

CELEBRATING 156 YEARS!

# Stark County Medical Society

# News

Spring/Summer 2022

## A Message from our President

We hope that you enjoyed a wonderful spring!

In April, I attended the annual meeting of the Ohio State Medical Society in Columbus representing SCMS and District 6 of OSMA.

Our members worked on forwarding multiple resolutions regarding various concerns and issues faced by the medical community. Those resolutions were adopted by the house of delegates with minor amendments.

This year, we were able to have our annual meeting in-person. The meeting was well attended by the members and guests.

Dr. Susan Mercer received a lifetime achievement award for serving the patients and leading the education of

medical professionals in the county. She was the program director for Family Medicine Residency for many years.

Dr. Stacy Holloway was recognized for her leadership and presiding the SCMS in 2021.

Dr. Charles E. Smith and the committee have worked to modify and update the mission statement of the society.

The Membership Benefit Committee has been working to arrange and make available various services based on group discounts. We will give you an update as soon as some of these services are finalized.

SCMS fundraising activities continue to raise money for scholarships and food banks.



Raza Khan, MD

## 2022 BOARD

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The Stark County Medical Society (SCMS) has access to politicians and the state medical association. Together, we are strong with a voice that will be heard! Contact us at 330.492.3333 or [www.starkmedical.org](http://www.starkmedical.org). We look forward to hearing from you.



Opinions expressed by the authors are their own, and not necessarily those of the Stark County Medical Society, Trustees or individual members. SCMS News reserves the right to edit all contributions for clarity and length, as well as, to reject any material submitted.

# Stark County Medical Society Family Pot Luck Picnic Sunday, August 21 2022

Join us for an old fashion family pot luck picnic at Noon.  
or Tee off at 10:30 am for a 9 Hole Scramble  
BBQ • Pot Luck • Outdoor Games and then golf another 9 holes!  
Cost: \$20.00 includes golf and cart

Either way bring a side dish or dessert to share. SCMS will supply the BBQ.

**RSVP: 330.492.3333 No later than 8/15/22**

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# Stark County Medical Society 21st Annual Golf Outing

to benefit the Akron-Canton Regional Foodbank

**Wednesday, September 21, 2022**  
**Arrowhead Golf Club**  
**1500 Rogwin Cir SW, North Canton, OH 44720**

**10:00 AM** Registration and Shrimp & Bloody Mary Hospitality Station  
**11:00 AM** Lunch  
**12:00 PM** Shotgun Start  
**6:00 PM** Dinner

Scramble format 18 holes with cart • Lunch cookout before shotgun start  
 Margaritas and chips at the turn • Beer (21+), pop and water on the course • Raffles • Exclusive swag bag for each golfer • Prizes  
 Free contests • Dinner in the ballroom immediately after golf

**\$100/Golfer • \$400/Foursome**

**Single Registration • \$100/Person**

Name: \_\_\_\_\_ Meal Selection: \_\_\_\_\_

Individual golfers and smaller groups will be paired for the event.

**Team Registration • \$400/Foursome**

Team Name: \_\_\_\_\_

Name 1: \_\_\_\_\_ Meal Selection: \_\_\_\_\_

Name 2: \_\_\_\_\_ Meal Selection: \_\_\_\_\_

Name 3: \_\_\_\_\_ Meal Selection: \_\_\_\_\_

Name 4: \_\_\_\_\_ Meal Selection: \_\_\_\_\_

The event will sell out. Registration is on a first come, first serve basis. Your payment is required for completion. Please indicate dinner selection after each name. Golfers have a choice of steak, scrod, lemon chicken or vegetarian.

**Dinner in the ballroom with no golf • \$30/Person**

Name: \_\_\_\_\_ Meal Selection: \_\_\_\_\_

**Tee Sponsorship • \$100**

Business or Family Name: \_\_\_\_\_

### Sponsorship Opportunities:

Become an outing sponsor for just \$100 and show your support of Community Harvest, a program of the Akron-Canton Regional Foodbank. Your family or business name will be proudly displayed at the tee box of one of the 18 holes.

**PRIZES AWARDED TO**  
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**Last Place Team**



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Contact Faith Barbato at 330.493.0800 or fbarbato@acrfb.org for more information.  
 Mail this form with check payable to Stark County Medical Society to:  
 Akron-Canton Regional Foodbank Stark Campus; 1365 Cherry Ave. NE; Canton, OH 44714

# FINANCIAL FOCUS: *Don't be surprised by Social Security taxes*

## BY EDWARD JONES

When you reach the appropriate age, it's easy to apply for Social Security retirement benefits – just go to Social Security's website, fill out the online form and you're essentially done. But many people overlook the next step – completing Form W-4V, which asks you how much federal income tax you want withheld from your benefits. And if you skip this step, you could face an unpleasant surprise when it's tax-filing time, because Social Security benefits can indeed add to your taxable income. Here are the details:

- If you're a single filer...If your "combined" income is between \$25,000 and \$34,000, you may have to pay income tax on up to 50 percent of your Social Security benefits. ("Combined" income includes your adjusted gross income, non-taxable interest, and one-half of your annual Social Security benefits.) If your combined income is more than \$34,000, up to 85 percent of your benefits may be taxable.
- If you're married and file jointly...If you and your spouse have a combined income between \$32,000 and \$44,000, you may be taxed on up to 50 percent of your benefits. If your combined income is more than \$44,000, up to 85 percent of your benefits may be taxable.

These numbers might seem high, but they don't mean you'll lose 50 percent, or 85 percent, of your benefits – they are just the percentages of benefits you may be taxed on, at your personal income tax rate.

To help avoid a big tax bill or an underpayment penalty, you can file Form W-4V with the Social Security Administration and request to have 7, 10, 12 or 22 percent of your monthly benefit withheld. Your tax advisor can help you choose the withholding percentage that's

appropriate for your situation.

The amount of taxes you may need to pay will also depend on when you start taking Social Security. The earlier you take benefits, the smaller your monthly checks, and the smaller the taxes. But taxes should not be a key issue in deciding when you need to begin collecting your payments. Rather, you should consider other factors, such as your anticipated life expectancy, your employment situation, your spending needs and the benefits for your spouse.

Here's something else to keep in mind: Because Social Security taxes are based on your overall income, as described above, the amount of money you withdraw during retirement, and where that money comes from, can also affect your tax situation. For example, withdrawals from a traditional IRA are taxable and will increase your adjusted gross income, but withdrawals from a Roth IRA will be tax-free, provided you've had your account at least five years and you're over 59 -1/2, so this money won't enter into your taxable income calculations and it won't increase the tax you owe on your Social Security benefits. Similarly, withdrawals from health savings accounts (HSAs) used for qualified health expenses also won't count toward your taxable income.

By knowing exactly what to expect from Social Security, including the tax effects, you can more effectively incorporate your benefits into your overall retirement income planning – and the better your plans, the more you'll be able to enjoy your life as a retiree.

*This article was written by Edward Jones for use by your local Edward Jones Financial Advisor. Edward Jones. Member SIPC.*

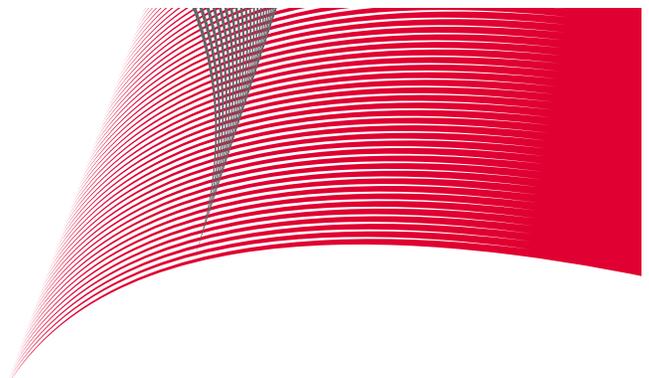
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# Hire Your Next Top Employee

## TWI BRIDGES THE GAP BETWEEN JOB SEEKERS WITH DISABILITIES & LOCAL BUSINESSES.

Founded in 1968, TWi is a non-profit (CBA) organization serving nearly 400 adults with developmental/intellectual disabilities in Stark, Mahoning, and Trumbull counties. TWi provides a range of services including: Homemaker Personal Care Residential, Adult Day Services, Vocational Habilitation, Group Employment, Community Employment and Non-Medical Transportation.

Many adults with disabilities work in our community or want to work in our community. For those working, TWi provides job coaching from a Workforce Consultant on a regular basis to empower them to maintain or grow in their current place of employment.

Adults with disabilities looking for employment or needing a discovery process to help figure out what type of employment would be a good fit for them, are typically referred to TWi via Opportunities for Ohioans with Disabilities (OOD). OOD is a separate funding source available to adults with disabilities to help them through this process. If needed, TWi Workforce Consultants provide a thorough assessment for Career Discovery to help determine what lines of work interest the individual. Workforce Consultants will then conduct a Community Based Assessment

A CBA is used to determine an individual's ability and readiness to enter the job market, and to ensure the best employment fit possible. When an individual is considered for a CBA, he or she is believed to have the potential for community employment. These short-term assessments provide hands-on experience, and allow TWi staff to determine what kind of training and support an individual may need to achieve their employment goals.

TWi Workforce Consultant, Heather Greynolds, describes the process best: "CBAs offer both the employer and the participant so many benefits. We never want to set someone up for failure and these assessments assist us in determining the right path of employment in order to set them up for success. It gives the participant the opportunity to do the work hands-on to see if they will like it or not. It's an opportunity for them to let me know if it's the right job for them or not. If not, then we try something else! Once the CBA is done and the line of work is determined, we start applying for jobs that they know they will like and be good at. Many times an employer hosting a CBA will see how great the participant is at the job and hire them

on the spot!"

TWi's goal is to tailor a CBA work site to meet each individual's strengths and skills. TWi is always looking for partnering businesses willing to host a CBA. CBAs can be completed in any industry because people with disabilities can perform almost any type of job – from unskilled labor to technical and professional jobs. Currently, TWi supports individuals with disabilities in a variety of employment environments; including hospitals, offices, restaurants, stores, and more.

A CBA involves 20-40 hours of employment experience observed by a TWi Workforce Consultant. Participating individuals are paid through TWi for all hours worked, creating a costless experience for participating businesses. Additionally, throughout the CBA, businesses have the opportunity to observe the job seekers' work ethic, work habits, and their overall ability to complete the tasks related to the desired position. Who knows, you might just find your next top employee through this process!

For more information on becoming a CBA site, or hiring an individual with disabilities, please contact Kathy Wahl at [wahlk@choosetwi.com](mailto:wahlk@choosetwi.com) or 330-479-3768.



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## *“Physician Non-Competition Agreements 2022”* by Scott P. Sandrock Brennan, Manna & Diamond, LLC

Contract provisions with restrictions on physicians practicing in the same area should they change employment have been around for decades. In Ohio, courts continue to state that while provisions are generally disfavored, non-competition provisions remain enforceable. Specifically, as to physician non-competes, the courts note that such agreements are further scrutinized regarding the adverse effect on the public interest to keep healthcare professionals in a community. Courts have continued in more cases than not to enforce restrictive covenants against physicians.

Two recent cases however provide some further guidance of newer views that may be of value to physicians considering a change of employment, particularly if they are employed by a hospital system and work in the hospital setting. In both cases, the court declined to enforce the non-competition provision under the facts and circumstances of the physicians in those cases.

The general standards for consideration by the Courts in the enforcement of non-compete provisions include:

1. Does the employer have a legitimate business interest that needs to be enforced to protect a business interest of the employer which would prevent unfair competition not just normal competition. In other words, did the employer share truly unique information with the employee such as financial information, business trade secrets and the like
2. The court has to determine if enforcing the agreement would impose an undue hardship on the employee and if enforcing the agreement would be injurious to the public.
3. Is the restriction reasonable as to both geography and duration.

The first case involved a cardiothoracic surgeon in Cincinnati area who specialized in Mitral Valve and LVAD procedures as an employee of a hospital. In this case, the physician sued the hospital asking the court to determine that the agreement should not be enforced. The court analyzed the various factors and concluded that while a hospital valued the physician service of the physician, that alone was not a business interest of the hospital that permit the enforcement of the non-compete. Patients were referred to the physician by other cardiologists and after the procedure, the patient generally returned to the referring cardiologist. Everyone agreed that the

physician in fact spent no time soliciting patients to refer cases to the physician.

The court further noted that when the physician went to the other hospital, he did not unfairly compete with his former employer as he did not take any patient information, any confidential business information with him, nor did he reach out to solicit any prior referral sources to send patients to him.

The court also found that the physician was one of a limited number of physicians who were able to perform minimally invasive mitral valve surgeries and the new employer had no physician who could do so. The court concluded that there was a compelling benefit to the public that the physician continue their new position. The court also discussed the impact on the physician himself, finding that the physician's wife was also a physician who had her own practice, they had minor children, and that the physician would have to commute to Columbus staying away from his family in order to satisfy the restriction. Based on all of these factors, the court declined to enforce the restrictive covenant.

The second case decided in January, involved a physician who was the director of the burn unit at Metro Health. He left Metro and took a position as the director of the burn unit at the Akron Children's Burn Institute. Metro Health sued seeking to enforce a two-year non-compete. The court likewise reviewed the same elements as in the Hamilton County case. The court concluded that in this circumstance, patients that need burn care generally are going to go to the closest burn center as opposed to making a conscious choice to select one physician over another to provide the care. The court further concluded that it is unlikely that a burn patient needing hospitalization would be out looking for a specific physician under the circumstances. Based on that factor, the court concluded that Metro did not have a business purpose for which the contract should be enforced.

The court further looked at the issue of undue hardship both as to the doctor and to the public. As to the physician, the facts in this case once again had a circumstance where the physician's spouse was also a physician working as a trauma medical director at another hospital and that restrictive covenant if enforced, would

require the physician to live apart from his family for a period of one year. The court further noted that there is a shortage of skilled burn surgeons in Northeast Ohio, and because of the specialty the public interest was best served by allowing the physician to continue to practice. The court however did note that the physician had previously served as the director of the burn unit at Metro and issued an injunction against the physician serving in any leadership capacity for the burn unit for Children's and from sharing any business or financial information regarding Metro's burn unit.

These cases do not hold that all non-competes for physician's are improper or unenforceable. The court in both cases dealt with a physician employed by a hospital system with a subspecialty. In both cases, patients came to the physician by way of either referrals by other physicians or proximity of the hospital to the patient's need (burn center). In these cases, both courts agree that the public interest of keeping a quality physician for the benefit of the public trumps the hospital's interest to prevent the physician from practicing in the community.

These cases also have some other lessons. First, you should carefully read contracts before you sign and consider the ramifications of non-competition provisions, either as to their enforceability or the cost of litigation to fight about them. Second, these cases both involve physicians employed by hospital systems. The Courts seemed to be more inclined to enforce restrictive covenants for physicians in private practices. Third, if you have a restrictive covenant and are thinking about a job change get legal advice in advance and plan a fresh start with no patient or referral source contacts. The negative effect on families alone will rarely carry the day for you. This continues to be an evolving area of the law, stay tuned for future developments.

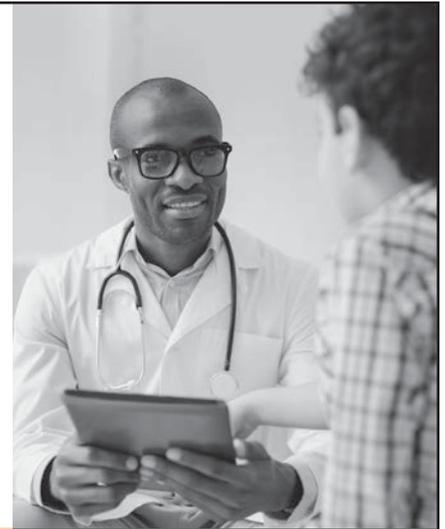
If you would like copies of the cases or have any questions, please contact Scott Sandrock at 330-253-4367, [spsandrock@bmdllc.com](mailto:spsandrock@bmdllc.com).

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Scott P. Sandrock  
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Jack T. Diamond  
Matthew A. Heinle  
Christopher J. Meager

Richard W. Burke  
Jason A. Butterworth  
John N. Childs

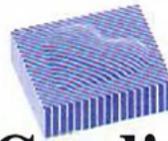


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For more information, contact Scott Sandrock, Healthcare Group Attorney at (330) 253-4060 or [spsandrock@bmdllc.com](mailto:spsandrock@bmdllc.com).

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# GOUT: Exploring a Chronic Systemic Disease of the Kidney

Wednesday, July 27, 2022 at 6:00 PM ET

Twisted Olive

5430 Massillon Rd

North Canton, OH 44720

Speaker: Bhavnish Bucktowarsing, MD

RSVP Audrey Heckaman

AHeckaman@horizontherapeutics.com

By July 25, 2022

+1 (216) 470-0200

## Program Highlight

- Describe the increasing burden of gout and review the efficacy and safety of KRYSTEXXA<sup>®</sup> (peglicase) for the management of uncontrolled gout

## INDICATIONS AND USAGE

KRYSTEXXA<sup>®</sup> (peglicase) is indicated for the treatment of chronic gout in adult patients who have failed to normalize serum uric acid and whose signs and symptoms are inadequately controlled with xanthine oxidase inhibitors at the maximum medically appropriate dose or for whom these drugs are contraindicated.

Important Limitations of Use: KRYSTEXXA is not recommended for the treatment of asymptomatic hyperuricemia.

Please see additional Important Safety Information on the following page and [click here](#) for Full Prescribing Information, including Boxed Warning.



## IMPORTANT SAFETY INFORMATION

### WARNING: ANAPHYLAXIS AND INFUSION REACTIONS

Anaphylaxis and infusion reactions have been reported to occur during and after administration of KRYSTEXXA. Anaphylaxis may occur with any infusion, including a first infusion, and generally manifests within 2 hours of the infusion. However, delayed-type hypersensitivity reactions have also been reported. KRYSTEXXA should be administered in healthcare settings and by healthcare providers prepared to manage anaphylaxis and infusion reactions. Patients should be premedicated with antihistamines and corticosteroids. Patients should be closely monitored for an appropriate period of time for anaphylaxis after administration of KRYSTEXXA. Monitor serum uric acid levels prior to infusions and consider discontinuing treatment if levels increase to above 6 mg/dL, particularly when 2 consecutive levels above 6 mg/dL are observed.

The risk of anaphylaxis and infusion reactions is higher in patients who have lost therapeutic response.

Concomitant use of KRYSTEXXA and oral urate-lowering agents may blunt the rise of sUA levels. Patients should discontinue oral urate-lowering agents and not institute therapy with oral urate-lowering agents while taking KRYSTEXXA.

In the event of anaphylaxis or infusion reaction, the infusion should be slowed, or stopped and restarted at a slower rate.

Inform patients of the symptoms and signs of anaphylaxis, and instruct them to seek immediate medical care should anaphylaxis occur after discharge from the healthcare setting.

### CONTRAINDICATIONS: G6PD DEFICIENCY ASSOCIATED HEMOLYSIS AND METHEMOGLOBINEMIA

Screen patients for G6PD deficiency prior to starting KRYSTEXXA. Hemolysis and methemoglobinemia have been reported with KRYSTEXXA in patients with G6PD deficiency. Do not administer KRYSTEXXA to these patients.

### GOUT FLARES

An increase in gout flares is frequently observed upon initiation of anti-hyperuricemic therapy, including treatment with KRYSTEXXA. If a gout flare occurs during treatment, KRYSTEXXA need not be discontinued. Gout flare prophylaxis with a nonsteroidal anti-inflammatory drug (NSAID) or colchicine is recommended starting at least 1 week before initiation of KRYSTEXXA therapy and lasting at least 6 months, unless medically contraindicated or not tolerated.

### CONGESTIVE HEART FAILURE

KRYSTEXXA has not been studied in patients with congestive heart failure, but some patients in the clinical trials experienced exacerbation. Exercise caution when using KRYSTEXXA in patients who have congestive heart failure and monitor patients closely following infusion.

### ADVERSE REACTIONS

The most commonly reported adverse reactions in clinical trials with KRYSTEXXA are gout flares, infusion reactions, nausea, contusion or ecchymosis, nasopharyngitis, constipation, chest pain, anaphylaxis and vomiting.

### Please see accompanying [Full Prescribing Information](#), including **Boxed Warning**.

Please note that Horizon Therapeutics adheres to the principles set forth in the PhRMA Code on Interactions with Health Care Professionals. All program functions are for invited guests only. Spouses and others, including office staff or other family members, may not attend.

**REPORTING DISCLOSURE:** All meal participants will be required to sign-in at this event. As required by the federal Sunshine Act and other similar state laws, the cost of the meal provided to you will be publicly reported. If you want to attend the program without your information reported, you may opt-out of the meal.



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# 2022 CALENDAR

June

August

..... September .....

**22**

**Health Improvement Summit**  
Wednesday, 8:30 AM  
Kent State at Stark

**21**

**Membership Picnic**  
Sunday, 10 a.m. Tee-Off  
Noon Lunch  
Oakwood Country Club

**1**

**SCMS Board Meeting**  
Thursday  
6:00 p.m.

**TBD**

**SCMS Health Fair**

September

October

November

December

**21**

**SCMS Golf Outing**  
Wednesday  
10:30 a.m.  
Arrowhead Country Club

**TBD**

**Fall Retreat**  
Saturday & Sunday

**3**

**SCMS Board Meeting**  
Thursday  
6:00 p.m.

**1**

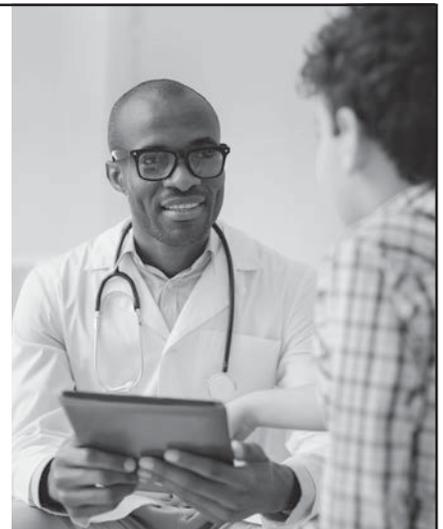
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