on time superseded their duty to their patients.

As a senior physician who trained prior to 1990s, I have witnessed firsthand the evolution of the regulation and monitoring of resident physician work hours. In fact, when I was a resident the term "duty" only meant that you were working. Hours, if addressed at all was only to achieve a semblance of equitable distribution among residents rather than how many continuous hours, or intervals between calls. Long hours on duty were an integral part of residency training. Long periods of hard work and dedication to patient care were considered essential to a resident's preparation for a career as a dedicated attending physician.

I vividly recall taking weekend call for 48 hours followed by 8-10 hours of duty on the following Monday for a total of 56-58 hours of continuous duty being routine. Fatigue associated with that amount of call was an acceptable norm. This was particularly true with surgical specialties.

Resident performance following long duty hours was first studied in the 1970s. By the 1980's residency, training was viewed very differently. Attention was drawn to addressing the issue of long work hours during residency and how to combat resident fatigue that could compromise patient safety. The earliest ACGME Program Requirements for Graduate Medical Education in both Internal Medicine and Pediatrics in 1980-81 issued statements on a balance of education and service. The Pediatric standard stated, "Hospital duties should not be so pressing or consuming that they preclude ample time for other important phases



John Hebert, MD

of the training program or for personal needs."

In 1984, the death of a patient in a New York State teaching hospital was linked to a 36-hour duty period worked by the residents involved in her care with inadequate attending physician supervision. This ultimately led to the Bell Commission, which recommended an 80-hour limit on weekly resident hours worked, a maximum of 24 consecutive hours on duty and a requirement for the presence of senior physicians in the hospital. These recommendations were incorporated into the New York

State Health Code in 1989 making, New York the first and only state to adopt regulatory standards for resident work hours.

Following New York's lead in 1987, the ACGME authorized the formation of a Task Force on Resident Supervision. The Task Force developed preliminary recommendations that included:

1. One day in seven away from the hospital
2. On call duty in the hospital no more frequently than every third night
3. Adequate backup if sudden and unexpected patient care needs create resident fatigue sufficient to jeopardize patient care
4. Instructional policies to ensure that all residents are adequately supervised

The AAMC in 1987 presented guidelines that specified that hours should not exceed 80 hours per week averaged over four weeks. The ACGME adopted the Task Force's report, which resulted in the 1992 Common ACGME Standards. These were clarified to define the Maximum Duty Period Length as 30 hours (admitting patients up to 24 hours, and then six additional hours for transitional and educational activities).

Major changes were made to the ACGME Duty Hour Regulations in 2011 when PGY-1 residents were limited to a Maximum Duty Period length of 16 hours. This change was made to minimize

the likelihood that first-year residents might make mistakes while fatigued. This change had a major impact on resident call schedules including, the resultant increase in night float schedules. After years of observations and studies, the ACGME has presented its latest rules, now called "Clinical Experience and Educational Work Hours." The most significant change is the elimination of the 16-hour limit for PGY-1 residents. The new rule will allow these new doctors to work as many as 28 hours continuously. The ACGME change is based on research that found that the 28 hours rule would not increase risks to patients. In fact, the longer work hours for PGY-1 residents will now be consistent with all other resident PGY levels. There will be less disruption of team care caused by PGY-1 residents having different requirements. This will result in fewer transitions of care, which will also reduce the number of errors related to transitions of care. The new rules also reflect the concern that separating the PGY-1 resident from the team delays the development of the resident's skills and may create what the ACGME calls a "shift" mentality, particularly in specialties where overnight availability to patients is essentially the same as daytime availability.

The new rules remain controversial. The fact that multiple studies show that sleep-deprived resident physicians are a danger to themselves, their patients and the public is unchanged. The ACGME recommendations acknowledge those studies. They also rely on studies that are more recent since the 2011 rule implementation. These studies show that returning PGY-1 residents to the same Maximum Clinical Work and Education Period Length as all other residents will not adversely affect patient care, patient safety or increase resident fatigue, if all the other rules relating to maximum hours of clinical and educational work per week are consistent for all residents.

As a residency program director for nearly 20 years, I am supportive of the changes. I have dealt with the scheduling disruptions and the negative impact on transitions of care. Residents in programs in my institution at all levels work considerably less than the 80 hours per week limit. Faculty, staff and residents are consistently taught to recognize fatigue. It is rare and when identified mechanisms are in place to immediately address and alleviate it.

Announcement

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

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Do you recognize this
DOCTOR?



Look for the Answer inside!

A COUPLE OF UPDATES

Occasionally, I am reminded of how profoundly well respected, the Genesee County Medical Society is. The most recent meeting of the Legislative Liaison Committee had legislators, legislative staff, and physicians, as well as practice managers, sitting together to discuss issues of critical importance to the health of the community, the practice of medicine, and the healthy future of the State of Michigan. The conversation that took place was substantive. It is an exquisite pleasure to watch such an effective process take place on a regular basis. It is built on years of relationships, and the building of trust through honest communication. There is plenty of room for participation. Physicians and physician office staff are welcome to join this communicative team. It is certainly a wonderful example of a collaborative team. The collaborative team effort is what makes it work so well. Please feel free to come enjoy it! You'll be glad you did.

We have recently been awarded a contract by Wayne State University and the Michigan State Department of Health and Human Services to participate in a project titled Advanced Disease

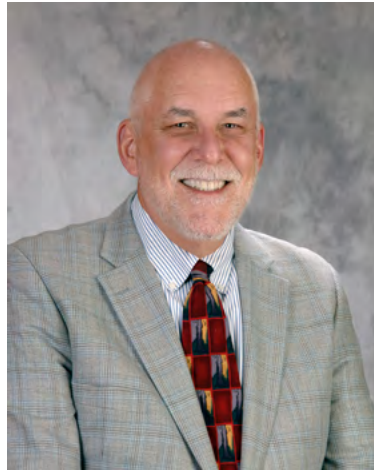
Surveillance Environmental Monitoring. This is a project that is looking at Legionella issues in Flint.

The part that the Medical Society will be playing is to enhance the ability of the researchers to communicate with physicians to test what is working or not working relating to communication on the Legionella issue.

The May 4, 2017, General Membership Meeting Town Hall Meeting will be on the topic of Avoiding Fraud & Abuse. Please plan to attend, and invite your office staff, colleagues, and fellow health professionals to attend also. This is only one month away, please register as soon as possible! (see ad page 13)

If you know anyone who is not a member, please invite them to join. The following links lead to writable applications.

To join: <https://www.msms.org/Membership/OnlineMembershipApplication4.aspx>, or to renew, use <https://www.msms.org/Membership/RenewYourMembership.aspx>. We would love to have new members. They are the lifeblood of any organization.



Peter Levine, MPH

For Local and Statewide Elected Official Contact Information, please reference the MSMS Legislative Directory:

https://www.msms.org/Portals/0/Documents/MSMS/Advocacy/MSMS_Leg_Dir_2017.pdf

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A Genesee County Medical Society Town Hall Meeting

Sponsored by the Genesee County Physician Public Health Alert System,
a GCMS program supported by the United Way of Genesee County

May 4, 2017

Avoiding Fraud & Abuse

What is Being Targeted?



Whether you attended the last GCMS session on Avoiding Fraud and Abuse or not, you will not want to miss this program!

Learn the latest about Voluntary Vs. Involuntary Compliance Plans. Hear about what is occurring in the health care industry relating to Corporate Integrity Agreements, and other types of payer audits.

Bring your practice managers, and your coders!

Faculty will be Laura Lovett, CPC, CPCO, CPMA, CPC-I, CANPC, CEMC, from The Rybar Group. She brings expertise in Professional Service Coding and Auditing. Ms. Lovett serves as a Consultant on Data Integrity and Compliance, and is highly experienced in working with multiple specialties, ranging from primary care to a variety of surgical specialties and nearly everything in between. She has worked as a Professional Coding and Documentation Auditor and Educator for a variety of provider types including private practices, teaching facilities, rural health, and hospital based practices, and has experience in coding inpatient, outpatient and surgical procedures.

Legal input will be provided by Cline, Cline & Griffin, PC.

LOCATION

Flint Golf Club
3100 Lakewood Drive
Flint, MI 48507

COST

**\$40 for GCMS-MSMS
Member Physicians, Spouses,
Practice Managers, & Staff**

**\$75 for Non-Member
Physicians, Spouses,
Practice Managers, & Staff**

6 pm, Registration & Social Hour

6:30 pm, Dinner

7 pm, Meeting

7:15 pm, Presentations

SPACE IS LIMITED. Please register by April 27, 2017.

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

Please mail all check payments to:

Genesee County Medical Society, 4438 Oak Bridge Dr., Ste. B, Flint, MI 48532

Physician's Assistant Practice Agreement: Do We Really Have To Have These?

*By: Barbara Hunyady, Attorney
at Cline, Cline & Griffin, P.C.*

If you are a physician assistant or work with a PA, do you really need to have a written practice agreement? The answer is a resounding YES. The new law governing physician's assistants requires all PAs to have a written practice agreement with a physician no later than March 22, 2017. This is the date when the practice agreement must be signed by both the PA and a physician. If you do not have this in place – do it now.

The most common questions we hear from clients who own PCs have been: WHY? Why do we need these? Are there any exemptions? How can we avoid this?

There is no way to avoid the practice agreement requirement. The new law, Public Act 379 of 2016, requires all PAs to have a practice agreement signed with a physician in order to practice. These are mandatory for everyone, even if the PA works within a group practice or hospital.

Why do you have to have these? The short answer is because the new law says so. If that is not a good enough reason for you, then you can try to decipher why our Legislature passed the new law. Below is an excerpt from the legislative analysis, which is a document that explains the proposed bill and the reason for it. For this bill, it is a five-page analysis. Under the category titled "The Apparent Problem" it says:

"THE APPARENT PROBLEM: Michigan, as well as the entire country, is said to be already in the throes of a physician shortage, and many predict the situation to worsen in coming years. Many believe that one way to improve access to quality care, especially in rural areas where the physician shortage is particularly acute, is to allow increased autonomy to physician's assistants. This legislation is offered to ensure that the Public Health Code more accurately describes the relationship between physician and physician's assistant." House Fiscal Agency Legislative Analysis for House Bill 5533.

The new law removes requirements that PAs practice "under the supervision" or "delegation" of a physician. This has been replaced with language that allows the PA to practice in accordance with the terms of their practice agreement. If there are multiple physicians in a practice who work with the PA, the practice can designate one physician to sign the agreement. The PA is not required to have a signed agreement with every physician in the

practice. The new law does not place limits on how many PAs one physician can sign agreements with

Personally, I do not have a strong opinion whether these are a good thing, or if it is simply generating more paper work. Time will tell. There is some frustration surrounding the agreements because there is not a standard form to use. The statute does not provide a lot of details for the agreement or what is expected. This is likely a good thing because no two practices or specialties are alike.

It is worth noting that anytime there is a written document, contract, or agreement that may have to be produced in the event of a lawsuit, you should be concerned from a liability standpoint. While I do not see that the change in law increases or decreases liability, the language in a practice agreement could help you or hurt you in the event of a lawsuit. For this reason, your practice agreement needs to be carefully and accurately drafted.

While this article cannot address all of the changes in the law, the basic minimum requirements for a practice agreement are as follows:

1. A process for communication, availability, and decision making between the physician and PA.
2. A protocol for designating an alternative physician when the participating physician is not available.
3. The signature of the PA and the participating physician.
4. A termination provision that requires 30 days' notice prior to terminating the agreement.
5. The duties and responsibilities of the PA and physician.
6. A requirement that the physician verify the PA's credentials.

The practice agreement does not have to be filed with the state, but it must be available for inspection. If you have any questions or concerns about your practice agreement or if you need one drafted, please author, Barbara Hunyady of Cline, Cline & Griffin, P.C. at bhunyady@ccglawyers.com or by calling the office at 810-232-3141

Please direct patients to flintcares.com for the latest information regarding Flint water issues



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PRESS RELEASE

IN GRATEFUL RECOGNITION OF FOREIGN BORN PHYSICIANS

On February 28, 2017, the Genesee County Medical Society Board of Directors issued the following statement, "The Board of the Genesee County Medical Society wishes to officially recognize the extraordinary contributions to the medical community in Genesee County made by our colleagues who were foreign born. We are a much better and more effective medical community because of the determined commitments made by those physicians who chose to immigrate to America and devote their medical talents to patients here.

Potential immigrants of every status who apply to enter the United States should be judged individually and not on the basis of race, religion, nationality, or country of origin. These are American values we cannot compromise."

For questions, comments or more information, please contact Peter Levine, MPH, at 810-733-9925, or email plevine@gcms.org.

SAVE THE DATE

GCMS/GCMSA

PRESIDENT'S BALL

NOVEMBER 18, 2017 • 6:00PM

GENESYS BANQUET & CONFERENCE CENTER

Save the Date!

“Shared Grief is Grief Diminished” – Shelly Miller

2017 Hospice Teleconference **“When Grief is Complicated”**



When: May 17, 2017

Time: 8:00 a.m. Registration
8:30 a.m.-12:30 p.m. Program
*****Full breakfast to be provided*****

Where: Genesys Conference & Banquet Center
Grand Blanc, MI

For registration information contact:

McLaren Hospice
Attn: Carolyn Stubbs
1-810-496-8625

**Funded by a grant from The Community Hospice Foundation Fund
of The Community Foundation of Greater Flint in cooperation with
Heartland Hospice, Kindred Hospice, McLaren Hospice, Reverence Hospice,
Brown Funeral Home, Hill Funeral Home and Reigle Funeral Home.**

GENESEE COUNTY PHYSICIAN ALERT SYSTEM, A GCMS SERVICE TO MEMBERS

For many years, the Genesee County Medical Society (GCMS) has forwarded appropriate and vital information from the Genesee County Health Department as well as the Michigan Department of Health and Human Services, and occasionally the U.S. Department of Health and Human Services, to physicians (members and nonmembers) electronically, via email, and via an electronic magazine, the Genesee County Medical Society Bulletin. Our information on non-members has been moderately good, but outdated. This has usually been done when there is a need to quickly communicate public health information to physicians.

The messages sent have been in response to a specific request by the Chief Medical Office of the county, state or federal public health agencies.

The Flint Water Crisis made clear that concise, timely, vetted, and consistent messaging to the broad physician community is needed on a rapid basis. Historically, infectious disease information was sent only to the infectious disease departments of our local hospitals.

This led to the Genesee County Medical Society and the Greater Flint Health Coalition both passing resolutions advocating faster public health communication to the provider community.

The GCMS Physician Alert system has been used much more substantially throughout the Flint Water Crisis and illuminated the need to have an alert system which could access as many physicians as possible, including those for whom the Medical Society had no contact information. The concept is to deliver vetted information to physicians, in as close to real-time as possible to benefit the entire impacted population.

GCMS submitted a proposal to the United Way seeking funding to provide the capacity to create and maintain an expanded system which would provide email notifications of critical public health information

to physicians across Genesee County. Because of mobility issues and changing communication access points for the physician community, infrastructure was needed to make the necessary contacts, as well as update and maintain the constantly changing information.

The United Way provided the funding for the project.

The Greater Flint Health Coalition has provided fiscal intermediary services, and a staff person was hired by Genesee County Medical Society to get the project underway.

Each physician member of the Medical Society has already been or is in the process of being contacted. Contact information for those physicians has been updated. All known non-members have also been contacted and information has been updated for them as we receive it. The staff person hired for the project is no longer involved, but a small, local communications company has been engaged to pursue a major, second cycle of contact being made to push for more comprehensive updated information.

We will also be seeking opt-in from nonmembers to be contacted for public health alerts.

Infrastructure is being created which will make the updating and maintenance of the data automatic. Right now, our email list is accurate for 649 members of GCMS, 528 non-member physicians, and 178 practice managers. So, when needed, we will be emailing 1,177 physicians and 178 proxies. This number will only increase. The most recent public health email blast had only three bounced emails!

This is a project which will provide long-term benefit to the community, and would not have been possible without the funding provided by the United Way.



Registration is Now Open



Advance Care Planning (ACP) Project *Respecting Choices*® ACP Courses

ACP Facilitator Training Course

Wednesday, April 19, 2017; Thursday, June 22, 2017; Wednesday, October 18, 2017
8:00 a.m. - 5:00 p.m.

Location: To Be Determined. Central Location in the Greater Flint Area.

This training course provides participants with a thorough understanding of Genesee County's ACP infrastructure, as well as the skill set and knowledge to assist others with facilitating an advance care planning conversation and completing the *Your Health Your Choice* advance directive. Attendance is recommended for those who work directly with patients or families and will be assisting them with advance care planning and the completion of an advance directive. Upon course completion, participants will be certified as a *First Steps*® ACP Facilitator. Continuing education credits available for RNs and SWs.

The cost for the ACP Facilitator Training Course is \$175. Payment to the Greater Flint Health Coalition must be paid in full prior to attending the training.

Participants will have to complete several prerequisites prior to attending the training:

- Complete online training modules (approximately 4-5 hours)
- Complete the *Your Health Your Choice* advance directive
- Engage in an advance care planning conversation with a friend or loved one

Implementing ACP in Your Physician Practice

Wednesday, June 14, 2017; Wednesday, September 27, 2017
12:15 p.m. - 4:15 p.m.

Location: To Be Determined. Central Location in the Greater Flint Area.

This training course provides participants with a thorough understanding of the *Respecting Choices*® ACP model, why it is important, and how to incorporate the model into medical practice workflows. Knowledge of the ACP resources developed for Genesee County and how to access them will also be provided.

The cost for the Implementing ACP in Your Physician Practice is \$25 per practice. Payment to the Greater Flint Health Coalition must be paid in full prior to attending the training.

**To register contact Jenn Sesti at the Greater Flint Health Coalition
(810) 232-2228 or gfhc@flint.org.**





MACRA UPDATE FOR PRACTICE MANAGERS

The Feb. 23rd Practice Managers' Meeting provided an update on MACRA. Stacey Hettiger, Director of Medical and Regulatory Policy at the Michigan State Medical Society held folks riveted with the most current information available for practices related to MACRA.

The group also discussed problems specific to one payer. It was agreed that staff would set up an urgent meeting for all GCMS practice managers to sit down with that payer to discuss how to sort out those issues.

In addition, the next several meeting topics were established. In March, the topic will be Blue Cross Blue Shield of Michigan and the Blue Care Network:

Updates and Feedback, featuring Dan Martin, Director of Provider Outreach. The April meeting topic will be Health Alliance Plan: Updates and Feedback, which will also feature Health Alliance plan Midwest. Faculty for that session has not yet been established. Another future session will be Leaving Money on the Table, and sessions will be held on Molina and Meridian, as well as topics concerning compliance plans.

All GCMS member practice managers are welcome to attend. Please contact Sherry Smith at ssmith@gcms.org, or call 810-733-9923, to ensure that your practice manager is on the notification list.



SAVE THE DATE

GCMS/GCMSA

PRESIDENT'S BALL

NOVEMBER 18, 2017
6:00PM

GENESYS BANQUET
& CONFERENCE CENTER



faith care UNITE heart NOW
connect family give HELP
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inspire COMPASSION GIFT
humanity PEACE
vision THANK YOU blessings
kindness LOVE unconditional
purpose DONATE

Medical Society Foundation

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

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

By giving to the Medical Society Foundation, you receive a great year-end tax benefit at the same time that you tell others how much their health – really means to you.

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

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

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

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

Mail your donations to:

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



LEGISLATIVE LIAISON COMMITTEE WORKS FOR YOU!

The March 6th meeting of the Legislative Liaison Committee epitomized the fully matured relationship between the Genesee County Medical Society, MSMS, and the Genesee County legislative delegation.

Attendees included Senator Dave Robertson, Representatives Phil Phelps, Tim Sneller and Sheldon Neeley. Bryanna McGarry of Senator Ananich's office was present via conference call. Ken Morin of Representative Neeley's office, Nicole Derusha-Mackey of Representative Pam Faris' office, Joe Neller of the Michigan State Medical Society were also in attendance.

The Committee reviewed a list of key legislative issues. The first issue was the fiscal year 2018 budget and its Medicaid, Graduate Medical Education, and mental health components. Legislation was reviewed relating to Maintenance of Certification (which would block hospitals and third-party payers from

using maintenance of certification as a sole criterion for removing physicians from their panels). Also discussed was legislation related to the Interstate Medical Licensure Compact, which MSMS is opposed to because of its dependence on maintenance of certification. The Committee discussed the importance of the MAPS replacement registration. An update on the AMA National Advocacy Conference was given. Medicaid, Healthy Michigan, Maintenance of Certification, and quality measurement fatigue were raised there.

The next meeting of the Committee is scheduled for 8:00am on April 3, 2017, at the GCMS offices.

Members who are interested in participating in the Legislative Liaison Committee are encouraged to contact Dr. Cathy Blight, Pete Levine at plevine@gcms.org, or Sherry Smith at ssmith@gcms.org.



A Genesee County Medical Society Town Hall Meeting

Sponsored by the Genesee County Physician Public Health Alert System,
a GCMS program supported by the United Way of Genesee County

May 4, 2017

Avoiding Fraud & Abuse

What is Being Targeted?



LOCATION

Flint Golf Club
3100 Lakewood Drive
Flint, MI 48507

COST

\$40 for GCMS-MSMS
Member Physicians, Spouses,
Practice Managers, & Staff

\$75 for Non-Member
Physicians, Spouses,
Practice Managers, & Staff

***Whether you attended the last GCMS session
on Avoiding Fraud and Abuse or not,
you will not want to miss this program!***

Learn the latest about Voluntary Vs. Involuntary Compliance Plans. Hear about what is occurring in the health care industry relating to Corporate Integrity Agreements, and other types of payer audits.

Bring your practice managers, and your coders!

Faculty will be Laura Lovett, CPC, CPCO, CPMA, CPC-I, CANPC, CEMC, from The Rybar Group. She brings expertise in Professional Service Coding and Auditing. Ms. Lovett serves as a Consultant on Data Integrity and Compliance, and is highly experienced in working with multiple specialties, ranging from primary care to a variety of surgical specialties and nearly everything in between. She has worked as a Professional Coding and Documentation Auditor and Educator for a variety of provider types including private practices, teaching facilities, rural health, and hospital based practices, and has experience in coding inpatient, outpatient and surgical procedures.

Legal input will be provided by Cline, Cline & Griffin, PC.

6 pm, Registration & Social Hour

6:30 pm, Dinner

7 pm, Meeting

7:15 pm, Presentations

SPACE IS LIMITED. Please register by April 27, 2017.

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

Please mail all check payments to:

Genesee County Medical Society, 4438 Oak Bridge Dr., Ste. B, Flint, MI 48532



GCMS's own S. Bobby Mukkamala, MD, Chair of the MSMS Board of Directors, met with Senators Stabenow, and Peters, as well as Congressman Dan Kildee.

MSMS GOES TO WASHINGTON



Photos from the AMA's National Advocacy Conference. (Courtesy of the Michigan State Medical Society)

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

**April 27th
Presenter(s):**

**“HAP: Updates & Feedback”
Debra Spencer, Associate VP, Provider Services
Shannon Wejrاندt, Director, Provider Network Mgmt.**

**May 25th
Presenter:
- AND -
Presenter:**

**“McLaren Health Plan”
Amy Weigandt, Provider Representative
“PCMH & PGIP: Lifting the Veil”
Tom Leyden, Director II, Value Partnerships Program, BCBSM**

**June 22nd
Presenter(s):**

**“Leaving Money on the Table”
Laura Lovett, Consultant, Data Integrity and Compliance, The Rybar Group**

July 27th

No meeting, enjoy your summer!

**August 24th
Presenter(s):**

**"Molina Healthcare" w
Molina Faculty - TBD**

**September 28th
Presenter(s):**

**“Meridian: Updates & Feedback”
Jacqueline Kirejczyk, Director of Network Development
Erica D’Ambrosio, Provider Network Development Representative**

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

March 22, 2017

The Honorable Paul Ryan
Speaker
U.S. House of Representatives
232 United States Capitol
Washington, DC 20515

The Honorable Nancy Pelosi
Democratic Leader
U.S. House of Representatives
204 United States Capitol
Washington, DC 20515

Dear Speaker Ryan and Leader Pelosi:

Due to projections that enactment of the American Health Care Act (AHCA) will result in millions of Americans losing health insurance coverage, the American Medical Association (AMA) must express our opposition to the proposal currently before the House of Representatives. The need to stabilize the individual insurance market and make other improvements in the Affordable Care Act is well understood. However, as physicians, we also know that individuals who lack health insurance coverage live sicker and die younger than those with adequate coverage. We encourage all members of Congress to engage in an inclusive and thorough dialogue on appropriate remedies. We cannot, however, support legislation that would leave health insurance coverage further out of reach for millions of Americans.

Earlier this year, we shared with Congress key health reform objectives that we believe are critical to improving the health of the nation. Among these objectives are ensuring that those currently covered do not lose their coverage, maintaining market reforms, stabilizing and strengthening the individual insurance market, ensuring that low and moderate-income patients are able to secure affordable and adequate coverage, and ensuring that Medicaid and other critical safety net programs are maintained and adequately funded. While we appreciate that the bill's authors have made efforts to maintain some market reforms and that regulatory efforts are underway to strengthen the individual insurance market, as a whole the legislation falls short of the principles we previously outlined.

Health insurance coverage is critically important. Without it, millions of American families could be just one serious illness or accident away from losing their home, business, or life savings. The AMA has long supported the availability of advanceable and refundable tax credits, inversely related to income, as a means to assist individuals and families to purchase health insurance. The credits proposed under the AHCA are significantly less generous for those with the greatest need than provided under current law. The reduced purchasing power with the AHCA tax credits will put insurance coverage out of reach for millions of Americans.

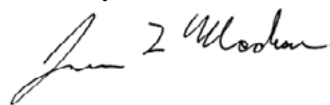
The Honorable Paul Ryan
The Honorable Nancy Pelosi
March 22, 2017
Page 2

We also remain deeply concerned with the reduction of federal support for the Medicaid program and the resulting significant loss of coverage. Medicaid expansion has provided access to critical services, including mental health and substance abuse treatment, for millions. Not only will the AHCA force many states to roll back coverage to these millions of previously ineligible individuals, but the significant reduction in federal support for the program will inevitably have serious implications for all Medicaid beneficiaries, including the elderly, disabled, children, and pregnant women, as well.

We also continue to be concerned about provisions that eliminate important investments in public health, and those that inappropriately insert the federal government into personal decisions about where Americans are allowed to access covered health care services.

We continue to stand ready to work with Congress on proposals that will increase the number of Americans with quality, affordable health insurance coverage but for the reasons cited above, urge members to oppose the American Health Care Act.

Sincerely,



James L. Madara, MD

Keeping the **game fair...**



...so you're not fair game.

Your Michigan medicine
is getting hit from all angles.

You need to stay focused and on point—
confident in your coverage.

Get help protecting your practice,
with resources that make important
decisions easier.



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SPECIAL GCMS PRACTICE MANAGERS MEETING WITH HAP

On Feb. 28th, the Genesee County Medical Society hosted an extraordinary meeting to communicate issues of concern between practices and the Health Alliance Plan. Over 40 practice managers attended. The group discussed concerns relating to email protocols, referral and authorization processes, physician loss of patients in the transition from HealthPlus to HAP, problems of loading participating providers into the system, responsiveness to concerns, inconsistent messaging, credentialing, PHO issues, collections, retroactive authorizations, deductibles and inappropriate phone calls to physician office staff.

Present for the meeting were Debra Spencer, Associate Vice President for Provider Services; Shannon Wejrandt, Director of Provider Network Management; and Peggy O'Neil, Senior Provider Services Administrator. Also present was Stacie Saylor of the Michigan State Medical Society.

Your Medical Society makes every effort to be extremely responsive to the concerns of members, and practice managers who function on behalf of our physician members. Extraordinary meetings can always be scheduled on issues which are endemic to the medical



community. Member practice managers are invited to attend the normally scheduled meetings which take place on the fourth Thursday of each month. Please notify Sherry Smith of contact information so GCMS can keep your practice manager up to date!

Hurley Medical Center Pediatric Oncology Unit

The Only One of Its Kind in Genesee, Lapeer and Shiawassee Counties.

- Cutting-edge therapeutic protocol and drugs
- Latest diagnosis and treatment options
- Real-time decisions from national experts
- Advanced diagnostic testing
- Scholarly and scientific guidance to care

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CHILDREN'S
HOSPITAL



hurleychildrens.com

YOUR \$\$\$ AT WORK

- Special meeting held as an open discussion between practice managers and Health Alliance Plan (HAP), and HAP Midwest, regarding specific problems
- Meeting held between practice managers and Blue Cross Blue Shield of Michigan
- Staff and Board members attended meetings and worked on process and structure of State Innovation Model
- Specific meetings set up with payers on behalf of several member practices
- GCMS continues to serve as communication vehicle used by public health agencies

HAPPY BIRTHDAY DOCTOR

APRIL

| | | | |
|------------------------------|----|-----------------------------|----|
| Devinder Bhrany, MD | 1 | Don Rubino, MD..... | 15 |
| Wayne Breece, MD..... | 2 | Ehab Youssef, MD | 17 |
| Kenneth Jordan, MD..... | 3 | Abdullah Raffee, MD | 19 |
| Kiran Kommaraju, MD | 4 | Sarah Sanchez, MD | 19 |
| Wilbur Boike, MD..... | 5 | Gregory Forstall, MD..... | 21 |
| Qazi Azher, MD..... | 6 | Gerald Cole, MD | 22 |
| Carlo Dall'Olmo, MD | 6 | Louis Coriasso, MD | 22 |
| Kurt Mikat, MD..... | 7 | Alan Weamer, MD..... | 22 |
| Brian DeBeaubien, MD | 8 | Thomas Bossi, DO..... | 23 |
| John Bauer, MD | 9 | Byron Schoolfield, MD | 24 |
| Ahsan Wahab, MD | 9 | Nita Kulkarni, MD | 26 |
| Syed Sattar, MD | 10 | Shujing Lin, MD | 26 |
| Dilraj Ghumman, MD | 11 | Rima Jibaly, MD..... | 26 |
| Muhammad Jabbar, MD..... | 11 | James Martin, MD..... | 26 |
| Elisea Singson, MD | 12 | Hesham Gayar, MD..... | 28 |
| Huda Elhwairis, MD | 13 | Ok Kang, MD..... | 28 |
| Jeffrey Diskin, MD | 13 | Sunita Tummala, MD | 29 |
| W. Archibald Piper, MD | 13 | Mark Camens, MD..... | 29 |
| Fook Kuet, MD | 15 | Seif Saeed, MD..... | 30 |
| M. Varkey Thomas, MD | 15 | Mark Mattos, MD..... | 30 |
| Peter Thoms, MD | 15 | | |

Genesee County Medical Society
Board of Directors
January 24, 2016 - Minutes

I. Call to Order

The meeting was called to order in the Rapport Conference Room, by John Hebert, III, MD, President. He introduced new Board member, Dr. Punam Sharman.

II. Review of Minutes

Motion: **that the minutes of October 25, 2016, Board of Directors meeting be approved as presented. The motion carried.**

III. Reports

A) Community & Environmental Health

Dr. Natzke reported that the Committee and Columbia University will be looking for funding for a chelation study. Dr. Syed Osama is now involved as well regarding nephrological issues. The study will have both intravenous and oral intervention components.

Levine reported that the GCMS resolution on a Timely Public Health Information for Healthcare Providers was also approved by the Greater Flint Health Coalition Board of Directors.

Peter Levine reported that the Medical Society will testify in favor of a new regulation which would prohibit the selling of tobacco and vaping products to individuals under the age of 21 in Genesee County.

B) Finance

MSF Fundraising Committee Report

Levine reported that about \$47,400 had been raised for fundraising.

C) Membership

Levine reviewed the list of new and reinstated member since the October Board of Directors meeting. He also reviewed the MSMS trend report for the period running through December 31. He noted that GCMS has more members who have paid during that period with a difference in revenue of \$15,000 to the positive.

D) Legislative Liaison

Dr. Cathy Blight reported that the Legislative Liaison Committee would be meeting on February 6th. She invited Board members to attend.

E) Greater Flint Health Coalition

Dr. Reynolds noted that the Health Coalition is moving forward with the State Innovation Model Project. The focus will be on ER frequent fliers. Dr. Khan noted that the PMC will be hiring 16 case managers for this project.

F) District Directors

It was reported that the MSMS Board of Directors meeting will be held the following day. The focus will be on the reconstituted MAPS program. The Board is still evaluating how the State Medical Society functions. These reports will be given at the House of Delegates meeting.

G) Presidents' Report

Dr. Hebert reviewed the letter received from the American Board of Internal Medicine that response for our declaration of no-confidence.

H) Other Business

Pete Levine reported that Wayne State University would like to survey GCMS members on legionella knowledge.

VIII. Adjournment:

No further business appearing, the meeting was adjourned at 7:25pm.

Submitted by,
Peter Levine, MPH
Executive Director

Easy Ways to Donate to the Medical Society Foundation:

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

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

To make a gift, simply use these words:

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

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

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



Don't Forget!
Donations are tax deductible!

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

April 2017 Fitness Calendar

FREE! Commit to Fit! Class Schedule

Class Descriptions & Locations

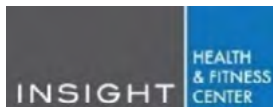
Basic Yoga (1 hour)

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



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.

Genesys Athletic Club (GAC)

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



Cardio Fit– This work out gets your heart rate up and will help you strengthen your muscles at the same time!

TIMES & LOCATIONS:

Southwestern Academy

4:45 -5:30 p.m.
1420 W 12th St, Flint, MI 48507

Holmes STEM Academy

4:45-5:30p.m.
6602 Oxley Dr, Flint, MI 48504



FLINT COMMUNITY SCHOOLS
Expect More. Achieve More.



Questions?
Email
commit2fit@flint.org

MIC-6C3 April.Fitness.Class.Calendar.032117.HB

Zumba – This class offers fun music to keep the excitement high while keeping the impact low
Friday's 5:30-6:30pm in ADR.

January 4th- April 28th 2017

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

Fit Walking- Tuesdays at 5:30 pm: Join us for a fun walking class on the track! Whether you're just getting your cardio started or want to complete a 5k, this class will help you reach your walking goals!



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

Carriage Town Ministries

605 Garland St Flint, MI
Tuesday 2:30-3:30 pm

Flint Farmers' Market- Tuesdays &

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



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

YMCA Downtown Flint

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



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

Eastside Senior Center: Wednesdays 10am – 11am

Forest Township Senior Center:

Wednesdays 12:30pm–1:30pm





April 2017 Fitness Calendar

FREE! Commit to Fit! Class Schedule

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

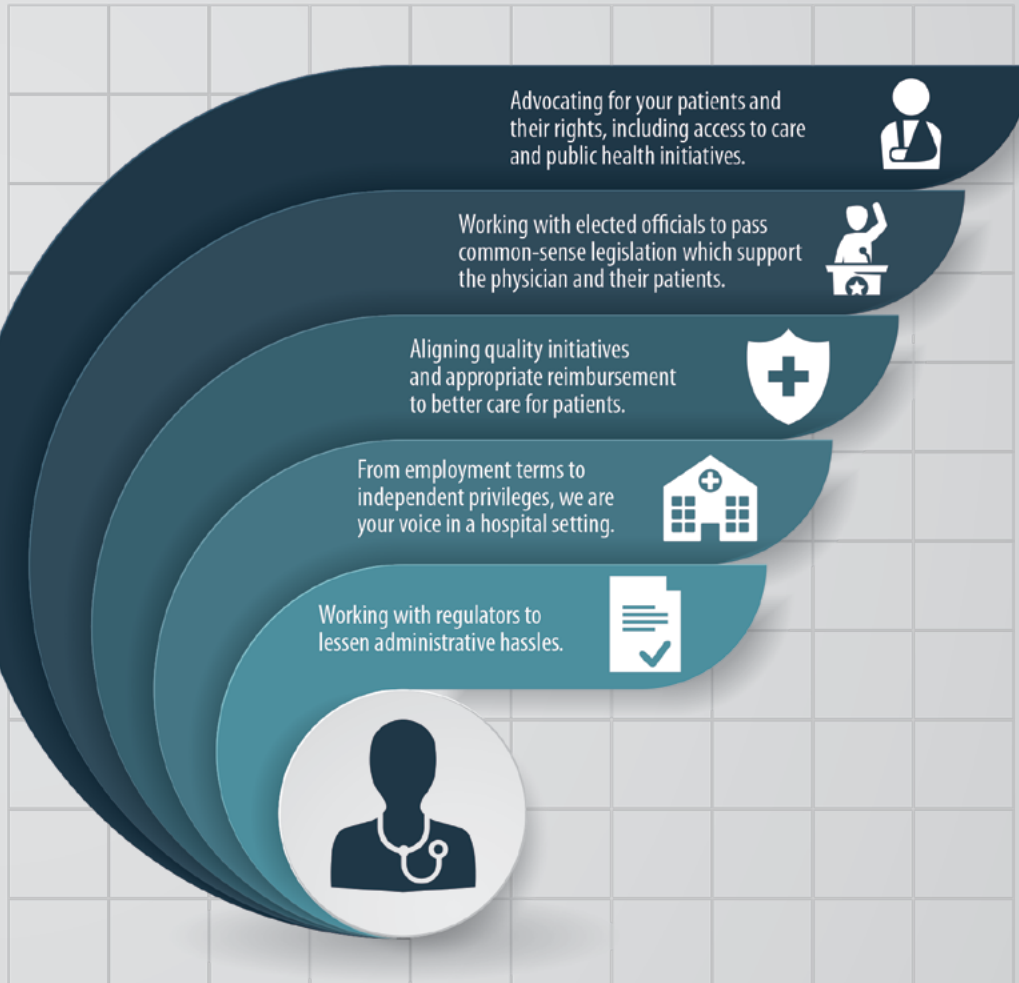
Nutrition Education & Resources Calendar

| | MONDAY | TUESDAY | WEDNESDAY | THURSDAY | FRIDAY |
|------------|---|--|---|--|--|
| APRIL 2017 | 3 Enhance Fitness Hasselbring Senior Center 9:00 a.m. Senior Stretch YMCA Downtown 10:00 am Aqua Fitness U of M-Flint Rec Center 5:30-6:30 pm | 4 Enhance Fitness Flint Farmers' Market 10:00 a.m. Arthritis Foundation Exercise Program Grand Blanc Senior Center 10:00-11:00am Fit Walking U of M Flint-Rec 5:30 pm | 5 Enhance Fitness Hasselbring Senior Center 9:00 a.m. Arthritis Foundation Exercise Program Forest Township Senior Center 12:30-1:30pm Zumba Gold (Beginner) GAC 5:30 p.m. | 6 Enhance Fitness Flint Farmers' Market 10:00 a.m. Basic Yoga IHFC 6:45 p.m. Arthritis Foundation Exercise Program Grand Blanc Senior Center 10:00-11:00am | 7 Enhance Fitness Hasselbring Senior Center 9:00 a.m. Arthritis Foundation Exercise Program Swartz Creek Senior Center 11am-12pm Zumba@ U of M-Flint 5:30-6:30pm |
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| | 17 Enhance Fitness Hasselbring Senior Center 9:00 a.m. Senior Stretch YMCA Downtown 10:00 a.m. Aqua Fitness U of M-Flint 5:30pm | 18 Enhance Fitness Flint Farmers' Market 10:00 a.m. Arthritis Foundation Exercise Program Grand Blanc Senior Center 10:00-11:00am Fit Walking U of M Flint-Rec 5:30 pm Cardio Fit Southwestern Academy 4:45 pm | 19 Enhance Fitness Hasselbring Senior Center 9:00 a.m. Arthritis Foundation Exercise Program Forest Township Senior Center 12:30-1:30pm Zumba Gold (Beginner) GAC 5:30 p.m. | 20 Enhance Fitness Flint Farmers' Market 10:00 a.m. Basic Yoga IHFC 6:45 p.m. Arthritis Foundation Exercise Program Grand Blanc Senior Center 10:00-11:00am Cardio Fit Holmes STEM Academy 4:45 pm | 21 Enhance Fitness Hasselbring Senior Center 9:00 a.m. Arthritis Foundation Exercise Program Swartz Creek Senior Center 11am-12pm Zumba@ U of M-Flint 5:30-6:30pm |
| | 24 Enhance Fitness Hasselbring Senior Center 9:00 a.m. Senior Stretch YMCA Downtown- 10:00 Aqua Fitness U of M-Flint Rec Center 5:30-6:30 pm | 25 Enhance Fitness Flint Farmers' Market 10:00 a.m. Arthritis Foundation Exercise Program Grand Blanc Senior Center 10:00-11:00am Fit Walking U of M Flint-Rec 5:30 pm Cardio Fit Southwestern Academy 4:45 pm | 26 Enhance Fitness Hasselbring Senior Center 9:00 a.m. Arthritis Foundation Exercise Program Forest Township Senior Center 12:30-1:30pm Zumba Gold (Beginner) GAC 5:30 p.m. | 27 Enhance Fitness Flint Farmers' Market 10:00 a.m. Basic Yoga IHFC 6:45 p.m. Arthritis Foundation Exercise Program Grand Blanc Senior Center 10:00-11:00am Cardio Fit Holmes STEM Academy 4:45 pm | 28 Enhance Fitness Hasselbring Senior Center 9:00 a.m. Arthritis Foundation Exercise Program Swartz Creek Senior Center 11am-12pm Zumba@ U of M-Flint 5:30-6:30pm |

MIC-6C3 April.Fitness.Class.Calendar.032117.HB

GENESEE COUNTY MEDICAL SOCIETY & MICHIGAN STATE MEDICAL SOCIETY:

The **ONLY** organizations advocating for **ALL** physicians and their patients.



The Genesee County Medical Society and the Michigan State Medical Society, for more than 150 years, has had a leadership role in Michigan. From standing up for patients' rights to working with lawmakers for sensible legislation to advocating insurance companies to negotiating with hospitals to lessening administrative hassles, GCMS and MSMS are the **ONLY** organizations advocating for **ALL** Michigan physicians.



4438 Oak Bridge Drive, Suite B
Flint, MI 48532
Call: 810-733-9923
Email: plevine@gcms.org
or ssmith@gcms.org



To join the movement, please call 800/352-1351;
email msms@msms.org; or, visit us online at
www.joinmsms.org

OBITUARY



Gerald Cole, MD

The Genesee County Medical Society is sad to report that the office has been notified that Dr. Gerald Cole passed away on July 22, 2015. Dr. Cole was an ear nose and throat specialist who came to Flint in 1965. Previous practice locations included a Bakersfield California, and San Jose California.

Dr. Cole graduated from Yale University in 1952. He received his MD degree from the State University of New York in 1956. His residencies included University Hospital of Cleveland and Henry Ford Hospital. Dr. Cole served as a lieutenant in the United States Navy and was a member of the Genesee County Medical Society, the Michigan State Medical Society, and the AMA.

Dr. Cole is survived by his wife Emily.



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to pnc.com/hcprofessionals*
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GCMS MEETINGS — April 2017 —

Legislative Liaison Committee, 4/3
8:00am, GCMS Office

2017 Ball Committee, 4/4
12:00pm, GCMS Office

**Community & Environmental Health
Committee, TBD**
12:30pm, TBD

Finance Committee, 4/25
5:00pm, GCMS Office

District 6 Directors Briefing, 4/25
5:30pm, GCMS Office

Board of Directors, 4/25
6:00pm, GCMS Office

Practice Managers, 4/27
8:00am, GCMS Office

MSF Fundraising Committee, 4/27
6:00pm, GCMS Office

**General Membership Town Hall Dinner
Meeting, 5/4**
“Avoiding Fraud & Abuse”
6:00pm, Flint Golf Club
*see ad on page 7

SAVE THE DATE!

2017 GCMS/GCMSA President’s Ball, 11/18
6:00pm, Genesys Conference & Banquet Center

**Please direct patients
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information
regarding
Flint water issues**



Did you recognize... Jack Nettleton, MD



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

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AUTOCLAVE NEEDED

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

PHYSICIANS NEEDED

at the Emergency Medical Center of Flint Various shifts available for part-time, as well. Must be willing to do minor stitches, infants & children, splinting, and minor eye & ear procedures. This is a classic urgent care much like family practice. Hours of operation Mon, Wed: 10am-9pm, Tue, Thur, Fri, Sat: 12pm-9pm, closed on major holidays Located at 2284 S. Ballenger Hwy., Suite 2, Flint, 48503.

Contact Pete Levine at 810-733-9925.

CHECK OUT OUR WEBSITE WWW.GCMS.ORG

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GCMS/MSMS