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THE Bulletin

FEBRUARY 2009 Volume 85 Number 2

A black and white portrait of a man with a mustache and glasses, wearing a suit and tie. He is smiling slightly. The background is a soft, out-of-focus grey.

**Kevin Kelly
Passes Away**

Free Clinic Update

**Dinner Business Meeting on
Health Care System Future**

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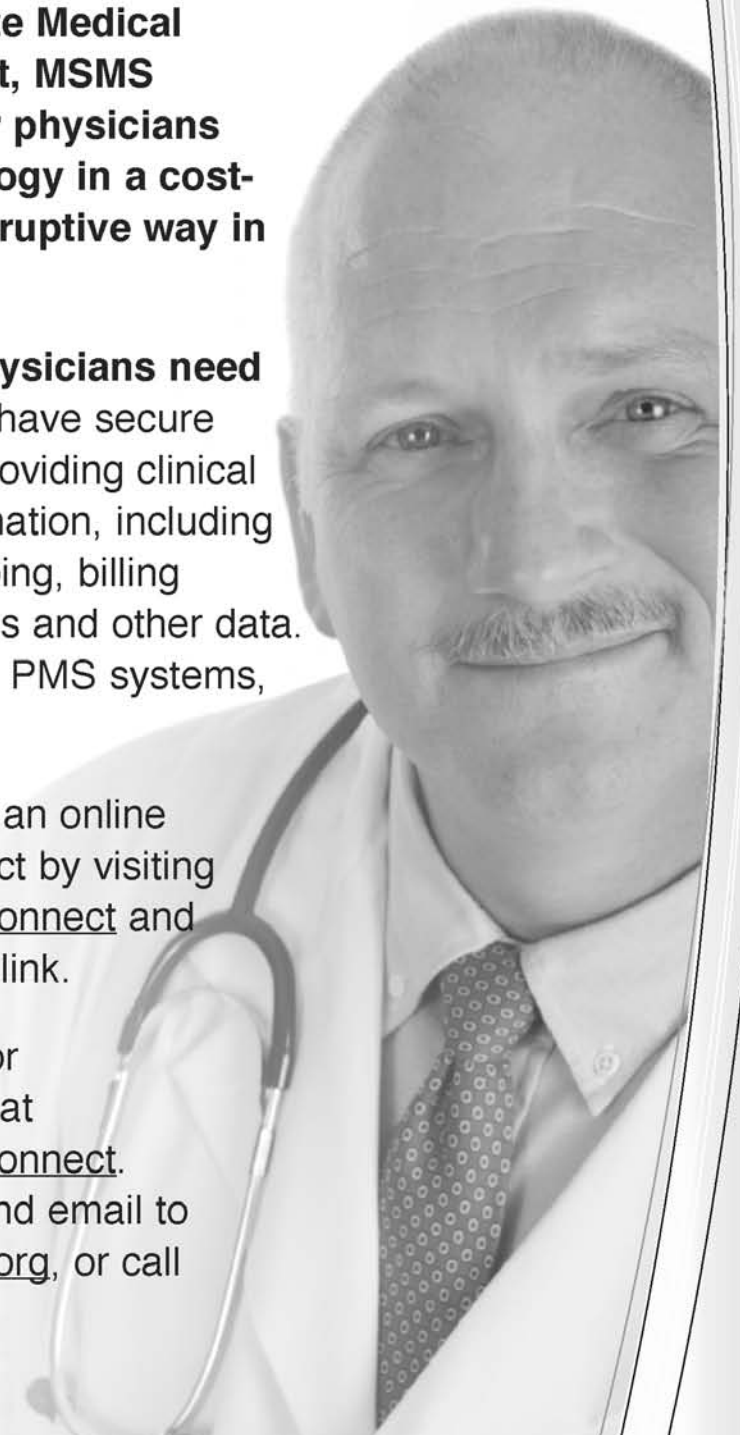
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FEBRUARY 2009 Volume 85 Number 2

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.

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PERSONALIZED CARE

We hear about protocols, guidelines and cookbook medicine frequently. Protocols may be a fine jumping off point. But simply following them will not lead us to quality health care. We are all different: our genetics are different, our personalities are different, our religious beliefs are different, and our cultural backgrounds are different. Yet all of these can and should play an important part in personalized care. And I do believe that is what most patients want. We cannot hope to overcome economic, geographic or racial disparities without this viewpoint. Let me give you an example.



John A. Waters, M.D.

A few years ago I had the honor of treating a great man. He had accomplishments leading to national

prominence. He had developed cataracts and needed surgery. Not a big deal in this modern era. So he was counseled, gave consent and went for preoperative testing. That is where the trouble began. The anesthesiologist ordered an ECG and he refused. You see, this man was a Native American. Based on his culture and religion, he believed the ECG would kill him. After a detailed discussion, he still refused the ECG. He could handle pain or anxiety, but not the ECG. So I elected to proceed with only local anesthetic and he did fine.

Each patient wants and needs that kind of personalized care.

Don't Miss This Dinner Business Meeting Regarding Your Future

Our February 5, the dinner business meeting will be most interesting. It will revolve around the opinions of three key decision makers on the future of the American health care system. This is timely information for all.

Featured speakers will include: State Senator Deb Cherry (who also chairs the Greater Flint Health Coalition), Michael Sandler, MD, President of the Michigan State Medical Society, and Peter Pratt of Public Sector Consultants. There are so many questions about what our future will look like. Come hear some very educated opinions. The meeting, at the Flint Golf Club, is a bargain at \$20 per person residents are only \$10. Please send and bring anyone who you think would be interested in this exciting meeting.

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A SHOT IN TIME MAY SAVE NINE

In this country there are only two seasons, winter and winter.

– SHELAGH DELANEY (1939 -)

February is nigh. Technically the shortest month of the 12, as winter slogs on, those who live in Michigan may begin to have the sensation that it is the longest. With luck and care, you and yours have avoided the cold and flu viruses that are so prevalent in the winter time. Maybe you even had the foresight to get a flu shot last fall. After all, the flu shot is recommended for most children between six months and 18 years of age and all adults over 50. It is estimated that 36,000 people die of influenza each year.



Daniel Ryan, MD

Edward Jenner, an English country doctor, usually receives credit for the concept of using fluid from cowpox pustules to inoculate humans to prevent the deadly disease of smallpox. (The term vaccine is derived from the Latin word for cow, vacca.) Actually, forms of smallpox inoculation had been utilized for centuries in China, India, and Turkey. Today, there are vaccines for more than two dozen viral and bacterial pathogens. Children can receive up to 28 shots for 14 different diseases; double the number of shots 40 years ago. They can sometimes be subjected to five shots at the same visit to their pediatrician. Ouch! This trend has many parents concerned and wary.

You are certainly aware of the purported link between the MMR vaccine and the increase in the incidence of autism. The controversy originated from a study published in the British journal Lancet in 1998 that theorized that intestinal inflammation following MMR administration led to harmful proteins in the blood and the subsequent development of autism within one month. The study was very small (12 children) and several researchers have since disproved any connection between the two. Unfortunately, once the first study became publicized, like the proverbial cat out of the bag, the notion became widespread among the general public despite evidence to the contrary. Mercury-containing thimerosal preservative used in many vaccines since the

1930s also has been implicated in the increase in autism. However, thimerosal is no longer used in most childhood vaccines. Yet the rate of new cases of autism continues to rise.

Another factor in some parents' resistance to childhood vaccination is the mandatory nature of the shots. All 50 states require children entering kindergarten to be current with recommended immunization, and 77% of them are. The remainder lack only a few shots. All but two states allow exemptions on religious grounds, and

20 states allow exemptions on philosophical grounds. Some parents resort to home schooling simply to avoid the vaccinations. But vaccinations not only protect the individual, but the public in general. If there are enough intentionally unvaccinated children in an area, outbreaks of usually controlled diseases can easily spread to vulnerable individuals such as infants, the elderly, and other unvaccinated children. The increase in measles cases is a perfect example.

Vaccines are certainly not risk-free. For example, one in 600,000 doses of Hepatitis B vaccine is complicated by anaphylaxis. The rotavirus vaccine was linked to intussusception in one in 10,000 who received it. The older "whole-cell" pertussis vaccine had a high rate of adverse effects such as fever and seizures. But far more people will die of Hepatitis B, rotavirus, and pertussis if they do not have the immunity afforded by the vaccines.

There are many misconceptions and much misinformation about the safety, efficacy, and necessity of vaccinations. And those opposed to vaccinations raise legitimate concerns about these issues that can have positive effects. A comprehensive program of timely immunizations for all age groups can be a powerful tool for public health programs and preventive medicine throughout the world. And, with a little luck, someone may find a vaccine for the common cold.



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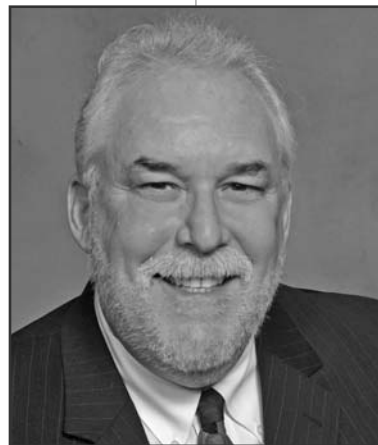
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Peter Levine, MPH

As we went to press with this issue, word came that Kevin Kelly passed away. You have all heard about his heroic struggle over the past 12 months with health issues which required him to step down as Executive Director of the Michigan State Medical Society. Those who knew Kevin knew what a special person he was. Every one who has spent time with him felt that he was their best friend. He had a remarkable clarity of purpose and was a genuinely terrific human being. Many of us have fascinating and sometimes deeply personal memories of him. It was not unusual to talk to him two to three times per week, and even to get together with him during holidays or vacations to share family experiences and maybe even talk a little business. His influence went far beyond health care but his most visible imprint is on the medical profession which saved his life during his college years when he developed Hodgkin's disease. That shaped the remaining years of his life in ways only those close to him knew. His dedication to the medical profession was real as was his dedication to his family and friends, his state, his university and his city. The Press Release regarding Kevin's passing is contained in this issue of The Bulletin.

OTHER ISSUES:

Beginning this year, the Medicare Program is offering a 2% bonus to physicians who ePrescribe. That bonus would apply to all Medicare services that physicians provide for the year. This bonus will diminish over five years and will be gone by 2014. Beginning in 2012, physicians whose offices are still on a paper-only system will begin to see a drop in Medicare

payments. The only exception to this will be if a physician can prove that electronically prescribing would represent a significant hardship. The MSMS website has links under "Hot Issues", which will take you to the Medicare website and provide a "Practical Guide to the ePrescribing Incentive Program."

Physician's offices are still having problems with MedAssurance. Please let us know if those problems are still occurring. We have communicated the issues to the powers that be, and hope

that those problems are solved. Thanks to all the Practice Managers who have helped with this.

A new administration is place. Congress is at work. The state legislature is moving on a variety of issues, and it's the season for Health System Reform. Please be assured that GCMS, MSMS, and the AMA will be engaged on these issues. There will be plenty of opportunities to express your opinions as processes begin to move forward. Stay alert and stay involved. We are on the cusp of social policy change in many areas, with health care driving the train.

To learn more about possible changes to the American health care system, please attend the Dinner Business meeting on February 5th where that will be the sole topic of discussion. This is not a meeting that you will want to miss.

Take advantage of the GCMS website! If you would like to have access to the "Members Only" part of the website (www.gcms.org) please contact Marcia Gzym at 810-733-9923 for your login and password.

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“The world is run by those who show up.”

“Kevin Kelly truly was a force of nature, the likes of which I’ve seldom seen.”

MEDICAL SOCIETY HONORS FORMER DIRECTOR **KEVIN A. KELLY**

EAST LANSING - Leaders of the Michigan State Medical Society recently honored the memory of Kevin A. Kelly, immediate past MSMS executive director.

"Medicine in this state is fortunate to have had a man of such integrity, respect for family, and commitment to his community," said MSMS president Michael A. Sandler, MD. "Caring and considerate, Kevin Kelly was a visionary in health care. Michigan citizens will continue to benefit from his lifetime of leadership and dedication."

Mr. Kelly served the 16,000-member MSMS his entire career, beginning shortly after graduating from Michigan State University in 1978 in economics. He started as a

legislative coordinator in 1979. In 1987, Mr. Kelly became managing director and in 2005 was named executive director, succeeding William E. Madigan.

"Kevin has been a mentor and an inspiration to many people, and his passion for life permeated everything that he did," said MSMS acting executive director Julie L. Novak. "The good fortune of knowing someone like him makes us all better people, and his influence will have a ripple effect for generations. We will miss him, but we will carry a little of him with us forever."

"The world is run by those who show up" is an adage Mr. Kelly adopted as his personal motto. He dedicated his life and inspired others

to "show up" and work for improving health care for all Michigan citizens.

"Kevin Kelly truly was a force of nature the likes of which I've seldom seen," said Gregory J. Forzley, MD, chair of the MSMS board of directors. "Kevin had the ability to engender passion among leaders to focus on issues that matter. He was one of the most positive people I've ever known. With him, suddenly the impossible becomes possible. He will be missed by many people in many ways."

Successes during his career at MSMS include the MSMS Future of Medicine initiative, a Michigan Patients' Bill of Rights, nation-leading medical liability reform,

increased AIDS education, stabilized funding of the Medicaid program, domestic violence education, and improved end-of-life care. He also was dedicated to banning smoking in workplaces, improving childhood immunization rates, and patient safety education, among many other health care issues.

Mr. Kelly's seemingly limitless energy was shared with a variety of organizations outside of MSMS including Ele's Place, the Children's Trust Fund, Michigan's Children, Capitol National Bank board of directors, Michigan Hospice Organization, Michigan Health Council, Michigan Sudden Infant Death Syndrome Alliance, Michigan Transplant Policy Center, Michigan Public Health Association, American Cancer Society, Gilda's Club, Michigan Festival, Michigan Political History Society, People's Church, MSU's Wharton Center, the Sparrow Hospital Foundation, and various advisory councils for the city of East Lansing, Lansing

Community College, and Sparrow Hospital.

In 2004, Mr. Kelly received one of his alma mater's highest honors, the MSU Distinguished Alumni Award. In 1999, together with Mr. Madigan, Mr. Kelly received one of the American Medical Association's highest awards, the Medical Executive Achievement Award. Other awards included the Strategic Association Leader Award from the Michigan Society of Association Executives and the Vernice Davis Anthony Ele's Place Award recognizing his leadership of that agency's efforts to counsel grieving children.

Most recently, on Dec. 9, the advocacy group Michigan's Children, named him the first recipient of the annual Kevin A.

Kelly Children's Advocate Award.

A corollary to Mr. Kelly's motto of "showing up" is "Hard on issues, soft on people." This respectful attitude toward others in public policy development garnered respect from every quarter, ally and opponent, alike.

"We all owe Kevin Kelly a debt of gratitude for his time, energy and commitment to improving health care in Michigan," Doctor Sandler said. "We owe it to him to continue to fight for access to quality health care. Kevin Kelly was a wonderful person who gave of himself to everyone."

Cards may be sent to the Kelly family in care of MSMS, 120 W. Saginaw St., East Lansing, MI, 48823

KEVIN A. KELLY

The very first time I met Kevin Kelly was in 1982 or 1983. My husband, Peter, was on the MDPac Board and we went to an MDPac meeting in Washington D.C. I remember Cathy Blight was also there but I don't know who else may have been. Peter and I had been married a very short time so I didn't know many physicians or any of the spouses. Kevin was there and organized some things for us to do. He got us tickets to go inside the White House. What a wonderful experience that was. That was my first and only time to make it inside. He was such a warm and caring person and from that day on he always called me by name and had a warm handshake and smile. He was a very gracious man and I will truly miss him and all he stood for. The MSMS building will be a little empty without him there.

– Cheryl Thoms, GCMSA

Anyone who met Kevin felt close to him. His ability to put people together, to foster positive change, and to create win, wins was unparalleled. Most of all he was simply the greatest guy, who taught me a lot about being a good dad. I loved working with him, and enjoyed our time together regardless of what we were doing, or where we were doing it.

– Peter Levine, MPH



I met Kevin when I was 29 years old and had been in private practice for all of about two months. He called me and asked if I could meet with him at MSMS headquarters to discuss my career. It was meeting I will never forget. Here was a man with far greater responsibility and no reason to be interested in my needs as a young physician. Words can't express the unique qualities he possessed that endeared him to so many people in all walks of life. My life is richer for having the opportunity to consider him a colleague, mentor, and friend.

– Bobby Mukkamala, MD

REFLECTIONS

It is very hard to express the inexpressible and compare the incomparable. My words cannot do justice to convey my feelings about our beloved Kevin Kelly. I can confidently say that Kevin Kelly was one of the reasons I got involved in organized medicine. His enthusiasm, cool demeanor, strategic vision, commitment to the cause, brilliant and high integrity attracted me to him. One of the greatest virtues of Kevin was his ability to analyze complex problems and come up with implementable, seemingly simple solutions. Kevin had the memory of "an elephant." When you met Kevin and started a conversation, he could quote events in minutes with details that may have happened many years earlier in previous conversations with him.

One of the most memorable events of my life with Kevin was the two weeks I spent with him in India during the Inaugural Ceremonies of NRI Medical College that he was so fond of.

Sumathi and I had the unique privilege of visiting Kevin and Jamie during his convalescence. He was as sharp as could be. I will never forget my last words with Kevin.

– AppaRao Mukkamala, MD

Kevin Kelly, past Director of Michigan State Medical Society was a great advocate for the physicians of Michigan. He was comfortable in the meeting of the Board, in the conference rooms of the Legislature, and in the committee rooms of MSMS. It is said a great leader doesn't do everything alone, but trains colleagues to continue the work in the leader's absence. Kevin certainly accomplished this. We will all miss Kevin's influence, his knowledge and his being there for us. But we have been enriched greatly by his presence. This will continue into the future.

– Edwin H. Gullekson, MD, District 6 Director

It is with deep sadness that I comment on the passing of MSMS Executive Director, Kevin Kelly on December 15th after a long illness. Our longtime members fondly remember Kevin as a young and very effective legislative coordinator in the 80's who rose through the ranks to become the number one guy at MSMS.

Kevin's genius lay in empowering and educating alliance members to act upon issues that affect physicians and their families. His encouragement and support of our educational initiatives certainly helped us become better advocates for health care and GCMSA become a political force in Michigan.

To me, he was a friend and a mentor who constantly raised the bar and made me get out of my comfort zone. While his death leaves a void that cannot be filled, we in Genesee County will continue his legacy of empowerment and action. Thank you Kevin!

– Jay Kommareddi

If the world is run by those who show up, then Kevin Kelly ran the World.

I have known Kevin for more years than either of us would probably like to have admitted. We “grew up” in organized medicine and the Michigan State Medical Society together. I don't quite remember when we first met, but I do remember the incident that brought us together and to which he kept referring as we “matured.” The hospice movement was just getting started and the Michigan Hospice Organization needed a physician representative from MSMS for its Board. Thinking it would be great fun to ride to Lansing together for meetings, Pete Levine, who was then with the Greater Flint Hospital Assembly, talked me into asking MSMS, through Kevin Kelly, for \$100 for a membership. It was Kevin's first big “ask” to his boss and I guess there were some anxious moments, but the money came through and our friendship was born.

To say Kevin was an extraordinary person is an understatement. He was always there to listen to problems and concerns and offer sage advice, often far beyond his years. He had hats in many arenas, not only the medical society but Michigan State University, for which we both shared a passion, the community through his activities with children, particularly Elle's place in Lansing, organized medicine at the AMA level and his family. Perani Arena was well know to Kevin who came to watch his younger son play hockey. During a particularly rocky time at MSU, when there was tension between the Board of Trustees and administration, Kevin was instrumental in starting the Green and White PAC, to elect more “administrative sympathetic” Board members.

Not being afraid to borrow good ideas from elsewhere, Kevin helped spearhead the activities of physicians in judicial races, particularly the Supreme Court race. And he found a friend in John Engler in that arena.

Kevin came up through the legislative arena in MSMS and never lost his love for the legislative process. He knew so many legislators and kept up the acquaintances, whether they stayed in government or not. His reputation in Lansing and Washington was legendary.

While many of us have lost a good friend, the medical society and the community have lost a tremendous advocate and visionary. It will be a long time before anyone will come close to filling his shoes.

– Cathy Blight, MD

Kevin Kelly was a great leader with exceptional abilities, calmness, inclusiveness, and non-egoistic thinking. He was the architect behind the scenes for our victories in the state capitol, but never sought credit for himself. He was a master at developing contacts in Lansing. I thank him for his great service to MSMS and I miss him dearly.

– Venkat Rao, MD

Kevin Kelly was smart, straight forward and followed through on his promises. I will always remember him as an honorable man. All aspects of society should be represented by men like Kevin. He will be missed.

– Walter P. Griffin,
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GENESEE COUNTY MEDICAL SOCIETY

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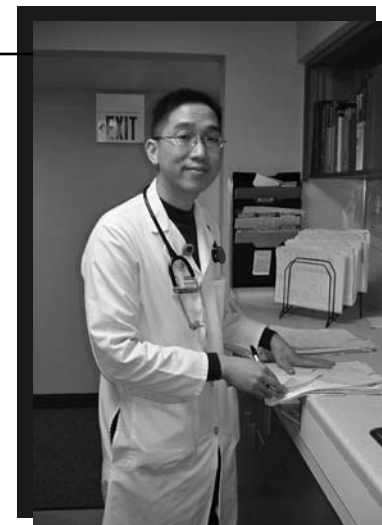
By Peter Thoms, MD

It works because “we” work. And that “we” goes far beyond the Genesee County Medical Society. The “we” includes virtually every part of the medical community and beyond.

In this issue of *The Bulletin* we want to thank all of those who make the Genesee County Free Medical Clinic (GCFMC) the outstanding success that it is. Started 18 years ago in a tiny office loaned to us for a Tuesday Night clinic, it has grown to a four-days-per-week operation in our own building with 10 exam rooms and a spectacular cohort of volunteers. GCFMC is truly a gem that is the envy of communities across the state.

The work has oversight by a Board of Directors which Allen F. Turcke M.D. serves as President. Rima Kudish M.D. is our full time Clinic Director assisted by Carolyn Fitzpatrick, RN our Clinic Coordinator, Cathy Adamson, Office Manager, and Orphie Klinert works part time as the Office Assistant. Without these individuals we would be at a loss handling the volumes of visits and needs of a growing population of patients.

All of this makes the clinic run like clock work. The volunteers are what make it all possible. The community has pitched in to a degree and in a manner unequaled anywhere else that I know of. There are far too many names to include them all, but we are staffed with volunteers who work as receptionists, social workers, nurses, pharmacists and primary care physicians. Then there is Jesse Trommer whose daughter has been conscripted to help keep our well stocked drug sample room organized and current.



The corps of physicians is made up of our internists, family physicians, and E.R. specialist, and nurse practitioners. Beyond our walls, specialists from every specialty receive our patients by referral. Genesys, Hurley, and McLaren render emergency and inpatient care. Dentists, physical therapists, podiatrists, and Clinical labs all pitch in to help us care for citizens. **AND WHAT IS TRULY AMAZING IS THAT ALL OF THIS IS DONE FOR FREE. YES! FREE. That is what sets us apart making us unique among free clinics.**

None of this could happen without the communities' financial support. Dr. Kudish's grant writing has brought in support from several foundations. The Genesee County Medical Society Alliance organizes the annual Healing Hands Walk/Run that has raised over \$100,000 annually. Individuals give. Churches and service clubs have made contributions. A few businesses have seen the benefit and support the work that has taken care of our Genesee County citizens who are

uninsured yet have meager income.

We serve those who often are working at low-paying jobs or have been retained on a part time basis. Our patients must meet several criteria. They must be residents of Genesee County, over 18, and be uninsured or uninsurable (not eligible for Medicaid, Medicare, Genesee Health Plan, etc.) and have a household income of less than twice the poverty level (which varies according to the number in the household).

On a budget of about \$250,000 we pay our employees, maintain our building, buy the needed supplies and provide the needed drugs. Drug companies have been generous in supplying us with samples and Mary Pat Toth helps us acquire direct mail special medications for those in need of products that we can not stock.

Only by a personal visit can you appreciate what a spectacular operation this is. From the clean, recently redecorated waiting room with comfortable seating, to the pharmacy and the organized drug sample room, the facility is a gem... but what makes it especially special is that people serve with joy. Those who qualify for care are professionally cared for. Our community has embraced the GENESEE COUNTY FREE MEDICAL CLINIC through contributions of services and finances.

WE WANT TO THANK OUR PHYSICIAN COLLEAGUES WHOSE GENEROUS GIFT OF THEIR CARE HELP MAKE GCFMC THE SPECIAL WORK THAT IT IS.

These are the wonderful physicians and organizations who make the Genesee County Free Medical Clinic possible. If we have forgotten anyone we apologize.

AHMAD, N
AHMED, K
ALGHANEM, A
AL-MIDANI, M
ANNE, S
ARIF, M
ASSOCIATED RADIOLOGISTS
BAKLEH, M
BARKEY, W
BASKOVICH, S
BERNARD, W
CHAPIN, M
DANIELS, K
DESAI, D
DISMOND, S

DUTT, N
EAST MICHIGAN EYE INSTITUTE
EUSTACE, M
EYE CARE ASSOC.
FAMILY CARE PLUS PHYSICAL THERAPY
FAMILY ORTHOPEDIC ASSOC.
FLINT GASTROENTEROLOGY ASSOC.
FORTUNATE, B
FRAPPIER, M
FULTON, G
GANAPINI, K
GENESYS REGIONAL MEDICAL CENTER
GENESYS/HURLEY CANCER INST
GHALIB, M
GUNSBERY, G

GUYOT, L
HAGENSTEIN, H
HAMMOUD, J
HURLEY MEDICAL CENTER
JACKSON, A
JAGGI, M
KARRAR, A
KATNENI, J
KAUSHAL, S
KING, G
KUMAR, F
LAWRENCE, L
LAZAR, P
MANNAN, S
MARTENS, H

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RESIDENCY
MC LAREN LABORATORIES
MC LAREN OB/GYN ASSOC
MC LAREN REGIONAL MEDICAL
CENTER
MDO IMAGING
METZ, J
MICHIGAN SLEEP DIAGNOSTICS
MICHIGAN VASCULAR ASSOC.
MICHIGAN VISION INSTITUTE
MID-MICHIGAN KIDNEY/HTN INST.
MRI DIAGNOSTICS
MUKKAMALA, S
NATZKE, G
NEIRINK, S
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OSAMA, S
PAIN MANAGEMENT CENTER

PANDRANGI
PANK, D
PLENSDORF, S
PLUCER, M
PULMONARY ASSOC.
QUEST LABORATORIES
RAMP, B
RAO, R
REGIONAL CARDIOLOGY
ASSOC.
REGIONAL MEDICAL
IMAGING
RING, H
RYAN, D
SAALWECHTER, J
SABOTKA, J
SAEED, E
SAHA, S
SAHOURI, S
SALEEM, M
SALIMI, R

SANKARAN, S
SAYAL
SHAH, J
SHUKAIRY, K
SODERSTROM, R
STACK, E
SUD, P
SURGICAL ASSOC.
TAJOUR, B
TALLURI, S
THAWANI, H
THOMS, P
TOMYCZ, N
TOWFIG, B
TRUDELL, D
TUMANENG
TUMMALA, S
UROLOGICAL ASSOC.
WATERS, J
WEASE, G
WOMENS SPECIALTY ASSOC.
ZENDLER, R

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Walter P. Griffin
Timothy H. Knecht
Jonathan M. Hartman
R. Paul Vance

Glenn M. Simmington
J. Brian MacDonald
Jose' T. Brown
Sandra K. Carlson

APPLICATIONS

Neetaben R. Patel, MD

Family Medicine
2313 E. Hill Rd.
Grand Blanc, MI 48439
810-953-6400
Fax: 810-953-6477
Dr. Patel received her medical degree from Government Medical College, South Gujarat University, Surat, Gujarat, India in 1990. She completed her residency at New York Medical College. Dr. Patel is Board Certified in Family Medicine. She is sponsored by Amitabha Banerjee, MD and S. Bobby Mukkamala, MD.

Tejal Joseph, MD

Family Practice
Fenton Medical Center
102 N. Adelaide
Fenton, MI 48430
PH: 810-629-2249
Fax: 810-629-6535
Dr. Joseph received her medical degree from Wayne State University in Detroit, MI in 1997. She is Board Certified in Family Medicine. Dr. Joseph is sponsored by Amitabha Banerjee, MD and S. Bobby Mukkamala, MD.

Donald Robinson, MD

Family Practice
Hamilton Clinic - North Pointe
5710 N. Clio Rd.
Flint, MI 48504
810-787-4445
Fax: 810-787-4491
Dr. Robinson received his medical degree from Wayne State University School of Medicine, Detroit, MI in 1992. He completed his residency at Wayne State University Medical Center. Dr. Robinson is Board Certified in Family Medicine. He is sponsored by Amitabha Banerjee, MD and S. Bobby Mukkamala, MD.

NEW RESIDENTS MEMBERS:

Ahmed Hamoda, MD
Venkatesh Krishnasamy, MD
Rajul Pandya, MD
Gurkan Ege, MD
Anant Patel, MD
Gagandeep Singh, MD

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2009 HEALTH CARE WEEKLY PROJECTIONS

Published January 12, 2009

By John Waters, MD, President GCMS and Peter A. Levine, MPH Executive Director

A LOOK AT 2009 BY A PHYSICIAN IN FLINT

One thing is certain - 2009 will be a fascinating year. The nation looks expectantly to our new President, Barack Obama, to come up with magic bullets on many issues, not the least of which is healthcare. The need for systemic change is obvious, but its method is not.

We will be forced to face the need for action! As more of our fellow citizens become unemployed, Medicaid becomes their insurer. As Medicaid insures more individuals, our safety net, which is so fragile, may break.

In a community like Genesee County, where unemployment and safety net utilization are so high, we also have an amazing provider commitment to care for the medically indigent. It will not take much of a change to provoke a safety net collapse.

It is our plea to state and federal policymakers to understand that each time physicians care for Medicaid, Genesee Health Plan, or Genesee County Free Medical Clinic patients, physicians are directly subsidizing that care. Any cuts to the Medicaid program would be devastating to the safety net.

Where does that leave us? It leaves us excited about the possibility of finding systemic answers to these questions. We all need to be engaged in the process of finding solutions. As Michigan's economy continues its downward spiral, the need for cooperation among our leaders becomes more intensified. Partisan politics must be set aside to find solutions to the problems that we face. We can either be optimistic about the possibility of abandoning partisanship or we can be pessimistic and approach the future on the same partisan path that has led us where we are today. In Genesee County we choose to aggressively pursue solutions to problems. We would encourage others to follow our lead through cooperation and a spirited approach to community service.

There are several potential catastrophic changes to legislation that could damage everything that we do. The first would be a diminution of the tort reforms of 1994. Those reforms have been a primary attraction of physicians to Michigan and Genesee County. Second, if Smoke Free Air legislation does not pass, physicians will assume that the legislature will continue to be irrational by refusing to eliminate one of the primary stimuli for diseases which cost the state so much. If the state won't act and the legislators lack determination to pursue this issue, the question then is why should physicians continue to voluntarily subsidize care while the state avoids paying for that care and at the same time encourages smoking-related illness. And third, the lack of certainty in the area of employer-based health insurance for large segments of the population is an issue that is on the forefront of everyone's mind. While this issue will not be resolved in the short term, it cannot be ignored.

The current situation we face is classically unsustainable. Everyone stands to lose if the systemic problems we are experiencing are not resolved. There is a lot of talk and not much effort or action when it comes to fixing major issues. This may be the year when hitting rock bottom forces all of us to stop merely debating the issues and unite in action to fix the systems that are crippling our communities.

Peter Levine, Executive Director, Genesee County Medical Society

2009 will be the year when the energetic and innovative pull away from the pack. The nation, our state and our communities, are running out of time and cannot continue blindly moving forward. So many areas of the Nations economy need to be addressed that those involved in health care will be forced, by necessity, to focus on doing things better and doing things cheaper. The long held philosophy that by reducing cost, improved quality may be achieved via standardization and information sharing may find a window of opportunity. This may force components of the health care, payor and consumer communities to talk with each other in ways that they never have before.

The Greater Flint area is a region where intense cooperation and intense competition have resulted in agreement

to try new ways of doing things in health care. There is a lot to be learned by watching those community wide organizations, which operate on a consensus basis such as the Greater Flint Health Coalition. There is much to be learned from the Genesee County Medical Society as well. It is an organization where physicians function as physicians, as opposed to competing entities. There needs to be more of this not less.

The Legislature and Congress both must find ways, to see past partisan politics on critical issues and get work done.

It is time for the voting and consuming public to refuse to accept business as usual. There is too much to do, to allow the lazy to refuse to change. Several examples of this are the refusal of Congress to permanently fix the flawed formula which Medicare uses to determine funding. Every member of Congress knows it is bad, and no one has the wherewithal to repair it. So much energy goes into getting it fixed on a year to year basis. That energy could be better spent on positive change, which also takes effort.

Scope of Practice Expansion is a field of legislative endeavor that is fought over every year. It is time for the Legislature to say, "When you chose to go into this field you chose a certain scope of practice. Just live with it, don't waste our energy with these efforts to increase your share of the pie". We do not have the resources to go through this constantly.

Not passing Work Place Smoking Bans is just a way to make sure that health care costs remain high and that the system looks irrational. We are the laughing stock of the rest of the world on this issue, and will remain so if we reject action.

We must fix the physician shortage problem. There are not enough residency programs slots, and everyone knows it. We know we are facing serious access problems in the future because of the severe shortage of physicians. If we are going to fix it, let's fix it. Perhaps we should make that our mantra when it comes to a major problem, let's fix it!

YOUR \$\$\$ AT WORK

- 💰 GCMS coordinated with MSMS physician opposition to Chiropractic Scope of Practice Expansion
- 💰 GCMS helped two individual physicians with billing issues
- 💰 GCMS continued pressuring the legislature to pass a workplace smoking ban
- 💰 GCMS hosted two meetings involving physician groups wishing to meet offsite
- 💰 GCMS met with newly elected legislators regarding health issues
- 💰 GCMS coordinated multiple legislative activities with MSMS
- 💰 GCMS liaised with two third-party payors to review physician issues
- 💰 GCMS provided input on MedAssurance
- 💰 GCMS met with County Commissioners regarding Genesee County Health Department
- 💰 GCMS Prepared 2009 Roster for publication and mailing



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Kumbla Bhakta	3	Nelson Schafer	16
Mark Weiss	3	Amy Yanmin Wu	17
Aamir Ahsan	4	Shawn Wiggins	18
Murugusundaram Veeramani	4	Dorothy Mulkey	19
John Damm	4	Raymond Rudoni	19
Evelyn Alunit	5	Athear Alrawi	20
Gregory Fortin	5	Hameem Changezi	20
Ahmed Akl	5	Charles Safley	20
Bradford Murphy	6	Dianne Trudell	20
Virgil Hooper	8	Richard Hennig, Jr.	21
Avery Jackson, III	9	David Wiese	21
Renee Baugh	9	Jonathan Arbogast	22
Craig Copeland	10	Daniel Bernstein	22
Frederick Lim	12	Steven Boskovich	22
Jay Holmes	12	Donald Canada	22
Gregorio Imperial	12	George Tumaneng	22
Ramesh Misra	12	Ali Esfahani	24
Sunil Nagpal	12	Laura Ann Carravallah	24
Nader Bassily	12	Kurk Kralovich	26
Sharon Dowd	14	Pino Colone	26
Margaret Taha	15	Naresh Kinra	27
Jami Foreback	15	Samuel Richard DeNardo	27
Rajeevi Pandyan	15	Mark Anderson	28
Frederick Armenti	16	Marvin Latchana	28
Edward Gomez-Seoane	16	Wilfredo Rivera	28

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GCMS MEETINGS - FEBRUARY 2009

- 2/2, 8 a.m. - Legislative Liaison @ GCMS
- 2/4, 7:30 a.m. - Bulletin Committee @ GCMS
- 2/5, 6 p.m. - Dinner Business meeting @ Flint Golf Club
- 2/16, 12 Noon - Membership Committee @ Grill of India
- 2/18, 5 p.m. - New Lawmakers reception @ MSMS
- 2/24, 5:15 p.m. - Finance Committee @ GCMS
- 2/24, 6 p.m. - GCMS Board of Directors @ GCMS
- 2/25, 12:30 p.m. - Community & Environmental Health Committee @ TBA
- 2/26, 8 a.m. Practice Managers @ GCMS

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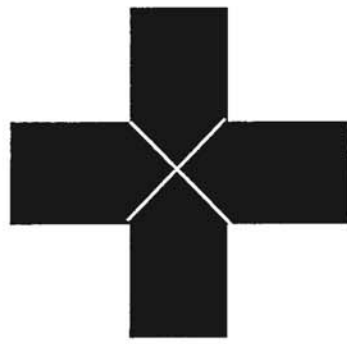
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