Mission: “to support our physicians and promote health in our communities”

News from the Tri-President, Beth Perenyi

We hope you had a wonderful holiday season and wish all of you a happy and healthy New Year. It was a very busy fall for our Alliance. Counties celebrated the 20th Anniversary of SAVE with memorable activities ranging from providing support to domestic violence shelters to electronic billboards and a Facebook presence from the Schenectady Alliance reminding us to Stop America’s Violence Everywhere. A successful Fall Conference followed where we experienced scenarios involving us to choose a course of action as a victim of domestic violence and then realizing the consequences in an interactive program, “In Her Shoes.” We also received informative presentations on retirement investing, social media and birding in NY. Our county alliances spent November and December fundraising for community organizations and their scholarship programs. Congratulations to the Schenectady Alliance whose fashion show luncheon netted $10,000! Additionally, a Facebook presence was initiated in the Hudson Valley region to provide support to spouses and domestic partners of physicians. If you are interested in chatting with or meeting other “Family of Medicine” members you can start by checking out https://www.facebook.com/groups/HudsonValleyPhysicianSpousesAlliance/. Additionally, the AMA Alliance also has a closed group to offer support to members at https://www.facebook.com/groups/1027206040647388/.

Our current focus is on advocating for legislation that benefits patient care and helps our physician spouses in their very challenging profession. Plan to attend Advocacy Day in Albany on March 8th to lobby legislators from your area. Please read the legislative section and contact your legislators to relay our concerns. More information will also be available the evening of Monday, March 7th and can be accessed via your home computer. Watch your e-mail for legislative alerts which often require immediate action.

“Think, Don’t Drink” continues to be our state project scheduled each year during prom season. (Some counties also distribute Think, Don’t Text and Drive cards.) This project involves distributing cards to high school students encouraging them to be responsible and not drink. The cards can be distributed by florists inserting them into prom corsages and boutonnieres; or tuxedo rental stores placing them into tuxedo pockets; or directly by the school inserting them into prom invitations. Individual Members in unorganized counties can contact Kathy Rohrer (Krohrer@mssny.org) to obtain cards that can be distributed in their community.
March 30th is "Doctor's Day! Check with your County Alliance to find out how you can help honor your local physicians. Joan, Lynn and I serve as your “Presidential Team” this year until our Annual Meeting April 14-15 in Tarrytown. Please consider joining us for our Annual Meeting held in conjunction with MSSNY’s House of Delegates. All physician spouses are invited and encouraged to attend this meeting as we plan for the future of your Alliance. Our keynote speaker will be AMA Alliance President, Julie Newman, who will provide an update on the national alliance.

**MSSNY’s Physician Advocacy Day**

MSSNY will hold its Physician’s Advocacy Day on March 8th in the Louis Swyer Theater in the Egg located in the Empire State Plaza in Albany, New York. We encourage all spouses and significant others to attend so you can become familiar with MSSNY’s legislative priorities and to meet with your legislators to advocate for legislation important to your spouse’s practice. Please contact your county Medical Society to learn which legislative visits have been arranged.

An informational session will be held in the MSSNY Albany office on Monday evening which can also be accessed via your computer. Invited guests include:

- Donna Frescatore, Executive Director, NYS Health Benefit Exchange
- Troy Oechsner, Special Assistant to the Superintendent, Department of Financial Services
- Legislative Panel: Kemp Hannon, Senate Health Chair; Richard Gottfried, Assembly Health Chair; James Seward, Senate Insurance Chair and Kevin Cahill, Assembly Insurance Chair.
- Senate Majority Leader, John Flanagan
- Assembly Majority Leader, Joe Morelle
- Assembly Speaker, Carl Heastie

To register for these events, go to: [https://docs.google.com/forms/d/1MJkaDNKqP3RLDfUGFon71g6mWHvbWPyi9Fq8huy96M/viewform?c=0&w=1&usp=send_form](https://docs.google.com/forms/d/1MJkaDNKqP3RLDfUGFon71g6mWHvbWPyi9Fq8huy96M/viewform?c=0&w=1&usp=send_form)

MSSNY’s Legislative priorities include: Medical liability reform, defeat of the CME mandate concerning e-prescribing, health insurer reform, and greater clarity of the design of value based payment systems, for Medicaid and commercial payers through the State Health Innovation.

**80th Annual Convention - Save the Date**

The Alliance is pleased to announce that their 80th Annual Meeting will be held April 14 and 15th at the Westchester Marriott in Tarrytown, NY. (The hotel is located at 670 White Plains Road (Route 119) in Tarrytown.) This meeting will be held in conjunction with MSSNY’s House of Delegates meeting. All Physicians spouses/significant others are invited to join us as we review the activities of the Alliance over the past year and plan for the future of the Alliance. Please come to network and learn about the issues facing our physician spouses.

The 2015-2016 AMA Alliance President, Julie Newman, will be our guest speaker. Julie is an advocate for healthy living having once been very overweight. In addition to her Alliance positions, Julie also served as president of the Alice Aycock Poe Center for Health Education in Raleigh, NC as well as a volunteer for the American Heart Association. She has a BA in accounting from James Madison University. Julie is married to Jack, a cardiologist, and they have two children: Hannah and Matthew.

Our meeting hours are 2:30 - 5:30 PM Thursday, and 9 am - noon on Friday. Friday activities also include a celebration luncheon at 12:30. Registration forms can be obtained by e-mailing Kathy Rohrer (krohrer@mssny.org) We thank you for your continued support of your Alliance and look forward to celebrating with you in April.

MSSNY has negotiated a discounted room rate at the Marriott. The reservation process is online and utilizing the reservation link will ensure that you receive the discounted rate of $133 per night plus tax (10.375%). The link for reserving your room is: [Book your group rate for Medical Society of the State of NY Annual 2016 Conference](https://www.marriott.com/travel/united-states/whstn-westchester-marriott-tarry-town-ny-hotel-670-white-plains-road-21269/en/overview) For those of you uncomfortable with reserving online, you may call Marriott reservations toll free at 1-800-882-1042. You must be sure to tell the reservation agent that you are with the Medical Society group in order to obtain the MSSNY room rate. Reservations made after the deadline of March 15 are based on availability only – the group rate cannot be guaranteed after this day. Please call now and make your reservation.

**Legislation**

*Federal*

As a result of the interplay between numerous statutory provisions, the Medicare fee schedule conversion factor will be reduced by 0.29% in 2016, from $35.93 to $35.83.

The US House and Senate passed two massive legislative bills in December, 2015. The $1.1 trillion FY2016 omnibus appropriations package will fund federal agencies and programs through September 30, 2016. Among the provisions is a 2-year delay of the so-called “Cadillac Tax” on benefit-rich health insurance plans enacted as part of the ACA that was to become effective
in 2018. The “Cadillac Tax” would impose a 40% excise tax on group health plan premiums that exceed $10,200 for single coverage and $27,500 for family coverage. It also cut $15 billion from the IPAB operational funding although that panel created by ACA has never actually been established. Congress also passed a $650 billion package that extends a broad range of tax-related policies and provides a two year moratorium on the medical device tax.

Congress also passed a bill that grants CMS the authority to expedite applications for exemptions from Meaningful Use Stage 2 requirements for the 2015 calendar year through a more streamlined process, alleviating burdensome administrative issues for both providers and the agency.

Continued advocacy is needed for Meaningful Use including delaying implementation of MU Stage 3; giving physicians proportional credit for the measures that are successfully completed, instead of the existing “all or nothing” approach; and expanding the hardship exemptions to recognize physicians who are victims of hacking or other disruptive technology problems related to their vendors or are close to retirement. Reform of MU will be a major focus of advocacy by the AMA, MSSNY and state medical society leaders at the upcoming National Advocacy Conference from February 22-24 in Washington DC.

The AMA also wrote a letter to the Antitrust Division of the Department of Justice urging that the proposed merger between Anthem (the parent of Empire BC/BS) and Cigna, as well as Aetna and Humana be blocked. Key points included that these mergers are occurring in areas where there already is a collapse of competition. Reviews indicate that greater health insurer consolidation leads to price increases as opposed to to greater efficiency or lower health care costs, and reduces pressures on plans to offer broader networks and would likely reduce the quantity of physician services.

Current pending legislation includes:
(H.R. 8309, Ellmers) to reduce the hassles associated with complying with onerous federal regulations governing the use of electronic medical records. The bill contains a provision to postpone the implementation of Meaningful Use Stage 3 until 75% of physicians can meet Meaningful Use Stage 2.
(H.R.1859, Collins) Ensuring Children’s Access to Specialty Care Act. This bill will encourage more doctors to become pediatric sub-specialists. It will add pediatric sub-specialists to the loan repayment program provided by the National Health Service Corps (NHSC) for doctors who practice in underserved areas. This program enables participants to receive up to $50,000 in loan repayments for each year they work in high-need and underserved areas, for a maximum of two years.

Stay up-to-date with the campaign to help physicians put patients before bureaucratic rules – visit BreakTheRedTape.org.

New York State
Governor Andrew Cuomo presented a $143.6 billion budget for the coming 2016-17 fiscal year which included some items of concern for NY physicians. He proposed to:

• Significantly limit access to the Excess Medical Liability Coverage. His proposal would prioritize funding for those physicians who practice in higher risk specialties and in more litigious regions of the State. By cutting the funding by $25 million from $127.4M to $102.4M, 55% of physicians who currently receive this essential coverage would be dropped. In upstate communities (north and west of Greene and Columbia counties) coverage would continue only for neurosurgeons, bariatric surgeons and OB-GYNs. Even in some downstate communities, (the Bronx, Kings, Queens, Westchester, Sullivan and Orange counties), many primary care physicians, ophthalmologists, otolaryngologists, pathologists, dermatologists and allergists would be dropped. The Excess Medical Liability Insurance Program provides an additional layer of $1M of coverage to physicians with hospital privileges who maintain primary coverage at the $1.3 million/$3.9 million level. The program was created over 30 years ago as a result of the liability insurance crisis of the mid-1980’s to address concerns among physicians that their liability exposure far exceeded available coverage limitations. Please urge your legislators to reject these cuts and restore full funding for the program. Go to: http://cqrcengage.com/mssny/app/onestep-write-a-letter?0&engagementId=161374

• Authorize establishment of Retail Clinics. His proposal would enable the establishment of ‘limited service’ clinics which provide a limited list of services in retail stores- provided that they adhere to regulations which would require them: to be accredited; accept walk-ins; adhere to advertising and signage standards; disclose ownership interests; directly employ a medical director; and strengthen primary care through integration of services with the patient’s other health care providers.

• Make significant changes to Workers Compensation program. His proposal would expand the list of providers who are eligible to deliver services and also eliminates need for county medical society’s review of physicians looking to be authorized to deliver care. It also removes the requirement for a referral by a physician for an injured worker as a pre-condition to receive psychological care. This initiative would also enhance the flexibility of hearing times and enables virtual hearings for workers compensation cases.

The Governor failed to include a Special fund or Guarantee Fund in the budget to respond to unpaid Health Republic claims as requested by MSSNY. The health insurer became financially insolvent and ordered to suspend renewing policies by the Department of Financial Services. Many reimbursement checks that were issued have bounced and physicians are owed outstanding claims of tens of millions of dollars. Over 1,000 physicians have responded to MSSNY’s survey listing their unpaid claims. MSSNY noted that many physicians are now expressing great reluctance to participate in other new health coverage
initiatives, as well as reluctant to participate in other reform initiatives that hold out the promise of upside financial benefits, but also could potentially put their medical practices at risk. Legislation has just been introduced in the Senate to support this fund. Please advocate for (S.6667).

MSNY supports:
(A.336, Gottfried/S.1157, Hannon): Permits independently practicing physicians the ability to collectively negotiate patient care terms with market dominant health insurers.

(A.1212, Lavine/S.4751, Hannon): Assures physicians are accorded a fair peer review appeals mechanism before their participation contract with a health insurance company can be non-renewed. This legislation is in response to situations such as the treatment by Emblem of 750 of its network physicians who were dropped from the network in October based upon the allegation of failure to transition to value-based payments, severing patient treatment relationships for countless patients. Go to [http://cqrcengage.com/mssny/app/onestep-write-a-letter?9&engagementId=151293](http://cqrcengage.com/mssny/app/onestep-write-a-letter?9&engagementId=151293) to send a letter of support.

(A.3353, Gottfried/ S.4698, Hannon): Extends the confidentiality provisions relating to discovery of testimony to apply to statements made by any person in attendance at peer-review committee that is a party to an action the subject matter of which was reviewed at such meeting.

(A.7267, Gottfried/ S.3461A, Hannon): Clarifies that the statutory liability protections offered for physician participants in the Committee for Physicians’ Health (CPH) program extend to the organization who sponsors the program as well as to the employees of the sponsoring program acting without malice and within the scope of its functions for the committee.

MSNY opposes:
(A.285, Weinstein/S.6596, DeFranciso): Changes the medical liability statute of limitations to a “Date of Discovery” rule. It did pass the Assembly last year and is now before the Assembly, It is anticipated that it will raise malpractice premiums 15%. Go to [http://cqrcengage.com/mssny/app/write-a-letter?4&engagementId=105729](http://cqrcengage.com/mssny/app/write-a-letter?4&engagementId=105729) to send a letter in opposition.

(A.355, Rosenthal/S.4348A, Hannon): Creates a continuing medical education mandate for practitioners authorized to prescribe controlled substances to complete three hours of continuing medical education every two years, prior to renewal of registration to practice, that involves pain management, palliative medicine, prevention, screening and signs of addiction, responses to abuse and addiction, and end of life care. This bill is currently in both the Assembly and Senate Health Committees. MSSNY views CME as valuable and is offering many voluntary sessions to provide new clinical information, but believes that physicians should be able to voluntarily choose those courses that pertain to their individualized practices. Go to: [http://cqrcengage.com/mssny/app/onestep-write-a-letter?7&engagementId=77696](http://cqrcengage.com/mssny/app/onestep-write-a-letter?7&engagementId=77696).

(A. 8601, MacDonald/S.6091A, Hannon): Limits the initial prescription of Schedule II or III Controlled Substance to a three to ten day supply. This bill is intended to encourage patients whose acute pain lasts longer than initially expected to follow up with a physician and it lessens the number of the pills left in medicine cabinets and available for diversion. MSSNY opposes because the arbitrary limit interferes with the practice of medicine. It is in the Health Committee of both houses.

One house bills have been introduced in both the Assembly and the Senate to authorize “limited service clinics” which was also proposed in the Governor’s Proposed Budget. Each seeks to allow publicly traded corporations to establish health clinics without a certificate of need for review.

One house bills have been introduced in both the Assembly and the Senate to authorize “limited service clinics” which was also proposed in the Governor’s Proposed Budget. Each seeks to allow publicly traded corporations to establish health clinics without a certificate of need for review.

Please send a letter in support or opposition of these bills. If a specific link is not listed, go to MSSNY’s Action Center.

**MSSNYPAC**

If you are not a member, please considering joining along with your spouse. MSSNYPAC is a separate segregated fund established by MSSNY to engage in campaign activities in New York State. It accepts contributions from New York physicians, residents, students and Alliance members to achieve political recognition for physicians. It targets support for elected state and federal officials and candidates who advance physicians’ goals and strengthens physicians’ voice in governmental affairs.
The PAC’s structure is an Executive Committee and subcommittees for federal and state elections. Please consider joining MSSNY PAC to support advocacy efforts. The Alliance contribution is $100. Contact Kathy Rohrer (krohrer@mssny.org) for an application.

To see how your legislators voted on key legislation go to www.mssnypac.org/scorecard.

AMA Alliance News

THE AMA Alliance has updated its strategic plan which we should receive soon. It is not too late to join the national alliance if you did not join through your county. There are single membership and couple membership categories:

- Regular Member $50 or Regular Member Couple $80
- Early Career Member (1 to 3 years post training) $35 or Early Career Couple $50
- Medical Student/Resident Spouse $10 or Medical Student/Resident Couple $15

The AMA will be meeting in Washington D.C, on February 22-24, 2016 at the Grand Hyatt for the annual National Advocacy Conference (NAC). Although the AMA Alliance does not have a full presence there, many members attend. The agenda and registration are available on the AMA’s website at http://www.ama-assn.org/ama/pub/advocacy/events/national-advocacy-conference-page/

The Allied Health Education Initiative (AHEI) grant applications must be postmarked by February 28, 2016. The AHEI is focused on providing grants to support community health education and related charitable endeavors in collaboration with the AMA Alliance, its affiliated state, county, and local alliances, and other health oriented civic and charitable community groups. To obtain the grants request forms, go to alliancehei.org and submit it along with requested documentation via mail by February 28, 2016. Grants will be awarded May 1, 2016.

Current editions of the Alliance magazine, ALLIANCE IN MOTION and PHYSICIAN FAMILY are available to read at amaaalliance.org. The ALLIANCE IN MOTION magazine is full of news from counties, states and national while the PHYSICIAN FAMILY has great information about managing work life balance from different perspectives.

Pennsylvania Medical Society Alliance is to hosting the AMA Alliance's Northeast Regional Meeting from April 15-17, 2016 in Gettysburg, PA. Gettysburg offers extensive battlefields and museums for the Civil War buff or amateur historian and enchanting cobblestone streets bordered by eclectic shops and restaurants. The recently renovated Gettysburg Hotel (est.1797) will be home for the weekend-long event which will feature exceptional speakers as well as tours and other activities. Some of the topics include opioid abuse (~Speaker will be Pennsylvania's Physician General, Rachel Levine, MD), how legislation impacts medicine, physician family wellness and leadership. More information is available on the Pennsylvania Medical Society Alliance website: http://www.pamedsoc.org/MainMenuCategories/PAMED-Community/Alliance, and the AMA Alliance regional meeting page at www.amaalliance.org.

Save the date! The AMA Alliance Annual Meeting 2016, Focus on the Future, will be held at the Hyatt Magnificent Mile Hotel on June 12-14. Registration will be available in the near future at amaalliance.org.

Health News

Medical Marijuana

The Compassionate Care Act authorizing the use of medical marijuana was signed into law on July 5, 2014. The New York Department of Health began the state’s medical marijuana program on January 7, 2016 by making approved forms of marijuana available with a doctor’s certification at designated dispensaries. Physicians must complete a four hour course approved by the Department of Health in order to provide this certification. Patients with the following conditions may be certified: cancer, HIV/AIDS, ALS (Lou Gehrig’s Disease), Parkinson’s Disease, multiple sclerosis, intractable spasticity caused by damage to the nervous tissue of the spinal cord, epilepsy, inflammatory bowel disease, neuropathies and Huntington’s Disease.

Steps to obtain marijuana include:
1. Obtain a DOH Medical Marijuana Program Certification from a registered physician
2. Provide photographic identification, documentation of his or her temporary or permanent New York residency, and designated caregiver information, if applicable. They may then access the DOH’s online Patient Registration System to obtain a registry identification card.

3. Patients with a valid registry identification card from the DOH are then eligible to purchase medical marijuana from a dispensing location.

A patient who is under 18 or who is otherwise incapable of consenting must apply through a proxy.

Five organizations were selected by the DOH in July, 2015 to grow marijuana and manufacture it in acceptable forms. Each organization operates a manufacturing facility and four dispensing facilities.

More information can be obtained at: http://www.health.ny.gov/regulations/medical_marijuana.

**Anti-Smoking**

MSSNY has agreed to join the American Cancer Society and the American Cancer Society Cancer Action Network in a new antismoking Campaign. The campaign, **2016 New York is Kicking Butts Quit Smoking Campaign** will be a week-long joint partnership among health care, non-and for-profit businesses, advocacy and community organizations, and patient communities to raise awareness of the resources and organizations available within New York City and New York State to help smokers quit. It is slated for May 31-June 6 and will be the largest NYC quit smoking week. Smoking continues to be the No. 1 cause of preventable death in New York City. It is hoped that in coming years it will be a statewide project.

As a partner, MSSNY will inform physicians about the tools and resources available to help New Yorkers quit smoking and to discuss with patients quitting smoking.

**Opioid Task Force and Resources**

MSSNY is one of eight state societies that is participating in AMA’s Task Force to Reduce Opioid Abuse. The task force was established in 2014 and embraces 5 concepts for implementation across the nation.

- Increase physicians’ registration and use of effective prescription monitoring programs
- Enhance physicians’ education on effective, evidence-based prescribing
- Reduce the stigma of pain and promote comprehensive assessment and treatment
- Reduce the stigma of substance use disorder and enhance access to treatment
- Expand access to naloxone in the community and through co-prescribing

In New York, we have already reduced the incidence of doctor shopping by 86% because physicians are checking the Prescription Monitoring Program prior to prescribing a controlled substance. MSSNY also supported legislation to increase access to naloxone to reduce deaths from overdose. MSSNY representatives to the AMA Task Force to Reduce Opioid Abuse are MSSNY Councilor, Frank Dowling, MD and Pat Clancy, MSSNY Vice President for Public Health and Education.

In *JAMA Internal Medicine*, investigators “examined Medicare claims from 2013 to see which doctors prescribed opioids and how many prescriptions they filled.” The analysis revealed that “the drugs are prescribed by a broad cross-section of medical professionals – including doctors, nurse practitioners, physicians’ assistants and dentists – rather than concentrated among a small group of practitioners.” Moreover, the analysis also revealed that on a “doctor-by-doctor level, pain management specialists and anesthesiologists handed out the most prescriptions for opioids,” but because there are more family physicians than specialists, as a group, “their number of painkiller prescriptions was higher than for any other category of health care worker.”

MSSNY supports efforts to increase voluntary education and training for physicians on safe prescribing practices. MSSNY and the New York State Office for Alcoholism and Substance Abuse Services are presenting a free, four-part webinar series on opioid prescribing, entitled, **“Revisiting the Role of Opioid Analgesics for Simple and Complex Patients with Chronic Pain.”** This series will provide information on managing pain, understanding the potential for patient addiction, and determining best practices for safe, responsible opioid prescribing. MSSNY has also developed a page entitled, **“Opioids: What One Doctor Can Do“**. This page is located on the MSSNY website, www.mssny.org, and is located in a blue box at the top of the home page.

**SHIP Update**

State Health Innovation Plan has the triple aim of “better care, better population health and lower health care costs.” It describes the prevalence of diabetes as “arguably our biggest looming health challenge.” For the three years ending in 2013, federal government data reports that approximately 1.6 million adult New Yorkers a year have been diagnosed with diabetes (10.3 percent of New York adults). The New York Department of Health (DOH) estimates that another 760,000 New Yorkers have the disease, but do not know it. In addition, DOH estimates that 5 million New Yorkers have pre-diabetes. The CDC estimates that without lifestyle changes to reduce the risk of diabetes, 15 to 30 percent of individuals with pre-diabetes, or 750,000 to 1.5 million New Yorkers, will develop Type 2 diabetes within five to ten years. DOH says the overall annual cost of diabetes in New York, attributable to both direct medical costs and lost productivity, is $12 billion for all payers, including Medicaid.

Over this time period, average annual diabetes prevalence in New York was slightly higher among men than women. Diabetes was least common among New Yorkers in the 25-34 age range; white individuals; those earning $50,000 or more a year; and those who have graduated from college. Comparing State and national data, New York’s annual adjusted diabetes death rates have been consistently lower than national rates for each of the last ten years. Both State and national diabetes death rates are significantly lower than they were ten years ago, despite some increase from 2010 to 2013. Preventing diabetes remains a challenge not only in New York but across the country.
Preventing Disease Outbreaks

New York is “tied for top billing in terms of preventing, diagnosing and responding to disease outbreaks.” The TFAH used data from the Centers for Disease Control and Prevention to create a “scoring system with metrics such as flu vaccination rates, food safety and HIV/AIDS surveillance – and then evaluated each of the 50 states to see how they stacked up.” New York is among the five states that “maxed out at 8/10 points.” Delaware, Kentucky, Maine, New York and Virginia—tied for the top score, achieving eight out of 10 indicators. Seven states—Idaho, Kansas, Michigan, Ohio, Oklahoma, Oregon and Utah—tied for the lowest score at three out of 10.

Physician Shortage

HANYS’ 2014 Annual Physician Advocacy Survey concerning the physician shortage showed a total need of 942 physicians. Primary care specialty was the group cited as most needed. The 2014 survey showed 888 new physician hires while 2104 retired/resigned. The upstate providers identified a total need for 615 new physicians, which represents 65% of the total need reported. Hospital employment of physicians has been increasing. Respondents reported that among their total physicians, 26% are directly employed, and among new hires, that number rose to 33%.

News from Around the State

Broome

Our annual holiday dinner was held at PS Restaurant on December 3rd. Donations were collected for the Glove House, an organization that provides service to children in foster care. Funds were also collected for gift cards for clients of the RISE shelter. A $250 donation will be given to Mothers and Babies Perinatal Network. We raised funds for scholarships through our annual holiday card and poinsettia sales. This spring we will provide $2000 to Broome Community College for nursing scholarships and distribute our Health Career Awards as well as the Krizinofski and the Erich and Helga Mamlok scholarships.

Onondaga

The Holiday Luncheon was held at the Genesee Grande on December 2nd which featured our Alliance Day Project that benefited the Interfaith Works Center for New Americans with a contribution of about $2,000 in cash and another $2,000 in-kind gifts for the refugees. This center welcomes refugees to the Syracuse area from many of the most troubled places on earth, helping them to establish new lives by assisting them in finding housing, learning English, and securing employment. The center typically resettles 500-600 new refugees each year and assists an additional 1200 families who have been in the United States for less than 5 years. Additionally, our holiday ad and basket raffle netted $4,000 for our scholarship fund.

Plans are well underway for our annual Doctors’ Day celebration to be held on March 30th at Julie’s Place with hot and cold hors d’oeuvres as well as a sumptuous supper with food stations. A local physician will receive an award for his/her support and continued advocacy for the mission of the Alliance and for all its efforts within the community. Doctors’ Day was established to honor and pay tribute to members of the medical profession everywhere and to recognize their contributions and continuing dedication. March 30 was chosen as the official day on which to celebrate Doctors’ Day because on this day in 1842, Dr. Crawford W. Long of Jefferson, GA became the first physician in history to use ether anesthesia during surgery. The official symbol of Doctors’ Day is the red carnation and carnations will be given to physicians in the North Medical and Physicians’ Office Buildings.

A Spring Luncheon is planned for May 11 at the Craftsman. The county Think! Don’t Drink or Text! Campaign will be initiated again in April.

Richmond

Our annual holiday cocktail party was held at the home of Dr. Robert and Corrie Verde on December 4th. Toys and monetary donations were collected for the Salvation Army. Our holiday card netted $1500 for our scholarship fund.

Schenectady

Our Alliance held our Luncheon and Fashion show on December 2, 2015. The fashion show was a social and financial success, raising over $10,000 for the organizations that we will be supporting throughout the year. The organizations are Things of My Very Own, an organization that assists with clothing and other items for foster children, SAFE Inc. of Schenectady which is a shelter for homeless, runaway and “throwaway” teens and children and those who have been sexually exploited, and S.T.E.P. (Saratoga Therapeutic Equestrian Program.) Over 190 guests were in attendance. The show featured holiday fashions from Saratoga Trunk, a Silent Auction, raffles and a delicious lunch catered by Glen Sanders Mansion. Ten vendors selling holiday gift items also participated. Everyone enjoyed the afternoon and the Schenectady Medical Alliance and "Friends" of the Alliance were pleased and proud to sponsor this event. Major underwriters of this event were Schenectady Medical Society, Dr. Chao Plastic Surgery, and
Mondragon, McGrinder & Stier, Obstetrician & Gynecologists. We will be holding a planning luncheon on February 9th to discuss our upcoming events including Niskayuna Day.

In Memoriam

We were heavy hearted when we heard about the death of Barbara Martin. Barbara was short in stature, but a dynamo in her contribution to the Alliance. She served several terms as Nassau County President and then proceeded to contribute her talents to AMSSNY. She served as delegate to the national alliance, director, chair of directors, newsletter editor, state president from 1994-95, director of finance as well as chairing many committees. Most recently she contributed to the alliance as a member at large.

Planning Calendar

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<tr>
<th>Event</th>
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<tr>
<td>AHEI Grant Application Deadline (postmarked)</td>
<td>February 28, 2016</td>
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<tr>
<td>MSSNY Physician Advocacy Day, Empire State Plaza, Albany</td>
<td>March 8, 2016</td>
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<tr>
<td>Northeast Regional Meeting, Gettysburg, PA</td>
<td>April 15-17, 2016</td>
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<tr>
<td>AMAA Annual Meeting and Leadership Development, Chicago, IL</td>
<td>June 12-14, 2016</td>
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Member-At-Large Membership

The Alliance is doing important works within our state and across our country, taking an active voice in medical legislation and a meaningful role in health issues. The Alliance needs YOUR support in order to continue with these efforts. Though you may not have the time or inclination to become involved presently, payment of your dues will help those who are already actively engaged. If you desire to become involved, members-at-large have the opportunity to serve on the board and can be delegates to our convention. Alliance members continue to work on projects concerned with violence, internet safety, bullying, peaceful conflict resolution, awareness for the need of organ and tissue donation, health literacy, smoking cessation, the growing problem of obesity—especially in children, and many other health and legislative issues.

JOIN US NOW

If you are already a member… THANK YOU…

Don’t forget to renew. Please Print Information

Name: ________________________________ Spouse’s Name: ________________________________

Address: __________________________________________________ County: _________________

City: _______________________________ State: ________________ Zip Code: _______________

Phone: ___________________________ Work Phone: ___________________________ E-Mail: ___________________________

Payments of dues for county, state and national should be made directly to your county alliance (if unsure if your county Alliance is active, call 1-800-523-4405). If your County does not have an active Alliance, you may become a Member-At-Large (MAL) by sending your State ($25) and National ($50) dues (Total of $75). Senior/Widows (65+ and 20 years active service) State dues are$12.50. ($62.50 if State and National) Please make checks payable to AMSSNY-MALs and submit to:

AMSSNY-MAL
865 Merrick Avenue
Westbury, NY 11590-9007