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THE Bulletin

APRIL 2009 Volume 85 Number 4



**SAVE MAY 7
FOR OBAMA
HEALTH PLAN
MEETING**

**IMG SECTION
RESOLUTIONS**

**PREPPING FOR
DEPOSITION**

**NEW LEGISLATORS
RECEPTION**

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EDITOR

Daniel J. Ryan, M.D.

ASSOCIATE EDITOR

Peter Thoms, M.D.

ASSISTANT EDITORS

Cathy O. Blight, M.D.

Hesham Gayar, M.D.

Ayman Haidar, M.D.

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designed, edited
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www.natniskypublishing.com (248) 547-9749

APRIL 2009 Volume 85 Number 4

THE Bulletin

Read by 96% of GCMS members.

FEATURE ARTICLES

<i>New Lawmaker's Reception</i>	12
<i>IMG Section Resolutions</i>	14
<i>Practice Managers</i>	22
<i>Dinner Business Meeting Minutes</i>	24

REGULAR FEATURES

<i>President's Message</i>	4
<i>GCMS Meetings</i>	4
<i>Editorially Speaking</i>	6
<i>Director's Message</i>	8
<i>Legislative Liaison</i>	10
<i>Legal Matters</i>	18
<i>Board Meeting Minutes</i>	21
<i>New Members</i>	22
<i>Your \$ At Work</i>	23
<i>Happy Birthday, Doctor</i>	26
<i>Classifieds</i>	26

Our Vision

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

Our Mission

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

PLEASE NOTE

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

THE BULLETIN (USPS 552-820)

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

By subscription \$60 per year. Member subscription included with Society dues. Periodicals postage is paid at Flint, Michigan and additional mailing offices. POSTMASTER: send address changes to *THE BULLETIN*, 4438 Oakridge Dr., Ste. B, Flint, Michigan 48532. 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.

E-PRESCRIPTIONS

Although I've used computerized medical systems to run my office for more than two decades, I was hesitant to transition to e-prescribing because they seemed cumbersome, until today. Perhaps this year's 2% Medicare incentive helped, but what really motivated me is that colleagues like you were beginning to use these systems with great success. My administrator, who attends the monthly GCMS Practice Managers meetings, recently returned with the most current and relevant information on e-prescribing.



John A. Waters, M.D.

helped my practice. While the meeting is well attended, it is surprising how many practices are not represented at those meetings. It is one of the best ways to stay informed on issues pertaining to MSMS, MMGMA, insurance, MedAssurant audits, collections and much more. The administrators set the agenda and Pete Levine arranges for guest speakers who are experts in their field. The meeting becomes a forum for problem solving, sharing ideas, and brainstorming best practices.

Next month's GCMS Practice Manager's meeting (from 8-10 a.m. on Thursday, April 23) will feature a speaker from Hurley PO.

We want our practices to thrive despite the difficult economic times, and one way to safeguard that is to connect with each other and learn ways to best manage and grow our business. Consider this the best time investment your office manager can make for your practice each month. Remember, the fourth Thursday from 8-10 a.m. is when your practice can be enhanced!

After speaking with other administrators and discussing the many benefits, she advised that we begin e-prescribing. I viewed the demos, saw the ease and efficiency of the new system, and was sold immediately. Not only will I receive cost savings from using the system, I will now be eligible for the Medicare bonus.

E-prescribing is just one of the many benefits my practice has realized from information obtained at the monthly GCMS Practice Managers meetings. In fact, each month my administrator returns from those meetings with some information or new ideas that have

GCMS MEETINGS - APRIL 2009

- 4/1, 7:30 a.m. - Bulletin Committee @ GCMS
- 4/6, 8 a.m. - Legislative Liaison @ GCMS
- 4/20, 12 Noon - Membership Committee @ Grill of India
- 4/21, 5:15 p.m. - Finance Committee @ GCMS
- 4/21, 6 p.m. - District Directors/GCMS Board of Directors @ GCMS
- 4/22, 12:30 p.m. - Community & Environmental Health Committee @ Sagano Japanese Restaurant
- 4/23, 8 a.m. Practice Managers @ GCMS
- 4/24-4/26, 2009 House of Delegates



Genesee County Free Medical Clinic

January 15, 2009

Dear

The Genesee County Free Medical Clinic has been established in 1991 to provide health care services to the indigent population in Genesee County. Almost two decades later the demand for the Free Clinic services continues to increase. **The Free Clinic continues to be one of the major medical refuges for this underserved and disadvantaged population. This segment of our community faces at least 50% higher risk of premature death as well as early onset of disability.**

All services including prescribed medications provided at the clinic are free of charge. Patients benefit from the services of **volunteers: physicians, nurses, pharmacists and other professionals** who donate their time and knowledge to the clinic. **At present**, the Free Clinic operates three days per week and sees **75-80 patients each week.**

The Free Clinic does not receive federal assistance and depends completely on the community commitment for support. Our primary fundraising effort is the **Healing Hands 5K Run/Walk** held each May and organized by the Genesee County Medical Society Alliance and PI Delta Chapter of Sigma Theta Tau, International.

A healthy community is a result of collaboration among its members. We invite you to be a "Friend of the Genesee County Free Medical Clinic" by making a contribution to the 2009 Healing Hands 5K Run/Walk. Your support and that of many others can make a difference in the lives of the Genesee County residents. Please give corporately and individually. The economic downturn has dramatically impacted us.

Thank you for your time and consideration in this important matter. **All together we can give hope to less the fortunate in our community.** Nobody should be in the position to choose between food, childcare and needs for health.

If you have questions or need additional information, please call the Executive Director, Rima Kudish, MD at (810)235-7430 or e-mail gcfmc@comcast.net.

Gratefully,

Allen F. Turcke, MD
President

Peter Thoms, MD
Medical Director

READY OR NOT; HERE COMES EMR

Change is the process by which the future invades our lives.

– Alvin Toffler (1928 -)

In a speech to a joint session of congress in late February, President Obama reiterated a campaign call for implementation of an electronic health record (EHR) system that would include every American within five years. If you already employ some type of system in your practice, you are in the minority. Only about 10% of hospitals and 16% of primary care physician offices are currently using electronic medical records (EMR).



Daniel Ryan, MD

Although the acronyms EHR and EMR are increasingly used interchangeably, experts in the field insist they are not the same. EMR is an electronic medical record in digital format that is the legal recorded source of data for the EHR, which is the ability to share medical information and the portability of such. Most programs include practice management software that supports the EMR. Although the Veterans Administration has been using a system wide EMR called VistA for many years, there are multiple reasons that EMR has not been embraced and adopted by the majority of medical practices and hospitals.

EMR systems need to communicate and exchange data with one another accurately, effectively, consistently, and rapidly. This is called interoperability. If they cannot, a national EMR system would be valueless. So far, there are no standards for interoperability.

The ability to preserve patient privacy is already an issue of concern with paper records. Multiple points of access over an open network like the internet will magnify exponentially the ability to improperly intercept private health information. Information security practices are well established and generally reliable, but wireless computer networks create new challenges to keep the

number of private information breaches from soaring.

How do we accurately and completely incorporate older paper records into a patient EMR? Digital scanning will be expensive and time consuming. Think of the hundreds of different paper record formats used by physician offices, hospitals, and labs. Digital scanning of already illegible handwritten records may well render them unintelligible and unusable. After conversion to EMR, the paper records will have to be destroyed in a

confidential and secure manner. This will add to the cost of the conversion.

Incorporating universal EMR into the health care system will involve a sea change in the routine work flow of physician offices and hospitals. Changing habits and attitudes among health care workers will be a far more daunting task than overcoming technological problems. At Cedars- Sinai Medical Center in Los Angeles, a \$34 million Computer Physician Order Entry (CPOE) system was scrapped after the medical staff revolted.

The physician, as the creator and custodian of the patient record, is responsible for data protection and security. You own the record but the patient owns the information within. With EMR, the physician is charged with managing the hardware, software, and media used to store information. This requires backup systems to preserve the content and structure of records that do not have an actual physical existence. You pay for the EMR system, you pay for maintenance, you pay for staff training, and you pay for repairs if the system malfunctions or crashes. It is predicted that most savings through improved efficiency will go to insurance companies and the government.

Innovative advances in software, hardware such as tablet P.C.'s, and network capability is overcoming past technological limitations affecting the feasibility EMR. Advantages of EMR include improved billing accuracy, reduction in duplication of lab tests and imaging studies, and streamlining clinical trials for researchers. Access to records and patient safety should be enhanced. But if up front costs, estimated at \$36,000 per physician, are accurate, there will be strong resistance to implementing EMR into their practices from physicians already squeezed by diminishing reimbursements and soaring overhead.

Announcement

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Dear Dr. Ryan,

Re: President's Message of February 2009 "Personalized Care"

I have read Dr. Waters President's Message of February entitled "Personalized Care." If I was to title my response it would be "Don't blame the protocols!"

No current protocol recommends EKG before a cataract surgery I have just reviewed the protocols from Henry Ford, DMC, Hurley, and Genesys, and others that were used to form the testing guidelines at Genesys. Eye surgeries came under class A/low risk surgeries.

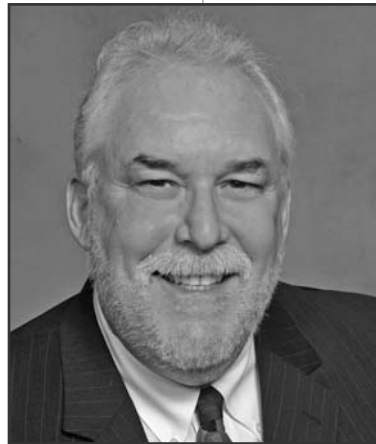
I would also refer readers to my President's Message of August 2005 where I noted that at Genesys PHO we find protocols save money and reduce unnecessary testing because their yield is very low.

Thanks,

Prasad Kommareddi, MD
Past President of GCMS

RESOLUTIONS, BAILOUTS, STIMULUS, AND NEW LAWMAKERS

As this memo is being created, the beginning components of President Obama's health system reform plans are coming out, just the smallest samplings. There will be tremendous opportunity to comment on these proposed changes, and tremendous opportunity to innovate as system change begins. The Genesee County Medical Society Board has expended significant energy already in discussing what they would like to suggest to the federal government in terms of access and coverage.



Peter Levine, MPH

This issue of the Bulletin has a plethora of resolutions which were approved by the MSMS IMG Section. You will be pleased to know that GCMS was remarkably represented at the section meetings. It would be fair to say that we were disproportionately represented. Between specialty societies, and section representation, as well as having a full delegation attending MSMS House and the Joint Section meeting, a lot will get done, and a lot will be influenced by your delegates. In addition, you will be pleased to know that GCMS has representatives on almost all of the MSMS reference committees.

The GCMS and GCMSA Delegation that attended the recent New Legislators Reception at the

Michigan State Medical Society was huge. One of the MSMS staff people said that they thought that everyone there was from GCMS. Those in attendance spent significant time discussing issues with new State Representative Paul Scott, and State Senator Tom George, MD (a candidate for Governor).

Those of you who are not sending your Practice Managers or key staff to the GCMS Practice Managers meetings are missing a tremendous opportunity to benefit from finding out what works at other practices. These meetings occur on the fourth Thursday of each month from 8 to 10 a.m. Please let us know contact information for your key staff, or just send them!

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LEGISLATIVE LIAISON

GCMS MEETS WITH NEW AND INCUMBENT LEGISLATORS

The Legislative Liaison Committee met in early March with Reps. Slezak, Hammel, Gonzales, and Scott, and Senator John Gleason as well as staff from Senator Cherry's office and Congressman Kildee's office. The discussion focused on the critical importance of handling stimulus money appropriately and not leaving big gaps in the budget for two years from now when the stimulus money has run out. Specific focus was placed on the Medicaid budget as well as stimulus package ideas that relate to health care. The Committee made very clear to the legislators that the Genesee County Medical Society is vehemently opposed to House Bill 4028 which would repeal the helmet laws from motorcycles. The Committee also reviewed in detail Senate Bill 111 which would allow a physician to Report Impaired Drivers to the Secretary of States office. The Committee also spent considerable time discussing the complex politics around House Bill 4341 which is Smoke Free Work Place Legislation.



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**NEW
LAWMAKERS
RECEPTION**



February 18, GCMS and GCMSA swarmed the New Legislators Reception at MSMS. They greeted Paul Scott, who in addition to being a new state representative, has submitted legislation to completely ban smoking in all workplaces. GCMS members had a good time introducing him to other community's physicians. The Genesee County delegation included Mona Sahouri, Velynda Makhene, Lakshmi Tummala, Sam Kiran, MD, Cheryl Thoms, Peter Thoms, MD, Cathy Blight, MD, Venkat Rao, MD, David Eilender, MD, Venu Vadlamudi, MD, James Forshee, MD, S. Bobby Mukkamala, MD, Nita Kulkarni, MD, Shafi Ahmed, MD, and Pete Levine. The delegation also included two students who will soon be getting their clinical rotation in Flint, Amrik Khalsa and Veronica Russo.



IMG SECTION RESOLUTIONS

Title: Free Play Benefits to Children Awareness Resolution

Introduced by: Genesee County IMG Delegation

Original Authors: Rima Jibaly, MD

Whereas, children's free play is fun, and
Whereas, free play is important to the physical, mental, and emotional wellbeing of children, and
Whereas, extra curricular activities are abundant and attractive, these activities are can also be stressful and overwhelming for both parents and children, and
Whereas, the American Academy of Pediatrics supports and acknowledges the benefits of Free Play; therefore be it resolved

RESOLVED: That MSMS support the position on Free Play of the American Academy of Pediatrics; be it further

RESOLVED: That MSMS promote the position on Free Play benefits widely where appropriate

Title: Rationalize Visa & Licensure Process for International Medical Graduate Residents

Introduced by: Genesee County IMG Delegation

Original Authors: Qazi Azher, MD

Whereas, the process of procuring an H1 visa for three years verses one year is not standardized, and
Whereas, the determination whether an incoming International Medical Graduate Resident receives a one year, two year, or three year H1 visa depends primarily on the officer handling the visa application, and
Whereas, the shortest residency program that an International Medical Graduate Resident would qualify for would be three years, and
Whereas, a visa could be terminated should the resident not be able to complete his/her residency program, and
Whereas, the second and third year visa applications are determined by the availability of a license from the State of Michigan, and
Whereas, a resident can only apply for licensure for the following year in June and July of the year as he/she completes each residency program year; therefore be it

RESOLVED: That MSMS work with the American Medical Association to seek standardization to the J1 and H1 visa procurement process to the length of the residency program; and be it further

RESOLVED: That MSMS work with the Michigan Board of Licensure to open up the licensure procurement period for a broader period in advance of the June to July period

Title: Bill of Rights for J1-Visa Waiver Physicians

Original Authors: Rima M. Jibaly, MD, and Venkat K. Rao, MD

Whereas, there are currently no rules regarding the number of hours a J1-Visa holding physicians may be forced to work by an employer, and
Whereas, there are many examples of J1-Visa holders being taken advantage of by employers due to fear on the part of a J1-Visa holder; therefore be it

RESOLVED: That MSMS supports a model employment contract specific to J-1 Visa Waiver physicians, and be it further

RESOLVED: That the Michigan Delegation to the AMA ask the AMA to seek legislation to establish a model employment contract specific to J-1 Visa Waiver physicians.

Title: MSMS to oppose discrimination in Residency selection based On the location of medical school

Original Authors: Venkat K. Rao, MD, Genesee County

Whereas, the ACGME has established rules which make it a violation for residency program to discriminate selection of candidates based on sex, race, age, religion, color, national origin, and disability, and
Whereas, Michigan relies heavily on applicants for residency from medical schools outside of the United States, and
Whereas, certain programs do not consider International Medical Graduates (IMGs) at all in their selection process, and
Whereas, the selection of medical residents based on any criteria other than quality places the patients of the State of Michigan at risk; therefore be it

RESOLVED: That MSMS add to its present list of prohibitions in resident selection, the name of the candidates' medical school.

RESOLVED: That MSMS ask AMA to lobby ACGME to include the names of the candidates in their list of discriminations prohibited.

Title: Urge Insurance and Managed Care Entities to Reject Prior Authorization Requirements for Medications

Introduced by: Genesee County IMG Delegation

Original Authors: Samasandrapalya Kiran, MD

Whereas, it takes physician time to discuss the appropriateness of medicines for patients medical conditions, and
Whereas, it can require multiple physician and physician staff telephone calls to get approval from insurance companies and managed care entities to prescribe medicines that are not in the formulary list, and
Whereas, the process of prior authorization often withholds the necessary medicines from the patient and increases the anxiety and apprehension associated with having to wait for an approval for appropriate medicine which may never come, and
Whereas, this prior authorization process takes away essential time from active patient care; therefore be it

RESOLVED: That MSMS work with the AMA to urge insurance companies and third party payors to stop its practice of prior authorization of prescription medications

Title Change Medicare Yearly Checkup Requirements

Introduced by: Shafi Ahmed, MD on behalf of the Genesee County Delegation

Original Authors: Shafi Ahmed, MD

Whereas, under Medicare rules a patient cannot have a yearly physical or components of the physical paid for in less than 365 days from the previous examination, and
Whereas, calendar related variations in scheduling can easily occur resulting in unreimbursed care, and
Whereas, sometimes it is necessary to accommodate patients for schedules in order to perform a yearly physical examination; therefore be it

RESOLVED: That MSMS ask the American Medical Association to seek alterations of the Medicare rules to allow yearly checkups with a grace period of thirty days to allow for the various fluctuations in individuals schedules

IMG SECTION RESOLUTIONS

Title: Ensuring Diversity in United States Medical Licensing Examination Exams

Original Author: Venkat K. Rao, MD, Genesee County

Whereas, the United States Medical Licensing Examination (USMLE) Step 2 English proficiency exam had until recently a failure rate of 17 percent, and

Whereas, the examination is re-evaluated and revised every two years for the purpose of improving the accuracy of the examination, and

Whereas, as the Committee adjusts the pass-fail bar arbitrarily, and

Whereas, the most recent adjustment to the examination resulted in a 25 percent failure rate, and

Whereas, there is lack of diversity and there are no International Medical Graduates on the Committee that oversees the USMLE Step 2 exam; therefore be it

RESOLVED: That the Michigan Delegation to the AMA ask the AMA to pursue diversity on the United States Medical Licensing Examination (USMLE) Step 2 Exam Oversight Committee that reflects the diversity of the test takers based on major identifying characteristics in an effort to eliminate bias from all USMLE examinations due to the human element.

Title: Urge Insurance and Managed Care Entities to Reject Prior Authorization Requirements for Radiological Procedures

Introduced by: Genesee County IMG Delegation

Original Authors: Samasandrapalya Kiran, MD

Whereas, it takes a considerable amount of physician time to explain the rationale for getting a radiological procedure such as a CT or MRI to a patient, and

Whereas, it takes valuable physician and patient time to pursue approval from insurance companies and managed care entities for such radiological studies, and

Whereas, the waiting creates apprehension and anxiety on the part of patients waiting for the prior approval process to itself out, therefore be it

RESOLVED: That MSMS work with the AMA to urge insurance companies and managed care entities to stop the practice of prior authorization for radiological procedures

Title: Temporary Social Security Number

Introduced by: Genesee County IMG Delegation

Original Authors: Qazi Azher, MD

Whereas, medical residents arrived in the United States without a social security card, and

Whereas, it is difficult for foreign medical residents to start life in the United States without a Social Security number; therefore be it

RESOLVED: That MSMS ask the AMA to work with the United States Government to provide a temporary Social Security number to foreign physicians upon lawful entry to the United States.

May 7, 2009

Genesee County Medical Society

DINNER BUSINESS MEETING

A Town Hall Meeting on President Obama's Health Care Plan

Come ready for a discussion!

All physicians, spouses, and family members, members and non-members of GCMS and GCMSA and interested other professionals are invited.

\$20 per person
Hospital Residents \$10
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May 1, 2009

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6 p.m. - Registration and Social Hour
6:30 p.m. - Dinner
7 p.m. - Meeting
7:15 p.m. - Presentations

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THE RULES

By Walter P. Griffin, Cline, Cline & Griffin, P.C.

Depositions aren't fun, but if you follow "the rules" it will be to your benefit. Sooner or later every physician will be called upon to give deposition testimony in a medical malpractice case or other civil action. You may either be a witness to events resulting in a medical malpractice lawsuit against another physician or institution or, unfortunately, you yourself may be named as a defendant.

Depositions, whether by video tape, discovery only as ordered by the court, or a simple discovery deposition, are extremely important in formulating a claim as far as Plaintiff's attorney is concerned or in formulating a defense as far as a defense attorney is concerned.

Physicians are sometimes unaware or are unprepared for the deposition process or the results that come from the deposition process.

One of my key phrases is:

"You can never win a lawsuit at a deposition, but you can lose it".

The above quote represents what I have learned over the years. Physicians who don't follow what I consider "the rules" when being deposed are more likely to provide information to the opposing counsel which could help them substantiate their claim or even formulate the basis for a new claim. Conversely, it is rare occasion that after a deposition of a physician the Plaintiff's attorney states "eureka" and dismisses the defendant because he has learned everything the physician knew about the case and has decided the physician was right and the claim made by the Plaintiff was wrong.

Therefore, every physician should follow certain rules when being deposed. If you don't follow the rules, you are at a disadvantage.

Listed below are what I consider the Ten "Rules of Thumb" to Follow When you are Deposed:

1. Listen to the question. Take your time. Make sure you understand the question before you answer it. If there is any part of the question you do not understand, say so.

2. Answer the question - not some other question - just the question you are asked. Say no more than is

necessary to answer the question. Do not volunteer extra information or explanations.

3. Do not guess. If you do not know the answer, say so. If you don't remember, say so. It is your job to give the answers you know, not to speculate about the answer you do not know.

4. You are the witness, not the lawyer. Do not argue with the lawyer for the other side. Do not object. Do not try to sell the case. Just answer the questions.

5. Watch out for questions that paraphrase your answers. Lots of times the lawyer may take your ideas and put them in other words - changing your meaning in ways that you might not catch at the time. If the lawyer asks if his paraphrasing is accurate, you are entitled to say that you would rather stand on your answer and stick with the way you put it.

6. Beware of absolutes. Watch out for questions that use the words "always" and "never."

7. Admit preparing for the deposition. There is nothing wrong in going over your testimony in advance. It would be irresponsible not to.

8. If your attorney objects, listen. If you are talking when your attorney objects, you should stop talking at once. An objection is a danger signal. It says you should put your mouth in low gear and your brain in high gear.

9. If you discover you have made a mistake in your testimony, let your attorney know before your deposition is over. Your attorney will fix it. Mistakes do not correct themselves.

10. If you get tired, ask for a break. If you need to go to the bathroom or get a cup of coffee or glass of water, say so. If you start to get argumentative or talkative, which is natural when you get tired, your attorney will ask for a break.

Finally, be sure to have your attorney spend as much time with you as you feel is necessary for you to be prepared for a deposition. This office is well known in the litigation field and is at your disposal. Ask for us if the need arises.

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Dr. Jack R. Grommons Passed Away



GCMS recently received a note that Jack R. Grommons passed away this past year. Dr. Grommons, was a long time member of the Genesee County Medical Society. He was a specialist in physical medicine, and appointed Director of the Department of Physiotherapy at Winchester Hospital in 1964. In addition to heading the department Dr. Grommons served as a consultant to other physicians on the hospital staff. He also practiced in Flint and served a three year residency in physical medicine and rehabilitation at the University of Michigan. Dr. Grommons also was in general practice in Mt. Pleasant and Durand.

Genesee County Medical Society Board of Directors Meeting – January 27, 2009

MINUTES

Motion:

That the report on the GCMS Budget be approved as presented. The Motion Carried.

Motion:

That a letter be sent to the Editor of the Flint Journal expressing opposition to the recent articles which present the opinion of smokers (related to legislation to ban smoking from the workplace. Statistics show tremendous drops in mortality and morbidity in states and cities where smoking bans have been implemented. The Motion Carried.

Motion:

That an Ad hoc Committee be established of Drs. Waters, Reynolds, and Soderstrom as well as staff to review and revise the document for presentation to the Health Coalitions Access Committee on November 11 and to further review the document with the GCMS Board at its next meeting. The Motion Carried.

Motion:

That an honorary membership for Dr. Rima Kudish be approved with a presentation. She is to be notified of the honorary membership, and a presentation made to her at the May Dinner Business meeting. The Motion Carried.

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PRACTICE MANAGERS DISCUSS ANSWERING SERVICE SAVINGS

In late February, the Practice Managers meeting convened by GCMS was held to discuss a variety of issues. A presentation on how to effectively utilize an answering service was provided by Debbie Green of PPI Communications also known as Physicians Answering Service. She stimulated a lively discussion in an effort to help physicians communicate more effectively while saving cost.

Also discussed were Patient Centered Medical Homes and Echo coding.

The future sessions of the Practice Managers will revolve around MedAssurant, MSMS Connect, and collections. Please contact Marcia with contact information for your key staff so they can be invited to these valuable sessions.

YOUR \$\$\$ AT WORK

- § GCMS met with state and federal elected officials regarding the stimulus package and specific recommendations for same, the Medicaid budget, the state budget as a whole, the importance of passage of smoking ban legislation
- § GCMS provided input on legislation regarding reporting impaired drivers, the helmet law, Medicaid reimbursement, and the complex and fragile nature of the safety net
- § GCMS continued working with the Greater Flint Health Coalition and all key components of the health care system on pursuing reenergizing RHIO
- § GCMS prepared an initial draft of a position statement on Access using the Greater Flint Health Coalitions draft document as a base
- § GCMS held meetings with Practice Managers regarding answering service and problems with specific billing codes
- § GCMS planned sessions for Practice Managers on Red Flag rules, MSMS Connect, and MedAssurant
- § GCMS communicated problems with MedAssurant to MedAssurant
- § GCMS prepared multiple resolutions for the MSMS House of Delegates
- § GCMS prepared multiple resolutions for the MSMS Joint Section meeting
- § GCMS prepared campaigns for candidates for individual section offices, and MSMS House of Delegates



CORRECTIONS TO THE 2009 ROSTER:

Rizwan Danish, MD is Medical Oncology

Joyce Fahrner, MD is Medical Oncology

Maneesh Lall, MD, office number is 810-606-0200

Siva K. Talluri, MD - new address: 3230 Beecher Rd., Ste. 2, Flint, MI 48503 phone: 810-342-5800 fax: 810-342-5811

Bonita Wang, DO - send PATIENTS to G1425 S. Graham Rd., send MAIL to: P.O. Box 620, Grand Blanc, MI 48480

Tarik Wasfie, MD is General Surgery with laparoscopic specialty

Joseph Luna, MD - phone: 810-658-8343, fax: 810-658-3743

Thank you to all who have called or emailed us with your corrections. Contact Marcia as your information changes.

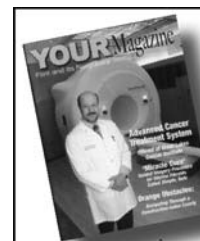
GCMS / MSMS NEW MEMBERS

APPLICATIONS

**Thomas Wright, DO
OBGYN**

Women's Integrated Healthcare
1595 Genesys Pkwy., Grand Blanc, MI 48439
PH: 810-606-9190 Fax: 810-606-9400

Dr. Wright received his medical degree from Midwestern University, Chicago College of Osteopathic Medicine, Downers Grove, IL in 1989. Dr. Wright is sponsored by Amitabha Banerjee, MD and S. Bobby Mukkamala, MD.



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YOUR Magazine has been working closely with both the Medical Society and the area's medical community to bring the latest medical news to our subscribers and readers. The monthly magazine publishes at least four issues a year that highlight medical achievements and innovations. This is a way to keep residents of Genesee County informed about our wonderful and advanced medical community.

Our mission is to highlight everything that is good about our community. If you haven't seen it, we feature information about businesses, schools, events and the people that make our community so great. The magazine is sold on newstands, by subscription and is distributed free to members of area chambers of commerce.

As a special membership benefit to Medical Society members, we are offering a year's free subscription. If you want to take advantage of this offer, call Your Magazine at 810.238.1638 or email us at michelle@yourmagazine.net. We really hope you will.

Michelle Cherveney, general manager

YOUR Magazine is owned and operated by The Flint Journal.

Genesee County Medical Society

– Dinner Business Meeting –

February 5, 2009

MINUTES

Call to order:

The meeting was called to order at 6:40 p.m. by John Waters, MD in the Flint Golf Club dining-room.

Introduction of Guests and Sponsors:

Dr. Waters welcomed guests and sponsors. Guests included Dr. Michael Sandler President of Michigan State Medical Society, Senator Deb Cherry, Dr. Peter Pratt of Public Sector Consultants, and State Representative Paul Scott. Sponsors included the Emergency Medical Center of Flint, MSMS Physicians Insurance Agency, Saginaw Bay Underwriters, Medical Protective Insurance Agency, and the Schering Corporation. He also welcomed members of the Genesee District Dental Society and invited Dr. Luis Perez, President to say a few words. Dr. Perez noted that he looked forward to both organizations working more closely together.

Approval of Minutes of Previous Meetings:

Motion:

That the minutes of the Dinner Business meetings of September 4, 2008, November 1, 2008 and the Board of Director meetings of June 24, August 26, 2008 September 23, 2008 and October 28, 2008 be approved as presented. The Motion Carried.

Membership Applications:

Motion:

That the request for membership be approved as presented:

Request for Membership:

John Bitner, MD	Kiet Doan, DO
Richard Frank, MD	Douglas Iddings, DO
Gordon Mc Climans, II, DO	Majed Nounou, MD
Joyce Stevens, MD	Seann Wilson-Carr, MD

Reinstated Members:

Melinda Wheatley, MD	Lynn Walker-Payne, MD
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Requesting Status Change from A-PIT to A:

Josephine Iskander, MD

Request change of from Active to Lifetime:

Musa Haffajee, MD

Requesting Reinstatement:

Jon Schriener, DO

Resident Requesting Membership:

Shivani Bishnoi, MD	Mahesh Borhade, MD	Edsil Asis De Ocampo, MD
James Donovan, MD	Hilana Hatoum, MD	Mohammad Katout, MD
Gurvinder Kaur, MD	Robert Kinzinger, MD	Maral Kojaian, MD
Visalakshi Kunapuli, MD	Eli Lotsu, MD	Ezequiel Martinez-Madrigal, MD
Mohamed Mansour, MD	Faranak Sarajzadeh, MD	Poonam Singh, MD
Maria E. Smith, MD	Vamsi Sreedharala, MD	Jyothsna Talluri, MD
Muni Theertham, MD	Divya Thomas, MD	Enson Tseng, MD

The Motion Carried.

New Business:

A) Election of the Nominating Committee

Motion:

That Drs. Ray Rudoni and Edwin Gullekson be elected to the GCMS Nominating Committee representing the GCMS Board. The Motion Carried.

Motion:

That Drs. EJ Raj, Sunita Tummala, Eric VanDuyne, Mona Hardas, and Mark Weiss be elected to the GCMS Nominating Committee as representatives of the General Membership. The Motion Carried.

B) Presidential Citation Award:

Dr. Waters invited Dr. Maurice Chapin to the podium and conferred upon him the 2008 GCMS Presidential Citation Award. He noted that Dr. Chapin's accomplishments serving his community, and performing medical missions were legion. Dr. Chapin thanked the medical society for such a high honor. He noted he had practiced medicine for over 50 years, and practiced the way that honored God and his patients. He thanked his wife for her support and thanked the members for their good work as well.

Reports:

A) MSMS Executive Directors Update

Dr. Michael Sandler reported that Julie Novak has been appointed Executive Director of MSMS.

B) Greater Flint Health Coalition

Dr. John Waters provided an overview of the current activities of the Greater Flint Health Coalition. He covered issues relating to the Access Committee, the Flint Health Care Employment Opportunities Project, the Regional Perinatal System Planning Committee, Regional Health Information Exchange Planning Project, Depression in Primary Care Project, Diabetes Group Visit Project, Children's Oral Health Education Campaign, Heart Failure Task Force, The Hispanic/Latino Community Health efforts, Pharmacy Task Force, and the Prompt Payment Task Force.

Announcements:

A) Dr. Waters reminded everyone that the House of Delegates will take place at the Amway Grand Plaza Hotel in Grand Rapids this year on April 24-26. The deadline for resolutions is March 11.

B) Dr. Waters invited those in attendance to contact Pete Levine regarding Presidential Citation Award nominees.

C) Dr. Waters invited everyone to send their Practice Managers or key staff to the Practice Managers meetings on fourth Thursday of each month at 8 a.m. for two hours.

D) Dr. Waters reported that Blue Cross decertification issues are arising again. He encouraged members to contact Pete Levine should they have a problem in this area.

Introduction of Speakers:

Dr. Waters introduced Drs. Michael Sander and Peter Pratt, as well as State Senator Deb Cherry who provided a stimulating discussion regarding The Future of the American Health Care "System".

Next Meeting:

The next meeting of the Genesee County Medical Society will take place on May 7 from 6 to 8:30 p.m. The topic will be "Change the American Health Care System proposed by President Barack Obama"

Adjournment:

No further business appearing. The meeting was adjourned at 9 p.m.

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Wayne Breece	2	Peter Thoms	15
Kunadi Reddy	2	Abdullah Raffee	19
Vemblaserry Jayabalan	3	Gregory Forstall	21
Kenneth Jordan	3	Louis Coriasso	22
Josephine Iskander	4	Gerald Cole	22
Imad Issawi	5	Alan Weamer	22
Carlo Dall'Olmo	6	Thomas Bossi	23
Qazi Azher	6	Donald Bryant	24
John Reid	6	Byron Schoolfield	24
Kurt Mikat	7	Ziyadeh Khoury	25
John Bauer	9	Nita Kulkarni	26
Gregorio Lecea	9	James Martin	26
Susan Smith	9	Rima Jibaly	26
Byung Ho Chang	10	Hesham Gayar	28
Syed Sattar	10	Ok Kyun Kang	28
Edwin Smith	10	Richard Prior	28
Majed Nounou	12	Sidney Martin	28
Elisea Singson	12	Sunita Tummala	29
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