Skin Rash Study Synopsis
Flint Designated Health Professional Shortage Area
Medical Malpractice Damage Caps
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October 2016 Volume 111, Number 31

FEATURE ARTICLES

Do you Recognize this Doctor? 6
Legal Advisor: Medical Malpractice Damage Caps 8
Always Changing 12
Dinner Business Meeting 14
Flint Receives Primary Care Health Professional Shortage Area designation 16
Findings of The Flint Rash Investigation from a Dermatologist’s Perspective 23
Commit to Fit 28
Obituaries 28

REGULARS

President’s Message 4
Practice Manager Meeting: Alphabet Soup Jeopardy 5
Director’s Message 6
Your $$$ at Work 7
Classifieds 26
Happy Birthday Doctor 33
GCMS Meetings 33

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.
Just as the New Year is a time of reflection, so are other transitions in life. As I write this I feel a variety of emotions: relieved, exhausted, energized, proud.

I find it somewhat ironic that all of those emotions blend together. There is a sense of relief that the demands of the presidency will be passed on (Good Luck, John!). Those demands have sometimes been daily with this past year of challenges facing Genesee County (especially Flint) and GCMS and have been emotionally exhausting.

That said, those same factors that have tested the mettle of this Society are also those that have left me feeling energized and proud. As the saying goes, the character of a person (or an organization, i.e. GCMS) is not determined by how he/she acts during tranquil times, but how he/she acts during times of crisis.

Throughout the past year, the Flint Water Crisis and its impact on the public has been the primary focus. GCMS has been challenged, tested and criticized throughout this past year, many times over. We have stood our ground and always based our decisions and statements on science and the safety of our patients. It has not always been easy. At the height of the Water Crisis, while undergoing the most intense scrutiny, attending meetings from all levels of state, local and national government, and during numerous media interviews, it seemed like the days were longer and they would never end. Looking back, it seems to have flown by and is a blur.

Our progress and recognition have come at a cost of time, talent and money by many, as you know. I want to specifically thank Pete Levine who has put in countless unpaid hours, and who has endless youthfulness and energy. Without him, it would have been a very different year. I also want to thank Sherry Smith, Pete’s right-hand person. They are amazing.

I also want to thank the GCMS Board and membership for this wonderful opportunity to lead such a great organization for the past year. I pass the torch knowing that the character of the Genesee County Medical Society shines brightly, and more convinced than ever that we are the strongest county society in the state.

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ALPHABET SOUP JEOPARDY

In late August, the Practice Managers who gathered for their monthly meeting were served a real treat. Stacey Hettiger, Director of Medical and Regulatory Policy of the Michigan State Medical Society, provided an overview entitled “Alphabet Soup.” It covered such issues as accountable care organizations, ambulatory surgery centers, outpatient surgery centers, organize systems of care, patient centered medical homes, physician group incentive programs, physician/hospital organizations, the State Innovation Model and many other issues. The audience was riveted in place, by her presentation which was formatted as a Jeopardy game. No one left early and everyone learned a lot.

The managers were also presented with an overview of some key issues relating to questions for PMC.

In addition, those in attendance were presented with new materials relating to Prescription for Health for patients and fitness prepared by the Greater Flint Health Coalition.

Finally, the managers were introduced to Justin Kimber of GCMS, who is developing an expanded database for dissemination of public health information.

The September topic will cover Medicaid Drug Formulary, with a follow up from McLaren Health Plan and Molina. The practice managers expressed their interest in this follow-up meeting scheduled for September 22, 2016. Stacie Saylor will also be present from the Michigan State Medical Society.

The October topic will be MACRA with presentations by Ronald K. Rybar, Principal of Rybar and Associates, as well as Stacey Hettiger, in a return visit from the Michigan State Medical Society.
Imagine a meeting for physicians where they can meet with Chief Medical Officers of the predominant insurance companies in Genesee County. Imagine that the physicians could ask them anything they wanted at that meeting. Well, the September General Membership Dinner Meeting was exactly that! We had chief medical officer’s from Health Alliance Plan, Molina, McLaren Health Plan, Blue Care Network and Blue Cross Blue Shield of Michigan. They were all together in the same room. They engaged in depth with GCMS members on issues of importance to their practices. The interchange was freewheeling, and reflected the respect that these medical executives have for the Medical Society and its members.

These are serious meetings. They are of value to you and your practices. Please feel free to come to the next one. Don’t forget to come to the President’s Ball on November 19th at Genesys!

This issue also contains a synopsis of the CDC skin rash study that was performed as a result of the Flint Water Crisis. Dr. Walter Barkey and the other GCMS dermatologists did a superb job on behalf of this community in evaluating the involved patients. They are great example of what can be done, when you step forward. They influenced the outcome of the study in a totally positive way. Kudos.

Announcement

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

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GCMS worked with major third-party payers to reinstate member benefits.
GCMS convened a Town Hall with Chief Medical Officers of major payers.
GCMS held a practice managers meeting on the Medicaid Drug Formulary.
GCMS and MSMS actively communicated with legislators on CRNA and NP scope legislation.
GCMS continued work on water related community health issues.
GCMS continues to investigate treatment issues related to lead.
GCMS continues to serve as the vehicle of communication between public health agencies and physicians for information critical to physicians.

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<td>5399 E. Court St. N.</td>
<td>1005 University Ave.</td>
<td>3400 Regency Park Dr.</td>
<td>168 N. Saginaw St.</td>
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<td>Grand Blanc, MI 48439</td>
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Medical Malpractice Damage Caps Always Changing

Barbara Hunyady, Attorney at Law
Cline, Cline & Griffin, P.C.

“The only thing that stays the same is everything changes.” - Bobby Braddock

Like many states, Michigan “caps” or limits the maximum amount of money a plaintiff may receive in a medical malpractice lawsuit for a certain category of damages. You may be familiar with the terms “low cap” and “high cap” cases. Every year the limits of the caps are adjusted according to the consumer price index. In 2016, both caps went down, from the 2015 all-time high. The only other year the caps went down, as opposed to increasing, was in 2010. This comes as no surprise as the limits are connected to the economy. For 2016, the low cap is $438,800 and the high cap is $783,500.

The cap on damages applies to noneconomic damages, which means damages or loss due to pain, suffering, inconvenience, physical impairment or physical disfigurement, or loss of enjoyment of life. Any damages or losses claimed by the patient’s spouse are also included in the same cap, which typically are loss of companionship claims.

Economic damages, which are not included in the cap, are not limited. Economic damages include compensation for past medical expenses, ongoing medical care, lost income, harm to the plaintiff’s ability to earn a living, and any other measurable financial losses related to the malpractice.

When determining their verdict, the jury must separate damages into economic and noneconomic losses, but the jury may not be informed of the caps on noneconomic loss. If the jury awards noneconomic damages exceeding the cap, the judge will reduce the award to comply with the cap.

For non-economic damages, the low cap applies unless there are special circumstances that entitle the plaintiff to the high cap. In order to be eligible for the high cap, the plaintiff must have paralysis from brain or spinal injury, permanently impaired cognitive function, or lost the ability to procreate due to permanent damage to or loss of a reproductive organ.

Over the last ten years, the caps have been as follows:

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<th>Year</th>
<th>Low Cap</th>
<th>High Cap</th>
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<tr>
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<td>economic damages, economic damages, with no special circumstances</td>
<td>economic damages, with no special circumstances special circumstances</td>
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<tr>
<td>2006</td>
<td>$382,800</td>
<td>$683,500</td>
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<tr>
<td>2007</td>
<td>$394,200</td>
<td>$704,000</td>
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<td>$401,500</td>
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<td>$444,900</td>
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<tr>
<td>2016</td>
<td>$438,800</td>
<td>$783,500</td>
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The low cap and high cap values are adjusted every year and posted on the Michigan Department of Treasury’s website. A jury verdict is subject to the cap value in effect at the time judgment is entered. You can contact this author, Barbara Hunyady of Cline, Cline & Griffin, P.C. at bhunyady@ccglawyers.com or by calling the office at 810-232-3141.
Please direct patients to www.flintcares.com for the latest information regarding Flint water issues.
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The Medical Society Foundation is engaged in a capital campaign. With a goal of $2 million, the purpose of the campaign is to raise funds for the Foundation to use in support of the Genesee County Medical Society’s charitable and public health related activities. We are seeking major gifts, and smaller ones too. Appreciated stock, IRA disbursements, and cash donations are all accepted with pleasure. The funds will go to the best of all uses. Examples of the types of activities that the funds have supported include the Genesee County Medical Society’s efforts on behalf of a safer Flint water supply, human trafficking advocacy and education, and support of end-of-life, fitness and community health initiatives.

Please do not hesitate to contact Pete Levine for more information at 810-733-9925 or plevine@gcms.org.

Sincerely yours,

Allen F. Turcke, MD
Immediate Past President
Genesee County Medical Society
Pino Colone, MD
President
Genesee County Medical Society
I. Call to Order:

The meeting was called to order at 6:40 p.m. by Pino Colone, MD, President, in the dining room of the Flint Golf Club.

II. Introduction of Guests:

Dr. Colone introduced the guests in attendance along with the speakers for the evening, Drs. Kathy Kudray, Medical Director for McLaren Health Plan, Greg Buran, Vice President and Senior Medical Director at Health Alliance Plan, James Forshee, Vice President, Medical Affairs & Chief Medical Officer Molina Healthcare, Marc Keshishian, Senior Vice President and Chief Medical Officer of Blue Care Network, and Tom Simmer, Senior Vice President and Chief Medical Officer of Blue Cross Blue Shield Michigan.

He also introduced Lori Kunkle, Chief Operating Officer of the Greater Flint Health Coalition.

Dr. Colone then invited Jennifer Shew to the podium to briefly explain the unique services of the Flint Area School Employees Credit Union, the sponsor for the meeting. Dr. Colone thanked the representatives from Flint Area School Employees Credit Union for sponsoring the meeting.

III. Review of Minutes from May 7, 2015 Dinner Business Meeting:

**Motion:** That the minutes of the May 5, 2016 Dinner Business Meeting be approved as published in the June 2016 Bulletin. **The Motion Carried.**

IV. Nominating Committee Report

Dr. Duncan reviewed the Nominating Committee report published in the August 2015 issue of the GCMS Bulletin. A printed Slate of Nominees was also available on each table.

**Motion:** That the Slate of Nominees prepared by the Nominating Committee and approved by the GCMS Board of Directors, and published in the August 2015 Bulletin be approved by acclimation. **The Motion Carried.**

Dr. Colone congratulated Dr. Gerald Natzke, Jr., who will serve as President Elect when Dr. John Hebert, III, becomes President in November.

The 2016-2017 SLATE OF NOMINEES FOR GCMS OFFICES was approved as follows:

**PRESIDENT- ELECT:**
Gerald Natzke, Jr., DO

**SECRETARY:**
Qazi Azher, MD

**DELEGATES:**

<table>
<thead>
<tr>
<th>Qazi Azher, MD</th>
<th>Pino Colone, MD</th>
<th>Hesham Gayar MD</th>
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<tr>
<td>Amitabha Banerjee, MD</td>
<td>Niketa Dani, MD</td>
<td>John Hebert, III, MD</td>
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<td>Cathy Blight, MD</td>
<td>Deborah Duncan, MD</td>
<td>Rima Jibaly, MD</td>
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<td>Ed Christy, MD</td>
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**ALTERNATE DELEGATES:**

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<tr>
<th>Sunil Kaushal, MD</th>
<th>Lawrence Reynolds, MD</th>
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<tr>
<td>Rama Rao, MD</td>
<td>Punam Sharman, MD</td>
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<td>Venkat Rao, MD</td>
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**FINANCE COMMITTEE:**
Raymond Rudoni, MD

Lawrence Reynolds, MD
V. Introduction of Speaker, Town Hall Meeting
Dr. Deborah Duncan, President, introduced Doug Dietzman, Executive Director of Great Lakes Health Connect. Mr. Dietzman has overall responsibility for Great Lakes Health Connect’s business and technical operations. Great Lakes Health Connect is Michigan’s largest health information organization. It currently covers 82% of the licensed acute care beds in the state of Michigan, as well as 4,000 physician offices.

The presentation by Mr. Dietzman elicited substantial discussion. Questions continued for quite a while.

VI. Next Meeting:
The next General Membership Meeting will be the Presidents’ Ball on November 7, 2015 at Warwick Hills Golf & Country Club and the next Town Hall Dinner Business Meeting is scheduled for February 4, 2016.

VII. Adjournment:
No further business appearing. The meeting was adjourned at 8:45 p.m.
FOR IMMEDIATE RELEASE
September 8, 2016

MDHHS CONTACT: Jennifer Eisner
(517) 230-9804, eisnerj@michigan.gov

Flint receives primary care Health Professional Shortage Area designation

LANSING, Mich. – Primary care services in Flint, Michigan will be strengthened through a federal Health Professional Shortage Area (HPSA) designation that makes the area eligible for primary care workforce recruitment and retention programs.

“This designation helps ensure that Flint residents are able to receive the health care services they need by helping health care providers recruit primary care doctors, nurse practitioners, and physician assistants to continue practicing in underserved areas,” said Nick Lyon, director of the Michigan Department of Health and Human Services. “With improved access to care, Flint residents will have more opportunities to see positive health outcomes today and in the future.”

The MDHHS requested a HPSA designation for Flint by submitting data demonstrating a shortage of primary medical care providers. After review by the Health Resources and Services Agency within the United State Department of Health and Human Services, portions of Flint received a Primary Care HPSA designation effective August 27, 2016.

Health facilities located within the designated area are able to utilize programs designed to improve access to primary care by recruiting and retaining providers in areas with HPSA designations. These initiatives include the National Health Service Corps Loan Repayment and State Loan Repayment which pay off medical education debt for providers practicing in HPSA designated areas, as well as the International Medical Graduate Program which assists international medical graduates working in HPSA designated areas.

There are three types of HPSA designations: primary care, dental, and mental health. In addition to the primary care HPSA, all of Flint is located within a mental health HPSA and portions are located within a dental health HPSA. HRSA is the primary federal agency for enhancing access to health care for people who are uninsured, isolated or medically vulnerable.

For more information about Michigan designated shortage areas, visit http://www.michigan.gov/mdhhs/0,5885,7-339-71551_2945_47514---,00.html.

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Findings of The Flint Rash Investigation from a Dermatologist’s Perspective

Walter Barkey, MD

As a private practicing dermatologist in Flint for 33 years, I am used to interacting with patients one-on-one in my office, diagnosing and treating a variety of skin ailments, including puzzling rashes and hair loss. Ask any primary care or emergency room physician and they will tell you that figuring out what’s causing an intensely itchy rash in a miserable patient can be very challenging.

This past winter, like everyone who lives in Genesee County, I heard the media reports of people with severe rashes and hair loss who were using Flint municipal water. Despite the switch back from the Flint River as a water source to Lake Huron on October 16, 2015, these reports seemed to be escalating.

On Friday, February 5th every physician in Genesee county received an email Health Alert that was initiated by health officials at MDHHS (Michigan Department of Health and Human Services). This Health Alert told physicians about an investigation that was being undertaken and it asked physicians to refer people with rashes and/or hair loss possibly related to Flint Municipal water to the state’s “211” number so that these people could be studied.

I read this Health Alert that Friday afternoon and decided (in perhaps a weak moment) to contact MDHHS and volunteer to help diagnose and treat my fellow community members who were suffering from these skin disorders. And what I thought might involve a few spare afternoons soon turned into a major collaborative effort of the State of Michigan (MDHHS) and the federal government (HHS, EPA, CDC, ATSDR) that lasted six months and culminated in The Flint Rash Investigation which was released on August 23, 2016.

When it became clear after just a few weeks that there might be hundreds of people who had rashes and hair loss who needed to be seen I called on my fellow Genesee County Medical Society dermatology colleagues Robert Soderstrom, MD, Bishr Al Dabagh, MD, and Kevin Gaffney, MD. I’m proud to say they never hesitated and each readily gave up what turned out to be 11 half-days to see a total of 122 people with rashes and hair loss between March 3 and May 12.

“The Flint Rash Investigation” set out with three goals: to better understand and characterize rashes and hair loss, to explore causes and possible associations with Flint water, and to make recommendations for public health interventions.” Unfortunately, we weren’t in a position to study the water that was coming into homes when the Flint River was the water source. We could only study the current water after the switchback on October 16, 2015. We also could only diagnose people who had an active rash or hair loss issue.

Through a number of press releases, public awareness efforts, and home visits from the EPA, over 600 people contacted the MDHHS and about 70% had a current or worsening rash or hair loss after the switchback. The CDC and MDHHS (in the person of Dr. Jevon McFadden) came up with a comprehensive questionnaire to gather information about participant’s rashes and their exposure to Flint water. Eventually, 390 people were interviewed with the help of state and federal people from MDHHS, the CDC, and the ATSDR (Agency for Toxic Studies and Disease Registry). All of the participants were offered extensive home water testing done by the EPA as well as a free skin examination by one of the four volunteer dermatologists.

Interviews were conducted by state and federal health officials and each interview took 30-45 minutes. Some of the most notable findings of the interviews were that over half of people who had rashes had the onset date before the switchback, 77% of people reported changes in their tap water quality at the time their rash or hair loss began, and most respondents had changed their routine bathing or showering habits because of concern about a possible association.

The dermatologists found that about 20% of the rashes were definitely unrelated to Flint water leaving about 80% that were felt to be “possibly related.” The most common type of rash in the latter group was eczema which is a common condition with a genetic basis but also known to have a variety of aggravating factors including irritation, dryness, and stress. We did not find any rashes that were related to bacterial or viral infections. The rashes people had been complaining about were indeed very real but overall the
dermatologists felt that the severity and spectrum of rashes seen during the study were similar to what they saw in their everyday practice during a typical Michigan winter. What impressed them the most about the participants was the general level of anxiety, stress, and mistrust among participants most of whom had stopped using Flint water to bathe or shower.

The EPA looked at every metal, mineral, and water quality parameter in homes that was even potentially associated with skin irritation, rash, or hair loss and they did not find any significant abnormality in these in over 170 homes that were tested. Flint homes tested had enough chlorine to protect against microbial contamination but not to cause skin irritation. They did find elevated lead levels in 16% of homes tested although there is no precedent for lead being associated with rash, skin irritation, or hair loss. They also found several homes with elevations of a few metals and minerals like iron and manganese that could definitely explain participants’ complaints about the taste, color, and texture of the water. These findings validate people’s concerns that the water still “wasn’t right.” These elevations were thought likely due to release from water service lines, internal plumbing, and fixtures resulting from lack of corrosion controls when the Flint River was the water source.

As a separate part of the investigation, an analysis was performed of the limited historical Flint Water Plant data from the period of time when the Flint River was used as a source (April 2004 - October 2015). Significant fluctuations were found in water hardness, pH/acidity, and free chlorine levels throughout this time. Since many rash complaints began while residents were using the Flint River water source, these fluctuations provide one possible explanation for the most common type of rash seen by dermatologists which was eczema. Unfortunately, no home water testing data is available from this period which means this very plausible explanation could not be confirmed.

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CONTINUED ON PAGE 18
Some would say that this was not a scientific study and that the findings cannot be automatically applied to the entire Flint community and they would be right. That kind of study would have taken years. This was a kind of pilot study initiated to look at these participants while their rashes were still present and designed to look for red flags that may lead to further study.

So what about the people who had their rash begin after the switchback or who still have a rash now? It may sound simple but the first thing needed to successfully treat any rash is an accurate diagnosis. So one of the major recommendations of the study was to suggest that anyone with an active rash that is concerned about a possible association with Flint water see their primary care physician (PCP). Efforts have been underway to try to educate PCPs to better diagnose and treat rashes and to facilitate referrals to dermatologists if needed. To this end, I gave a combined Internal Medicine / Pediatric Grand Rounds on August 31st at Hurley Medical Center (https://hurleymc.zoom.us/recording/play/QpERZ375ooe6EkaZjRaeOjtNYYEX2EDPUEVZ_JOjIjA7UFzFA9IICH9NWozYiS3V).

With the recent expansion of Medicaid and the presence of several government funded health care centers here (Genesee Community Health Center and Hamilton Community Health Network) almost everyone in Genesee County should be able to get established with a PCP. While some rashes may go away on their own, others can be difficult to get rid of without proper treatment. If someone needs to see a dermatologist they can self-refer or be referred by their PCP.

After the last participant was seen in the investigation in May 2016 the work was not nearly over. The federal government (specifically HHS and the CDC) decided to take the “front seat” and control the writing and presentation of the findings. I’m sure Sunday night revisions in the written report as well as presentations to various officials and eventually the public. The only leverage I had working with these federal officials was that they needed a local name on their report and at the press briefing to give it some measure of credibility with the people of this community.

From my point of view, there were some very good things that came out of this whole experience. This investigation brought a lot of different people together who had to work as a team to answer a question that a large community like Flint had never faced before. I got to know my fellow Genesee County Medical Society dermatologists in a way that was not possible before and I am proud of the way they all stepped up to assist. I had never before worked so closely with Pete Levine of the GCMS. I have the utmost respect for what they do for us as physicians but also for the community. I really came to appreciate the work of some physician colleagues at the state (Eden Wells, MD and Jevon McFadden, MD in particular) and federal (Nicole Lurie, MD) levels. Personally, this experience taught me to get outside of my comfort zone, my one on one office interaction with patients, and to look at the health of our community as a whole.
For a long time, people in Flint have been worried about rashes and hair loss. These problems are real, and the question from people in Flint is: “Is the water causing skin problems?” A special team did a study from February through May of 2016 to find possible causes.

What the study found:

1. Many people saw skin doctors who volunteered as part of this study. Information from these visits helped the team look for possible causes.

2. When the city was using water from the Flint River, there were large swings in chlorine, pH and hardness. These swings are one possible explanation for the eczema-related rashes.

3. While some rashes may go away on their own without any treatment, others can be hard to get rid of without proper treatment. Stress makes almost all skin problems worse. People in Flint say there is a lot more stress since the Flint water crisis.

4. In Flint’s water now, the chlorine, water hardness, metals, and pH are not at levels that would cause skin problems.

For the study:

1. 429 people in the study had rashes or hair loss when the study started and 390 agreed to be interviewed.

2. The team looked at information about the water Flint is using now. Also, they tested hot and cold water in people’s homes for chlorine, water hardness, metals, and pH.

3. The team also looked at water test results from the water treatment plant when the city was using the Flint River water.

4. The team helped people in the study see skin doctors for free. 122 people visited one of the skin doctors.
What Do I Do If I Still Have a Rash?

Take care of your skin.
See *The DOs and DON'Ts of Rashes* from Dr. Barkey, Flint dermatologist

Go see your doctor even if your rash seems to be getting better. If needed, they can refer you to a specialist.

Talk with your doctor about bathing and showering habits.

If you don’t have a doctor, visit a health center. The health centers are open to everyone – both children and adults. For most people, they are free or very low cost.

Managing Stress:

If you are feeling stressed, talk to a trained crisis counselor from the Disaster Distress Helpline. All calls are free and confidential.

Call 1-800-985-5990
Text ‘TalkWithUs’ to 66746

Deaf or Hard of Hearing: Call 1-800-846-8517

Where Do People Who Participated in the Study Live?

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<th>Ward</th>
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</tbody>
</table>
**The DOs and DON’Ts of Rashes**

Many things may cause rashes and scratching a rash may cause an infection. If you have a rash that does not go away and/or an uncomfortable rash, see your primary doctor or your dermatologist. Here are some things to consider in the meantime for an itchy rash:

- **Do add an oatmeal bath product**, such as Aveeno® Oilated Oatmeal, to a lukewarm bath and soak for a while.

- **Do use a gentle body wash** like Dove® or Cetaphil® instead of regular bar of soap when you bathe or shower.

- **Do apply a good moisturizer to the rash**. Creams, oils, and petrolatum based products are preferred over lotions.

- **Do clean open wound with a gentle cleanser and water**.

- **Do apply over-the-counter 1% hydrocortisone cream or ointment** to the rash twice a day (preferably after a bath or shower) for up to one week at a time.

- **Do try an over-the-counter antihistamine** like Benadryl® (diphenhydramine) at night time if itching is keeping you from sleeping.

- **Do keep your appointment with your primary doctor or your dermatologist** even if you improve with these measures. He/She can diagnose your rash and may provide more powerful prescription remedies.

- **Don’t use rubbing alcohol on your rash**. It does not promote healing, does not kill infectious bacteria; it irritates, stings, dries out your skin and makes rashes like eczema worse.

- **Don’t use regular bar soap on dry itchy rashes**. Soap dries out skin and makes rashes like eczema worse.

- **Don’t clean open wounds with hydrogen peroxide or bleach**. They do not promote healing and aggravate most rashes.

- **Don’t use triple-antibiotic ointment** (such as Neosporin®). It does not kill the bacteria that cause skin infections, and may cause an allergic reaction in the skin due to one of the ingredients.

This document is based on recommendations by Walter Barkey, MD, a board certified dermatologist who practices in Flint, MI.
Issues of Serious Concern for Medical Practices!

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

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

The following topics are tentatively scheduled and subject to change

October Topic:

MACRA
Ronald Rybar, Principal, Rybar & Associates
Stacey Hettiger, Director, Medical & Regulatory Policy, MSMS

November / December

NO MEETING

Light breakfast available – coffee, tea, yogurt, fruit cups and granola bars

Genesee County Medical Society | Rapport Conference Room
4438 Oak Bridge Drive, Suite B | Flint, MI 48532
FREE! Commit to Fit! Class Schedule

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

**Click HERE to Access the Nutrition Education & Resources Calendar**

<table>
<thead>
<tr>
<th>OCTOBER 2016 CALENDAR</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>MONDAY</strong></td>
</tr>
<tr>
<td><strong>3</strong></td>
</tr>
<tr>
<td>Enhance Fitness</td>
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FREE! Commit to Fit! Class Schedule
Class Descriptions & Locations

Basic Yoga (1 hour)
This class is a balanced flow of postures designed to build stamina, strength, and flexibility while promoting weight loss and general stress relief.

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

Insight
Health & Fitness Center

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

Genesys
Athletic Club

Fit Club Workouts (45 minutes) – Join the Fit Club every Tuesday at 5:30 pm for fun boot camp style workout videos. All ages are encouraged to attend! Check out their Facebook page for up-to-date information!

The Flint Local 432
124 W. 1st Street Flint, MI 48503  (810) 813-4000

The Flint Local 432

Yoga in the Gardens of Applewood Estates
11:00am-12:00pm Introductory Family yoga session meant for adults and children! Mats provided, no equipment needed. Appropriate for all ages. Build strength, flexibility and mindfulness! Free event!

Applewood Estate, 1400 E. Kearsley St.
October 1st and 8th 11:00am-12:00pm

Yogalates Barres & Balls – A well rounded class for all levels that combines the elements of Yoga, Pilates, Ballet, strength, and cardiovascular conditioning.

Friday's 5:30-6:30pm in ADR.
September 16-December 16, 2016.

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

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 48504
(810) 766-7128 Mon, Weds, & Fri 9-10 am

Carriage Town Ministries 605 Garland St Flint, MI
Tuesday 2:39-3:30 pm

Faith United Methodist Church
2266 Coldwater Rd Flint, MI
Tuesdays and Thursdays
12:30-1:30 pm

Triumph/North Star (MBC) 1657 B
Mondays- 6:00-7:00pm &
Thursdays 5:30-6:30 pm

Flint Farmers’ Market - Tuesdays &
Thursdays 10:00-11:00 am
300 E. First St Flint, MI 48502
(810) 232-1399

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

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

Questions?
Email
commit2fit@flint.org

Fall 4 Fitness Challenge starts October 1st and runs through October 31st!! Organizations who have the highest levels of participation and average minutes of physical activity will receive trophies and additional raffle chances per person for cash prize drawings. For individuals who reach the challenge goal of 1,000 minutes of physical activity, incentives will include $2,000 in cash prizes, wearable fitness devices, memberships to local fitness centers, gift certificates, and more!

Questions?
Email
commit2fit@flint.org

commit2fit.com
The Medical Society Foundation is engaged in a capital campaign. With a goal of $2 million, the purpose of the campaign is to raise funds for the Foundation to use in support of the Genesee County Medical Society’s charitable and public health related activities. We are seeking major gifts, and smaller ones too. Appreciated stock, IRA disbursements, and cash donations are all accepted with pleasure. The funds will go to the best of all uses. Examples of the types of activities that the funds have supported include the Genesee County Medical Society’s efforts on behalf of a safer flint water supply, human trafficking advocacy and education, and support of end-of-life, fitness and community health initiatives.

Please do not hesitate to contact Pete Levine for more information at 810-733-9925 or plevine@gcms.org.

Sincerely yours,

Allen F. Turcke, MD
President
Medical Society Foundation
Deborah Duncan, MD

Immediate Past President
Genesee County Medical Society
Pino Colone, MD

President
Genesee County Medical Society
READY TO MOVE IN 4,500 SQ. FT.
Custom designed physician office. Available for rent or purchase in Stone Bridge office complex off Linden Rd. across from Genesee County Medical Society. New roof and heating/cooling. Contact 810-610-0965

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

PHYSICIANS NEEDED
at the Emergency Medical Center of Flint Various shifts available for part-time, as well. Must be willing to do minor stitches, infants & children, splinting, and minor eye & ear procedures. This is a classic urgent care much like family practice. Hours of operation Mon, Wed: 10am-9pm, Tue, Thur, Fri, Sat: 12pm-9pm, closed on major holidays Located at 2284 S. Ballenger Hwy., Suite 2, Flint, 48503. Contact Pete Levine at 810-733-9925.

CLASSIFIEDS
CHECK OUT OUR WEBSITE WWW.GCMS.ORG

Meeting the Health Needs of Genesee County’s Children

Child & Adolescent Dentistry
• Dental Exams & Preventive Care
• Dental Treatment & Restorations
• School Screening and Sealant Program
• Infant & Toddler Oral Health Care

Child & Adolescent Health/Psychiatry
• Pediatrics
• Audiology
• Nutrition Education
• Psychiatric Consultation
• Medication Management
• Teen Wellness Center

Mott Children’s Health Center
806 Tuuri Place
Flint, Michigan 48503
(810) 767-5750  ●  fax (810) 768-7511
2016 President's Ball
UNDER THE BIG TOP
a family affair

In Honor of the GCMS & GCMSA Presidents

Saturday, November 19, 2016
at 6:00 PM

Genesys Conference & Banquet Center
801 Health Park Blvd | Grand Blanc, MI 48439

Bring the entire family
~ all ages welcome ~

RSVP by November 7, 2016
at ssmith@gcms.org or (810)733-9923

Ticket Prices:
Ages 13 & up, $85
Ages 3-12, $35
Ages 2 & under, free

Valet Parking Available
Black Tie Optional | Relaxed Business Attire Welcomed
Celestine M. Joseph, MD

Celestine M. Joseph, MD, passed away on August 31, 2016. Dr. Joseph was born May 19, 1941, in Jaffna, Sri Lanka. Dr. Joseph attended Medical School at University of Ceylon, graduating in 1967. He served an internship at St. Joseph Hospital, Flint. He served a residency in General Practice at St. Joseph Hospital, Flint. His residency in OB/GYN was served at Hurley Medical Center. Dr. Joseph worked as Attending Physician in obstetrics and gynecology at Hurley Medical Center for 45 years and as Clinical Professor for Michigan State University. Surviving is his wife, Mary Helen.

Carlton K. Dettman, MD

Carlton K. Dettman, MD, of Montrose, MI, recently passed away in Grand Rapids at 88 years of age. Dr. Dettman, a graduate of the University of Michigan Medical School, served as a 1st Lt. in the Army Medical Corps from 1953-1955. He practiced medicine in Montrose, for nearly six decades, making house calls throughout the surrounding farming community. He bred, trained and exhibited American Saddlebred horses, winning countless championships. Descendants of his horses are still performing in the show ring today. He is survived by his wife, Gloria; two children, and his grandchildren.

Please direct patients to www.flintcares.com for the latest information regarding Flint water issues
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[800.282.6242](tel:800.282.6242)  ProAssurance.com
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!

NEXT MEETING: NOVEMBER 7
The Medical Society Foundation is engaged in a capital campaign. With a goal of $2 million, the purpose of the campaign is to raise funds for the Foundation to use in support of the Genesee County Medical Society’s charitable and public health related activities. We are seeking major gifts, and smaller ones too. Appreciated stock, IRA disbursements, and cash donations are all accepted with pleasure. The funds will go to the best of all uses. Examples of the types of activities that the funds have supported include the Genesee County Medical Society’s efforts on behalf of a safer flint water supply, human trafficking advocacy and education, and support of end-of-life, fitness and community health initiatives.

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GCMS Bulletin

**OCTOBER**

Eleuterio Lumaque, MD ......................................... 1
Todd Rosen, MD ..................................................... 1
Walter Barkey, MD .................................................. 2
Tintin Manuela-Abad, MD .................................... 2
Raza Cheema, MD ................................................... 2
George Predeteanu, MD ........................................ 4
Randolph Schumacher, MD .................................. 4
Lewis Twigg, MD ................................................... 5
Miguel Perez-Pascual, MD .................................... 5
William Macksood, MD ........................................ 6
Anthony Parillo, MD .............................................. 6
Donald Hardman, MD ........................................... 7
Ahmed Arif, MD ..................................................... 7
Jack Price, MD ....................................................... 8
Afroze Hai, MD ...................................................... 8
Charles Frank, MD ................................................ 8
Jack Nettleton, MD ............................................... 9
Abdul Hassan, MD ................................................ 10
Behrouz Moghtassen, MD .................................... 10
Chandulal Malde, MD .......................................... 10
Lee Perry, MD ....................................................... 10
Prasad Kommareddi, MD ..................................... 10
Robert Weber, MD ............................................... 11
Kavita Rajkotia, MD ............................................. 11
Prajesh Patel, MD ................................................ 12
Jerome Kasle, MD ................................................ 13
Hemant Thawani, MD .......................................... 13
Berton Mathias, MD ............................................. 14
Naraharisetty Rao, MD ......................................... 14
Jeanne Hicks, MD ............................................... 14
Tai Kang, MD ...................................................... 15
Amitabha Banerjee, MD .................................... 15
Krishna Shah, MD ................................................ 15
Dirk Snyder, MD ................................................... 15
Cherie Phillips, MD ............................................... 15
Sunil Kaushal, MD .............................................. 16
John Dobson, MD ................................................ 16
Frederick Bruening, MD .................................... 18
S. Peter Almeida, MD .......................................... 19
Wayne Kinning, MD, FACS ................................. 19
Sara Elsayed, MD ................................................ 19
Vernon Urih, MD ................................................... 20
Allan Ebert, DO ..................................................... 20
Alex Solik, MD ..................................................... 21
Giovanni DiGiannantonio, MD ............................. 21
Adrienne Kimler, MD .......................................... 21
Gail Cookingham, MD ....................................... 22
Duane Bailey, MD ............................................... 23
Robert Yochim, MD ............................................. 26
Kevin Gaffney, MD ............................................. 26
Vicente Carino, MD ............................................. 27
Edgardo Balde, MD ............................................. 27
Christopher Conlin, MD ................................... 27
Christopher Cukrowski, DO ................................. 28
Daniel Ryan, MD ................................................ 29
Sai Dukkipati, MD ............................................. 29

**LEGISLATIVE LIAISON COMMITTEE**
8am, GCMS Office

**2016 BALL COMMITTEE**
12pm, GCMS Office

**COMMUNITY & ENVIRONMENTAL HEALTH COMMITTEE**
12:30pm, GCMS Office

**FINANCE COMMITTEE**
5:15pm, GCMS Office

**BOARD OF DIRECTORS**
6pm, GCMS Office

**GCMS MEETINGS**
— October 2016 —

**LEGISLATIVE LIAISON COMMITTEE, 10/3**
8am, GCMS Office

**2016 BALL COMMITTEE, 10/11**
12pm, GCMS Office

**COMMUNITY & ENVIRONMENTAL HEALTH COMMITTEE, 10/12**
12:30pm, GCMS Office

**FINANCE COMMITTEE, 10/25**
5:15pm, GCMS Office

**BOARD OF DIRECTORS, 10/25**
6pm, GCMS Office

**COMMUNITY & ENVIRONMENTAL HEALTH COMMITTEE, 10/26**
12:30pm, GCMS Office

**PRACTICE MANAGERS, 10/27**
8am, GCMS Office

**MSF FUNDRAISING COMMITTEE, 10/27**
6pm, GCMS Office

**GCMS/GCMSA PRESIDENT'S BALL, 11/19**
6pm, Genesys Conference & Banquet Center

HAPPY BIRTHDAY DOCTOR
2016 President's Ball

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Valet Parking Available
Black Tie Optional | Relaxed Business Attire Welcomed
State and County Medical Society

MEMBERSHIP APPLICATION

Join MSMS and your County Medical Society online at www.joinmsms.org

☐ I am in my first year of practice post-residency.
☐ I am in my second year of practice post-residency.
☐ I am in my third year of practice post-residency.
☐ I have moved into Michigan; this is my first year practicing in the state.

☐ Male ☐ Female

First (legal) Name: ___________________________  Middle Name:  ___________  Last Name:  ________________________

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

Job Title:  _______________________________________________________________________________________

W Phone ___________________  W Fax  __________________   H Phone  _________________ H Fax  _________________

Mobile:  _______________________________  Email Address  ________________________________________________

Office Address  ○ Preferred Mail  ○ Preferred Bill  ○ Preferred Mail and Bill

City:  ___________________________________________ State:  __________ Zip:  __________________

Home Address  ○ Preferred Mail  ○ Preferred Bill  ○ Preferred Mail and Bill

City:  ___________________________________________ State:  __________ Zip:  __________________

*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, 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:  _______________________________

 County Medical Society Use Only

Reviewed and Approved by: ___________________________  ___________________________  ___________________________