



WESTCHESTER PHYSICIAN

September 2017

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PRESIDENT'S MESSAGE STAYING HEALTHY FOR OURSELVES?

We tell our patients to eat right, lose weight and exercise. But do we follow our own advice? Many of us do not and let our careers be the excuse. Many of us are working more hours per week every year just to keep up with the regulations, EHR documentation and declining reimbursement. We use Obamacare and hospital administrators and medical group officers as the scapegoats for our lack of time to take care of ourselves. We have little time to eat a good breakfast or lunch. We have little time to exercise. We look at vacations as a loss of income rather than time away from work.

It is time to take back what is ours and that is our downtime. We need to aggressively push for time away from work without emails and texts and phone calls. Our patients and office staff and partners need to know that there are just some times when we are absolutely not available. We need to understand that we will be better doctors, more thoughtful doctors and more adept surgeons if we just shut down and take a real break during work weeks and throughout the year.

So how do we start taking care of ourselves? Lets start with exercise. Until this year, I let work dictate when I could go to the gym or go for a bike ride. Some weeks I wouldn't go at all and some weeks, two times at the most. I have friends that commute to NYC and somehow are able to exercise early in the morning before they get on the train. They told me they feel great and by doing this, it was out of the way and they felt more productive at work. I always thought that they are sacrificing sleep and family time to achieve this goal. They are not.....

This year I started to workout early in the morning on my office days and both weekend days and it has made a huge difference in my life. I

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MARSHAL PERIS, MD
President, WCMS

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UPCOMING EVENTS

WAM Golf Outing
Tuesday, October 3, 2017
Westchester Country Club
Rye, NY

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333 Westchester Ave., Suite LN01
White Plains, NY 10604
914.967.9100 / FAX 914.967.9232

PETER J. ACKER, MD
Editor

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FROM THE EDITOR...

PETER J. ACKER, MD
CRYBABY



A normal baby cries on the average about 2 hours a day. Every new parent knows that baby's cry but that simple knowledge is no preparation for the sheer agony that can ensue when a baby cries for prolonged periods for no discernable reason and defies all strategies to provide comfort. I still remember vividly our first born 32 years ago wailed away each evening, my wife looking askance at me the pediatrician who had no answer despite years of training to that simple question, why.

Dealing on a daily basis with newborns, it is no surprise that an article in the science section of the New York Times caught my eye a couple of weeks ago. It described some recent research into the neurobiology of a baby's cry. One study with mice identified a small cluster of brain cells that were known to be in charge of fast, active respiration. It also controls the behavior of crying. When these neurons were obliterated (only 17,000) in baby mice, they could only breathe very slowly. If they opened their mouths to cry, nothing came out. More important was the behavior of the mother mouse which was to completely ignore the pups who would cry. There is no question that a baby's cry exerts a galvanizing affect upon the parent and ensures that progeny are well cared for.

Another study involved recording the cries of various mammalian infants: bat, eland, sea lion, marmot, goat and kitten. There were remarkable similarities across all these species. The cry is clear fundamental tone which falls and rises in unpredictable ways, similar to a police siren which simply cannot be ignored. Within 49 thousandth of a second from that start of the baby's cry, the periaqueductal gray matter in the midbrain of the parent lights up quickly rousing him or her out of the deepest of sleep. What was fascinating that all the infant cries elicited the same response in human parents regardless of the species.

Researchers have also attempted to characterize the different cries in response to different situations. The baby that is simply hungry produces an angry cry, eyes have closed, head turned to one side, full throated and escalating. The frightened baby instead hesitates, the facial muscles tense before emitting the cry and the eyes are wide open. The response to pain as is observed when a shot is administered is immediate, full force with the eyes tightly closed.

This subject though important for every practicing pediatrician, has for personal reasons of particular interest for me: to wit my oldest daughter who taught me so much in her infancy is due to have her own baby next month. Similarly she is also a pediatrician and I have no doubt despite all preparation, the reality will be full of surprises: the sheer worry that descends upon a new parent, the cacophony of sounds that the precious bundle produces even when not crying, snorts, grunts and explosions of gas, and most importantly the power of a baby's cry. I look forward with intense anticipation to this grand event and of course want to help in any way I can, though I have a feeling I will be as inept as I was so many years ago!



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Barry P. Mitchell Jr., CRPC®, CRPS®

Managing Director—Wealth Management
Senior Portfolio Manager, PMP
Retirement Plan Consultant
barry.mitchell@ubs.com

Jennifer G. Piche

Senior Wealth Strategy Associate
jennifer.piche@ubs.com

Maggie B. Smith

Senior Wealth Strategy Associate
maggie.smith@ubs.com

Edward A. Bugniazet

Financial Advisor
ed.bugniazet@ubs.com

Gary J. Raniolo II

Senior Wealth Strategy Associate
gary.raniolo@ubs.com

Jennifer Galli

Client Service Associate
jennifer.galli@ubs.com

Mitchell WealthCare

UBS Financial Services Inc.
709 Westchester Avenue, Suite 400
White Plains, NY 10604
914-287-6074

ubs.com/team/themitchellgroup



THE BUSINESS OF MEDICINE

HIPAA-CRITICAL

Rick Weinstein, MD, MBA

Director of Westchester Sport & Spine @ White Plains Hospital Center

So much misunderstanding or just blatant lies have led to stupid obstacles to patient care under the guise of HIPAA. Nurses, doctors and of course administrators pretend to know what HIPAA is and misquote it obstructing our ability to fix our patients. So, let's cut through all the BS and really understand what HIPAA is.

The Law and Flow

HIPAA was a public law enacted August 21, 1996 and issued by the Department of Health and Human Services (HHS). The acronym stands for Health Insurance Portability and Accountability Act and is a set of standards for use and disclosure of individuals' health information. It is designed to "assure that individuals' health information is properly protected while allowing the flow of health information needed to provide and promote high quality health care and to protect the public's health and well being." (hhs.gov) This statement states that HIPAA is designed to NOT block care of our patients but to maintain the "flow" of health information. Obviously, administrators did not read this part of the law.

Who?

The law applies to "health plans, health care clearinghouses, and to any health care provider who transmits health information in electronic form..." (<https://www.hhs.gov/hipaa/for-professionals/privacy/laws-regulations/index.html>) This means doctors, medical practices and hospitals all fall under the law.

The transmitted information must identify the individual or there is a "reasonable basis to believe it can be used to identify the individual." (HIPAA Transactions Rule at 45 C.F.R. § 160.103) Read this carefully. This means you can transmit pictures, x-rays and descriptions as long as there is no reasonable way to identify the patient from the transmitted information. Someone from the ER can send you a picture as long as there is no name or other way of identifying the patient's information sent.

In Writing

You may use or disclose a person's protected health information if the individual gives you "permission in writing." (45 C.F.R. § 164.502(a).) Verbal permission is not adequate. Get it in writing!

A medical provider is permitted to use and disclose protected health information for treatment or payment **without** permission. A covered entity may disclose protected health information for "quality or competency ... or fraud and abuse detection and compliance activities, ..." in relevant circumstances.

Don't Fear the Law, Know It

There is tremendous fear of violating HIPAA and rightfully so as the penalties for violation of HIPAA are \$100 to \$50,000 or more per violation. This is typical of the government to say "or more" which is put in purely for intimidation. However, HSS states that "A penalty will not be imposed for violations ... if the failure to comply was not due to willful neglect, and was corrected during a 30-day period after the entity knew or should have known the failure to comply had occurred." (<https://www.hhs.gov/hipaa/for-professionals/privacy/laws-regulations/index.html>) So if you are abiding by the law and there is an accidental violation, fix it quick and there should be no penalty.

You are Smarter

These are just some of the issues of HIPAA. If you have concerns or questions, don't roll over and play dead...research for your answers. Doctors are smarter than most other people including the regulators who made these laws and administrators who interpret them. Don't allow yourself to be abused and more importantly don't allow your patients to be abused by HIPAA misrepresentation. Yes, the ER doc can send you a copy of an x-ray from his phone to your phone as long as there is no identifying information of the patient. HIPAA was created with the intention of keeping the "flow" of information. Keep this in mind when someone is obstructing you taking care of your patient.



Volunteer New York 9/11 Serve + Remember Event



Volunteers for 9/11 Serve + Remember Event

On Sunday, September 10 the Westchester Academy of Medicine sponsored the Volunteer New York 9/11 Serve + Remember event. WAM participated in Organic Gardening at the Hilltop Hanover Farms in Yorktown Heights. Over the course of the day the members who participated weeded, spread mulch, cleaned onions and assisted with the “pick your own” stand at the farm. We would like to thank all those who selflessly gave their time to the event by volunteering for such a great organization: Marshal Peris, MD; Anna Peris; Omar Syed, MD; Bella Malits, MD; Michael Rosenberg, MD; Lee Gruber, MD and Janine Miller, Executive Director. We hope to participate in more of these events in the future and encourage our members to give back to their communities by participating as well.



Anna Peris (right) with other Volunteer New York participants



Dr. Michael Rosenberg; Dr. Lee Gurber & Wendy Pearlroth



Dr. Marshal Peris; Dr. Omar Syed & Janine Miller, ED



Dr. Marshal Peris spreading mulch with other Volunteer New York Participants



Ana Peris cleaning onions with other Volunteer New York Participants



Assemblywoman
Sandy Galef
Invites you to attend



The Great Debate: Single Payer Healthcare?

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Tuesday, October 10th
7 p.m. – 9 p.m.

Cortlandt Town Hall

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• **Panelists Include** •

Assemblyman Richard Gottfried

75th Assembly District, Sponsor of the New York Health Act

Bill Hammond

Director of Health Policy for the Empire Center for Public Policy

Dr. Thomas Lee

Past President, Westchester Medical Society and Westchester Academy of Medicine

Dr. Betsy Rosenthal

Physicians for a National Health Program, NY Metro Chapter

*I encourage you to bring your friends, family, neighbors and anyone else you think
would be interested in this complicated issue that affects all of us.*



**For more information contact Assemblywoman Galef's office
at 914-941-1111 or galefs@nyassembly.gov**

PRESIDENT'S MESSAGE STAYING HEALTHY FOR OURSELVES?

(Continued from page 1)

feel more energized and my office day isn't nearly as stressful even though nothing has changed in my office and my staff have noticed the difference. The extra exercise time during the week also forces me to want to eat healthier. Have I sacrificed sleep? A little. Those two nights during the week, I go to sleep earlier and concentrate on not doing any work after dinner so I can spend more quality time with my family. As a result of this little change in my life (waking up an hour earlier 2 days a week), I am feeling healthier and at my last physical, my cholesterol has never been lower.

Now what about time off?? We don't take enough true time off. Even on our nights off call, we are answering emails and patient questions. On vacations, we are clearing our inbox and signing off on imaging studies and answering our nurses' questions. Our colleagues email us questions even if our "out of office" reply is on, knowing that most of us will answer even when we are away. In this day and age of cell service and wi-fi almost everywhere in the world, unless you don't carry your cell phone with you, you can and will be

reached.

Vacations should be vacations. We need to turn off our ringers and vibrations and go into airplane mode. We need to understand that emergencies will be dealt with and our colleagues and nurses will either wait for our answer when we return or ask someone else. The most away I have felt in a long time was earlier this summer while vacationing in the Canadian Rockies. There were multiple days with limited cell service while hiking and biking and I put my phone on airplane mode and didn't even have it in my pocket. It was useless and I was happy. It allowed me to actually enjoy what I was doing and have real conversations without distractions. When I couldn't think of something, I didn't reach in my pocket to ask Google. I just shrugged and moved on. Our families will be happier too if we could just "turn off" for days at a time and just be husbands, wives, children, parents and friends without simultaneously being doctor.

So I leave you with this advice: Sleep, Exercise, Eat Well, and Vacation off the grid. This will allow us to live happier, healthier lives and our patients will see the difference.



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The following is an Excerpt from the May 2017 **MEDICAID UPDATE**

Attention Managed Care Network Providers: Medicaid Provider Enrollment Requirement

Section 5005(b)(2) of the 21st Century Cures Act amended Section 1932(d) of the Social Security Act (SSA) and requires that **effective January 1, 2018**, all Medicaid Managed Care and Children's Health Insurance Program providers must enroll with state Medicaid programs. The SSA requires that the enrollment include providing identifying information including name, specialty, date of birth, social security number, National Provider Identifier (NPI), federal taxpayer identification number, and the state license or certification number.

For example, if a physician currently participates in a network with a Medicaid managed care plan that provides services to, or orders, prescribes, or certifies eligibility for services for, individuals who are eligible for medical assistance, the physician must enroll with New York State Medicaid.

Common Enrollment Questions:

- To check on your enrollment status, please call CSRA at 1-800-343-9000. Practitioners may also check the Enrolled Practitioners Search function at: <https://www.emedny.org/info/opra.aspx>
- If you are already enrolled as a Medicaid fee-for-service (FFS) provider and are listed as active, you will not have to enroll again.
- If at one time you were a FFS provider, and your enrollment has lapsed (no longer actively enrolled), you may be able to keep your original Provider Identification Number (PID), also known as MMIS ID, by reinstating.
- Practitioners who do not wish to enroll as a Medicaid FFS billing provider may enroll as a non-billing, Ordering/Prescribing/Referring/Attending (OPRA) provider. ***The enrollment form for this function is attached.***
- Enrollment in Medicaid FFS does not require providers to accept Medicaid FFS patients.

If you are not actively enrolled, please go to: <https://www.emedny.org/info/ProviderEnrollment/index.aspx> and navigate to your provider type. Print the **Instructions** and the **Enrollment form**. At this website, you will also find a *Provider Enrollment Guide, a How Do I Do It? Resource Guide, FAQs*, and all forms related to enrollment in New York State Medicaid.

As a point of information, under **42 CFR 455.104** defines the following providers as excluded from the definition of "disclosing entity":

- Solo practitioners such as an individual physician, psychologist, or chiropractor.
- Group of individual practitioners, such as a group of cardiologists, or a group of radiologists."

Therefore, physicians do not need to complete Section 5.

If you have questions, please contact:

Regina

Regina McNally, VP

Division of Socio-Medical Economics

Medical Society of the State of New York

865 Merrick Avenue

Westbury, NY 11590

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MSSNY email is not HIPAA-secure, so please do NOT include any PHI!



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► **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 Rebecca Freeman at 914-358-0757.

AWARDS PRESENTATION | OCT. 24 5:30 P.M.

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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 FIFTH ANNUAL EVENT IS CO-PRESENTED BY BROWN, GRUTTADARO, GAUJEAN, PRATO & SASTOW ATTORNEYS AT LAW; UBS MITCHELL WEALTHCARE AND 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.

**NOMINATION DEADLINE:
SEPTEMBER 29**

**Department
of Health****ANDREW M. CUOMO**
Governor**HOWARD A. ZUCKER, M.D., J.D.**
Commissioner**SALLY DRESLIN, M.S., R.N.**
Executive Deputy Commissioner

DATE: September 13, 2017

TO: New York State Healthcare Providers
Local Health Departments
New York State Regional Offices

FROM: NYSDOH Division of Epidemiology

Health Advisory:**Investigation of Hepatitis C Infection in Westchester County**

New York State Department of Health (NYSDOH) and the Westchester County Department of Health (WCDOH) are conducting an investigation of hepatitis C infection at the Mt. Kisco (37 Moore Avenue, #3) and White Plains (1133 Westchester Avenue) offices of Dr. Timothy Morley (operating as "Tomorrow Medicine") as well as Advanced Medicine at 37 Moore Avenue in Mt Kisco. The investigation has revealed that some patients might have become infected with hepatitis C virus (HCV) because of care received at one or both practices. The NYSDOH and WCDOH recommend that patients who received intravenous infusions, injections, and/or blood draws at Tomorrow Medicine should be tested for HCV, hepatitis B virus (HBV), and human immunodeficiency virus (HIV). While there is no indication that hepatitis B or HIV infections have occurred, NYSDOH recommends screening for all three viral infections because of their similar modes of transmission.

The following tests are recommended:

- **Hepatitis C Virus (HCV):** Hepatitis C virus antibody screening assay (e.g., HCV EIA). If the result of HCV antibody testing is positive, a nucleic acid test (NAT, also known as an "RNA" test) should be ordered to determine if active HCV infection is present. A positive NAT together with a reactive antibody screening test provides confirmation of active HCV infection. If the HCV NAT testing is negative, additional testing may be needed. Additional information is available online at <http://www.cdc.gov/hepatitis/HCV/index.htm>.
- **Hepatitis B Virus (HBV):** Hepatitis B surface antigen (HBsAg), total hepatitis B core antibody (total anti-HBc), hepatitis B surface antibody (anti-HBs). Depending on the timing of the potential exposure, additional testing may be needed.
- **HIV:** HIV Antigen/Antibody (fourth generation) combination screening test with reflex to supplemental antibody and RNA testing, if needed. Prior to being asked to consent to HIV testing, patients must be provided information about HIV. Please see https://www.health.ny.gov/diseases/aids/providers/testing/docs/testing_toolkit.pdf for more information. The requirement for written consent for HIV testing was removed in June 2014. Consent may be obtained orally, except in criminal justice settings. Requirements for the consent process include:

- Providing key points about HIV testing in writing, verbally or by video before conducting the test;
- Notifying the patient that HIV testing is being done;
- The patient having an opportunity to refuse the test;
- Documenting in the patient chart that an HIV test was conducted.

If your patient is known to have current infection with HCV, HBV, or HIV, then he/she does not need to be retested for that particular infection. However, he/she should be tested for the other infections.

For individuals who test negative for HCV antibodies, consider testing with an HCV NAT if the patient has symptoms of viral hepatitis infection (fever, fatigue, loss of appetite, nausea, vomiting, abdominal pain, dark urine, clay-colored bowel movements, joint pain, jaundice).

For individuals who test negative for any of the three viruses and have no symptoms of viral hepatitis, the following additional evaluation is recommended to assure that individuals are not still in the incubation period for infection:

- HCV - Retest for HCV antibody (HCV EIA) 6 months after the last potential exposure in this healthcare setting.
- HBV - Retest for hepatitis B surface antigen (HBsAg), total hepatitis B core antibody (total anti-HBc), hepatitis B surface antibody (anti-HBs) 6 months after the last potential exposure in this healthcare setting.
- HIV – If the initial testing was performed with a laboratory-based fourth generation HIV Antigen/Antibody test, no repeat testing is necessary. If the initial testing was done using another method, retest with an HIV Antigen/Antibody (fourth generation) combination screening test with reflex to supplemental antibody and RNA testing, if needed.

Any positive result for HCV and/or HBV is reportable to the local health department within the jurisdiction in which the patient resides, pursuant to New York State Sanitary Code (10 NYCRR 2.10). Any positive result for HIV is reportable to NYSDOH pursuant to Public Health Law § 2130. Physicians and other clinicians are required to report positive results using the following procedures:

- **Hepatitis B and hepatitis C:** Complete NYSDOH Form 389 and mail to the local health department in the county where the patient resides within 24 hours of receipt of a positive test result. NYSDOH Form 389 is a triplicate form and therefore cannot be downloaded for use. A sample is available for viewing at <http://www.health.state.ny.us/forms/doh-389.pdf>. To obtain copies of the form, call 518-474-0548.
- **HIV:** Complete NYSDOH Form 4189 and mail Page 2 (the YELLOW carbon copy) to the NYSDOH Division of Epidemiology, Evaluation and Research at PO Box 2073, ESP Station, Albany, NY 12220-2073 upon receipt of a confirmed positive HIV antibody test

or other testing documenting HIV infection (i.e., reactive NAT for HIV). NYSDOH Form 4189 may be obtained by calling 518-474-4284. For newly diagnosed HIV infections related to this investigation, please indicate “treatment at Tomorrow Medicine” under “Other risk” in the risk ascertainment section (Box e) of the form.

If patients do not have, or prefer not to be tested by their own healthcare provider, testing is available at no cost through the Westchester County Department of Health by calling (914) 995-7499 Monday – Friday, 9 a.m. to 5 p.m. Additionally, representatives from the New York State Department of Health are available to answer questions at 1-888-364-4902 Monday – Friday 9 a.m. to 5 p.m.



Have an idea for a story, a topic you want to see covered or information that you feel is important to share with your fellow WCMS members?

Please submit them to our office:

admin@wcms.org

WCMS Board Meeting Schedule

2017-2018

October 11

November 9

December 21

January 11

February 8

March 8

April 19

May 10



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Westchester Academy of Medicine 2017 Golf Outing & Fundraiser

**Tuesday, October 3, 2017
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

2017 Golf Outing & Fundraiser

Tuesday, October 3, 2017

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 \$ _____

Card # _____ V Code _____ Billing Zip Code _____ Expiration Date _____

Name on Card _____ Signature _____