



THE Bulletin

January 2020 Volume 97, Number 1

Thankful For Our Members

Register For The Feb. 6 Town Hall – Health Can't Wait

In Memory Of Dr. Anthony Miltich - Page 22

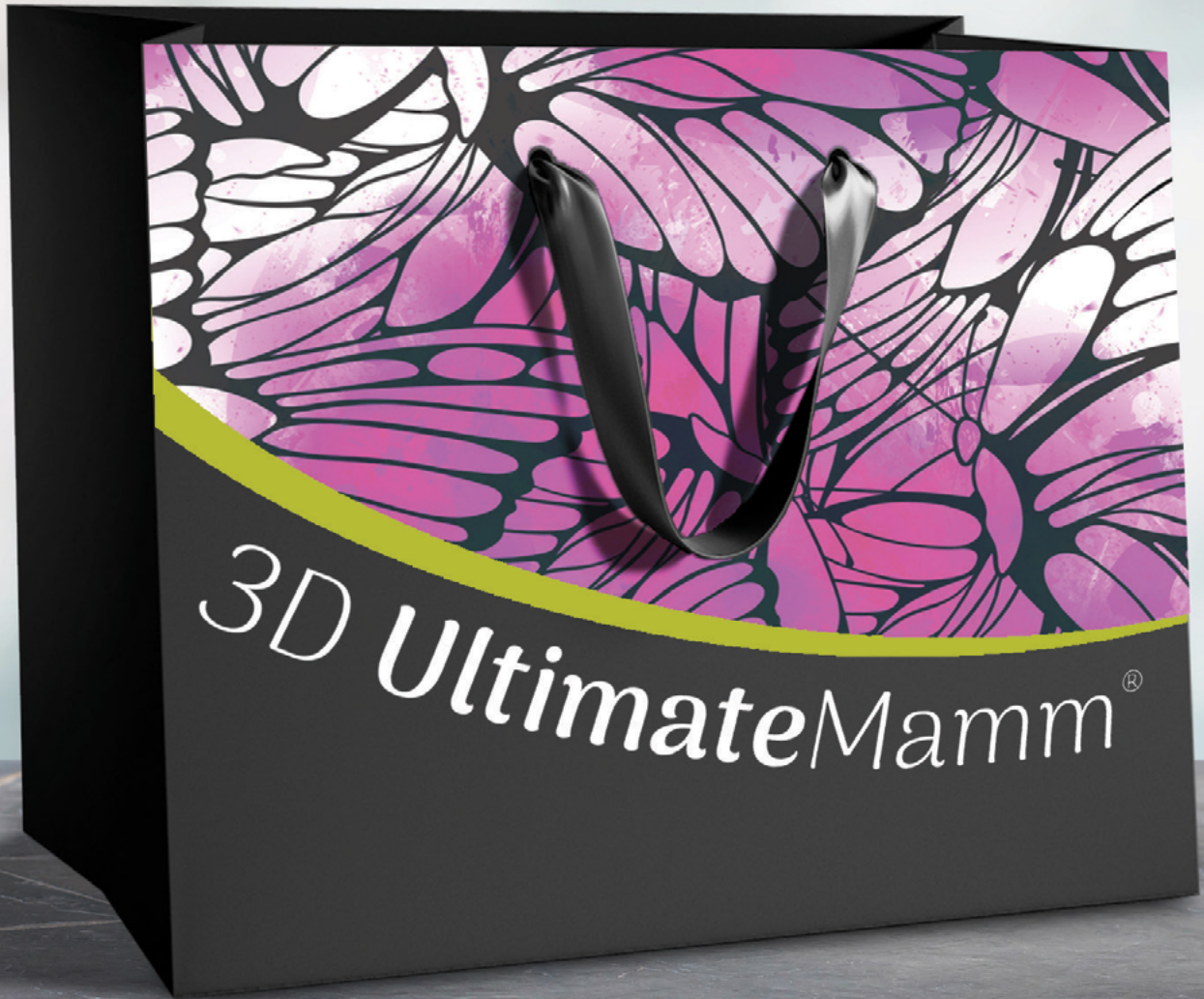
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THE Bulletin

Read by 96% of GCMS members.

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Our Vision

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

Our Mission

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

PLEASE NOTE

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

THE BULLETIN

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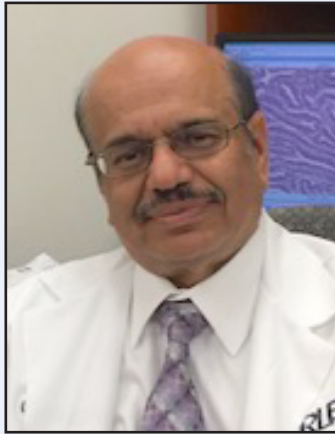
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Grateful for Our Members

As we embark on a new year, I'd like to take this opportunity to give thanks for the things over the past year for which I am grateful. I am grateful for my family, for my friends, and for the opportunity that you have given me to lead this wonderful organization.

GCMS is proud to serve you and we are very grateful for all that you do! Your support of the Society, each other and, most importantly, your patients is truly awe-inspiring and worthy of appreciation not only today, but throughout the year.

I'd also like to take this opportunity to remind you of the many gifts our physicians provide to our community every day. Whether advocating for medicine locally through our alliances with organizations such as the Greater Flint Health Coalition, state-wide through our synergistic relationship with the Michigan State Medical Society, and even at the national level with our representation at the AMA House of Delegates, GCMS members are directly influencing the future of medicine for our colleagues and patients.



Qazi Azher, MD

Through my time on the Board, I've come to appreciate just how much work is being done by GCMS to help physicians better serve our patients, and I recognize that none of it would be possible without our members. I thank you for supporting the Society's mission of maintaining a high standard of practice in the science and art of medicine; maintaining a harmonious and equitable relationship with the people of the community and maintaining a program of educational service to the public on matters of health and hygiene; and promoting a high standard of ethics in the conduct of the members between themselves and in their relations to the individual patient and to the public at large. I encourage you to reaffirm your support by renewing your membership for 2020.

I hope you and your family had a wonderful and safe holiday season. Thank you for continuing to be the hardworking and dedicated physicians that make GCMS so successful!

At the end of this column is a list of our current members. Please see who is absent and contact the absentees.

Fall 2019 - January 2020

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Fall 2019 - January 2020

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Help Your Patients Kick Off A Healthy New Year By Targeting Their Blood Pressure

In Michigan, 298 residents for every 100,000 die of stroke, heart failure, and other cardiovascular disease deaths. Heart disease is the leading cause of death in Michigan and stroke is the fourth leading cause of death in the state. According to the American Stroke Association, high blood pressure is the single most important treatable risk factor for stroke. It is also one of the key risk factors for heart disease.

In order to combat this, the AMA has partnered with the American Heart Association (AHA) on Target:BP™, an initiative that works to reduce the number of Americans who suffer heart attacks and strokes by urging physicians and care teams to prioritize blood pressure control. Target: BP is the go-to source for information and guidance on how to improve blood pressure control rates and recognizes practices for their commitment to this effort. When you register for Target:BP, you will receive guidance and support from the AHA field staff, as well as a newsletter providing the latest cardiovascular news and information.

The BP Improvement Program is a comprehensive solution using the latest clinical evidence to help improve blood pressure control rates. The program has three pillars:

- Measure blood pressure accurately, every time it's measured. Measuring accurately is the first step to hypertension control. (Target: BP provides resources to train clinical staff on how to accurately measure blood pressure and the BP Positioning Tool allows you to identify the common errors made when blood pressure is measured in the clinical setting.)
- Act rapidly to address high blood pressure readings.
- Partner with patients, families and communities to promote self-management.

More than 1,000 medical practices, providers and health systems are now participating in Target: BP. They are encouraged to implement the BP Improvement Program and submit data annually to track progress.

As the initiative has evolved, a recognition program is also being implemented to recognize healthcare providers, groups and clinics that attain high levels of blood pressure control. Physician practices and health systems will be recognized for achieving blood pressure control rates at or above 70 percent within the populations they serve. There are 2 levels of recognition:

- Achievement: ≥70 percent of patients with blood pressure controlled to <140/90 in 2016.
- Participation: Recognizes health care systems for registering with Target: BP and submitting data.

Visit <https://targetbp.org/> for more information on the program.



Angie Kemppainen, CAE



The Genesee County Medical Society cordially invites you to a

Quarterly Dinner Business Meeting & Medical Community Town Hall

sponsored by

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Thursday, February 6, 2020

Flint Golf Club

3100 Lakewood Drive

Flint, MI 48507

Health Can't Wait

It's a reality that physicians understand and patients experience. Tragically, insurance company bureaucracy too often stands between patients and the medicine, treatment, or testing their physicians believe they need. Prior authorization, step therapy, and fail first requirements hamstringing treatment, drive up prescription nonadherence and lead to diminished health.

GCMS is part of the Health Can't Wait coalition, an exciting partnership of patients, health care providers, and patient advocacy associations dedicated to putting Michigan patients first and ending delays in patients' access to health care. Join us to discuss these costly, onerous, and dangerous payer practices and how the HCW coalition is fighting to end them.

Please invite other physicians and practice managers to this meeting! GCMS physicians, spouses, GCMSA, family members, GCOA members, practice staff and other interested professionals are invited to attend!

Meeting Agenda

6:00 pm Registration & Social Hour

6:30 pm Dinner

7:00 pm Meeting

7:15 pm Health Can't Wait Presentation



Kevin McFatridge
Senior Director of Marketing &
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Registration Fees

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Practice Managers & Staff**

**\$40.00 Genesee County Osteopathic
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New Year; Congruent Headwinds

As we start a new year, we will continue to deal with much of the same agenda in our medical arena as we continue to face the same headwinds. Among these is our need to build membership. At the last GCMS Board of Directors meeting, we again addressed this issue, and spent time making calls to several who have not renewed their membership. We were somewhat successful in that effort. Membership is key to the health of any organization. It is key to GCMS's position of leadership. It is key to our effectiveness in vocalizing our concerns in Lansing as well as our stance on the local scene because, with numbers, we can achieve more together.

With increased numbers, we become financially stronger, which translates into the ability to be involved in community endeavors to promote improving health-related initiatives. We can better support the many projects of our GCMS Alliance who, by their community involvement, promote us as concerned professionals for a healthy community. Many years ago, Dr. John Reed started the "Reach Out and Read" program to improve the reading skills of early primary school children. This was then taken over as one of the initiatives of the Alliance with the goal to provide a book for every 1st- and 2nd-grader in our community schools.

More recently, the Alliance initiated an awareness campaign to stifle human trafficking and, partnering with them, our Medical Society held a successful symposium for awareness and we created the Human Trafficking Toolkit for Healthcare Professionals, possible through a grant from the Greater Flint Health Coalition, and the Michigan Department of Health and Human Services. We followed the lead of GCMSA by promoting their agenda to our physicians with material



Peter S. Thoms, MD

to raise the awareness of this blight in society. The old adage "money talks" is critical to what we do, and memberships provide that critical base.

GCMS needs everyone, not just the Board of Directors, to encourage belonging. Membership is a barometer of our health as a vibrant organization. For many years, we have published a column called, "Your Dollars At Work," to help members see the benefits of belonging—and there are many—but foremost is the fact that organized medicine has been the strong voice that protects and promotes our profession. At the end of the President's Message is a list of our current members. Please see who is absent and contact the absentees. WE NEED YOUR HELP!

Another headwind is the perennial problem of getting legislation passed. The legislative process is a tedious endeavor that requires persistent attention. Currently, the big issues on which we are focused are prior authorization and surprise billing. The first is of great concern to us. The second issue is one that affects our patients. As their advocates, it also concerns us. The issues are moving slowly through one committee after another in the long legislative trail. At the last Legislative Liaison Committee meeting on Dec. 2, both issues were addressed (as were others). It is evident that our concerns are being heard. There is a keen awareness of the impact that these issues have on their constituents. But please do not hold your breath. As I already stated the process is tedious and we must be patient while continuing to push.

Lastly, let me encourage each of you to patronize our advertisers. Each one supports us and offers services that are cogent to our personal and professional lives. We thank them for offering their particular services and their ongoing support of our publication.

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GCMS MEETINGS

JANUARY

Practice Managers - Recessed

Legislative Liaison Committee - Recessed

**Community & Environmental
Health Committee, 1/22**
12:30pm, GCMS Office

Finance Committee, 1/28
5:30pm, GCMS Office

Board of Directors, 1/28
6:00pm, GCMS Office

FEBRUARY

Legislative Liaison Committee, 2/3
8:00am, GCMS Office

GCMS Town Hall, 2/6
6:00pm, Flint Golf Club

Practice Managers, 2/6
8:00am, GCMS Office

**Community & Environmental
Health Committee, 2/19**
12:30pm, GCMS Office

Finance Committee, 2/25
5:30pm, GCMS Office

Board of Directors, 2/25
6:00pm, GCMS Office



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Litigation Is Changing

By MEGAN R. MULDER, Cline, Cline & Griffin

The Michigan Supreme Court issued an order June 19 detailing several changes to the Michigan Court Rules. These changes are set to take effect Jan. 1 and will drastically change litigation.

By way of background, the new rules were adopted to promote efficiency within the court system. The new rules were drafted to cut costs associated with discovery. Although the rules outline many changes, perhaps the biggest change affecting physicians is the requirement of initial disclosures.

When a lawsuit is filed, rather than wait for formal questions served the opposing party to provide information, initial disclosure of information and documents will now be required. The information required to be included in a party's initial disclosures are:

1. The factual basis of the party's claims and defenses;
2. The legal theories on which the parties claims and defenses are based, including, if necessary, citation to legal authorities;
3. Witnesses, including names, addresses, and telephone numbers of individuals with discoverable information;
4. A copy and description, including location, of any electronically stored information that a party may have in its possession and may use to support its claims or defenses;
5. A copy and description of any electronically stored information that is being held by a third party;
6. A calculation of damages;
7. A copy of any pertinent portions of an insurance policy, indemnity agreement/ clause, security agreement, etc.; and
8. The anticipated subject areas of expert testimony. (MCR 2.302(A)(1)).

One note regarding expert

witnesses, as they play a key role in medical malpractice cases, is that the rules do not require that the names of expert witnesses be disclosed during the initial disclosures. Rather, only the anticipated subject matter to which the expert will likely testify needs to be disclosed. For example, identifying that an infectious disease expert will be utilized, or a radiology expert will be utilized, should be sufficient at the outset.

For plaintiffs, initial disclosures are due 14 days after any defendant answers the complaint. (MCR 2.302(A)(5)(b)(i)). Keep in mind that a defendant has 28 days from the date the complaint is served to file an answer. For defendants, initial disclosures are due 14 days after plaintiff's initial disclosures or 28 days after they filed their answer, whichever is later. (MCR 2.302(A)(5)(ii)). A defendant's initial disclosures are due regardless of whether plaintiffs filed their initial disclosures.

Given that a significant amount of information will need to be disclosed no later than 28 days after the filing of a defendant's answer to a complaint, an



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intensive pre-suit investigation will need to occur in order to ensure the necessary information is identified, gathered to the extent it can be gathered, and disclosed at the appropriate time. As such, it is imperative for physicians to provide their carrier and/or counsel with a copy of the Notice of Intent as soon as it is received. This will allow for the carrier and/or counsel to work together, along with the physician(s), to secure the above information in preparation for the initial disclosures. While parties can stipulate to extending time for initial disclosures, this tool should not be used as a replacement for an intensive pre-suit investigation.

Furthermore, the new discovery rules provide for a continuing duty to supplement the initial disclosures throughout the discovery phase of the case. MCR 2.302(E). Should a party become aware that their initial disclosure was incomplete or incorrect in any way, a party must supplement or correct that disclosure in a timely manner.

Any evasive or incomplete initial disclosure or supplemental disclosure will be treated by courts as a failure to respond. As such, these disclosures must be taken seriously. The new court rules provide for harsh punishments should there be failure to comply by any party, including heavy sanctions, inability to use concealed evidence to prove the case, and limiting discovery that can be performed during the discovery phase of the case.

If you have any questions or concerns regarding the information contained within this article, please

contact the author, Megan R. Mulder of Cline, Cline & Griffin, P.C. at mmulder@ccglawyers.com or by calling the office at 810-232-3141.

Announcement

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

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PMC serves as a vehicle for physicians to be part of a larger, clinically-integrated organization working together on health care opportunities. We also assist our members with achieving Patient-Centered Medical Home (PCMH) designation and maximizing health care incentive payments for PCP's and Specialists. PMC is the largest independent Physician Organization in Genesee County.

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The Legislative Liaison Committee Discusses Health Can't Wait Legislation

The December 2, 2019, meeting of the Legislative Liaison Committee focused on the Health Can't Wait (HCW) legislation, SB 612. The Senate Health Policy Committee has scheduled a hearing for January 30, 2020 at 1:00 pm. HCW advocates are planning on convening at the Radisson in downtown Lansing at 11:30 am for lunch- buses will be provided to take participants to the hearing room.

Physicians and patients will not win on this issue without your support. Please consider attending and encouraging your colleagues, your office staff and, most importantly, your patients to attend as well. Firsthand experiences of health care delays or denials due to the reckless use of prior authorization or step therapy make

all the difference in the fight for reform and a robust presence on the day of the hearing will send a message to the committee on the importance of SB 612.

Registration is now open: <https://www.surveymonkey.com/r/HCWHearing>

Upcoming meetings of the Legislative Liaison Committee will place on February 3, 2020; March 2, 2020; April 6, 2020; May 4, 2020; and June 1, 2020.

Registration is now open:
<https://www.surveymonkey.com/r/HCWHearing>

CLICK HERE

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Blue Distinction Center (BDC) met overall quality measures for patient safety and outcomes, developed with input from the medical community. A Local Blue Plan may require additional criteria for providers located in its own service area. For details, contact your local Blue Plan. Blue Distinction Center+ (BDC+) also met and maintains the additional consumer need for charitable healthcare. Each provider's cost of care is calculated using data from its Local Blue Plan. Provider's CA, ID, NPI, and DRG may vary on local Blue Plan areas, resulting in tier evaluations for cost of care, and their own Local Blue Plans decide whether one or both cost of care evaluations must meet BDC+ national criteria. National criteria for BDC and BDC+ are displayed on www.bdc.com. Individual outcomes may vary. For details on a provider's or your own policy coverage, contact your Local Blue Plan and ask your provider before making an appointment. Neither Blue Cross and Blue Shield Association nor any Blue Plans are responsible for non-covered charges or other losses or damages resulting from Blue Distinction or other provider information or care received from Blue Distinction or other providers.

GCMS' monthly practice manager's meeting is consistently cited by our members as one of the most important benefits that GCMS provides. Each month, a topic relating to physician practices is addressed by experts in their field in addition to the managers being able to share in their questions and concerns among their colleagues. The calendar for winter/spring 2020 is located on page 24.

At the December meeting, MSMS Reimbursement Advocate Stacie Saylor gave a presentation on changes to the CPT E/M coding for office visits set to take effect in 2021. She also answered questions regarding the new work requirements for Medicaid clients. See below for expanded information on both topics.

The monthly manager's meetings are sponsored by Sovita Credit Union. As a credit union dedicated to the medical profession, Sovita takes pride in their availability and their personal service.

Coming January 2021: Major Revisions to Office Visit Documentation

CMS has finalized a historic provision in the 2020 Medicare Physician Fee Schedule Final Rule. Slated to take effect on Jan. 1, 2021, this provision includes revisions to E/M office visit CPT codes (99201-99215) code descriptors and documentation standards that address the continuing problem of administrative burden for physicians in nearly every specialty. With these landmark changes, documentation for E/M office visits will now be centered around how physicians think and take care of patients and not on mandatory standards that encourage copy/paste and checking boxes.

For decades, the physician community has struggled with burdensome reporting guidelines for reporting office visits and other E/M codes. With the proliferation of EHRs into physician practices, documentation requirements for office visits has moved towards increased "note bloat" within the patient record largely due to the check-box nature of meeting current documentation requirements.

The AMA led a consensus-driven, open and transparent work-group process to ensure the reimagined approach to office visits represented input from the broad array of medical specialties that perform these visits. The workgroup was created with members who had both CPT Editorial Panel and AMA/Specialty Society RVS Update Committee (RUC) experience. In addition, the process engaged participants with diverse medical specialty backgrounds including primary care, several surgical specialties, private payers and qualified healthcare professionals (i.e. physician assistants).

The workgroup held numerous open conference calls, where on average, more than 300 individuals participated to provide direct input. Many of the major decisions made by the workgroup, including the definition of time and key definitions of medical decision making (MDM) criteria, were based on targeted stakeholder survey results.

The Workgroup brought their proposal to the CPT Editorial Panel as consensus recommendations and only minor modifications were made by the Panel prior to approving them. The Panel outlined four primary objectives to this important work:

1. Decrease administrative burden of documentation and coding
2. Decrease the need for audits, through the addition and expansion of key definitions and guidelines
3. Decrease unnecessary documentation in the medical record that is not needed for patient care
4. Ensure that payment for E/M is resource-based and that there is no direct goal for payment redistribution between specialties

The AMA revisions to reduce administrative burden achieve a shared goal with CMS, putting patients over paperwork while improving the health system. These revisions work in lock step with the already established administrative burden relief initiatives established by CMS for 2019:

- Eliminate requirement to document medical necessity of furnishing visits in the home rather than office.
- Eliminate requirement for clinicians to re-record elements of history and physical exam when there is evidence that the information has been reviewed and updated.
- Physicians must only document that they reviewed and verified information regarding the chief complaint and history if already recorded by ancillary staff or the patient.

Additional burden reduction will be seen through:

- Simplifying code selection criteria and making them more clinically relevant and intuitive
- Creating consistency across payers by adding detail within the CPT E/M Guidelines
- Alignment with current documentation guidelines from Medicare and the CPT code set to ensure minimal disruption to practices

Summary of Revisions

5. Eliminate history and physical as elements for code

selection While the physician's work in capturing the patient's pertinent history and performing a relevant physical exam contributes to both the time and MDM, these elements alone should not determine the appropriate code level.

- The workgroup revised the code descriptors to state providers should perform a “medically appropriate history and/or examination”
6. Allow physicians to choose whether their documentation is based on MDM or total time
 - MDM: The Workgroup did not materially change the three current MDM sub-components, but did provide extensive edits to the elements for code selection and revised/created numerous clarifying definitions in the E/M guidelines.
 - Time: The definition of time is minimum time, not typical time, and represents total physician/qualified health care professional (QHP) time on the date of service. The use of date-of-service time builds on the movement over the last several years by Medicare to better recognize the work involved in non-face-to-face services like care coordination. These definitions only apply when code selection is primarily based on time and not MDM.
 7. Modifications to the criteria for MDM The Panel used the current CMS Table of Risk as a foundation for designing the revised required elements for MDM. Current CMS Contractor audit tools were also consulted to minimize disruption in MDM level criteria.
 - Removed ambiguous terms (e.g. “mild”) and defined previously ambiguous concepts (e.g. “acute or chronic illness with systemic symptoms”).
 - Defined important terms, such as “Independent historian.”
 - Re-defined the data element to move away from adding up tasks to focusing on tasks that affect the management of the patient (e.g. independent interpretation of a test performed by another provider and/or discussion of test interpretation with an external physician/QHP).
 8. Deletion of CPT code 99201
 - The Panel agreed to eliminate 99201 as 99201 and 99202 are both straightforward MDM and only differentiated by history and exam elements.
 9. Creation of a shorter prolonged services code
 - The Panel created a shorter prolonged services code that would capture physician/QHP time in 15-minute increments. This code would only be reported with

99205 and 99215 and be used when time was the primary basis for code selection.

MDHHS Prepares Healthy Michigan Plan Beneficiaries for Work Requirements with New Letters Outlining Steps for Compliance

More than 238,000 people enrolled in the Healthy Michigan Plan will begin receiving letters this week explaining what is needed to comply with the program's new work requirements. The notices are the are intended by the Michigan Department of Health and Human Services (MDHHS) to preserve health insurance coverage for those affected.

Anyone who receives this letter must tell MDHHS monthly about their work or other activities, such as job training approved by MDHHS or searching for a job. They must work or participate in other qualifying activities for at least 80 hours each month or else they could lose Healthy Michigan Plan coverage.

Healthy Michigan Plan beneficiaries who are subject to the work requirements must report work or other activities to MDHHS from January 25 to February 29 by going to www.Michigan.gov/MiBridges

or calling 833-895-4355. They will need to continue to do that every month.

Michigan's work requirements are in jeopardy as a result of a lawsuit filed last month. In Arkansas, Kentucky and New Hampshire, after similar lawsuits were filed, a federal court issued an injunction halting application by vacating approval of each states' work requirements. Facing similar litigation, Indiana, Arizona and New Hampshire voluntarily put their states' work requirements implementation on hold prior to the court vacating the requirements. Michigan is the only state moving ahead with expanded Medicaid work requirements in January despite legal action.

Michigan enacted its highly successful Healthy Michigan Plan effective April 1, 2014, after bipartisan approval of legislation that expanded Medicaid to residents with incomes at or below 133 percent of the federal poverty level. More than 640,000 people have Healthy Michigan Plan coverage today. According to research from the University of Michigan, the Healthy Michigan Plan has more than doubled primary care usage, reduced enrollees' reliance on the emergency room by 58 percent, cut uncompensated care by nearly 50 percent, and added \$2.3 billion to the state's economy.

Learn more about the Healthy Michigan Plan at HealthyMichiganPlan.org and about the work requirements and other changes on the Changes Coming in 2020 tab. Beneficiaries with questions can call 800-642-3195.

CDC Releases E-cigarette, or Vaping, Associated Lung Injury (EVALI) Update

CDC published updated interim guidance Dec. 20 for health care providers for managing patients with suspected EVALI, which includes an algorithm for patient management. It is a clinical companion piece to another CDC publication titled “Characteristics of Patients Experiencing Rehospitalization or Death after Hospital Discharge in a National Outbreak of E-cigarette, or Vaping, Product Use-Associated Lung Injury – United States, 2019.”

As this investigation continues, CDC encourages clinicians to continue to report possible cases of e-cigarette, or vaping, product use-associated lung injury (EVALI) to their local or state health department for further investigation. If EVALI is suspected, a detailed history of the substances used, the sources of products, duration and frequency of use, and the devices used and how they are used should be obtained, as outlined in the above articles.

CDC has also developed International

Classification of Diseases, Tenth Edition, Clinical Modification (ICD-10-CM)- Supplement coding guidance for healthcare encounters related to EVALI.

Hospitalized patients should be documented as clinically stable for 24–48 hours prior to discharge. Patients should have a follow-up visit with a primary care provider or pulmonary specialist, optimally within 48 hours of discharge, as outlined in

New tools for physicians include an updated algorithm for management of patients with suspected EVALI and a Discharge Readiness Checklist.

Both articles, the ICD-10 supplement, the companion EVALI discharge readiness checklist, and the patient management algorithm can be found here: https://www.cdc.gov/tobacco/basic_information/e-cigarettes/severe-lung-disease/healthcare-providers/index.html.

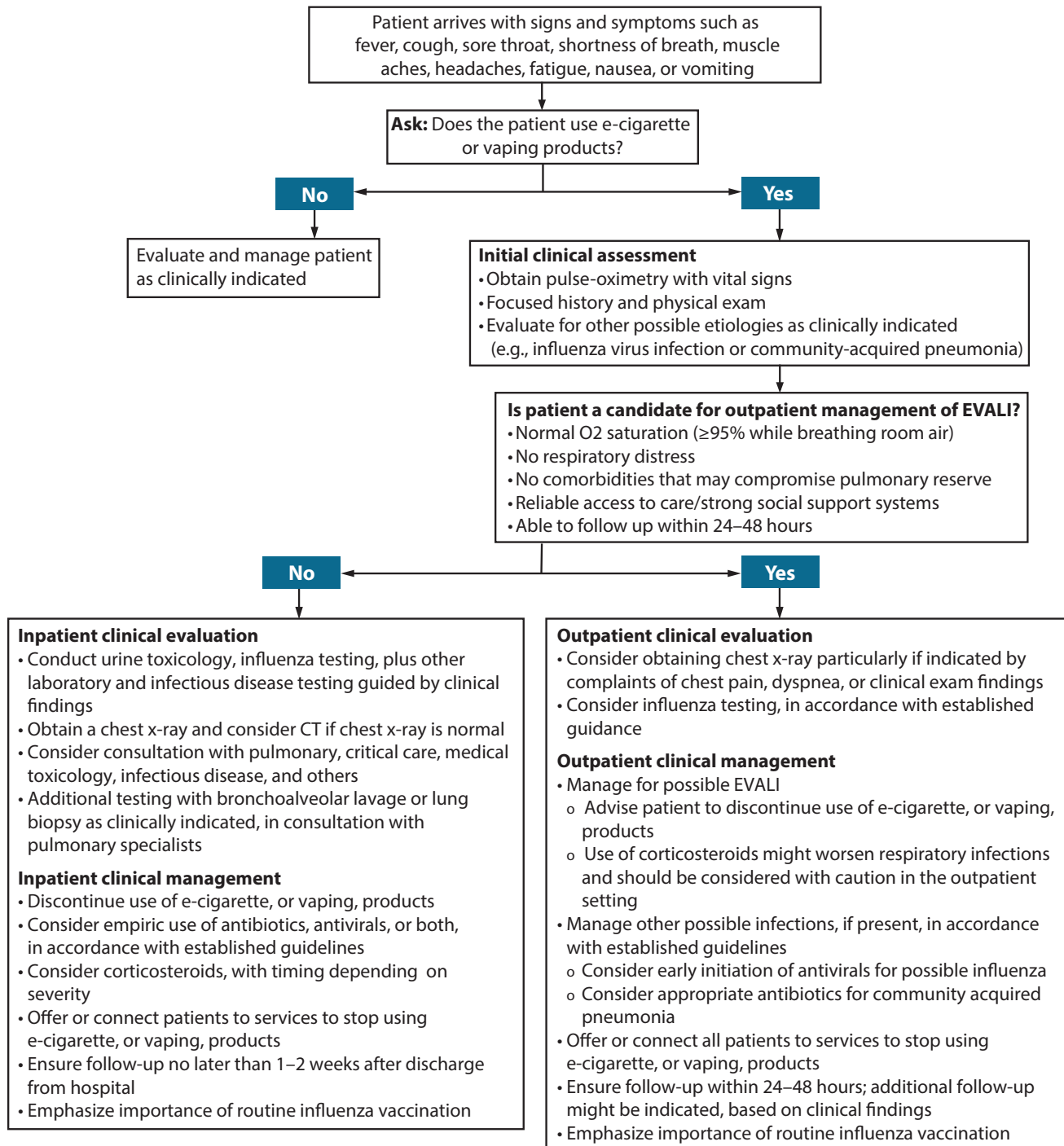
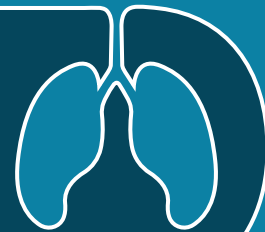
Reporting cases with suspected EVALI to state, local, territorial, or tribal health departments is critical for accurate surveillance of EVALI.

Determine whether any remaining product, including devices and liquids, is available for testing. Consider submission of any collected specimens, including bronchoalveolar lavage, blood, urine, biopsy, or autopsy specimens, to CDC for evaluation. Testing can be coordinated with [health departments](#).

CDC recently developed [International Classification of Diseases, Tenth Edition, Clinical Modification coding guidance](#) for health care encounters related to EVALI.

Recommendations for clinicians regarding the Outbreak of EVALI will be updated at www.cdc.gov/lunginjury.

ALGORITHM FOR MANAGEMENT OF PATIENTS WITH RESPIRATORY, GASTROINTESTINAL, OR CONSTITUTIONAL SYMPTOMS AND E-CIGARETTE, OR VAPING, PRODUCT USE



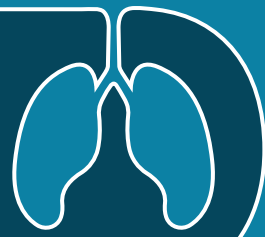
Abbreviations: CT = computed tomography; EVALI = e-cigarette, or vaping, product use–associated lung injury.

continued >>



EVALI DISCHARGE READINESS CHECKLIST

Use this checklist in addition to institutional checklists and resources to assist with planning towards the safe discharge of patients hospitalized with e-cigarette, or vaping, product use–associated lung injury (EVALI).



CONFIRM PATIENT CLINICAL STABILITY

- Stable oxygenation and exercise tolerance for 24–48 hours prior to planned discharge*
- Stable vital signs, physical exam, resolution of symptoms, and normalized laboratory tests

ENSURE INITIAL FOLLOW-UP, OPTIMALLY WITHIN 48 HOURS

- Confirm outpatient follow up with primary care and/or pulmonology optimally within 48 hours of anticipated discharge

ENSURE APPROPRIATE OUTPATIENT FOLLOW UP

- Confirm outpatient follow up, as indicated by clinical course during hospitalization
 - Primary care:** for all EVALI patients, optimally within 48 hours
 - Pulmonology:** for all EVALI patients, follow up within 2–4 weeks, and at 1–2 months
 - Endocrinology:** for pediatric EVALI patients given steroids, for all EVALI patients at heightened risk of adrenal suppression due to duration or intensity of steroid treatment
 - Cardiology:** for those EVALI patients with history of cardiac pathology
 - Psychiatry:** for those EVALI patients with concurrent anxiety, depression, PTSD, ADHD, previously diagnosed psychiatric illness, or if inpatient psychiatry consultation was required
 - Addiction medicine:** for those EVALI patients with a positive substance use disorder screen
 - Physical therapy:** for those EVALI patients demonstrating any deconditioning
 - Pain management:** for those EVALI patients with a chronic pain syndrome or pain due to comorbidities
- Provide written guidance about signs/symptoms and instructions on finding help, if symptoms recur
- Consider additional measures to optimize outpatient follow up for patients with conditions of high risk for EVALI rehospitalization and death**

OPTIMIZE OUTPATIENT MEDICATION USE & SAFETY

- Complete discharge medication reconciliation with outpatient medications, clinical course
- Complete discharge medication counseling between inpatient pharmacist and patient
- Counsel on signs of adrenal insufficiency if patient was prescribed corticosteroids during hospitalization, and on informing providers about corticosteroid treatment in case of acute injury or illness

CONNECT TO SOCIAL CARE WORKFORCE

- Complete evaluation by social care workforce to identify, record, and address postdischarge support needs
- Complete screening for mental health and substance use disorders
- Connect to community services to address social determinants of health

OFFER AND OPTIMIZE CESSATION SUPPORT

- Complete substance use disorder screening (ASSIST, CRAFFT-N, or institution's preferred tool) with connection to addiction medicine, follow up counseling, and medications when indicated
- Discuss cessation from e-cigarette, or vaping, including documenting a quit plan, and offering evidence-based tobacco product cessation interventions, including behavioral counseling and medications***

PRINT ONLY

¹ [Evans 2019], [Mikosz 2019], Clinical Lung Injury Working Group

*After EVALI admission or if prior home O₂ dependence, confirmed stability on low flow O₂ with home discharge on supplemental O₂ may be indicated.

**Older age, cardiac disease, diabetes, chronic pulmonary disease (including chronic obstructive pulmonary disease and obstructive sleep apnea), or multiple comorbidities.

*** Among patients aged < 18 years, health care professionals can consider the use of interventions that have been shown to increase cigarette smoking cessation among adults, including behavioral interventions. No medications are currently FDA-approved for tobacco product cessation, including e-cigarettes, in children and adolescents.



U.S. Department of
Health and Human Services
Centers for Disease
Control and Prevention

Issues of Serious Concern for Medical Practices!

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

**GCMS Practice Manager
meetings are held on
the 1st Thursday of each
month from 8am to 10am**



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

February 6, 2020

Presenter(s)

"Meridian Health"

Kristen Gasieski, Manager of Network Development
Valerie Southall, Provider Network Development Representative
Jeffrey A. Holzhausen, Director of Network Development

March 5, 2020

– or May 7 - pending confirmation

Presenter(s)

"Health Alliance Plan"

Sheri Chatterson, MSM, CHFP, MBA
Vice President, Provider Network Management

April 2, 2020

Presenter(s)

"McLaren Health Plan"

Trish Smith, Network Development Supervisor

Please email Sherry at ssmith@gcms.org or call 810-733-9923 to RSVP!

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

FLINTREGISTRY



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People who used Flint water from April 25, 2014 to October 15, 2015 can participate in a voluntary secure registry that will refer them to programs and other resources aimed at minimizing the effects of lead on their health, while promoting wellness and recovery.

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or call 833-463-5468



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flintregistry.org

A RESOURCE FOR YOUR PATIENTS



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flintregistry.org

The Flint Registry is a resource to see how the people of Flint are doing and provide support for those impacted by the water crisis. After completing a survey, individuals are referred to services that promote health and development such as education, health and nutrition programs. Support, especially for children, includes referral to Genesee Health System Neurodevelopment Center of Excellence – a new, no-cost child development assessment center.

The Flint Registry is modeled after other public health registries like the World Trade Center Disaster Registry. The Flint Registry is for anyone who was exposed to lead-contaminated water because they worked, lived, went to school, or daycare identified as an address on the Flint water system from **April 25, 2014 – October 15, 2015**, including children who were prenatally exposed. The Flint Registry is for all ages.

Want to learn more? Visit our website at flintregistry.org or call 833-GO-FLINT.

WHAT IS THE LOGO ALL ABOUT?

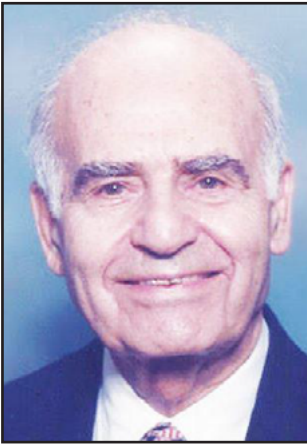


The logo represents the Sankofa bird, a mythical African bird from the Akan tribe in Ghana. The bird is flying forward, yet looking back, and carrying an egg in its mouth. It is symbolic of always needing to move forward, but never forgetting what happened in the past, and prioritizing the young. The logo suggestion was made by a Flint resident.



Michigan State University College of Human Medicine received funding for this work from the Centers for Disease Control and Prevention (CDC), Grant #NUE2EH001370.

OBITUARY



Anthony J. Miltich, MD

June 1, 1915 - November 25, 2019

Dr. Anthony Miltich passed away on November 25, 2019, at the age of 104 following a sudden illness.

He was born on June 1, 1915, in Virginia MN. He was a voracious reader and stated that he had read every book in the local library by the time he finished high school. He continued to read throughout his life. He was the first of his family to attend college, attending the University of Minnesota where he obtained his MD degree. He paid for his education by playing saxophone and clarinet in a small dance band.

During WWII, Dr. Miltich was assigned by the War Board to Flint to keep the workers assisting with the war effort healthy. He practiced there until his 70s with his independent practice of General Medicine and Surgery. He was an acute observer of people with an ability to diagnose hypothyroidism by sight. As he talked with his patients, his accent and mannerisms would mirror those of the patient, and he was loved by many. Tony was a member of the Genesee County and Michigan State Medical Societies, and the American Medical Association.

Dr. Miltich resided in Flint, Grand Blanc and Higgins Lake, MI; Port St Lucie, FL; and, most recently, in Mooresville, NC. His favorite hobby was bird and big game hunting. He was well known for his charisma and charm.

He is survived by his wife, Martyne Sheline and four children, along with many grandchildren, great-grandchildren, and two great-great-grandchildren.

Remembering Anthony J. Miltich, MD

Dr. Anthony James Miltich was a dear friend of mine who I had the pleasure of meeting at the Genesee County Medical Society. I have had the privilege of calling him a friend for 40 years. Our friendship started when he asked me to cover for him and to see his patients in the hospital at McLaren and Genesys. What I remember best about Tony was his charisma. He had an amazing bedside manner—the ability to talk to a patient, who came into the office sick and miserable and have them leave partially healed by his kindness and charm. This was the Anthony that I knew. He was 104 years old at the time of his passing, but when I visited him this past summer, more than

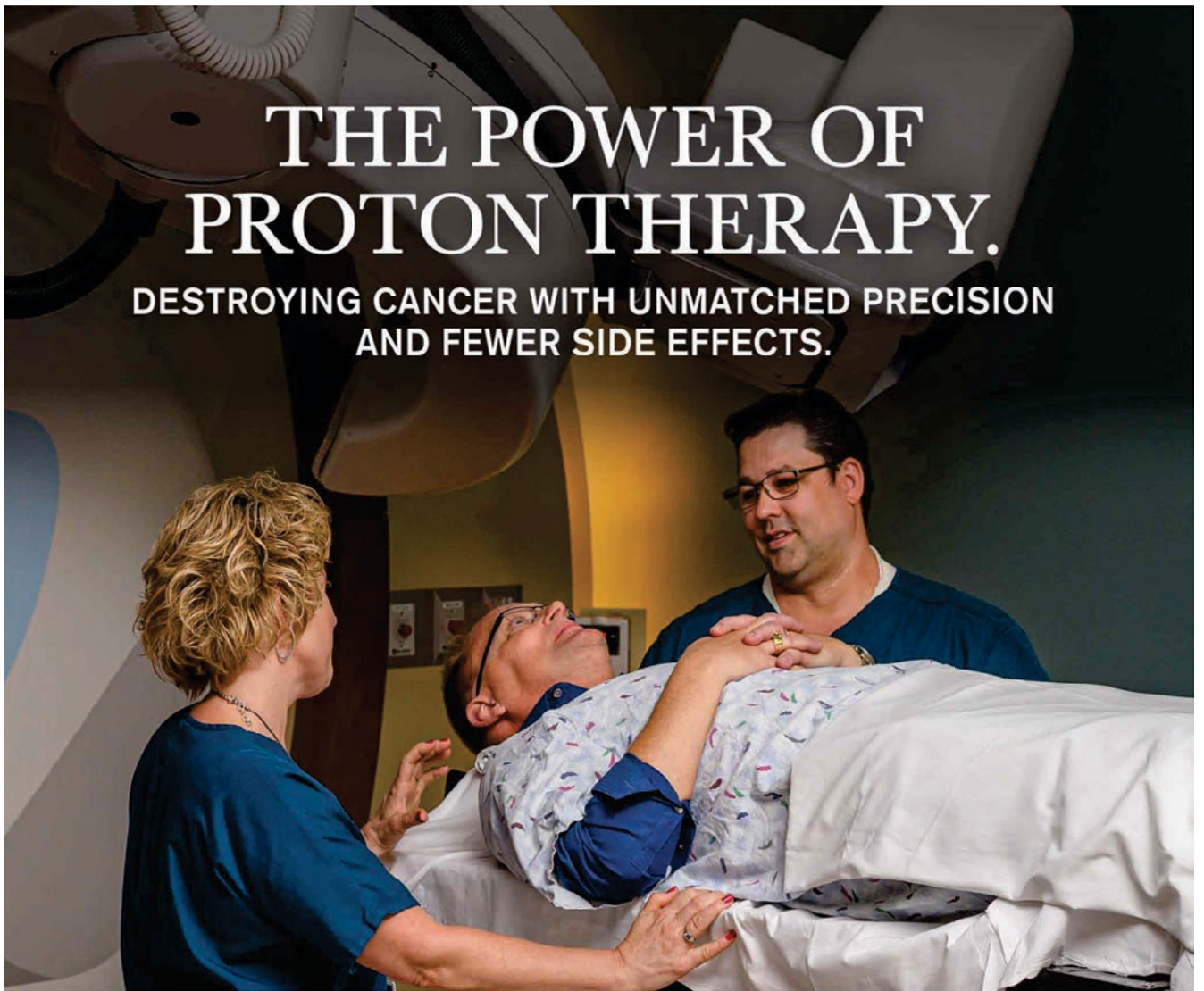


a century of living had not dulled his lust for life. He practiced medicine in Flint for 47 years, and all his patients had a love for him that could only come from a relationship fostered for that long. His patients had blind trust in him, a testament to not only his clinical abilities but his investment in a career built on caring for others for nearly half a century. He was a lifelong member of the GCMS and was a staunch supporter of the organization while he practiced here in Flint and even in retirement. Tony will be sorely missed by not only me, but by others here in Genesee County who were touched by his warmth and magnetism.

—Abdullah Raffee, MD

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PROTON THERAPY CENTER



JANUARY

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Elmahdi Saeed, MD	1	J. Rajkumer Pandyan, MD	16
Khalid Ahmed, MD	1	Silvia Gomez-Seoane, MD	19
Martin Lapa, DO	1	Heedong Park, MD	20
Saurav Nepal, MD	2	Harris Dabideen, MD	21
Jason Evans, MD	3	Matthew Orgel, MD	21
Cathy Chen, MD	5	Frederick Sherrin, MD	23
Manjit Grewal, MD	5	Lawrence Ashker, DO	23
Travis Baes, MD	6	Alpesh Korant, MD	24
Gwendolyn Reyes, MD	8	Alan Morgan, MD	25
Celso Samaniego, MD	9	Roderick Smith, MD	25
George Greidinger, MD	10	Cyrus Farrehi, MD	26
Shafi Ahmed, MD	10	Paul Karr, Jr., MD	26
Jagdish Bhagat, MD	12	Sandeep Grewal, MD	26
Syed Ahmed, MD	12	Rodolfo UyHam, MD	27
Philip Hardy, MD	13	Joseph Luna, MD	27
Epifania Aranas, MD	13	George Politis, MD	28
Samuel Dismond, Jr., MD	14	Eranio Malto, MD	28
Balvant Ganatra, MD	14	Geeta Rode, MD	28
Harun Rashid, MD	14	Joel Beene, MD	29
Ajay Srivastava, MD	14	Anant Patel, MD	29
Boleslaw Pietruszka, MD	15	Ahmad Kaddurah, MD	30
Nil Barua, MD	15	Daniel Zelko, MD	31

FEBRUARY

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Cynthia Horning, MD	3	Dianne Trudell, MD	20
Kumbla Bhakta, MD	3	Charles Safley, MD	20
Gregory Fortin, MD	5	Athear Alrawi, MD	20
Evelyn Alunit, MD	5	David Wiese, MD	21
Bradford Murphy, DO	6	Steven Boskovich, MD	22
Virgil Hooper, MD	8	Daniel Bernstein, MD	22
Avery Jackson, III, MD	9	Laura Carravallah, MD	24
Gregorio Imperial, Jr., MD	12	Ali Esfahani, MD	24
Jay Holmes, MD	12	Pino Colone, MD	26
Frederick Lim, MD	12	Omar Gayar, MD	26
Sharon Dowd, MD	14	Thomas Wright, DO	27
Maurice Chapin, MD	15	Wilfredo Rivera, MD	28
Rajeevi Pandyan, MD	15	Mark Anderson, MD	28
Nelson Schafer, MD	16		

Save the Date

GCMS President's Ball
November 7th, 2020



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Quick Reference Referral Guide

*for Substance
Use Treatment*



KnowMoreGenesee.org



ABOUT OPIOID ADDICTION

Genesee County Opioid Prevention Project



As a Genesee County provider encountering changes in legislation regarding utilization of the Michigan Automated Prescription System (MAPS), and navigating the substance use treatment system with your patients, the Greater Flint Health Coalition and its Mental Health & Substance Use Task Force offer this referral guide as an introductory resource.

The First Step: Accessing Substance Use Treatment

1 If an individual has **Medicaid, is uninsured, and/or has general questions**, they may call or visit (during business hours) **the Genesee Health System Access Center** at:

- 810-257-3740 (crisis line available 24/7)
- TTY 810-232-6310
- Toll-Free 877-346-3648
- 420 W. Fifth Avenue, Flint, MI 48503 – Open Monday through Friday, 8 a.m. to 5 p.m.

Please have the following information available when calling to expedite the process:

- Name, date of birth, social security number
- Medical insurance card or numbers, including Medicaid (if applicable)
- Names of current medicines and doctors

- Guardianship or court papers (if applicable)
- Special education or other school records (if applicable)
- Drug (quantity, frequency)
- Services needed (detox, inpatient, outpatient)

Fees for services are based on a person's ability to pay; therefore, staff will need to know the household income and number of dependents of the person seeking help. A coverage determination will be made at the time of the screening. Staff will let you know if you can expect to have any cost for your services. No one will be denied services based on their inability to pay.

2 If an **individual has insurance other than Medicaid**, call the insurance plan directly to determine covered services and providers.

Substance Use Treatment Centers in Genesee County and Surrounding Areas

GENESEE COUNTY RESIDENTIAL CENTERS

Above the Water House

4105 Keyes Street, Flint, MI 48504
(810) 877-2907
Women's recovery housing for females with addiction/alcoholism with mild to moderate psychological impairments.

Flint Odyssey House

529 M.L. King Avenue, Flint, MI 48503
(810) 238-5888
Medication assisted treatment, withdrawal management, long-term residential treatment, outpatient services, recovery housing, women's specialty services, adolescent treatment services.

Kairos Health Care, Holy Cross

8218 N. Jennings Road
Mt. Morris, MI 48458
(844) 452-4767
Corcoran House Residential Treatment for Women

Life Challenge Ministries

Life Challenge of Southeastern Michigan
17667 Pierson Street, Detroit, MI 48219
1230 Dupont St, Flint, MI 48504
(844) 355-LIFE
info@lcministries.org

One-year residential program for men and women with drug, alcohol, and other life-controlling addictions. Affiliated with Teen Challenge USA, International, our goal is more than rehabilitation, Faith based program.

New Paths Inc.

765 E. Hamilton Avenue, Flint, MI 48505
(810) 233-5340
newpaths.org
Short and long-term residential treatment, withdrawal management, outpatient services, recovery housing, 23-hour sobering facility, Court ordered treatment programming.

Salvation Army Adult Rehabilitation (Men Only)

2200 N. Dort Highway, Flint, MI 48506
(810) 234-2678
Long-term residential program, spiritual base, work therapy, group and individual counseling, leisure time activities.



GENESEE COUNTY OUTPATIENT CENTERS & SUPPORT SERVICES

Bio-Med Behavioral Health Care INC. - Flint

1044 Gilbert Road, Flint, MI 48532
(810) 733-7623
Outpatient, integrated treatment, medication assisted treatment.

Catholic Charities

901 Chippewa Street, Flint, MI 48503
(810) 232-9950
Outpatient SUD treatment, Court ordered treatment programming.

Families Against Narcotics – Genesee County Chapter

(810) 397-7175
familiesagainstnarcotics.org
Information regarding prescription drug abuse, local resources, family support network. Available to answer questions regarding substance use and steps to seek treatment.

Genesee Community Health Center

422 W. 4th Avenue, Flint, MI 48503
(810) 496-5777
Integrated health care, treatment services for co-occurring disorders, medication assisted treatment (Suboxone, Vivitrol).

Hamilton Community Health Center

Multiple Locations
(810) 406-HCHN (4246)
Outpatient, substance abuse counseling, Vivitrol program.

Holy Cross Services

4318 Miller Road, Flint, MI 48507
(810) 249-9924
Outpatient SUD treatment, recovery housing.



Hope Network

1110 Eldon Baker Drive, Flint, MI 48503
(810) 232-2766
Free family and addiction services.

Insight Wellness Center

4400 S. Saginaw St., Ste. 1370
Flint, MI 48507
(810) 223-0199
Medication assisted treatment, outpatient SUD treatment, services for co-occurring disorders, pain management, physical therapy.

Meridian Health Services

1289-D S. Linden Road, Flint, MI 48532
(810) 620-7501
Outpatient care, integrated treatment, and family therapy.

New Oakland Family Center

2401 South Linden Road,
Flint, MI 48507
(810) 957-4310
Intensive outpatient counseling (dual diagnosis – mental health and substance use disorder).

Remedy Exchange Programs (outreach services)

12745 S. Saginaw, Suite 806-144
Grand Blanc, MI 48439
(810) 449-0159
remedyexchange@gmail.com
PRIME for Life is a program that helps youth and adults learn how to reduce their risk of alcohol and other drug related problems throughout life.

Sacred Heart - Flint

2091 Professional Drive,
Flint, MI 48532
(810) 732-1652
Outpatient, integrated treatment, medication assisted treatment (Methadone, Vivitrol), women's specialty.

The Serenity House of Flint

954 Church Street, Flint, MI 48502
(810) 893-1276
Informational, holistic options for recovery from addictions.

RESOURCES OUTSIDE OF GENESEE COUNTY

Brighton Center for Recovery

12851 Grand River Road
Brighton, MI 48116
(810) 227-1211
brightonrecovery.org
Inpatient and intensive outpatient.
Provides residential, outpatient, dual diagnosis, and detox services. Will accept private insurance, cash, and Medicare.

Dawn Farms

6633 Stoney Creek Road
Ypsilanti, MI 48197
(734) 485-8725
Adolescent (17+) and adult residential, outpatient. Non-medicated, 12-step based detox is FREE to anyone, even if they do not stay for residential treatment. Transitional housing.

Grace Centers of Hope

35 E. Huron Street, Pontiac, MI 48342
(855) HELP-GCH
Adult residential, family and life-skills programs.

Henry Ford Maplegrove Center

6773 W Maple Road
West Bloomfield, MI 48322
(248) 661-6100
henryford.com
Outpatient and inpatient for adults.
Outpatient only for adolescents.

Kairos Healthcare Adolescents

3400 South Washington Road
Saginaw, MI 48601
(989) 755-1072
Adolescent and adult residential, integrated treatment, informational, prevention and problem assistance, outpatient screening assessment referral and follow-up.

Meridian Health Services

1255 N Oakland Blvd
Waterford, MI 48327
(248) 599-8999
Detox, adult residential, inpatient and outpatient care, integrated treatment, and family therapy.

Sacred Heart – Memphis

400 Stoddard Road
Memphis, MI 48041
(888) 804-7472 Admissions
(888) 802-7472 Admin
Adult residential, detox inpatient, case management, early intervention, integrated treatment, peer recovery and support, screening assessment referral and follow-up, Methadone.
Residential admissions:
(888) 804-7472 or (734) 284-0070
Monday-Friday, 8:30am-5:00pm
Emergency admissions:
(888) 804-7472, ext. 266, weekdays, weekends, and holidays. Sliding fee scale, Medicaid, ABW, and most health insurance.

Salvation Army Harbor Light

42590 Stepnitz Drive
Clinton Township, MI 48036
(586) 954-1838
Adult residential/outpatient, case management, detox, screening assessment referral and follow-up.

Serenity Therapy Center

745 Barclay Circle, #305
Rochester Hills, MI 48307
(586) 219-7010
serenityhelp.com
Outpatient, addiction counseling, family therapy, and interventions.

Teen Challenge of Western Michigan

440 Pontaluna Road
Muskegon, MI 49444
Men's Phone: (231) 798-7927
Women's Phone: (231) 798-2702
Email: info@wm-tc.com
wm-tc.com/contact-us
One year residential program. Faith based.

Vision Quest Recovery

Port Huron, MI
info@visionquestrecovery.com
Program Director: (810) 937-6279
Assistant Program Director:
(248) 421-8143
Transitional housing program, 12-step program, structure, guidelines.

Disclaimer: Resource details provided by Families Against Narcotics. All information was accurate at time of printing. Information is subject to change.

This program is supported by the Michigan Health Endowment Fund.



The Genesee County Medical Society cordially invites you to a

Quarterly Dinner Business Meeting & Medical Community Town Hall

sponsored by

Sovita Credit Union

Thursday, February 6, 2020

Flint Golf Club

3100 Lakewood Drive

Flint, MI 48507

Health Can't Wait

It's a reality that physicians understand and patients experience. Tragically, insurance company bureaucracy too often stands between patients and the medicine, treatment, or testing their physicians believe they need. Prior authorization, step therapy, and fail first requirements hamstringing treatment, drive up prescription nonadherence and lead to diminished health.

GCMS is part of the Health Can't Wait coalition, an exciting partnership of patients, health care providers, and patient advocacy associations dedicated to putting Michigan patients first and ending delays in patients' access to health care. Join us to discuss these costly, onerous, and dangerous payer practices and how the HCW coalition is fighting to end them.

Please invite other physicians and practice managers to this meeting! GCMS physicians, spouses, GCMSA, family members, GCOA members, practice staff and other interested professionals are invited to attend!

Meeting Agenda

6:00 pm Registration & Social Hour

6:30 pm Dinner

7:00 pm Meeting

7:15 pm Health Can't Wait Presentation



Kevin McFatridge
Senior Director of Marketing &
Public Relations
Michigan State Medical Society

Registration Fees

**\$40.00 GCMS Members, Spouses,
Practice Managers & Staff**

**\$40.00 Genesee County Osteopathic
Association Physician
Members & Spouses**

\$25.00 Residents & Students

\$75.00 All Non-Member Guests

Register Today

Space is limited!

Please register by January 24, 2020

Mail your reservation payment to:
*Genesee County Medical Society
4438 Oak Bridge Drive, Suite B
Flint, MI 48532*

Questions? Email Sherry Smith at ssmith@gcms.org or call 810-733-9923.

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 under-served, and wellness initiatives.

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

To make a gift, simply use these words:

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

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

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

**Please feel free to contact
Sherry Smith
at 810-733-9923 or
ssmith@gcms.org.**



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

**Please feel free to contact Sherry Smith at
810-733-9923 or ssmith@gcms.org.**

Genesee County Medical Society
Board of Directors
September 24, 2019 Minutes

I. Call to Order

The meeting was called to order in the Rapport Conference Room at 6:00 pm, by Ed Christy, MD, President.

Dr. Christy introduced Angie Kemppainen, CAE, the new GCMS Executive Director.

II. Review of Minutes

Motion: that the minutes of the August , 2018, Board of Directors meeting be approved as presented. The motion carried.

III. Reports

A) Membership Updates

1. Recent Meeting with MSMS Partnership

Ms. Kemppainen met with Kevin McFatrige, MSMS Senior Director of Marketing and Public Relations. They will work together with connected GCMS Board members to target group membership of PMC, McLaren Flint and Genesys PHO.

2. Offering Discounts for New Members

Doctor Mukkamala reminded the Board that there was an approved 25 percent discount for new members in 2020 and those who renew their membership for 2020 after being previously dropped for non-payment of dues.

3. Board Member Assignments

Directive: Ms. Kemppainen was directed to provide the NPD list as an electronic version to the Board.

B) GCMS Alliance

1. Alliance Membership

Mrs. Tummala reminded the Board that the GCMS Alliance has been a long-time partner of GCMS. She outlined membership recruitment efforts and Alliance- sponsored programs. Mrs. Tummala requested that GCMS Board members also promote Alliance membership.

2. President's Ball Updates

Mrs. Hardman presented an update on the President's Ball on October 18, 2019, at the Genesys Banquet Center. Sponsorships and registrations are coming in. Board members were encouraged to both register and consider sponsorship for the Ball.

C) MSMS Update

Dr. Kulkarni reported that the MSMS Board will meet in October and she will be able to provide a fuller update after that meeting. In the meantime, GCMS Board members should be on the lookout for activities and asks regarding the MSMS Health Can't Wait initiative, a legislative package addressing prior authorization and step therapy.

D) Review of GCMS Financial Status – Part 2

Motion: that the GCMS Board formally request that the GCMS Foundation Board meet, review their financial records, conduct an audit, and share their financial records and any audit results with the GCMS Board of Directors within 7-10 days. The motion carried.

Motion: that the GCMS Board Re-appoints Ed Christy, MD, to the GCMS Foundation Board. The motion carried.

E) Other Reports

1. September 5th, General Membership Meeting/Town Hall

The general membership meeting held September 5, 2019, at the Flint Golf Club featured a education session on prior authorization. During the business meeting portion, the 2019-2020 slate of candidates was adopted for election during the President's Ball on October 18, 2019.

2. Future GCMS Practice Manager's Meeting Topics

A calendar outlining the Practice Manager's Meeting topics for the rest of 2019 was distributed.

F) Community & Environmental Health

Dr. Gary Johnson provided an update on the flavored vaping ban by Governor Whitmer.

G) Greater Flint Health Coalition

1. Board of Directors
2. SIM Update
3. Opioid Toolkit Presentation
4. Flint Registry Update (FLExR)

Work is continuing on current grants.

IV. Other Business

A) Email from Cyrus Farrehi, MD, Former President

Ms. Smith presented an email received from Dr. Farrehi. No action was taken regarding the request due to the ongoing audit.

B) GCMS Bulletin Discussion

Dr. Thoms has returned to serve as editor of The Bulletin. He apologized for the late release of the past few issues during the staff transition and vowed to make sure that future editions were released on time.

IV. Next Meeting

The next meeting of the Board of Directors will take place on October 22, 2019, at 6:00 pm.

V. Adjournment

No further business appearing, the meeting was adjourned at 8:00 pm.

Respectfully submitted,

Ed Christy, MD

GCMS President





faith care UNITE heart NOW
connect family give HELP
support SHARING HOPE abundance community FRIEND
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 Sherry Smith at (810) 733-9923 or at ssmith@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 48532-5400**



January 2020 Fitness Calendar

FREE! Commit to Fit! Class Schedule

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

	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SAT
J a n u a r y 2 0 2 0			1	2	3	4
				<p>Enhance Fitness Berston Field House 10:00am</p> <p>Arthritis Foundation Exercise Program Grand Blanc Senior Center 10-11:00am</p> <p>Total Body Challenge 10:00-11:00am Brennan Senior Center</p> <p>Splash Fit U of M-Flint Rec 11:00am</p> <p>Chair Aerobics Brennan Senior Center 12:30-1:15pm</p> <p>Community Yoga Southwestern Academy 5:30-6:30pm</p> <p>Basic Yoga Insight Health & Fitness Center 6:45pm</p>	<p>Enhance Fitness Hasselbring Senior Center 9:00am</p> <p>Arthritis Foundation Exercise Program Burton Senior Center 9:00-10:00am</p> <p>Arthritis Foundation Exercise Program Swartz Creek Senior Center 11:00am-12:00pm</p>	<p>Yoga Flow U of M-Flint Rec 11:00am</p>
	6	7	8	9	10	11
	<p>Enhance Fitness Hasselbring Senior Center 9:00am</p> <p>Senior Stretch YMCA Downtown 10:00am</p> <p>Pound Ascension Genesys Health Club 10:15am</p> <p>Arthritis Foundation Exercise Program Loose Senior Center 2:00-3:00pm</p> <p>Aqua Fitness UM-Flint Rec Center 5:30-6:30pm</p> <p>Mindful Monday Longway Planetarium 5:30-6:30pm</p>	<p>Enhance Fitness Berston Field House 10:00am</p> <p>Arthritis Foundation Exercise Program Grand Blanc Senior Center 10:00-11:00am</p> <p>Total Body Challenge 10:00-11:00am Brennan Senior Center</p> <p>Splash Fit U of M-Flint Rec 11:00am</p> <p>Chair Aerobics Brennan Senior Center 12:30-1:15pm</p>	<p>Enhance Fitness Hasselbring Senior Center 9:00am</p> <p>Arthritis Foundation Exercise Program Davison Area Senior Center 10:00-11:00am</p> <p>Community Yoga Educare 10:00-11:00am</p> <p>Arthritis Foundation Exercise Program Forest Township Senior Center 12:15-1:00pm</p> <p>Yoga Brownell Elementary 4:30-5:30pm</p> <p>Community Yoga Crim Fitness Foundation 5:30pm-6:30pm</p> <p>Zumba Ascension Genesys Health Club 6:45pm</p>	<p>Enhance Fitness Berston Field House 10:00am</p> <p>Arthritis Foundation Exercise Program Grand Blanc Senior Center 10-11:00am</p> <p>Total Body Challenge 10:00-11:00am Brennan Senior Center</p> <p>Splash Fit U of M-Flint Rec 11:00am</p> <p>Chair Aerobics Brennan Senior Center 12:30-1:15pm</p> <p>Community Yoga Southwestern Academy 5:30-6:30pm</p> <p>Basic Yoga Insight Health & Fitness Center 6:45pm</p>	<p>Enhance Fitness Hasselbring Senior Center 9:00am</p> <p>Arthritis Foundation Exercise Program Burton Senior Center 9:00-10:00am</p> <p>Arthritis Foundation Exercise Program Swartz Creek Senior Center 11:00am-12:00pm</p>	<p>Yoga Flow U of M-Flint Rec 11:00am</p>

January 2020 Fitness Calendar

FREE! Commit to Fit! Class Schedule

<p>13</p> <p>Enhance Fitness Hasselbring Senior Center 9:00am</p> <p>Senior Stretch YMCA Downtown 10:00am</p> <p>Pound Ascension Genesys Health Club 10:15am</p> <p>Arthritis Foundation Exercise Program Loose Senior Center 2:00-3:00pm</p> <p>Aqua Fitness UM-Flint Rec Center 5:30-6:30pm</p>	<p>14</p> <p>Enhance Fitness Berston Field House 10:00am</p> <p>Arthritis Foundation Exercise Program Grand Blanc Senior Center 10:00-11:00am</p> <p>Total Body Challenge 10:00-11:00am Brennan Senior Center</p> <p>Splash Fit U of M-Flint Rec 11:00am</p> <p>Chair Aerobics Brennan Senior Center 12:30-1:15pm</p>	<p>15</p> <p>Enhance Fitness Hasselbring Senior Center 9:00am</p> <p>Arthritis Foundation Exercise Program Davison Area Senior Center 10:00-11:00am</p> <p>Community Yoga Educare 10:00-11:00am</p> <p>Arthritis Foundation Exercise Program Forest Township Senior Center 12:15-1:00pm</p> <p>Yoga Brownell Elementary 4:30-5:30pm</p> <p>Zumba Ascension Genesys Health Club 6:45pm</p>	<p>16</p> <p>Enhance Fitness Berston Field House 10:00am</p> <p>Arthritis Foundation Exercise Program Grand Blanc Senior Center 10-11:00am</p> <p>Total Body Challenge 10:00-11:00am Brennan Senior Center</p> <p>Splash Fit U of M-Flint Rec 11:00am</p> <p>Chair Aerobics Brennan Senior Center 12:30-1:15pm</p> <p>Community Yoga Southwestern Academy 5:30-6:30pm</p> <p>Basic Yoga Insight Health & Fitness Center 6:45pm</p>	<p>17</p> <p>Enhance Fitness Hasselbring Senior Center 9:00am</p> <p>Arthritis Foundation Exercise Program Burton Senior Center 9:00-10:00am</p> <p>Arthritis Foundation Exercise Program Swartz Creek Senior Center 11:00am-12:00pm</p>	<p>18</p> <p>Yoga Flow U of M-Flint Rec 11:00am</p>
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		Zumba Ascension Genesys Health Club 6:45pm	Community Yoga Southwestern Academy 5:30-6:30pm Basic Yoga Insight 6:45pm	
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Thursday, February 6, 2020

Flint Golf Club

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Meeting Agenda

- 6:00 pm** Registration & Social Hour
- 6:30 pm** Dinner
- 7:00 pm** Meeting
- 7:15 pm** Health Can't Wait Presentation



Kevin McFatrige
 Senior Director of Marketing &
 Public Relations
 Michigan State Medical Society

Registration Fees

- \$40.00** GCMS Members, Spouses, Practice Managers & Staff
- \$40.00** Genesee County Osteopathic Association Physician Members & Spouses
- \$25.00** Residents & Students
- \$75.00** All Non-Member Guests

Register Today

Space is limited!

Please register by January 24, 2020

Mail your reservation payment to:
 Genesee County Medical Society
 4438 Oak Bridge Drive, Suite B
 Flint, MI 48532

Questions? Email Sherry Smith at ssmith@gcms.org or call 810-733-9923.

January 2020 Fitness Calendar

FREE! Commit to Fit! Class Schedule

Basic Yoga (1 hour)

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

Insight Health & Fitness Center (IHFC)

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



Community Yoga (1 hour) – This is a yoga class for all levels. Please wear comfortable and loose-fitting clothing. Some yoga mats will be available to borrow as well

Mindfulness@crim.org
(810)-235-7461



Crim Fitness Foundation

452 Saginaw Street Downtown Flint

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

YMCA Downtown Flint

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



Spin/HIIT – Each Zumba® class is designed to bring people together to sweat it on. We take the "work" out of workout, by mixing low-intensity and high-intensity moves for a calorie-burning dance fitness party. Designed for all fitness levels.

POUND® transforms drumming into an incredibly effective way of working out. Instead of listening to music, you become the music in this exhilarating full-body workout that combines cardio, conditioning, and strength training.

Ascension Genesys Health Club

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



Each class includes **B**alance and Flexibility, **A**erobic Activity, **S**trength and Resistance Training, and **E**xercise Education

Chair Aerobics

Basic Seated functional fitness class for those who are overcoming mobility issues; includes aerobic activity, core work, and resistance training. Location: *Brennan Senior Center*

Total Body Challenge

Intermediate level workout which includes cardio, strength training, core work, balance and coordination, and flexibility training. Location: *Brennan Senior Center*

Hustle Aerobics

Advanced level workout that incorporates 45 minutes of non-stop cardio to the latest hustle songs followed 15 minutes bodyweight strength training. Location: *Brownell & Eisenhower*

IHFC Water Aerobics

A 1-hour class that will help you strengthen your muscles and cardiovascular system plus improve flexibility. Location: Insight Health and Fitness

Class Descriptions & Locations

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

Yoga Flow: Learn yoga at a comfortable pace. Connect your mind's attention to your body's fluidity and movement -- promote strength, flexibility, coordination, agility, stamina and an overall experience of well-being.

University of Michigan-Flint Rec Center

401 Mill Street, Flint, MI 48502
(810) 762-3441



Enhance Fitness (1 hour) – A fun, energizing class geared toward improving overall functioning and well-being. Improve your cardiovascular fitness, strength, flexibility and balance!

TIMES & LOCATIONS:

Hasselbring Senior Center

1002 Home Ave. Flint, MI
(810) 766-7128 Mon, Weds, & Fri 9-10 am



Flint Farmers' Market- Tuesdays &

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

Berston Field House

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

Main Clinic

2900 N. Saginaw Street
Flint, MI 48505
Wednesdays, 5:30 - 6:30pm



Genesee County Parks and Rec

Visit the calendar at: <http://geneseecountyparks.org/> to learn more about fun family events in Genesee County Parks!

For more information please go to:

- Geneseecountyparks.org or call 800-648-PARK
- Descriptions for classes such as Let's Hike It Baby, Yoga for Kids, Yoga for Families, and more can all be found at the online calendar on Commit2fit.com or geneseecountyparks.org



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 10:00am – 11:00am

Swartz Creek Senior Center:

Fridays 11:00am – 12:00pm

Forest Township Senior Center:

Wednesdays 12:30pm–1:30pm

Burton Senior Center

Fridays 9:00am-10:00am

Loose Senior Center

Mondays 2:00pm - 3:00pm



