



Table of Contents

- 2 GVSU Update
- 3 CMU Students Help with H1N1 Clinics
- 4 From the Editor's Desk
- 5 PAMPAC
- 6-7 MAPA Fall Conference
- 8 Understanding the Business of Medicine
- 9 Senate Hearing
- 10-11 From MI to Africa

MAPA Paves the Way for Increasing PA Visibility in Michigan

Welcome to another edition of the Michigan Academy's quarterly newsletter. I have found it exciting to serve along side an excellent and committed group of fellow PAs. Since the last quarterly newsletter, the leadership has been extremely busy for our fellow PAs across the state. Whether meeting with the Michigan Hospital Association, attending Michigan State Medical Society meetings on healthcare legislation issues, addressing legislators regarding state and federal health care reform initiatives (i.e. Provider Tax, Health Care Reform, etc...), developing a clear strategic plan for MAPA's future, or running a record breaking CME conference, this past quarter has been exciting. I am amazed at the commitment of past leaders, current leaders and upcoming leaders who have taken the time to commit to this profession that we love. Our patients and our state are the better for it. According to Jim Rohn (author and leadership expert), "Whatever good things we build end up building us."

As we build for the future, MAPA's commitment to Michigan PAs is to be at the table, not on the menu, with key stakeholders to make sure the PA voice is heard. Sometimes that involves being creative to the opportunities that come our way. As individual PAs, we can make a difference in our own communities or hospitals through little efforts of education and awareness. However, Tim Irwin gives a good reminder from his book, "Running with the Bulls", "Are we doomed to be nothing more than the sum total of what we are now?" My passion, along with other board members, is that we not forget the paths that were paved in the past, and may we not grow complacent in our own comfort to be doomed in the future. Everyone can make a significant contribution if we take advantage of the opportunities.

As President, I recently spelled out for the MAPA Board of Directors specific goals or opportunities for others to get involved. First, support the desires and goals of the Academy Board. From the strategic planning weekend on September 12, 2009, thirteen goals and



By Wallace Boeve, EdD, PA-C
President
Michigan Academy of Physician Assistants

charges for each committee, region, and executive board were established. Thanks to all who participated in a very productive day. Second, maintain a presence regarding health care legislative issues among key state leaders. In the crux of the health care reform debate, it is important, now more than ever, that PAs remind others that we are an important part of the health care team for the best interest of patients. Third, develop a conduit through which MAPA has in place a pipeline of continued mentoring and empowering of PA leaders throughout the state. I want to leave the office of President knowing that I had a positive impact on equipping other PAs to carry the "PA torch" in Michigan. Finally, work closely with the Membership Committee, Communications Committee, and Rossman Group (public relations firm) to establish some clear goals and timelines to build upon the work of past presidents and lay a strong agenda for positive progression within our membership ranks and for increased public awareness. Tom Brady (3-time Super Bowl winning quarterback) said it best, "It's not like you just go out there and wing it ... you try that, you're going to get hit and you're going to throw interceptions. And that's no way to play the game."

So prepare yourselves and come play this game with us. . . the PA profession has a bright and prosperous future for improved patient care. Until next time remember, "What we practice, not what we preach, is usually our great contribution to the conversion of others" (C.S. Lewis, historian & theologian). Let's keep working together, converting others and paving the way for an excellent future.



Grand Valley State University Update

Rachel VanStrien, PA-S2
Grand Valley State University

This is an exciting time for the second year students! We are anticipating our upcoming White Coat Ceremony and preparing to head out for clinical rotations. Although we have valued our time in the classroom, we are looking forward to beginning the clinical phase of our training.

Recently, we took second and third place in the PA Foundation Student Quiz Bowl at the Annual Fall MAPA CME conference. We were glad to be so well represented, and our success is a great reflection of the quality education we have received.

This month, we are hosting a Holiday benefit event to raise funds for Oasis of Hope. Oasis of Hope is a faith-based medical clinic located in Grand Rapids that offers services at no charge to those in need. Over the years, Grand Valley PA students have built a collaborative relationship with the owners of this clinic. We are able to volunteer in a medical setting while they rely on volunteers to help run their clinic. This is a wonderful relationship that we value greatly. We look forward to continuing to nurture and flourish this partnership in the years to come.

Thank you for your service

MAPA's Board would like to extend a public thank you to Cindy Wikstrom, MAPA's Academy Administrator, for her years of outstanding service to the Michigan Academy of Physician Assistants. For those who know or have worked with Cindy, her service has helped the Academy to advance its mission in so many ways. Please join the Board in wishing Cindy the best as she will be leaving MAPA to pursue a promotional career opportunity.



CMU Students Help With H1N1 Clinics

By Kali White PA-S



Central Michigan University physician assistant students have been aiding the Central Michigan Community Health Department in protecting the local community and surrounding areas from the H1N1 pandemic by providing staffing support at novel influenza vaccination clinics.

Several thousand people have been vaccinated at five locations including Mount Pleasant, Harrison, Clare, Beal City and Beaverton with clinics scheduled in Farwell and Sheppard.

Students are glad to be a part of this unique public health situation and have taken advantage of the

opportunity for patient contact experience with 100% class participation. CMU PA students have also provided assistance by holding fundraisers during National PA week and donating the proceeds to the Isabella County Health Department. It is a very rewarding experience as well as an excellent learning opportunity.

Region 1 Update

Region 1 held their fall meeting on Friday, October 30, 2009 at Up Front and Company in Marquette. Doctor Juan Mella, Pulmonologist/Internal Medicine Specialist from OSF Medical Group in Escanaba, gave a very-informative talk on COPD. Region representative Jan Ryan-Berg PA-C reported that 17 PAs were in attendance, and two boxes of food were donated to the local Salvation Army food pantry. This meeting was sponsored by GlaxoSmithKline and Takeda Pharmaceuticals.



MAPA Region 1 Member Honored

Region 1 member Michael (Mick) Kreis PA-C, of Marquette's Family Care Doctors, was honored this fall by Marquette General Medical Group. Their annual "Leadership Among Peers" award is given annually, and Mick was selected, tying with a Kingsford physician. Mick was quoted as saying, "I was and am honored and humbled by the award." Mick Kreis PA-C works in both the large Marquette and rural Trenary family practice locations, and MAPA is pleased to spread the news to our members.



From the Editor's Desk...

Editor, "Michigan PA", Chris Noth, PA-C, cjnoth@yahoo.com



The MAPA Newsletter in its present form is about to undergo a metamorphosis and what emerges will hopefully be resourceful and engage readers. The name of

the newsletter is being changed to "Michigan PA", which adds credence to the professionalism and credibility of this revamped informational resource. Along with the title change, the format and content will change to reflect the diversity of the PA working environment and the influence of factors that we as PAs need to be cognitive of for effective patient care. New features and departments will be displayed including: nutrition, women's issues, geriatrics, legal, professionalism, Q & A, technology/communications, along with established articles on reimbursement and legislative issues, regional updates, PA school notes and community service activities.

An exciting new feature is called 'Michigan PA in the Spotlight.' This feature will highlight a PA in Michigan that has shown exceptional professionalism, community involvement or patient care and were recognized by their

peers or supervising physician. If you are aware of an outstanding or exceptional PA, please submit your request for consideration and a short synopsis of the candidate's attributes to the following e-mail: cjnoth@yahoo.com.

The editorial staff of the new "Michigan PA" hopes that these changes will mirror the diversity and complexity of PAs in Michigan. The most productive way to ensure success of any endeavor is to have support from as many people as possible, therefore, if you are willing, or can refer a fellow PA who has a specialty or previous professional experience in a relevant field, to write an article for the newsletter, this will help to add variety and integrity to every edition. The more diverse the input, the better the results. We want the purpose of this newsletter to yield information that will help propagate quality and cost-effective health care delivery. Sharing professional experiences and information may benefit others and help further our PA community.

If anyone has questions for the Q & A portion, any issues that need to be addressed or would like to volunteer to write an article, please contact me at cjnoth@yahoo.com or MAPA at michiganpa.org. I look forward to hearing from you.

Prescribing Compounded Rx's? Trust the Leader.

Health Dimensions is Michigan's leading accredited pharmacy and has been exclusively compounding medications for patients and doctors across the Midwest for the past 13 years.

Of the 56 THOUSAND licensed pharmacies in the United States, under 100 are PCAB accredited to make compounded medications.

The American Medical Association (AMA), the American Veterinary Medical Association (AVMA), and The Joint Commission (JCAHO) now recommend working only with a PCAB accredited pharmacy when compounding is needed.

Physician's Assistants work with our lab to create:

- Custom topical treatments for pain and skin conditions
- Diabetic neuropathy treatments.
- Injectables for joint pain and rehabilitation.
- Bio-Identical hormone therapies...just to name a few.

- PAID ADVERTISEMENT -

**HEALTH
DIMENSIONS**
COMPOUNDING PHARMACY



39303 Country Club Dr.
Suite A-26
Farmington Hills MI, 48331
800.836.2303 ph
248.489.1586 fax
hdrx.com

ACCREDITED



New Edition to the MAPA Fall CME Conference

MAPA is proud to announce a way to promote better communication between the Board of Directors of MAPA, the six regional representatives and PAs in Michigan. The six MAPA Regional Representatives are working together as a consortium to help share and relay information to our constituents. This 'sharing' idea led to a new addition to the Annual MAPA Fall Conference, a Regional Representative Exhibitors booth.

The booth was stationed in the exhibitor's hall and was continually staffed by one of the MAPA Regional Representatives. A map of MAPA's six regions was a booth backdrop and the regional reps. answered many questions posed by conference attendees. This was a very effective promotional event for MAPA's reps. to meet constituents in their region and for attendees to put a face to a name.

From all parties, this was a great success for both the conference participants and regional representatives. This new edition will become a staple at all MAPA Fall conferences in the future. This is a direct form of communication that benefits both parties and can generate future ideas to support Michigan PAs.

Note: To see which MAPA Region you live in, visit MAPA's website at www.michiganpa.org.

PAMPAC

PAMPAC is the political action committee (PAC) of MAPA. Monies donated to PAMPAC are used to help support legislators who are familiar & supportive of our profession, or who need to be educated about PAs. All monies donated to PAC, and then to legislators, are then reported to the State of Michigan and are public information. It is important to allow our lobbyist the opportunity to support the campaigns of legislators deemed 'friendly' to MAPA. Times may be tight but it is important to protect and maintain a healthy practice environment in Michigan. By law your MAPA dues money cannot be donated to PAMPAC. Donations have to come directly from you.

State of Michigan Political Action Committees	CURRENT PAC BALANCE
As of the October 2009 reporting period	
Medical Doctors (MSMS)	\$98,477/87
Osteopathic Doctors (MOA)	\$95,821.70
Michigan Nurse Assoc. (MNA)	\$45,462.45
Chiropractors	\$34,301.90
Physical Therapists	\$16,432.46
Nurse Practitioners	\$7,635.60
Physician Assistants	\$3,479.39

This is a list of your colleagues who have made donations to PAMPAC. The PAs in bold print have given for the year 2008 & 2009, or have given an exceptional amount of money to PAMPAC.

RICK KEDZIERSKI
CHRISTOPHER NOTH
M. LAWAUN HANCE
DEBRA KNIGHT
KARL WAGNER
LYDIA RISING
SHARON MOSER
HEATHER DWYER
JENNY GRUNWALD
LINDA CHUTE
DONNA HINES
JESSICA WILSON
RICK KEDZIERSKI
ANTHONY SANTINI
VAUGHN BEGICK
HEATHER BURGESS
MIKE GARRETT
BETH BELESKY
STEVEN MULRENIN
JAN RYAN-BERG
ALLAN FAUST

DEBRAH MICHAEL
CLARE DEPUE
JENNY GRUNWALD
RON STAVALE
HEATHER BURGESS
LYDIA RISING
SUZANNE YORK

ANDREW BOOTH
SCOTT BARTZ
REBECCA HILSS
TAIBI CHBIHI
BONITA GAWEL
REBECCA PODOLL
MOLLY PAULSON
DENNIS MARIEN
NANCY ZUCKER
JOHN LOPES
JACOB SUAVE
LORI OSWALD
MICHAEL JOHNSON

TODD CHISHOLM
ERIC VANGSNES
GAYLE ADAMS
JODI MCCOLLUM
PAUL GUALTIERI
ROSE HIGGINS
MARSHA SALLEY
JILL LEBOURDAIS
JAMES KILMARK
GALE EASTON
JASON EVANS
RENE HERNANDEZ
DANIEL LEMON
MICHAEL CORACI
LAURA MILLER
KELLY FLORIANO
NANCY HERCK
KENNETH WAS
SHARON SHERNIT
MELISSA BROEDERS
RENATA NYTKO

Please take a moment to thank these PAs for their donation which maintains and protects a healthy practice environment for all physician assistants in Michigan.

If by our error your name was not included, or was misspelled, please contact Ron Stavale at rxvalle@yahoo.com or Mike Degrow at lobbyguy@mikedegrow.com.

You may donate to PAMPAC by sending a check to
PAMPAC c/o MAPA • 120 West Saginaw St.
East Lansing Michigan 48823

MAPA Fall Conference – *A Great Success*

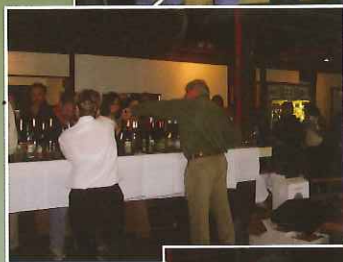
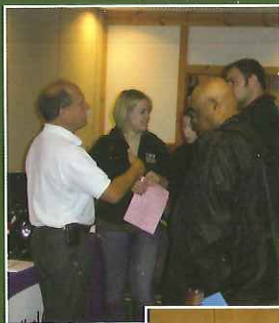
This year's MAPA Fall CME conference at Boyne Mountain was a record breaker. We had the highest attendance from any previous conference. Thanks to all of our members for making this conference such a success. The participation in all of our activities was excellent with a huge turnout for the family night with crafts, bonfire and hayride. Of course, the water park was a big attraction, and the wine tasting went well at the Eagles Nest.

The overall experience at the conference was very positive. Lectures were very good and informative and the resort received high marks from all who attended. Our goal is to provide a conference that everyone can enjoy, from the student and newer PA to the veteran PA with their family along for fun. We welcome any comments about how the conference experience went and what changes could make the experience better. Please e-mail to MAPA at michiganpa.org.

Next year's MAPA Fall CME Conference is set for October 14-17, 2010 at the Grand Traverse Resort in Traverse City, and with your help and participation, we could set a new record for attendance. We look forward to seeing you in October of 2010.

Sincerely,

Mark F. Gillette, PA-C
MAPA CME Chairperson





Understanding the Business of Medicine

Brian M. Gallagher, MSPA, PA-Cr

Have you ever asked to see your monthly expense and revenue reports? Do you know your value to the practice? After reading "More PAs Testing the Waters of Practice Ownership," in the October 2009 issue of *PA Professional*, it reminded me of the importance of understanding the business of medicine.

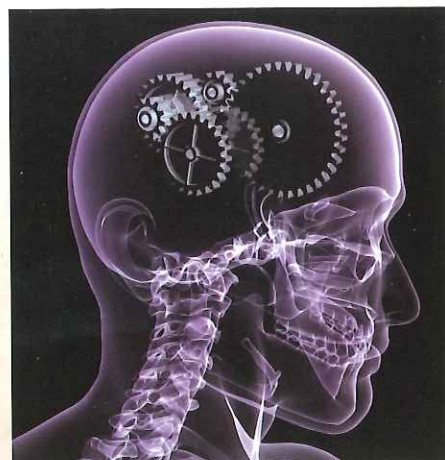
How do we provide cost-effective care but still generate revenue? How do we determine our contribution to the practice? How do we use this information during an annual performance evaluation? Understanding how a patient visit is billed and how we are paid is the first step.

Every patient visit is assigned an evaluation and management code (E & M). These codes correspond to the level of medical decision-making performed during the visit. CPT codes may also be assigned for any additional procedures and/or diagnostic testing performed. Finally, the ICD-9 codes are assigned that correspond to the medical diagnoses addressed. It

is critical to know the criteria required for each E&M level. Frequently, we are afraid to bill the appropriate higher level for services provided and therefore lose potential revenue.

Next, at month end, the accounting/billing department of your practice generates two monthly reports. The first is a monthly billing report, comprised of the total charges billed and the actual revenue generated. The second is an expense report that outlines the operation costs of the practice. Subtracting the expenses from the revenue will yield the amount of money generated for the practice that month.

These reports can sometimes be deceiving. It can take two to three months for an insurance company to provide payment. Also some practice expenses are paid annually, therefore, those months have increased expenses. If you question when your revenue is down, though your days are busy—think back two months ago—you might find your vacation!



As your annual performance evaluation comes around, knowing your value to the practice will be the best way to prove your contributions. You may see the most patients, bring in the most revenue and find yourself as the most productive provider in your practice, but when you have the reports and figures to prove and support yourself, then you have the leverage needed to negotiate raises, practice ownership, etc.

It is critical to understand your business. Review your practice's reports every month. The business of medicine is one of our professional responsibilities. Patients will always come first, that is why we are PAs, but knowledge of your business is what helps you provide the cost-effective healthcare patients desire while earning the revenue you deserve.



PA/Physician Tax Debate

There was standing room only in the Senate hearing room on October 20, 2009 for discussion on the provider tax bill. Outside, circling the capitol, were dozens more providers in a sea of white coats holding signs. An incredibly strong message was delivered that day as MAPA, MSMS, MOA and other professional organizations joined to oppose legislation that would have added a 3% tax on gross revenues for physician services. The legislation proposed using this additional revenue to gain matching federal funds in an attempt to increase Medicaid reimbursement to providers. Not all present that day were opposed. The Michigan College of Emergency Physicians and the American Academy of Pediatrics were among those who showed up to support the bill. In the end, the bill was defeated on the Senate floor 32-4. MAPA would like to thank all the PAs and other health care workers who contacted their Senators and Representatives in opposing this tax. While recovering the federal matching funds and increasing Medicaid funding would be important for Michigan, we believe it is unfair to ask the providers to prop up this system that serves as an important safety net for all citizens of our state.

From Michigan to Africa

Julie Malacusk, PA-C

Executive Director, The Dream Project

2009 AAPA Humanitarian of the Year

www.thedream-project.org

Prior to moving to Mozambique, Africa five years ago, I had worked for several years in an ED prompt care unit in Troy, Michigan. Little did I know how different it would be to provide care in Mozambique!

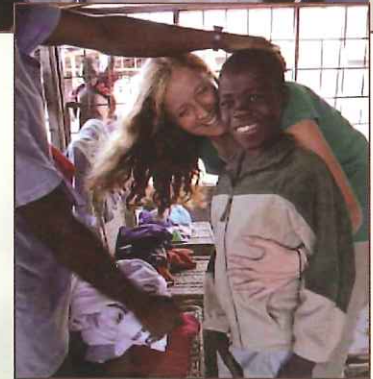
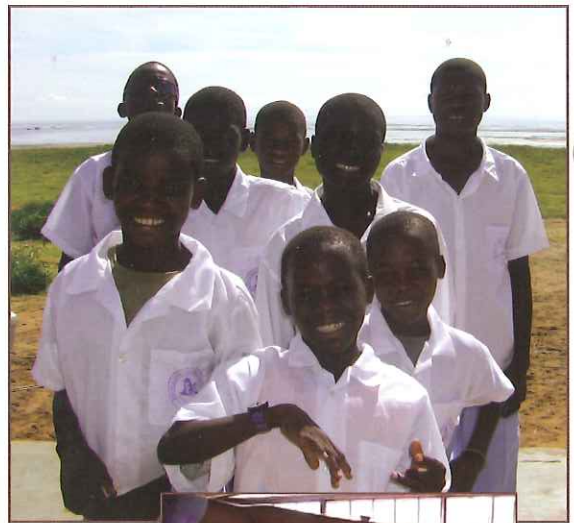
When I met Manuel, the son-in-law of the village Pastor, he was lying on a mat outside, unable to eat and too weak to walk. He had refused to go to the provincial hospital. After praying for him and asking him again to go, he said, "I want to go." I knew in order to live he would need IV fluids. He was severely dehydrated as he had been vomiting and had diarrhea for several days. We helped Manuel to my car, and I took him to the provincial hospital. When we arrived, the registration clerk asked what the problem was. When we mentioned the word diarrhea, we were redirected to a separate building. We helped Manuel walk to this other building. I have never seen anything like what I saw here. There were lines of mats with a single large hole for people to pass their excrement. All of the workers had masks and gowns. I watched as an employee dumped a bucket of bleach water over a patient who had been discharged. I walked with Manuel to his bed. However, other people who didn't receive the favor I receive because I am foreigner, were being turned away. They were told it is prohibited to enter. The next day the village pastor arrived to check on Manuel, without receiving any news on his son-in-law's condition, he was just told that he was prohibited from entering and had to leave.

I found out later this day that Manuel's father is a witch doctor and had put a "curse" on the Pastor's family. He told the Pastor that if his son Manuel dies, three people in the Pastor's family will die. The day after Manuel entered the hospital, Joanne, the Pastor's granddaughter, was admitted to the hospital and the Pastor got malaria. Many wanted to send the son-in-law to his witch doctor father quickly, before

Manuel died. I had my doubts that in his condition, Manuel would even be able to make this several hour trip. We continued to pray for the health of Manuel and all in the Pastor's family.

The health workers never used the word "cholera," perhaps to not cause a panic. However, it did not take me long to realize these patients were being isolated because they were suspected of having cholera. Cholera is extremely contagious. If infected, a person becomes severely dehydrated and can die within 24 hours if he doesn't receive treatment. Manuel was soon discharged but was not any better. He drank a coke outside the hospital door and immediately vomited.

We turned around and went back into the hospital. I asked a Cuban doctor I had met if he would attend to Manuel. The doctor agreed but asked me to pay an extra fee. This doctor already receives a salary and should not have asked me for additional money. However, he was doing me the favor of seeing a patient that under another



doctor's care, could certainly die. There are so many ethical dilemmas here. Everyone is trying to make a few extra dollars, however they can.

Manuel tested positive for HIV. When I told Manuel's wife that Manuel has HIV, she told me that a year ago she had almost died in childbirth. The doctors told her she had HIV, but she didn't believe them. I explained to her how HIV is transmitted.

Manuel and all of the Pastor's family members recovered. Manuel and Manuel's wife began HIV treatment and continue to take treatment to this day. Their baby died in his first year of life.

These are our health challenges in Africa. Although the challenges sometimes seem too great, every life saved makes the fight worthwhile. I have discovered here the simple truth that it is a great privilege to have something to give.



I enjoyed meeting many wonderful people with open hearts at our MAPA conference this fall. It was a pleasure sharing the struggles of the poor from around the world as well as their stories of hope. The fact that there are hundreds of thousands of child soldiers, child prostitutes and children living on sidewalks, makes every one of us stop and think. Thank you for your reception and for responding with open hands. At the fall conference, \$5,383.00 was raised to help support the ongoing efforts of "The Dream Project". In addition, four children received sponsors.

At the conference, I shared a story about a family we care for. The mother, Irene, has been suffering from advanced HIV since we first met her three years ago. The father died some years ago. Irene's four children, ages 10 – 16, moved from veranda to veranda with their mom as they had no home. The older brothers' childhoods had ended early as they had taken on the responsibility of trying to find odd jobs and provide food for the family by collecting crabs on the seashore. Yet, this was not sufficient, and the family went without food for more days than not. None of the children had the opportunity to attend school, and all four of them were illiterate and malnourished.

When we met the family, Irene told her two younger children, twins Issac and Njuale, "Go with this woman, this is your hope." We began caring for the entire family and took the 10 year old twins to live with us in our childrens' home. The older boys began studying in primary school. Musa is studying to be a carpenter and Genito, a community health worker. Both have been eating regularly and living in a home with their mother. The twins are now in third grade. Issac is very studious and always careful to have a clean shirt for school. Njuale is full of life and is always joking and dancing. They play as every child should. Issac wants to be a school teacher and Njuale a pilot! Issac has agreed that when he is a teacher, he will not kick any child out of his class because the

student can't afford flip-flops, pen or notebook. When Njuale becomes a pilot, he has plans to bring medical relief supplies to the sick and food to the hungry. These children are 'the hope of Mozambique.'

This past weekend, Irene passed away. Our staff was with the children. As I am currently in Michigan and not in Mozambique, I called and spoke with each boy individually to express my heart felt sorrow. I am saddened by the loss of Irene, and I cried for my children who have lost both parents at such a young age. However, I am so thankful that these children are not alone in their time of trial and suffering. I am grateful that they have hope for the future and it's comforting to know that they are loved.

Thank you for your support that makes it possible to stand with Njuale, Issac, Musa, Genito and countless others like them in their time of trial and help lead them towards their 'dream.' The children are equipped as leaders and are the hope and future for Mozambique and Africa. You may visit our website to receive more information, make a donation or to sponsor a child at www.thedream-project.org.

Thank you!

