Everything You Want to Know About PGIP!
(From The BCBSM Perspective)

February 5, 2015
RSVP’s requested by February 2, 2015
Please email ssmith@gcms.org or call 810-733-9923 for more info.
CAN YOU SEE THEIR LUNGS?

TELL YOUR AT-RISK PATIENTS ABOUT OUR
CT LUNG SCREENING SERVICE

Most insurance carriers (including Medicare) will provide coverage in 2015. Remind patients to contact their provider for details. CT lung screenings may have eligibility requirements for insurance coverage.

- RMI is here to serve your patients!
- Convenient evening and Saturday hours at our Lennon Road office.
- Saturdays include CT, mammography, MR, X-ray and ultrasound services.

rmpc.net  (810) 732-1919

CT screenings at three of our six locations: Lennon Rd, Flint  Fenton  Grand Blanc
Our Vision
That the Genesee County Medical Society maintain its position as the premier medical society by advocating on behalf of its physician members and patients.

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

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

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

By subscription $60 per year. Member subscription included with Society dues. Contributions to THE BULLETIN are always welcome. Forward news extracts or material of interest to the staff before the 5th of the month. All statements or comments in THE BULLETIN are the statements or opinions of the writers and are not necessarily the opinion of the Genesee County Medical Society.
Last week, my office hired a security expert to look at our physical office and procedures. He did an excellent job, most importantly providing a two-hour training session for ourselves and our employees on how to safely and effectively respond to angry, aggressive patients, threats of violence, bomb threats, neighborhood situations and local toxic chemical releases. The training increased all of our situational awareness. Now we are developing more comprehensive emergency plans. While we don’t consider ourselves a target, there are lots of angry people around.

Have you fired anyone lately? Are your employees having marital problems? Is there a drug store in your building? You could be vulnerable. I would recommend you be proactive. Take a thorough look at your office. Get some training. Protect yourself, your employees and your family.

Colleagues, peers, friends, practice managers, the world is changing, and you need to hear how. We are all familiar to some degree, with the Physician Group Incentive Program from Blue Cross Blue Shield of Michigan. But how familiar are we? We may be getting our information by reading, or from our PO or PHO meetings, from ACO meetings, or from conversations in the doctor’s lounge. But one place we are not getting it from, is directly from Blue Cross. There have been so many questions about PGIP that we have invited Tom Simmer, MD, Senior Vice President for Health Care Value and Provider Affiliations, and Chief Medical Officer of Blue Cross Blue Shield of Michigan to come to talk to our members and their practice managers directly. This is a rare opportunity to meet with an individual who is a key decision maker within a key organization dealing with key issues for virtually all of our members. He will be open to questions, and will provide helpful information.

One of the things that is most frustrating when sitting on the Board of the Genesee County Medical Society, is hearing from doctors that we are not communicating with them on certain issues. From our perspective, we think we are communicating. But many people are not hearing. Please notice and consider attending this meeting on PGIP for your own good. Please also let your peers and colleagues know about it. Invite them. This is not a meeting to be missed. Too much is at stake for you and your patients and your families. Please do not hesitate to contact Sherry at ssmith@gcms.org or at 810-733-9923 to make reservations.

Deborah Duncan, MD
Genesee County Medical Society Town Hall Meeting on February 5, 2015

Everything You Want to Know About PGIP!
(From The BCBSM Perspective)

Come and hear Thomas L. Simmer, MD, Senior Vice President for Healthcare Value and Provider Affiliations and Chief Medical Officer of Blue Cross Blue Shield of Michigan, as he explains what physicians need to know about the Physician Group Incentive Program (PGIP), from the BCBSM perspective. Dr. Simmer is responsible for contracting with more than 20,000 physicians who participate in the Blue Cross traditional and PPO plans, as well as for directing medical policy for BCBSM. He is responsible for professional payment policies and programs to improve the quality, cost, and access to medical services. Under his leadership, BCBSM has implemented physician incentive programs to promote collaborative improvement programs for more consistent care for persons with chronic illnesses and more cost effective prescribing patterns. Dr. Simmer also served as Associate Program Director for the Internal Medicine Residency Program at Henry Ford Hospital.

In addition, Dr. Simmer serves as Vice Chair of the Center for Health Care Research and Transformation, an Ann Arbor based think tank on medicine.

Location:
Flint Golf Club
3100 Lakewood Drive
Flint, MI 48507

Cost:
$35.00 for Physicians, Spouses, Practice Managers, Staff and Guests
$25.00 for Residents & Students

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

6 pm, Registration & Social Hour
6:30 pm, Dinner
7 pm, Meeting
7:15 pm, Presentations

Kindly submit your RSVP to this by February 2, 2015.
You may mail a check with your reservations to:
Genesee County Medical Society
4438 Oak Bridge Dr., Ste. B
Flint, MI 48532

Email Sherry at ssmith@gcms.org to register your attendance or call 810-733-9923 for more information.
A recent news story out of southern California concerning an unvaccinated young woman spawning an outbreak of measles after visiting Disneyland, then flying to Washington before returning to California, illuminates the public health problems that can be generated by medical myths and the opinions of pseudoscientists. In late December and early January, 32 other unprotected children in four states, some infants too young to have been vaccinated, became ill after exposure to this highly contagious virus at the theme park and on airplanes. Misunderstandings and fear about the safety profile of vaccines is leading to outbreaks of diseases, such as measles, whooping cough, and mumps, once thought to be effectively controlled and practically eradicated in the United States.

The Centers for Disease Control and Prevention labels measles as the most deadly of all childhood rash/fever related illnesses because 90% of those not immunized against measles will become infected after exposure to a carrier (although the actual death rate from measles is low). While about 20 million people contract measles each year worldwide, a typical expected caseload in this country is around 220. Last year, there were 644 reported cases, the highest in two decades. Most current U.S. and Canadian trained physicians, even pediatricians, have never even encountered a case of measles because the vaccine protocols are so effective. But unvaccinated people in this country provide a welcome mat for measles imported from abroad.

A poignant irony associated with childhood vaccination programs is that communities where the population tends to be better educated and more affluent are trending toward far lower vaccination rates and more requests for exemptions than in less well-off school districts. Of those choosing to forgo immunizations, most cite religious, philosophical, or personal reasons. Parents may assume the risk to their child is negligible because disease prevalence is negligible because disease prevalence is low. But the reason the above mentioned outbreak has not reached epidemic proportions is that most parents accept the advice of epidemiologists and their physicians and have their children protected. This endows the community with a “herd immunity” that starts to disintegrate as the immunization rate falls.

Vaccines are not completely risk-free but, in most cases, there is far less risk from the vaccine than from the disease it is intended to prevent. Anti-vaccination entities such as the non-profit National Vaccine Information Center are opposed to current vaccine protocols. A widely debunked, and eventually retracted, report in Lancet in 1998 purported a link between vaccines and autism and for some strange reason this erroneous assumption will not die. Parents are concerned that the number and frequency of shots will “overload” the child’s immune system. Other concerns centered on the use of a mercury compound as a preservative in measles vaccine vials leading to mercury poisoning. That preservative was ethyl mercury that is rapidly eliminated, not methyl mercury that is a toxin. Anyway, measles vaccines no longer contain mercury.

The bottom line is, no child should be allowed to attend a public school in this country without proof of having received the standard vaccinations, unless there is a medically valid reason for not doing so. The medical community and the general public should be concerned and outraged that anti-vaccine elements have an uninformed yet influential voice that can unnecessarily harm others. Public health policy should be based on scientific evidence and not dictated by ignorant people.
WE WANT YOU FOR THE LEGISLATIVE LIAISON COMMITTEE!

Young physicians - are you looking for interchange with your legislators?

Seasoned physicians - would you like to help bring GCMS and MSMS positions to the forefront?

Become involved in the GCMS Legislative Liaison Committee!

Be a part of an elite group of communicators who meet with our elected officials.

You are invited to engage in conversation with your legislators on the first Monday of each month at 8:00am in the Rapport Conference Room at the GCMS office.

You may contact Pete Levine at plevine@gcms.org or call 810.733.9925, if you would like to participate.

This is a valuable opportunity; don’t let it go to waste!
EXECUTIVE DIRECTOR’S MESSAGE

COME HEAR DIRECTLY FROM BLUE CROSS

I have several thoughts this month, ranging from current issues to the future and to the past.

First of all, don’t forget that on February 5th, you can come and hear directly from Blue Cross Senior Vice President and Chief Medical Officer, Thomas Simmer, MD, as he talks about the Physician Group Incentive Program. This is not an event to miss. Please take a moment to register. For additional information, please see the ad in this issue for meeting details.

I was so impressed with how GCMS, MSMS and the rest of the counties did in the legislature during the lame duck session!

Anyone who thinks the defeat of Senate Bill 2 was a slam dunk, is unaware of how things really went. MSMS and GCMS leaders, as well as leaders of other county societies, did a great job of defeating this bill. In addition, MSMS was successful in getting expedited partner therapy legislation passed, which is a major medical and public health coup.

So much of what goes on in the legislature is sausage-making, but when it goes well, the result is a thing of beauty. The whole idea of the three tiers of organized medicine, local, state and national, is to have the grass roots functioning with the leaders of the higher levels. It was certainly happening during the lame duck session of the Michigan legislature.

My last set of thoughts were about some of our past leaders.

Some of our past leaders were real characters, and some of them are still our current leaders, or at least very actively involved. I have few very distinct memories from very early in my career.

The first one happened within the first few weeks of my hire at the Medical Society. I came into my office and found a poorly dressed gentleman sitting in my chair, rummaging through my desk drawers. While watching the very nervous expressions on the face of my secretary, Wanda, I asked him if he needed bus fare. He responded to me, in what sounded like an erudite and well-educated manner. He essentially handed me my head, regarding working with the Medicaid program without involving him, and as it turned out, it was Dr. Allen F. Turcke, MD PC, Radiologist and Chair of the Michigan State Medical Society Medicaid Liaison Committee. Fortunately, he was able to look beyond my faux pas and has remained a major leader even now.

I also have very distinct memories of Dr. Richard Rapport, who represented GCMS on the Blue Cross Board, as well as the MSMS Board, and would likely have been President of the Michigan State Medical Society, had he not become ill. Probably his most famous quote as a leader of MSMS and of the Genesee County Medical Society was “Beep beep. Beep beep beep beep beep beep together!” Yes, those beeps do represent blotted out curse words.

Dr. William Muller was a real gentleman and a fanatically hard worker. He was very involved at Hurley, at GCMS, and at the Red Cross. He was also a fanatical University of Michigan fan. When he retired from medicine, I bought him a wolverine hide in Alaska, and I thought he was going to cry when he received it. He had a daughter who played softball for four years at the University of Michigan. I don’t think he missed a single game! I tried to do the same during our son’s college sports career.

Dr. Charlie Thompson was Chief of Staff at Hurley for many years. He was truly a man of few words. But I will never forget when I was threatened personally with a lawsuit while he was President. A meeting was held between the involved parties in the GCMS conference room at the Mott Children’s
Health Center. The meeting was entirely calm until one of the potential plaintiffs said something that Dr. Thompson thought was offensive to me and he stood up, leaning across the table, got in the individual’s face and said “You can go after Pete, but you’re going to have to come through me first and I guarantee you will lose.” Those were both, the most words I had ever heard him string together, and the most reassuring words I had ever heard.

Also early in my career, I remember Dr. Sam Dismond, Family Physician of the Year for the Michigan Academy of Family Practice and the American Academy of Family Practice, as well as a President of GCMS, describing the travesty of salt poisoning in Genesee County. He was passionate in his opinion that a reduction in salt consumption would result in lower morbidity and mortality among minority populations.

Dr. John W. Tauscher ran the Hurley pediatric residency program, and also served as Vice President for Medical Affairs at the Mott Children’s Health Center. He was elected completely out of the blue to the presidency of GCMS. He was an unknown entity to some of the GCMS Board members. He was elected, because we needed a highly ethical SOB to serve as President because of a problem that we were having in the community. He reveled in that role. He was a really nice guy, who got to play battering ram for a year, and had a ball doing it. I could go on and on, and maybe over time, I will throw some more names of our past leaders out there, and some of my fond memories of them.

We are unwavering in our mission to defend, protect, and reward the practice of good medicine.
**Commit to Fit! Fitness Classes**

*Commit to Fit! offers FREE fitness classes and healthy cooking demonstrations to all individuals who live or work in Flint and Genesee County. Depending on the facility, participants may be asked to complete a brief registration form prior to attending a class. See back side for details.*

### FEBRUARY 2015 SCHEDULE

<table>
<thead>
<tr>
<th>MONDAY</th>
<th>TUESDAY</th>
<th>WEDNESDAY</th>
<th>THURSDAY</th>
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<td>2 FE</td>
<td><strong>Enhance Fitness</strong>&lt;br&gt;Flint Farmers’ Market&lt;br&gt;10:00 a.m.&lt;br&gt;<strong>Healthy Cooking Demonstration</strong>&lt;br&gt;Flint Farmers’ Market&lt;br&gt;12:00 p.m.&lt;br&gt;<strong>Enhance Fitness</strong>&lt;br&gt;Carriage Town Ministries&lt;br&gt;2:30 p.m.</td>
<td><strong>Zumba Gold (Beginner)</strong>&lt;br&gt;GAC&lt;br&gt;5:30 p.m.</td>
<td><strong>Enhance Fitness</strong>&lt;br&gt;Flint Farmers’ Market&lt;br&gt;10:00 a.m.&lt;br&gt;<strong>Basic Yoga</strong>&lt;br&gt;IHF&lt;br&gt;6:45 p.m.</td>
<td><strong>Zumbal Toning®</strong>&lt;br&gt;UM-Flint Rec&lt;br&gt;5:30 p.m.</td>
<td><strong>Healthy Cooking Demonstration</strong>&lt;br&gt;Flint Farmers’ Market&lt;br&gt;12:00 p.m.</td>
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<td>9 FEB</td>
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<td>28 FEB</td>
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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) 762-3441

Zumba Gold (1 hour) - A less intense version of the classic Zumba. This class offers fun music to keep the excitement high while keeping the impact low.

Genesys Athletic Club (GAC)
801 Health Park Blvd
Grand Blanc, MI 48439
(810) 606-7300

Zumba! Toning® (1 hour) - Combines targeted exercises and high-energy cardio work with Latin-infused Zumba® moves to create a calorie-torching, strength-training, dance fitness-party.

University of Michigan-Flint Recreation Center (UM-Flint Rec)
401 Mill Street (for mapping)
303 E. Kearsley
Flint, MI 48502
(810) 762-3441

Healthy Cooking Demonstration (1 hour) – Learn how to cook a simple, healthy dish by a vendor at the Market and try a sample after!

Flint Farmers’ Market
300 E. First St
Flint, MI 48502
(810) 232-1399

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

Flint Farmers’ Market
300 E. First St
Flint, MI 48502
(810) 232-0522

Carriage Town Ministries
605 Garland Avenue
Flint, MI 48503
(810) 233-8787

Questions?
Email
commit2fit@flint.org

For updated monthly calendars of the Commit to Fit! Fitness Classes visit:
commit2fit.com

MIC-6C3 FEBRUARY.Fitness.Class.Calendar.12015.na
Issues Of Serious Concern For Medical Practices!

Don’t let your practice manager miss these important meetings!

February 26, 2015

Topic & Focus:
To Be Determined

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

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

Light breakfast available (coffee, tea, fruit cups, granola bars)
• GCMS announced General Membership Meeting on PGIP with Dr. Tom Simmer, Chief Medical Officer of BCBSM

• GCMS announced Practice Managers Meeting regarding What’s Coming Down the Pike at Practices, featuring Joshua Richmond, MDPAC Director at MSMS

• GCMS worked with one physician on significant regulatory issues

• GCMS worked with two physicians regarding third party payer certification issues

• GCMS hosted Dr. Jordan Greenbaum, Medical Director of the Stephanie Blank Center for Safe & Healthy Children at the Children’s Health Care of Atlanta Center on medical guidelines and protocols relating to human trafficking

• GCMS submitted two Resolutions for the Michigan State Medical Society for consideration at the House of Delegates

• GCMS staff attended a meeting at MSMS with other county medical society executives to discuss membership issues
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Michael Zarr, MD  
Michael Kia, MD
3 Sunsets on Sleeping Bear Bay
from Glen Arbor, Michigan

By Pete Levine
Trihalomethanes (TTHM)

What are Trihalomethanes (TTHM)

Trihalomethanes (TTHM) are a group of chemical byproducts formed when chlorine used for water disinfection reacts with naturally occurring organic material.

Public drinking water systems often experience temporary increases in Trihalomethanes due to short-term increases in chlorine disinfection. Chlorine increases usually occur in the summer months when warmer temperatures promote the growth of bacteria and organic material.

The USEPA has set an allowable level not to exceed 80 parts per billion (ppb) or micrograms per liter (μg/L). When the level is exceeded, then the public must be notified.

Possible health risks of Trihalomethanes

Studies suggest that elevated levels of total Trihalomethanes are not an immediate health concern to most people, but those with a severely compromised immune system, pregnant women, infants or elderly may have increased risks. Concerns regarding the risks should be discussed with health care providers.

People who drink water containing Trihalomethanes in excess of the allowable level over many years may experience problems with their liver, kidneys, or central nervous system, and may have an increased risk of getting cancer.

How to reduce exposure to Trihalomethanes

Use bottled water or a point-of-use home water filter (faucet mount, pour through pitcher style, and plumbed-in units).

Water filters should be certified by National Sanitation Foundation (NSF), Underwriters Laboratories (UL) or the Water Quality Association (WQA) to remove Trihalomethanes (look for the seals on the box). These filters are widely available for purchase at houseware or hardware stores.

For more information, please contact your water utility department and visit the websites below.

http://www.michigan.gov/deq/0,4561,7-135-3313_3675_3691---,00.html
http://water.epa.gov/drink/contaminants/basicinformation/disinfectionbyproducts.cfm
On January 6th, the Genesee County Medical Society, along with the Genesee County Human Trafficking Task Force and the Michigan Women’s Commission hosted a dinner with Jordan Greenbaum, MD, Medical Director of the Stephanie Blank Center for Safe and Healthy Children in Atlanta, Georgia.

Dr. Jordan led a broad spectrum of physicians and medical professionals in a lively discussion on the issue of how the Center for Safe and Healthy Children approaches potentially trafficked individuals to communicate with them, and also described their protocol for handling these cases.

The materials for the session were specifically for use in the state of Georgia, but hopefully an article reacting to this session will be available in a future issue of The Bulletin. What follows below is a short screening form which can be used in the office or clinic setting.

Dr. Greenbaum has trained medical and non-medical professionals about human trafficking at the local, state and national levels. She has chaired a work group that developed medical guidelines for evaluating victims of child sex trafficking for the American Society on the Abuse of Children. She is currently working with the American Academy of Pediatrics to develop a clinical report regarding the commercial sexual exploitation of children. The session was also attended by Senator Judy Emmons, who authored and shepherded nearly thirty Bills through the Michigan legislature in 2014, relating to human trafficking.

Important Contacts for information and reporting if you suspect that you have trafficked individual:
text BeFree or call 1-888-373-7888
Short Screen for Child Sex Trafficking (CST)

Prior to beginning the survey, build rapport with the patient. Indicate that you routinely ask these questions of adolescents so that you can find out whether or not they may need help, and if so, how you might be able to help them. Emphasize that the child does not have to answer the questions if he/she doesn’t want to. Also remind them of limits of confidentiality (cannot guarantee that caregivers or others won’t eventually get access to the chart and see information; you are obliged to tell authorities if child reveals possible abuse or thoughts/actions related to hurting themselves, or others). If you are a male staff member it is recommended that you have a chaperone in the room during questioning.

For each question with a “Yes” answer, follow up with questions about details.

1. Have you ever broken any bones, been knocked unconscious or had any injuries that required stitches? (If yes, “Can you tell me about those times?”—determine if abuse, peer violence, dating violence, or CSEC)

2. Some kids have a hard time living at home and feel that they need to run away. Have you ever run away from home? (If yes, “have you stayed out all night, or longer?” “How many times have you run away?” “How long is the longest time you’ve been gone from home?” When you were gone, how did you get money for food? Where did you stay? etc)

3. Kids often use drugs or drink alcohol these days, and different kids use different drugs. Do you use drugs or drink alcohol? (and follow up with specifics—frequency of use, type of drug, reason for using drugs/alcohol—recreation, self-medication)

4. Sometimes kids have run-ins with police. Maybe for running away, for breaking curfew, for shoplifting. There can be lots of different reasons. Have you ever had any problems with the police? Do you feel comfortable telling me about them?

5. If you’ve been sexually active in the past, and by that I mean having oral sex, vaginal sex or anal sex, have you had more than five partners?

6. Have you ever had any sexually transmitted infections, like gonorrhea, or chlamydia or trichomonas? (If yes, ask if received treatment)

If child has answered Yes to two or more questions, then ask the following questions:

1) Has a boyfriend, a girlfriend or anyone else ever asked you, or forced you to have sex with another person?

2) Sometimes kids are in a position where they really need money, or they need drugs, or they need food or a place to stay. They feel they have no option except to exchange sex or some sort of sex activity for the money or the other thing they need. Have you ever had to exchange sex for money, food, shelter or something else you wanted?

If “Yes” to either question, ask for details to determine if child is potential victim of CSEC.
Announcement

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

For details, contact:

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Call to Order
The meeting was called to order in the Rapport Conference Room at 6:10pm, by Deborah Duncan, MD, President.

She welcomed Drs. Sunil Kaushal and Rama Rao to their first meeting as Board members.

Review of Minutes
Motion: that the minutes of the October 28, 2014 Board of Directors meeting be approved as presented. The motion carried.

Reports
A) Finance
Motion: that the Budget-to-Actual report for the period ending October 31, 2014 be approved as presented. The motion carried.

B) Membership
Directive: staff was directed to develop a list of physicians who have never been members, as well as former members, in advance of the next Board of Directors meeting, and to distribute the list to the board so that individuals that they know can be selected and contacted in advance of the Board meeting.

Directive: each Board member was directed to bring 3 names and cellphone numbers to the next Board meeting, to contact and solicit for membership.

Consensus: that PMC be asked to join with 100% membership.

Directive: staff was directed to contact hospital medical staff offices again, to solicit who the new medical staff members are, and integrate them back to the Board.

Consensus: that hospitals would be asked to help with membership.

Consensus: that the Board will debrief after the 15 minutes of phone calls to document what they discovered.

C) Legislative Liaison
Dr. Cathy Blight reported that the elections went very well. In addition to the Supreme Court candidates who were successful, Dr. John Bizon was victorious in his State House run.

D) Community & Environmental Health
Motion: that the revised Resolution on fracking be approved as presented and submitted to the House of Delegates. The motion carried.

Motion: that the Resolution entitled Seek to Have Non-Physicians Who Perform Immunizations Correspond With Physicians be amended to remove the word “and tests” from the first Whereas, and remove “to and testing” from the second line of the Resolved section and to correct the acronym ‘MICR’ to read ‘MCIR’. That the Resolution be submitted to the House of Delegates. The motion carried.

E) GFHC Updates
Dr. John Waters reviewed the discussions of the past GFHC Board of Directors meeting. He noted that a significant amount of time was spent discussing the Flint city water system issues, and their impact on health care, and public health.
Dr. Carravallah reported that the Advance Care Planning project is moving forward into new stages of pilots and expanding into more community based organizations.

Dr. Waters presented a Resolution, which was submitted for review, entitled To Support a Reduction in Sugar Sweetened Beverage Consumption.

Motion: that the Resolution To Support a Reduction in Sugar Sweetened Beverage Consumption and Increase Water Consumption As a Strategy to Improve Health in Flint and Genesee County, be approved as and action item for the GCMS Board and to be supported at the Greater Flint Health Coalition. The motion carried.

Directive: staff was directed to return the Resolution to the Greater Flint Health Coalition, marked as endorsed by the Genesee County Medical Society Board of Directors at its meeting on November 25, 2014, along with a copy of Report 5 of the Council on Science and Public Health of the AMA.

F) District Directors
Dr. Mukkamala reported that the recent helmet repeal law has resulted in 25% of motorcyclists riding without helmets and 24 more motorcycle deaths this year, than previously.

New Business
A) February Dinner Business Meeting
The Board discussed the February Dinner Business Meeting topic.

Consensus: that either David Shear or Tom Simmer from Blue Cross Blue Shield of Michigan be invited to talk about the PGIP Program. They are to be asked to focus on physician topics.

Consensus: GCMS will ask the hospitals and the PO’s to send attendees to the meeting.

Respectfully submitted,

Peter Levine, MPH
Executive Director
Genesee County Medical Society Town Hall Meeting on February 5, 2015

Everything You Want to Know About PGIP!
(From The BCBSM Perspective)

Come and hear Thomas L. Simmer, MD, Senior Vice President for Healthcare Value and Provider Affiliations and Chief Medical Officer of Blue Cross Blue Shield of Michigan, as he explains what physicians need to know about the Physician Group Incentive Program (PGIP), from the BCBSM perspective. Dr. Simmer is responsible for contracting with more than 20,000 physicians who participate in the Blue Cross traditional and PPO plans, as well as for directing medical policy for BCBSM. He is responsible for professional payment policies and programs to improve the quality, cost, and access to medical services. Under his leadership, BCBSM has implemented physician incentive programs to promote collaborative improvement programs for more consistent care for persons with chronic illnesses and more cost effective prescribing patterns. Dr. Simmer also served as Associate Program Director for the Internal Medicine Residency Program at Henry Ford Hospital.

In addition, Dr. Simmer serves as Vice Chair of the Center for Health Care Research and Transformation, an Ann Arbor based think tank on medical...
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February 2015

GCMS MEETINGS

Legislative Liaison Committee, 2/2
8am, GCMS Office

Finance Committee, 2/24
5:30pm, GCMS Office

Bulletin Committee, 2/4
7:30am, GCMS Office

Board of Directors, 2/24
6pm, GCMS Office

C-Section Task Force, 2/19
6pm, GCMS Office

Community & Environmental Health Committee, 2/25
12:30pm, GCMS Office

MSF Fundraising Committee, 2/26
6pm, GCMS Office

Practice Managers, 2/26
8am, GCMS Office

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6 o’clock pm at the
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Autoclave Needed
by not-for-profit urgent care center. Please contact Brenda at bcraft@gcms.org or call (810) 232-2710.

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*Source: Centers for Medicare and Medicaid Services (CMS) most recent ratings
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- Heather Mannor
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State & County Medical Society Membership Application

120 W. Saginaw Street • East Lansing, MI 48823
msms@msms.org • www.msms.org
517-336-5762 • Fax: 517-336-5797

Application Code: ____________________________
County Medical Society Use Only
Reviewed and Approved by ____________________________

I am in my 1st year of practice post-residency.
I am in my 2nd year of practice post-residency.
I am in my 3rd year of practice post-residency.
I have moved into Michigan, and this is my first year practicing in the state.

Male □ Female □

First (legal) Name: ____________________________ Middle Name: ____________________________ Last Name: ____________________________ □ MD □ DO

Nickname or Preferred Form of Legal Name: ____________________________ Maiden Name (if applicable): ____________________________

Job Title: ____________________________ W Phone: ____________________________ W Fax: ____________________________ H Phone: ____________________________ H Fax: ____________________________

Cell: ____________________________ Email: ____________________________

Office Address □ Preferred Mail □ Preferred Bill □ Preferred Mail and Bill
City: ____________________________ State: ____________________________ Zip: ____________________________

Home Address □ Preferred Mail □ Preferred Bill □ Preferred Mail and Bill
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* Please base my county medical society membership on the county of my (if addresses are in different counties): □ Office Address □ Home Address

* Birth Date: ______ / ______ / ______ Birth Country: ____________________________ MI Medical License #: ____________________________ ME #: ____________________________

Medical School: ____________________________ Graduation Year: ____________________________ ECFMG #: (if applicable): ____________________________

Residency Program: ____________________________ Program Completion Year: ____________________________

Fellowship Program: ____________________________ Program Completion Year: ____________________________

Hospital Affiliation: ____________________________

Primary Specialty: ____________________________ Board Certified: □ Yes □ No

Secondary Specialty: ____________________________ Board Certified: □ Yes □ No

Marital Status: □ Single □ Married □ Divorced Spouse's First Name: ____________________________ Spouse's Last Name: ____________________________

Is your spouse a physician?: □ Yes □ No If yes, are they a member of MSMS?: □ Yes □ No

Within the last five years, have you been convicted of a felony crime?: □ Yes □ No If yes, please provide full information: ____________________________

Within the last five years, has your license to practice medicine in any jurisdiction been limited, suspended or revoked?: □ Yes □ No If yes, please provide full information: ____________________________

Within the last five years, have you been the subject of any disciplinary action by any medical society or hospital staff?: □ Yes □ No If yes, please provide full information: ____________________________

I agree to support the County Medical Society Constitution and Bylaws, the Michigan State Medical Society Constitution and Bylaws, and the Principles of Ethics of the American Medical Association as applied by the AMA and the MSMS Judicial Commission.

Signature: ____________________________ Date: ____________________________

When completed, please mail to MSMS or Fax to (517) 336-5797. Thank you!