



WESTCHESTER PHYSICIAN

September 2016

Volume 32, Issue 8



PRESIDENT'S MESSAGE

GIVING UP PRIVATE PRACTICE AND THE CORPORATIZATION OF MEDICINE
(PART 2)

In my first Article I discussed what my patients and I, and many doctors, are going through; because of the new economic realities of medicine; and what it is doing to patient care. Now I will focus on the “system” that has lead us down this pathway, and what it is doing to our society. The ultimate question to answer is why is this happening and why is it working, at least for now. The “bottom line” is money. The cost of medicine has become very high. It exceeds 25% of most state budgets; about 20% for the federal budget; it is over 10% of most companies’ expenses and rising every day. This monetary pressure on society and the nation has led many to consider ways to control costs and limit future growing expenditures. Medicare is funded primarily from three sources: general revenues (41%), payroll taxes (38%), and beneficiary premiums (13%); while Medicaid is funded totally through general revenues (taxes).

Problem # 1: The cost of medicine is very high. (We will talk about whether it is “too high” later).

In response to this growing “threat”, government has implemented many changes to its “reimbursement” for medical services, that then are followed by Insurance Companies. Of course it makes sense that the Insurance industry would keep in line with government policies; but the functional outcome is very different. While government is trying to reduce losses for the public good, the insurance industry just makes more and more money.

Problem # 2: As the largest Insurance Company in the world, the US government, cannot act as a guardian or watchdog for the people, as it is too interested in the monetary outcome for itself (conflict of interest).

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GINO C. BOTTINO, MD
President, WCMS

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UPCOMING EVENTS

WCMS Legislative Breakfast
Sunday, September 25, 2016
C.V. Rich Mansion
305 Ridgeway
White Plains, New York

WAM 7th Annual Golf Outing
Thursday, October 6, 2016
Westchester Country Club
99 Biltmore Avenue
Rye, New York

WESTCHESTER PHYSICIAN

Published by the
Westchester County Medical Society
333 Westchester Ave., Suite LN01
White Plains, NY 10604
914.967.9100 / FAX 914.967.9232

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FROM THE EDITOR...
PETER J. ACKER, MD
LABOR DAY



I am writing this on Labor Day, the traditional last day of summer. The sun rose at 6 :27 this morning, a couple of minutes later than the day before. This slow shift of morning light over July and August have been subtle reminders that the summer was slowly receding, like sand sifting out of an hour glass. Before long I will be rising in the dark to go the hospital for rounds and then trudging out of my office in the dark to start my homeward commute. I remember as a teenager laughing at the meticulous attention my father paid to the times of sunrise and sunset. I get it now – he commuted from Connecticut and similarly in winter he did not see his house during the light of day. The simple pleasures of checking the vegetable garden before work or walking the dogs at the end of the day in day light are denied by that cruel stealing of the morning and late afternoon light.

Summer is a time of celebrating the light at the beach and countryside. My pediatric office develops an almost languid air. Many of our patients of safely ensconced in distant sleep away camps and many of the others are with their parents on vacation. By August, however, the atmosphere becomes anticipatory, marked by the almost imperceptible shortening of the days. School and fall are beckoning and our collective mien becomes more solemn. Labor Day is the last hurrah.

This “last day of summer” blues mood leads me to think about our profession. Clearly we are in the midst of seismic changes. Solo and small group practitioners, the backbone of primary care for decades, have been bought up in the frantic move to consolidate, to create large organizations that will reduce economies of scale and provide clout in the fight for reimbursements. Many physicians I have talked to in the recent months are thinking hard about their options, struggling to find their place, a stable piece of earth to sink their roots into. A common lament I hear is “If I were doing this over again...”

Some of my colleagues have told me that they are advising their children not to go into medicine as a career. This gives me pause, since two of my three daughters have chosen medicine, pediatrics in fact. My third daughter is thinking about that other profession in which current practitioners are discouraging their kids from entering: law. Yet, I can’t help feel excited as my two pediatric daughters call me to discuss interesting cases or to ask my opinion on a clinical matter. As a side note, I will say that while initially the flow of information was mainly from myself to them, it has recently undergone a tidal shift: I am receiving more than I’m giving!

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Westchester & Putnam County Medical Societies Legislative Breakfast

Sunday, September 25, 2016
10:00am - 12:00pm
C.V. Rich Mansion
305 Ridgeway
White Plains, NY 10605

Come, listen to and chat with your elected representatives and their challengers as they share their views on issues important to physicians and the practice of medicine prior to the very important fall elections.

RSVP TODAY to Janine Miller, 914-967-9100, by email to jmiller@wcms.org or fill out the form below and fax to 914-967-9232

There is no charge for members and their spouse to attend this event
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Email: _____

PRESIDENT'S MESSAGE

GIVING UP PRIVATE PRACTICE AND THE CORPORATIZATION OF MEDICINE (PART 2)

(Continued from page 1)

Everyone knows that it is the doctors that spend all the money (on behalf of their patients), and therefore **they** must be controlled to control the outflow of money. But the government has no way of dealing with or controlling how doctors spend the money, as they do not understand what it is to function as a doctor.

Problem # 3: (It may sound simplistic but) Only doctors can be doctors. Despite this, no doctors have been invited to be on the panels that have developed our medical system including the Affordable Care Act.

Although doctors direct the cost of medical care, they are not the recipients of those monies. Doctors and nurses account for about nine cents of the medical dollar. The cost of medicine has skyrocketed due to 4 factors: 1) the progressive expensive technology delivered by a corporate system; 2) the manpower intensive nature of taking care of people, which is greatly expanding with all the ancillary services being created in medicine; 3) laws that have forced Hospitals and doctors into forming huge corporate entities to deliver care; and 4) in the US, an out of control Legal System that is choking the entire Medical System, to the great benefit of the lawyers, but no one else.

Problem # 3: While government imposes controls on, and delivers poor reimbursement to patients, hospitals, and physicians in an attempt to control costs; corporations follow suit, not to control costs, but to increase revenues. Government cannot criticize these corporations, as they are just doing what the government itself did!

Examples of corporations being out of control and hurting the public need and good are easy to find. Just recently in the news there has been stories of 2 drugs: Daraprim and Epipen. In both cases an investment company, looking for a quick profit, found a drug that was cheaply priced and bought the rights to sell it from the pharmaceutical company that made it. Then they just jacked up the price by the hundreds-fold. They did not invest anything into the development of the drug or change its manufacturing at all. Although these companies were criticized and pressured to lower the cost of the drugs (not to

what it was but more reasonable), they are making millions and millions for no good reason at all. Many of us now are going online to order medications from Canada and other countries, despite this being technically illegal. There is no practical explanation for this except the greed of a few hurting the public interest.

Problem # 4: The differential billing of goods and services to US corporations, Government, and consumers verses the huge mark-downs to other countries can only be explained by greed.

Many of the pharmaceuticals spend millions to bring a new drug to market; but then gouge the public for billions for these lifesaving and improving medications. An example of this is Harvony for hepatitis C. This medications' basic research was done with government funding. Like many of the medications we use. Then the company took this promising drug through human testing, spending lots to get to market. They then set the price at \$90,000.00 for the course of this life saving medication. But in France and other countries, the medication is sold for a small fraction of this price!

Problem # 5: The US Government allows the corporate system to operate with little to no constraints (where does the money to run political campaigns come from - corporations and those that run and own them?).

It is no secret that one of the biggest costs of our system is the pressure of litigation and medical malpractice. Every piece of equipment, every bit of training, any policy generated, every action of the medical staff, all subject to intense medical scrutiny, so that lawyers can find a way to enrich themselves. Most countries in the world have no medical malpractice to deal with, and those that do have very limited recovery of monies. Clearly the allowance of fee spitting, and contingency percentage fees, greatly contributes to their corruption. Think about how much medical malpractice would change if the lawyers could only charge their hourly fees?

Some states have been successful combating this problem by capping awards, greatly reducing the insurance burden to hospitals and doctors. This has not been the case in the Northeast, and New York remains the state with the highest cost of medical malpractice. With a government where most of the politicians are lawyers, how can this ever change?

(Continued on page 7)

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PRESIDENT'S MESSAGE

GIVING UP PRIVATE PRACTICE AND THE CORPORATIZATION OF MEDICINE (PART 2)

(Continued from page 4)

Problem # 6: With most of our lawmakers being lawyers, they will never vote to decrease their professions' ability to make millions.

So what has been the response of our politicians to address the ever rising cost of health care?

Government does what it does best; organize the system into a bureaucratic structure, and impose corporate watchdog bureaucracies in oversight. All costing extraordinary amounts of money, none of which goes to patient care! The management fee for CMS in 2016 was over 4 billion dollars! Doctors and hospitals are forced to comply to more and more oversight demands, leading to a system that responds not to patient's interests, but to the system itself. Unfunded mandates continue to expand, causing resentment and anger among medical professionals, making the working environment mentally unhealthy.

Problem # 7: Progressive bureaucracy leads to more oversight than care, the delivery of mediocre/poor care, and more and more bureaucracy with wasted time and money!

With the cost of this bureaucracy shifting to the doctors and the public, the "cost of doing business" for hospitals and physicians has risen to a level that, as individuals, we cannot cope with. It has been said that for every doctor practicing there are 7 people watching over them.

Because of the above, doctors and hospitals are coalescing into ever expanding health care networks, ie. corporations. Because these systems are so large, they can effectively fight the government and Insurance corporations.

With this system doctors have become the hired help (see first article) and patients now have insurance that costs more while providing less! Worse, is that for the average family, the amount that they must spend before the insurance provides funding is greater than the premium; meaning that the real cost to them is much greater. What this system comes down to is a "catastrophic insurance plan" while routine costs are self-funded.

Problem # 8: No matter what government has done to control costs; the cost of medical care just keeps going up. Not only is what they are doing not helping, it is adding to the problem.

This "corporatization" is leading to corporate "war"

against not only the government and the insurance industry, but each other (of the healthcare systems). These corporations are now spending millions of dollars in advertising to get "market share." Insurance companies spend the same to get clients. Pharmaceuticals spend advertising money to get the public to push doctors into using their drugs and not the other companies' drugs. Dealing for health care dollars is now in the hands of expanding corporate interests. We are all praying now to the god of money.

Problem # 9: A corporate medical system is morally bankrupt! And doesn't serve the public interest.

Do not get me wrong, I am not against a corporate system, or profit-motivated endeavors; but who is really watching out for the citizenry, and controlling a system that is out of control?

Remember that corporations are only legal constructs of the government in order to allow effective handling of goods and services to the public. They are not citizens of the US. These creations need to be controlled for the common good, and not allowed to control us.

In the past our medical system was "collegial" based on individual doctors doing what was best for their patients. The heart of this "system" was the patient-doctor relationship. The patient-doctor bond is still the main characteristic of the medical profession and providing good medical care. Today it has become the patient-government-insurance-doctor relationship; every day the patient-doctor relationship is further attacked and eroded.

But the expanding complexities of the medical system, and its monetary pressures, have forced a change. In most countries this has led to a 2 tier system with socialized medical care for the masses, and private medical care for those who can afford it.

Problem # 10: The fundamental question is: Is the cost of medical care too high, or must the corporate attitude change because it is wrong?

Is the care of the population, medically at least, as important as it's security? Is the cost of medicine less important than the cost of guns and bombs? What is the priority of the people? Remember the old saying; "Without your health you have nothing!"

Our current system is clearly failing and must change. It is not a question of if it will fail (monetarily) but when. So where do we go from here?

Stay tuned for my next article.





**Department
of Health**

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Governor

HOWARD A. ZUCKER, M.D., J.D.
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SALLY DRESLIN, M.S., R.N.
Executive Deputy Commissioner

Legislation Enacted Regarding Drugs used for Detoxification or Maintenance Treatment of Opioid Addiction in Medicaid Fee-for-Service (FFS) & Medicaid Managed Care

Per changes to Social Services Law section 364j, and Public Health Law section 273, prior authorization is not allowable for initial or renewal prescriptions for preferred or formulary buprenorphine or injectable naltrexone when used for detoxification or maintenance treatment of opioid addiction. Food and Drug Administration (FDA) and Compendia supported frequency, quantity and/or duration limits may continue to be applied.

To obtain preferred/formulary drug listings and plan limitations please see the following websites:

Medicaid FFS Preferred Drug List and Pharmacy Prior Authorization Programs- <https://newyork.fhsc.com/>

Medicaid Managed Care Pharmacy Formulary and Benefit Information- <http://mmcdruginformation.nysdoh.suny.edu/>

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ANNUAL POOL PARTY & BARBECUE

On Sunday, August 21, 2016 Robert & Kira Geraci Ciardullo opened their home for our Annual Pool Party and Barbeque. More than 50 people were in attendance for the event. Special guests included: Dr. Malcolm Reid, President MSSNY; Dr. Adolph Meyer, Past President Kings County; Dr. Dr. Michael Goldstein, Past President New York County. We enjoyed the beautiful sunshine and the amazing atmosphere of the Geraci -Ciardullo home. A wonderful time was had by all!

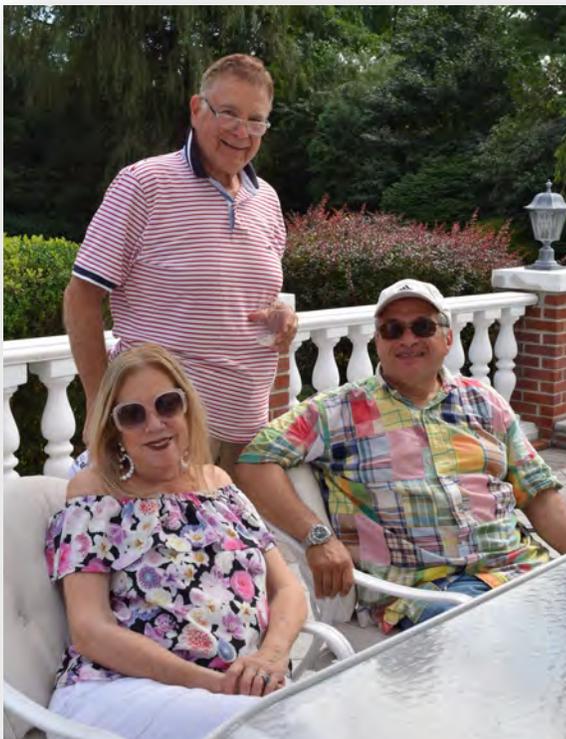
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Dr. Peter Liebert, MaryAnn Liebert & Dr. Adolph Meyer



Dr. Kira Geraci-Ciardullo & Dr. Peter Liebert



Emily Reid, Dr. Malcolm Reid; Belle Goldstein & Dr. Michael Goldstein



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Dr. & Mrs. Wojcik and friends



Dr. Thomas Lee & Dr. Michael Goldstein



John Pilkington, Esq.; Belle Goldstein; Mary Ellen Pilkington and Emily Reid



Dr. Elaine Healy & Bruce Davison



Dr. Joseph Tartaglia & Dr. Norberto Torres-Otero

YOU CAN PLAN ON IT

Webster's definition of "planning" is simple: *the act or process of making a plan to achieve or do something.*" However, when it comes to financial planning for doctors, things can quickly evolve from simple to more complex. You can plan on it: from medical school through residency to single or group practice, physicians' lives, finances, and goals are continually evolving. As complexity builds, working with a knowledgeable and experienced financial planner can both help you realize your life goals and also avoid missteps that can easily derail the best-laid plans.

"Do I really need a financial planner?" is a logical question that in our experience many medical professionals have asked themselves. Some things to keep in mind as you answer the question:

- *As my practice, professional obligations and family all grow, do I have the time to devote to keeping a financial plan on track and making adjustments when appropriate?*
- *Do I have the time and energy to keep pace with financial market and other developments that can have a critical impact on my personal and family finances?*
- *Can I properly assess all the risks that can arise as my career progresses – business and legal risk, estate planning, and adequate protection of my earning power?*

Of course, physicians have the ability to make important financial decisions. We provide guidance and input on key areas such as retirement planning, investments, family needs, income protection, and philanthropic goals. The client uses our process to validate their decision making and to realize their overall vision. He or she makes the final determinations on the broad direction and content of the plan.

Below are a few points a good financial planner might raise with you in an introductory conversation:

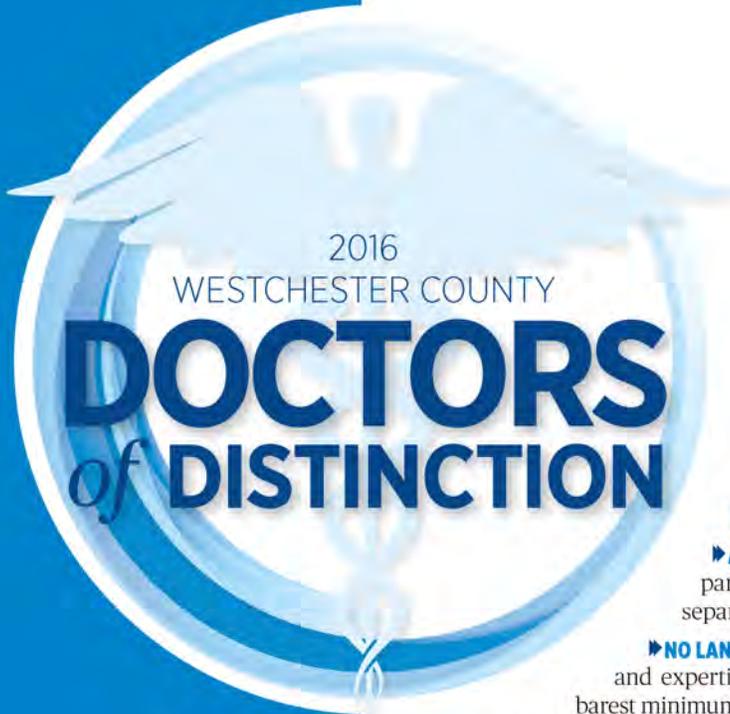
- ***How did you get started in your current practice or position?*** This is more than a polite conversation starter. Your answer provides insight into what is important to you, your aspirations, and other priorities and interests.
- ***What is the legal structure of your practice?*** Whether you practice as part of a team or as an individual, the specific legal structure impacts the risk profile of the practice.
- ***Do you have a specific retirement plan in place?*** Many medical practitioners are so deeply engaged with the practice or other responsibilities that they do not take time to craft a specific retirement plan with appropriate funding, asset allocation, etc. A good retirement plan is a reflection of your post-retirement goals and desired life style.
- ***Do you have appropriate asset protection?*** Creating a solid asset protection plan is critical in an environment where malpractice suits are common, and tax planning is imperative.

As a financial planning team, we recognize the importance of utilizing other professional resources, too, such as attorneys and CPAs who can function like a board of directors to assure that a plan is comprehensive and that all bases are covered.

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By: Ron Pac and Eric Gerhard
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A UNIQUE AWARDS PROGRAM CELEBRATES THE ACCOMPLISHMENTS OF PHYSICIANS IN WESTCHESTER COUNTY JUDGED BY A PANEL TO BE THE MOST EXEMPLARY IN THE PROGRAM'S CATEGORIES. THIS PRESTIGIOUS FOURTH ANNUAL EVENT IS CO-FOUNDED BY ACCOUNTING AND CONSULTING FIRM CITRIN COOPERMAN, THE WESTCHESTER COUNTY BUSINESS JOURNAL AND WESTCHESTER COUNTY MEDICAL SOCIETY.

Open to nominations from the public, this is an opportunity to recognize those physicians who make an impact each and every day on people's lives.

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SEPTEMBER 14**

NOMINATE A DOCTOR IN THE FOLLOWING CATEGORIES

- ▶ **ALL IN THE FAMILY:** In recognition of husbands and wives, parents and children or siblings who work together in a practice or separately, dedicating their lives to make other lives better.
- ▶ **NO LAND TOO FAR:** In recognition of a doctor who donates his or her time and expertise to countries where medical care is either nonexistent or at barest minimum.
- ▶ **CUTTING EDGE:** In recognition of a doctor who spends endless hours working on research and clinical trials to save lives.
- ▶ **CARING FOR ALL:** In recognition of a doctor who turns no patient away, but rather devotes time and effort to philanthropic cases.
- ▶ **FEMALE TRAILBLAZER:** In recognition of a female doctor who has made great strides in empowering other women to advocate for themselves and be aware of their specific medical needs.
- ▶ **PROMISE FOR THE FUTURE:** In recognition of a medical student who excels in his or her studies and will bring compassionate care and a fresh perspective to the medical profession.
- ▶ **LIFETIME ACHIEVEMENT AWARD:** In recognition of a physician respected for a lifetime career in the medical profession.

To nominate, visit westfaironline.com/doctors or call Danielle Brody at 914-358-0757.

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CME - Physician Wellness: Mindfulness and stress management for the busy doctor.

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Beginning Monday, October 17th

This course will run 8 weeks (no class on 10/31).

8:00pm – 9:00pm (Online course)

Please contact jmiller@wcms.org to register

Presented by Mark Bertin, MD

Together with the Westchester County Medical Society, Dr. Mark Bertin will present his class, *Physician Wellness: Mindfulness and stress management for the busy doctor*. This eight week course is designed to reduce the risk of chronic stress and burnout that is on the rise. This program will be offered online to cut down on logistics. While live and interactive, anyone can log in from any internet-connected device. If you need to miss a class, recordings are available to watch at any time. We hope you'll be able to join us for this exciting trial program.

If you're a practicing physician, you don't need anyone else to tell you that the risk for chronic stress and burn out has been rising. A recent Mayo clinic survey found more than half of physicians today have at least one symptom of burn out. Excessive stress of this kind doesn't affect only your own wellbeing, but often affects communication and patient care.

Mindfulness-based stress reduction programs have been shown through hundreds of studies to decrease stress and anxiety, along with many other specific benefits. Smaller studies report improvements in how health-care providers feel, and suggest gains in patients' perceptions of provider empathy, as well as other measures. The evidence behind mindfulness has become so strong that is now considered 'mainstream' medicine instead of 'alternative' for the purpose of funding grants.

Most importantly, mindfulness is meant to be practical and accessible to anyone. It isn't specifically a meditation technique, nor does it aim for bliss, perfection, or the elimination of stress – none of which is possible. It also doesn't take a lot of time, and can be integrated into anyone's busy life.

What mindfulness really shows is that we can intentionally develop traits that help manage the stress and uncertainty of life. When we regularly train ourselves to be more focused, less reactive, and to settle ourselves throughout the day before stress takes over, our lives get easier. The best analogy is exercise. Work out, your physical health improves. Practice mindfulness, your mental health does.

Accreditation Statement

This activity has been planned and implemented in accordance with the Accreditation Requirements and Polices of the Medical Society of the State of New York (MSSNY) and the Westchester Academy of Medicine. The Westchester Academy of Medicine is accredited by the Medical Society of the State of New York (MSSNY) to provide Continuing Medical Education for physicians.

The Westchester Academy of Medicine designates this live activity for a maximum of 8 **AMA PRA Category I Credits™**. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

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Special offer for all WCMS members! Special Discounted Advertising Rates in the *Westchester Healthcare News*, *Boomer's & Beyond* and *Hospital Newspaper*.

The Westchester County Medical Society has formed a special partnership with *Healthcare News* that allows all physician members and their medical practices to receive a substantial discount of 30% on any marketing plans in the publications by *Healthcare News*.

Healthcare News is a respected monthly publication which focuses on health, wellness and other important trends in healthcare and the medical field. Started in 2006, *Healthcare News* has a circulation of nearly 100,000 with editions in Westchester, NY and nearby Fairfield County, CT. The target audiences are residents who seek the best health options, along with a diverse array of physicians aiming to promote their services in the community. Inserted into each edition of *Healthcare News* is *Boomer's & Beyond* publication for the ever growing 55 and over demographic.

In addition *Healthcare News* has a companion bi-monthly publication called *Hospital Newspaper* for which the advertising discount also applies. *Hospital Newspaper* has been a top source of news and information for medical professionals in the hospital industry since 2001.

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Mark Your Calendars!
Upcoming WCMS Board Meetings:

All Board meetings are held on Thursdays beginning at 6:00pm in the WCMS Headquarters located at 333 Westchester Avenue, Suite LNO1 in White Plains, NY. If you are interested in attending a meeting, please call or email our office.

- October 13**
- November 10**
- December 8**
- January 12**
- February 9**
- March 9**
- April 13**
- May 11**
- June 8**

(914) 967-9100—jmiller@wcms.org

FROM THE EDITOR...

PETER J. ACKER, MD
LABOR DAY

(Continued from page 2)

Here's the thing: at its core, the practice of medicine is immutable. When I enter an exam room and begin to interact with child and his parent, observing carefully, taking in and sifting information, formulating a diagnosis, I feel like Antaeus, the giant of Greek myth who derived his strength from contact with the earth. He was finally defeated by Hercules who adopted the stratagem of holding his opponent up in the air out of contact with the earth and he slowly weakened. Direct patient care is the "earth" from which I derive my "strength" and I must say that however Pollyannaish it may seem, I have never regretted the path I have taken. Don't allow those herculean forces to lift us from our earth. And to quote Dylan Thomas, "rage, rage against the dying of the light."



FEE WAIVERS FOR NON-COMPENSATED NYS LICENSE RENEWAL

A point of information for those physicians who have retired and are no longer compensated for medical care provided – a waiver of the fee for the registration of your license as a physician in the State of New York is allowed under the provisions of Section 6524(10) of the New York State Education Law. This law allows a waiver of the registration fee requirement for physicians who certify to the State Education Department that, for the period of their registration, they will only practice medicine without compensation or the expectation or promise of compensation. The waiver of the registration fee is limited to the duration of the registration period indicated by the affidavit below. <http://www.mcms.org/sites/default/files/resources/NC-Affidavit11-02.pdf> or see page 17.

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Affidavit of Non-Compensation

The University of the State of New York
THE STATE EDUCATION DEPARTMENT
Office of the Professions
Division of Professional Licensing Services
89 Washington Avenue
Albany, NY 12234-1000
www.op.nysed.gov

Name

Last

First

Middle

Address

Apt./Bldg.

Street

City

State Zip Code

Province/Country
If not U.S.

**Physician
License Number**

I am applying for a waiver of the fee for the registration of my license as a physician in the State of New York under the provisions of Section 6524(10) of the New York State Education Law for the registration period ending: _____ / _____.
Month Year

This law allows a waiver of the registration fee requirement for physicians who certify to the State Education Department that, for the period of their registration, they will only practice medicine **without compensation or the expectation or promise of compensation**. The waiver of the registration fee is limited to the duration of the registration period indicated herein. In consideration for that waiver, I affirm and agree to the following during the full registration period for which a waiver is granted:

1. I understand the above requirement for a waiver and to obtain this waiver I agree to practice medicine in New York without compensation or the expectation of compensation in accordance with Section 6524 (10) of the New York State Education Law.
2. I am not and will not be a shareholder, officer, director, member or manager of a Professional Corporation (PC), Professional Limited Liability Company (PLLC), or a Limited Liability Partnership (LLP). Or, if I am a shareholder, officer, director, member or manager of a PC, PLLC or LLP, that I have attached documentation that verifies that I am not being compensated for the practice of medicine by these business entities.
3. I understand that the fee waiver associated with this registration is valid only for the registration period specified above. If I seek to continue to practice medicine after the above registration period is ended, I must renew my registration and if I desire a waiver for the next registration period I must file a new affidavit.
4. To notify the New York State Education Department in writing at the address at the bottom of this page within 30 calendar days of any change in my compensation status that could affect my eligibility for this registration fee waiver;

AFFIRMATION

I affirm that the information provided herein and submitted herewith is true, complete and correct and that this information will be for all purposes the equivalent of an affidavit and if it contains a false statement, shall subject me to the same penalties for perjury as if I had been duly sworn.

Signature _____/_____/_____
mo. day yr.

Subscribed and sworn before me this _____ day of _____, 20_____.

Notary Public: _____

Notary ID number: _____ Expiration date: _____/_____/_____
mo day yr

Notary Seal

**Return this Affidavit with your
registration application form to:**

New York State Education Department, Office of the Professions, Division of Professional
Licensing Services, Fee Unit, 89 Washington Avenue, Albany, New York 12234-1000.

Westchester Academy of Medicine 2016 Golf Outing & Fundraiser

Thursday, October 6, 2016
Westchester Country Club
99 Biltmore Avenue
Rye, NY 10580



Registration, Driving Range & Halfway House Lunch—11:00 AM
Shotgun Start at 12:30 PM
Golf Format: Scramble
6:00 PM—Cocktails
6:45 PM—Buffet Dinner/Awards/Raffles

If you are unable to attend, please consider making a tax-deductible donation. Contact Kalli Voulgaris kvoulgaris@wcms.org or 914-967-9100 for more details.

Individual—\$400 ♦ Individual plus Hole Sponsorship—\$575
Paid Foursome—\$1,400 ♦ Paid Foursome plus Hole Sponsorship—\$1,525
Hole Sponsor \$275

Additional Sponsorship Opportunities Available
Cocktails/Dinner Only—\$150 per person/\$250 per couple

All proceeds will benefit the Westchester Academy of Medicine
For more information and other sponsorship opportunities,
contact Janine Miller at 914-967-9100 or jmiller@wcms.org

Golf Reservations are Limited—Please RSVP Today!



Westchester Academy of Medicine 2016 Golf Outing & Fundraiser Thursday, October 6, 2016

*****Please Fax to 914-967-9232*****

Name _____ Phone _____ e mail _____

Address _____ City _____ State _____ Zip _____

Golfers _____ x \$400 = \$ _____ Name _____

Golfer + Hole Sponsorship \$575 _____ Name to appear on sign: _____

\$1,400 Foursome/\$1,525 Foursome + Hole Sponsorship

Name _____ Name _____

Name _____ Name _____

Name to appear on sign: _____

\$ 575 Individual + Hole Sponsorship

Name to appear on sign: _____

\$275 Hole Sponsorship

Name to appear on sign: _____

Cocktails & Dinner Only: # _____ Name(s): _____

\$150 per person/\$250 per couple; Amount Enclosed: _____

*Please make checks payable to: Westchester Academy of Medicine, 333 Westchester Ave.,
White Plains, NY 10604 - 914-967-9100*

Or fill out the information below to pay by credit card

Please charge: Visa MasterCard American Express Discover AMOUNT \$ _____

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Name on Card _____ Signature _____

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333 Westchester Avenue
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Underwritten by: Life Insurance Company of Boston & New York, Athol Springs, NY. This policy provides disability income insurance only. It does NOT provide basic hospital, basic medical or major medical insurance as defined by the New York State Insurance Department. The expected benefit ratio for this policy is 60%. This ratio is the portion of future premiums which the company expects to return as benefits, when averaged over all people with this policy. See the Product Brochure and/or Policy Form DIC-N (0900) NY for details concerning policy benefits, limitations and exclusions.

CJS 401 6/16

Exp. 12/31/18