



Tuesday,
Feb 11,
2014

“Vaccine Myth, Rumor and Reality”

Volume 174, Issue 1

FEBRUARY
2014



Speaker:
Gregory D. Harrington, DO, Bronson Infectious Diseases & Pulmonary Medicine

* * *

*R.S.V.P. to
Jeanne at
660-0893*

*See you at
Battle
Creek
Country
Club*

MEETING INFO.

LOCATION:

BATTLE CREEK COUNTRY CLUB

AGENDA:

* 5:30 P.M. - CCMS Executive Committee (*Battle Creek Country Club*)

* 6:00 P.M. - 6:30 Social)

*6:30 P.M. Dinner/ Presentation

*MENU:

Buffet with vegetarian option

ABOUT THE SPEAKER

Dr. Harrington received his education from Michigan State University College of Osteopathic Medicine in 1987.

His internship was served at St. Lawrence Hospital and his post-graduate Residency was at Spectrum Health-Butterworth Hospital. His Fellowship was done at University of Michigan hospitals. He became board certified in 1991 for Internal Medicine, 2004 for infectious Diseases, and 2006 for Pulmonary Diseases.

His practices specialty is Infectious Disease Medicine and Pulmonology. His practice is located in Battle Creek, Michigan with hospital privileges at Bronson Battle Creek Hospital.

1-Hr CME

OBJECTIVES

- ◆ History of anti-vaccine movement.
- ◆ Factors contributing to anti-vaccine movement.
- ◆ Common mistakes by anti-vaccine movement.
- ◆ Assessment of risk-benefit of vaccination.
- ◆ Impact of waning vaccination rates.

“Bronson Battle Creek is accredited by the Michigan State Medical Society Committee on CME Accreditation to provide continuing medical education for physicians. Bronson Battle Creek designates this educational activity for a maximum of One Hour of Category 1 toward the AMA Physician’s Recognition Award. Each physician should claim only those credits that he/she actually spent in the activity.”

TARGET AUDIENCE

The target audience for this program is ALL PHYSICIAN MEMBERS OF Calhoun County Medical Society.

This is a non-sponsored presentation. The speaker has no financial affiliation. A disclosure form is on file at Bronson Battle Creek.

**CCMS
EVENT
CALENDAR**

2014

2nd Tuesday,
6:30pm Meeting
Topics:

Mar. 11 @ BCCC	Jeffery Miller, MD, Cardiologist (1 CME)
Apr. 8 @ BCCC	Kari Formsmma, MD, OB/GYN (1 CME)
Apr. 25 thru 27	MSMS House of Delegates, The Henry, Dearborn
May 13 @ BCCC	Satya Chaparala, MD, Sleep Health (1 CME)
June. 10 @ BBC	Executive Committee ONLY @ BBC Medical Staff Library Conference Room,
Sept. 9 @ BCCC	TBA

PRESIDENT'S REPORT



Gunjana Bhandari, MD
2014 President,
Calhoun County
Medical Society.
Email: Gunjana_Bhandari@hotmail.com.

If you have concerns or suggestions, call me at my Battle Creek office phone

FEDERAL LEGISLATOR CONTACT INFO.:

U.S. Senator
Debbie Stabenow
-R
Phone
(202) 224-4822
Email: senator@stabenow.senate.gov

U.S. Representative
7th District
Tim Walberg -D
Phone
(517) 780-9075
Email: <http://walberg.house.gov>

Dear Membership,

The New Year was off to a cold start, but the future looks bright. Not only will there be major changes in national healthcare, but on the Calhoun county community level as well.

Reform

The government healthcare reform has been a controversial topic, and 2014 sees more of the program being implemented. Patients can now enroll for coverage online, and physician reimbursement plans will be established.

Education

The Western Michigan University School of Medicine is taking steps towards completion. The inaugural class will matriculate this fall. Western Medical School will enroll 50 dedicated medical students to address the physician shortage Southwest Michigan.

County Patients

As president of the CCMS, I would like to focus on keeping patients within Calhoun County and not having to send them outside for their medical care, unless absolutely necessary. The medical professionals in Calhoun County should discuss these issues.

2014 will surely be an exciting year. I'm looking forward to working with all of you.

Sincerely,

Gunjana Bhandari, MD

“Financial Burden of Medical Care: A Family Perspective.”

In 2012, more than 1 in 4 families (26.8%) in the United States felt the financial burden of medical care, according to the National Center for Health Statistics (NCHS), part of the Centers for Disease Control and Prevention.

In addition, nearly 1 in 6 families (16.5%) had problems paying medical bills in the last 12 months, 1 in 10 (8.9%) had medical bills they were unable to pay at all (a subgroup of those having problems paying medical bills), and 1 in 5 (21.4%) were paying medical bills over time, according to a NCHS data brief released January 28.

Families with income at or below 250% of the federal poverty level had the highest levels of any financial burden of medical care, and families with children up to age 17 years were more apt to experience financial burdens of medical care than families without children.

Overall, 1 in 3 families (36.0%) with children reported financial burden of medical care. One in 4 families with 2 or more adults and no children (25.2%) experienced financial burden of medical care, as did 1 in 5 families (20.1%) with only 1 adult and no children (adults living alone).

The presence of a family member without health insurance increased the likelihood that a family would experience a financial burden of medical care, the data show.

The findings emerged in an analysis of data for 2012 from the National Health Interview Survey (NHIS). The survey included questions about financial burden of medical care and health insurance coverage. Information was collected for 43,345 families.

"Previous reports based on data from NHIS examined financial burdens of medical care from a person-level perspective," note the authors of the brief, Robin A. Cohen, PhD,

and Whitney K. Kirzinger, MPH, from the NCHS. "One strength of NHIS is that information on insurance and financial burden is collected at the family level, giving analysts the ability to look at both family-level and person-level data. The family perspective is a useful expansion of previous research because having one family member who contributes to the bulk of the financial burden for medical care may place the entire family's ability to pay medical bills and overall financial well-being at risk," they explain.

"Financial Burden of Medical Care: A Family Perspective." NCHS Data Brief 142. Published online January 28, 2014.

LEGISLATIVE REPORT



Marjaneh Rouhani MD
CCMS Legislative Co-Chair
Email: mrouhani@doctor.com
If you have any concerns, please call my office phone (269) 969-6108.

STATE LEGISLATOR CONTACT INFO.:

Michigan 62nd District State Representative
Kate Segal-D
Phone toll free 1-888-347-8062
Email: KateSegal@house.mi.gov

Michigan 63rd District State Representative
Jase Bolger-D
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Michigan 19th District Senator
Mike Nofs-R
Phone toll free 888-962-6272
Email: ILike

**LEGISLATIVE
REPORT**

State of the Union

per Medscape News .

In his fifth State of the Union speech tonight, President Barack Obama skipped over the shaky rollout of the health insurance exchanges under the Affordable Care Act (ACA) and instead touted some big numbers that have come about.

As in 9 million Americans who have signed up so far for a private plan or Medicaid as part of healthcare reform.

As in another 3 million Americans under 26 years of age who have coverage under a parent's plan.

The president said he doesn't want to stop there, however.

"I ask every American who knows someone without health insurance to help them get covered by March 31st," said Obama.

"Moms, get on your kids to sign up. Kids, call your mom and walk her through the application. "To illustrate how the ACA has benefited America, Obama described how a woman named Amanda Shelley, a physician assistant and single mom, was able to obtain

healthcare coverage on

January 1 under the law only to undergo emergency surgery 5 days later.

"Just one week earlier, Amanda said, that surgery would've meant bankruptcy," Obama quoted her as saying. Obama threw down a gauntlet before Republican members of Congress whose opposition to the president centers largely on his landmark healthcare reform law. He urged them to stop trying to repeal it, and instead propose their own plans to "cut costs, cover more people and increase choice." "Let's not have another forty-something votes to repeal a law that's already helping millions of Americans," he said, referring specifically to legislative efforts in the Republican-controlled House. "The first forty were enough. We got it. We all owe it to the American people to say what we're for, not just what we're against." Those strong words aside, the president focused far more tonight on dollar signs than vital signs, dwelling on economic growth, job creation, upward mobility, and the need for a higher minimum wage

in addition to touching on foreign-policy hot spots such as Syria and Iran. Obama also framed topics such as immigration, energy, and education in terms of improving the economy. Such an emphasis should come as no surprise for a president seeking to boost sagging poll numbers and his party's fortunes, because that is where to find votes. According to a Washington Post-ABC News poll published yesterday, 86% of Americans say that the economy is an important issue going into the Congressional elections this November. The federal budget deficit and the way Washington, DC, works — or doesn't work — rank second as key issues (71% each), with healthcare reform not far behind (69%). Obama vowed to do his part to help end the political gridlock that shut down the government for 16 days last year and yielded so little finished legislation. He pointed to a bipartisan budget bill passed last month as an example of progress, and urged lawmakers to keep it up and "make

Continued on page 5

LEGISLATIVE REPORT

However, Obama said in so many words that if Congress does not act, he still will, using his executive powers to advance a growth agenda. "America does not stand still — and neither will I," Obama said. "So wherever and whenever I can take steps without legislation to expand opportunity for more American families, that's what I'm going to do." In a GOP response to Obama, Rep. Cathy Rodgers (R-WA) cast Obama as a champion of Big Government and Republicans as the party of individual choice and free markets. As a counterpoint to Obama's story of Amanda Shelley, Rodgers offered a case study of how the ACA has hurt instead of helped Americans. Rodgers described a woman in her state named Bette "who hoped the president's health care would save her money, but found out that her premiums were going up nearly \$700 per month." "No, we shouldn't go back to the way things were, but this law is not working," said Rodgers

Congratulations!

Doctors Collins and Ptacin Receive Leadership Award.



Dr. John J. Collins



Dr. Philip C. Ptacin

Dr. John J. Collins and Dr. Philip C. Ptacin are the 2013 recipients of the Dale G. Griffin Healthcare Leadership Award for their body of work revolving around the creation of the Nursing Clinic of Battle Creek 25 years ago. The honor which recognizes exemplary contributions that improve the quality and accessibility of health care in greater Battle Creek, is presented annually at the Sherwood B. Winslow, MD Distinguished Lecture-ship Program.

COMMUNITY HEALTHCARE CONNECTIONS

DONATIONS ACCEPTED

For your useful equipment and medication disposal, please consider donations to *Community HealthCare Connections (formerly Nursing Clinic of Battle Creek)*.

Samantha Pearl,
Executive Director,
Community HealthCare Connections
(Calhoun Health Plan & Nursing Clinic of Battle Creek)
190 East Michigan Ave,
Ste 385
Battle Creek, MI 49014
(269) 969-6461
spearl@chcconnections.org.

2014 CCMS EXECUTIVE COMMITTEE

at the 5:30
meetings...

President - Gunjana Bhandari, MD
President-elect - Satya B. Chaparala, MD
Vice President - Sridhar Chalasani, MD
Secretary / Treasurer - Jahandar Saifollahi, MD
Immediate Past President - William J. Comai, DO
3rd District Director - John Schwarz, MD
Legislative Chair - Marjaneh Rouhani, MD
Michigan Society of Hematology & Oncology - Stephen L. Smiley, MD

Trustees (3-Year Terms)

Christopher M. Flynn, MD, exp. 2014
Patrick Sweeney, MD exp. 2014
Kari Formsma, MD, exp. 2015
Maddur Badarinath, MD, exp. 2015
Marjaneh Rouhani, MD, exp. 2016
Karl Loomis, MD, exp. 2016

MSMS Delegates (1-Year Term)

Raakesh C. Bhan, MD
James H. Timmons, MD, PhD

Alternate Delegates (1-Year Term)

Daniel C. Hood, MD
Jeff M. Jones, MD

Executive Director

Jeanne Morales

Elkmoss Corner: "Choir"

I always thought that choirs dated back to medieval times, and that probably is true at least for church music. I believe true choirs started with Gregorian Chants, but of course, have improved quite a bit since. Some choirs today are major primetime productions, augmenting services for thousands in their congregations. Such developments have not come to my church, however. I think it more closely relates to the Renaissance period. We do sing in parts, but not always on key. What we do well, however, is "make a joyous noise unto the Lord."

While growing up, I not only sang in a church choir, but also learned a little about singing in the A Cappella Club in high school. I really did not have the time to devote to singing in undergraduate school, the Army, or even medical school. Another resident in my program not only sang in his church, but was a soloist in theater productions during his three years in training. I was much too intimidated to try singing with him.

By the time I started private practice and married Mrs. Elkmoss, I had lost interest in choirs all together. Mrs. Elkmoss (a much better singer than me), even if she was interested in the choir, was much too busy raising our three little Elkmosses to be able to participate. Besides, the director was an overbearing man (although brilliant choir leader). After years of putting up with obnoxious professors, drill sergeants, and attending physicians, I was not about to subject myself to such a hard driving taskmaster.

Several years ago, however, the choir changed. The old director got ticked off with the pastor and left, and a very pleasant leader stepped up to help direct the group. He was a former band member in the Armed Services for many years before retiring and was literally "God-sent" to our church.

So after more than thirty years without singing, I joined our church choir. I read somewhere that an ideal choir needs to sing precisely in tune and with correct volume, read and pronounce the text accurately, and sight-read music fluently. We could not and cannot to this day, in spite of a director who has the patience of Job. The attendance of the choir practice varies greatly- from as many as fifteen members to as few as one.

The average age of the group is somewhere around seventy, and the backgrounds of the participants are quite varied.

Most small church choirs usually have trouble with getting enough men to participate, but the strong part of our little group is that we have plenty of basses and tenors. Granted, a retired real estate agent, a lady, has been kind enough to sing in the tenor section. She is really a delightful person and a great singer. She forms the core of the tenors. The only other person in the tenor and bass section that can read music is a retired school superintendent. He was a bass and I depended on him greatly. Unfortunately for me and the bass section, when he lost his wife of more than 60 years, he moved into the tenor section

Elkmoss Singing in the Choir



Fortunately, the Almighty is compassionate, kind, understanding, and hopefully tone deaf!

Elkmoss *(continued)*

next to the charming retired real estate lady who had lost her husband of many years as well. I do have to say they make wonderful music together.

We have a couple that are retired school teachers. The husband actually sings in a city vocal group. He is quite tall, knows how to read music well, but sings off key. My barber, an elderly guy, recently lost his wife and joined the choir for the comradeship. He is also a terrible singer, but well loved by our group and his presence encourages us to sing louder so as to drown him out.

The only person in the bass section that is younger than me is a sometimes president of the congregation. He has an interesting personality to say the least and he does carry a tune better than I do. The biggest difficulty we have with him, besides a tendency to constantly chatter during practice, is with his nervous tic. He always coughs just before and just after his part. It probably would not be so annoying to me if he was on the opposite side of the room, but he is always sitting beside me. I sometimes want to reach for a hymnal and bop him over the head. (Such thoughts make it obvious a need to go to church more often and ask for forgiveness.)

The most spectacular member of our choir is Michael. He is in his early sixties, but grew up in a state institution. About thirty years ago, the state legisla-

ture decided to do away with such institutions and absorbed as many patients as possible in the community. Mike's community was Swampville and perhaps largely because of our church support, he has done quite well. Only on rare occasions has he gone off on a deep end to where he needs to be hospitalized and have his medicines readjusted.

Michael is quite intelligent and will frequently interrupt the choir director to clarify something in the music. At first we all would cringe when Mike spoke up, but in a way we now look forward to his comments. The director always gives him a "thank you" and Mike has a look of pride with the recognition.

It is with this group of quite interesting people that the choir director works to provide music for the church service. For Easter and Christmas services he usually prepares something special, and this Easter our choir worked particularly hard on the music. It required several weeks of practice as well as a couple extra sessions until the director felt they were ready. I say "they" because it was Spring Break time for Mrs. Elkmoss and we were out of town. We came back just in time for the Easter Service, so I sat in the congregation while our choir sang its hymn.

I cannot say the choir sounded perfect, but to me (perhaps because I know the members and how hard they worked), they were wonderful. It brought a lump to

my throat to hear them.

Afterward, Mrs. Elkmoss wondered why I was so emotional, and I had a little difficulty understanding it myself. Then I remembered an experience I had when in Officer Candidate School, forty years earlier. It was a rigorous six-month experience, and the final hurdle before becoming seniors in the program was a three-day ordeal. The officers-to-be finished up by coming back to the company grounds after an all night forced march, setting up tents, and undergoing a full field inspection. I had sprained an ankle just before the exercise, and was forced to stay at company headquarters doing paperwork while all the company went on the grueling mission. I remember looking out of the company headquarters window, watching with pride how my company stood tall for the inspection, with tears in my eyes. One might think I would have been glad to miss such a difficult exercise, but I was not. I was greatly disappointed to not be with my comrades at such an important time.

Perhaps that was some of the reason for my emotions of not being part of our choir and making "a joyous noise unto the Lord".



*Herman J.
Elkmoss,
MD*

Do you have a new colleague in your office?

Calhoun's MSMS Member Consultant, **Gary A. Huyge**, would be pleased to meet with them to answer their MSMS membership questions. To schedule a visit, please contact him at Phone 616-826-4652 or Email GHuyge@msms.org.

Michigan State Medical Society
120 W Saginaw East Lansing, MI 48823
Main Phone: (517) 337-1351
Website: www.msms.org
Email: msms@msms.org



MICHIGAN STATE MEDICAL SOCIETY
120 W. Saginaw, Lansing, MI 48823
msms@msms.org • www.msms.org
517-336-5762

State and County Medical Society Membership Application

CALHOUN COUNTY MEDICAL SOCIETY
PO Box 278
Battle Creek, MI 49016-0278
269-660-0893 • Calhouncms@yahoo.com

Do you work 20 hours or less per week? YES NO
Is your spouse a member of MSMS? YES NO
Is this the first year you have practiced in Michigan? YES NO

Please PRINT or TYPE

FULL NAME _____ MD or DO (Circle One)

HOME ADDRESS, CITY & ZIP _____
Area Code & Telephone Number _____

OFFICE ADDRESS, CITY & ZIP _____
Area Code & Telephone Number _____

PRACTICE NAME _____
Office Fax Number _____

EMAIL ADDRESS _____ For mailing, please use (check one): Office address Home address

BIOGRAPHICAL DATA Sex: Male Female Birth Place _____ Date of Birth _____
Month Day Year

Maiden Name _____ Spouse's Name _____

Government Service (check one): Military National Health Service Beginning Date _____ Completion Date _____

EDUCATION (please complete or attach CV)

INSTITUTION	LOCATION	DEGREE	YEAR GRADUATED	
			Beginning	Ending
College/University _____	_____	_____	_____	_____
Medical School _____	_____	_____	_____	_____

INTERNSHIP, RESIDENCY, AND FELLOWSHIPS	SPECIALTY	COMPLETION DATE
_____	_____	_____
_____	_____	_____

License: MI # _____ Date Issued _____ ECFMG # _____

License held in other states/countries (list states or countries) _____

PROFESSIONAL DATA Present Type of Practice (check appropriately):

OFFICE BASED: Solo Hospital Based Teaching Research Government
 Group Practice Name _____ Other (specify) _____

Specialty _____ Subspecialty _____

Board Certifications (list specialties & dates) _____

Present Hospital Appointments (list dates) _____

Teaching Appointments (list dates) _____

Previous Medical Society Membership (list dates) _____

Specialty Society Memberships _____

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 CALHOUN 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 Calhoun County Medical Society, or FAX to 517-336-5797. THANK YOU!



Count MSMS Among Your Blessings...

To my colleagues:

As another year comes to a close and as you take stock of the blessings in your life during this season of reflection, I ask you to take a moment to consider what the Michigan State Medical Society has accomplished for your profession in the last year.

Here's a sampling:

- Passing tort reform legislation
- Stopping nurse scope expansion
- Guiding you through Affordable Care Act requirements
- Helping your practice achieve Meaningful Use of EHR
- Preparing your practice for ICD-10
- Fighting to repeal the failing SGR formula
- Protecting graduate medical education funding

Now think of what challenges lie ahead in 2014 for medicine—Health Insurance Marketplace, ICD-10, Meaningful Use of EHR, emerging systems of care, etc.—**are you prepared to face these alone?**

By [renewing your MSMS membership dues now](#), you won't have to. You will have the peace of mind of knowing that you can start the New Year with a silent partner in your corner and an effective advocate at the highest levels of government. And renewing now could save you money at tax time because up to 87 percent of your dues may be tax deductible.

We appreciate your membership, we value your contributions to the profession, and we wish you a healthy and Happy New Year!

Kind regards,
Ken Elmassian, DO
MSMS President

Medicaid Health Plans Receiving Primary Care Payment Increases

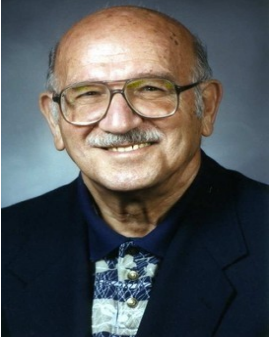
Last month, Medicaid health plans received their initial payment for the primary care increase. There's currently no timeline by which the health plans will release this money to the physicians. However, it will be retroactive to January 1, 2013. There might be a few health plans sending the payments through the PO/PHO. But 100% of the money is to be paid to the physician, so the PO/PHO will not be keeping any portion of that money.

If you have questions about the payment timeline or whether the money will be paid through a PO/PHO, please contact the health plan directly.

For more information, contact MSMS Reimbursement Advocate Stacie Saylor, CPC, CPB, at 517-336-5722 or ssaylor@msms.org.

[Check out MSMS's Dynamic New Website](#)

MSMS is proud to launch its new website. Members will be able to more easily log onto the website to pay dues and complete other transactions. The new homepage features a dynamic rotating slideshow of top news and promotional items. In addition, members and their staff will appreciate the enhanced resources area call "For Practices," which includes the resources they need every day, such as reimbursement and payers, HIT, quality and safety, legal and regulatory topics, insurance services, public health, health professions, and more.



Honoring our CCMS Friend in Passing.

Patrick S. Ferazzi, M.D., 90, of Battle Creek, passed away peacefully at home surrounded by his loving family.

Patrick was born January 15, 1924 in Naples, Italy to Frank and Mary (Terra-nova) Ferazzi. He came to the United States through Ellis Island with his family at the age of 15 months. Patrick grew up in Bayonne, NJ, where he graduated from high school at the age of 16. He received his undergraduate degree and graduated from Medical School from the University of Virginia. Patrick did his residency in St. Louis, MO and his internship in Detroit. Patrick served his country as a Base Physician while serving in the U.S. Navy. Dr. Ferazzi served the Battle Creek area community for 35 years as a dedicated Pediatrician, retiring in 1990 from Northside Pediatrics.

Dr. Ferazzi was a Chief of Staff at the former Leila Hospital, now Bronson Battle Creek. He was a member of the American Medical Association. He enjoyed helping his children with their homework, writing papers and poetry. Pat tinkered with everything electrical and mechanical and was very inquisitive. He liked working in his yard, battling the squirrels, woodchucks, moles and protecting his bird feeders. He was proud of his ability to grill the perfect steak for his family. He loved following the financial markets, the New York Yankees, the Detroit Lions and driving as many miles as it took to find the perfect deal. He was very competitive at board games and enjoyed playing cards and solving crossword puzzles. He was an encyclopedia of trivia, witticisms and Dadisms.

Patrick was preceded in death by his first wife, the former Charlene Joss in 1974. He married Bonnie J. (King) Maurer on November 25, 1977 in Battle Creek. Surviving are Bonnie, his wife of 36 years; children, Steve Ferazzi and Patricia "Tish" Ferazzi both of Kansas City, MO, Frank (Yolanda) Ferazzi, Tom (Lori) Ferazzi and Chris (Tammy) Ferazzi all of Houston, TX, Kristen (Ken) VanDalsen and Gianna (Mark) Ferazzi-Mooney both of Battle Creek; eleven grandchildren, Ellen and Sydney Vessels, Emmalie, Ellison and Nick Ferazzi, Eric and Mallory Ferazzi, Katherine Ferazzi, Taylor VanDalsen, Bonnie Ferazzi_Garcia and Angela Ferazzi Mooney; and his mother-in-law, Ruth King of Quincy. In addition to his first wife, Patrick was preceded in death by his parents; two sisters, Frances Gudicello and Natalie Ferazzi Lauritano and his father-in-law, William King. Funeral services for Dr. Ferazzi's family will be officiated by Chaplain James Codde. Interment will be held at Memorial Park Cemetery. Arrangements are by the Farley-Estes & Dowdle Funeral Home.

Memorial contributions may be made to Parkinson Foundation, 30400 Telegraph Rd. Suite 150, Bingham Farms, MI 48025-5819; Susan G Komen for the Cure , 229 E. Michigan Avenue, Suite 245A, Kalamazoo, MI 49007-6402; or Lifespan Good Samaritan Hospice Care, 166 E. Goodale Ave., Battle Creek, MI 49037-2728. Personal messages for the family may be placed at www.farleyestesdowdle.com.

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CALHOUN COUNTY MEDICAL SOCIETY

*** 2014 SECOND-TUESDAY MEETINGS ***

EXEC. CMTE. 5:30 P.M.: Battle Creek Country Club

SOCIAL. 6:00 P.M. GEN. MEMBERSHIP MTG 6:30 P.M.:

Feb. 11 – BC Country Club	Sept. 9 – BC Country Club
Mar. 11 – BC Country Club	Oct. 14 – B.C. Country Club, HCLF Winslow Lectureship
Apr. 8 – BC Country Club	Nov. 11 – BC Country Club
May 13 – BC Country Club	Jan – President’s Celebration
June 10 – Ex. Committee Only	

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Since 1839

PO Box 278
Battle Creek, MI 49016-2078

Phone Messages / Fax:
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Email: calhouncms@yahoo.com
Jeanne Morales, Executive Director

Articles submitted and opinions
expressed in *The Bulletin* are views of
the writer and not necessarily those of
Calhoun County Medical Society. Articles
must have author's signature, address
and phone. They can be sent to Calhoun
County Medical Society at the address
above.

NEWSLETTER DEADLINE:
*The 15th day of each month
prior to published month.*

A Nonprofit Physician's Professional Organization

BIOGRAPHY: A Society is a group of professionals with a common trade that offers networking and referrals, professional development and educational opportunities. The medical society offers enhanced services at the county level, guided by the professional state level. Calhoun County formed one of the earliest medical societies in the state of Michigan in 1839; Michigan State Medical Society formed in 1866.

MISSION STATEMENT: The purpose of the Calhoun County Medical Society / Michigan State Medical Society is to offer opportunities for networking, leadership and mentoring, grassroots medical legislative involvement, continuing medical educational needs along with personal and professional support services at the county, state, or national levels.

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<http://www.sw-rehab.org>
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Battle Creek, MI 49016-0278
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