

Report of the Reference Committee on Operations
June 24, 2018

Reference Committee Chair: Mr. Speaker, the Reference Committee on Operations has considered each of the items referred to it and desires to present the following report. The Committee's recommendations on each item will be submitted on our consent calendar.

Speaker: Should the Congress approve the consent calendar, all items on the consent calendar will be disposed of in that single action. There will not be any opportunity for discussion on any item that is included on the consent calendar after the consent calendar is adopted. It is important, therefore, to extract an item from the consent calendar at this time if you wish to discuss that item. A motion to extract something from the consent calendar does not require a second. Any delegate may extract an item from the consent calendar by so moving that the item be extracted and the item will be extracted without objection. The items on the consent calendar are listed in the report of the reference committee and are being projected on the screen. Does anyone have anything they would like to have extracted?

A: CONSENT CALENDAR

Mr. Speaker, the Committee wishes to place on the Consent Calendar the following items

1. Resolution 18-01 "Increase CME Continuing Medical Education Credit Requirement to a Maximum of 50 Percent" **Be Adopted**
2. Resolution 18-04 "Supporting Menstrual Equity in New York State" **Be Adopted**
3. Resolution 18-06 "Assessing the Quality of Healthcare Insurers" **Refer to the Board**
4. Resolution 18-07 "Defining the Causes of Family Physicians' Frustrations and Feelings of Burnout" **Be Affirmed**
5. Resolution 18-10 "Gun Violence, Education, and Trauma-informed Care" **Be Adopted as Amended**
6. Resolution 18-11 "Streamlining Health care in New York State" **Be Adopted as Amended**
7. Substitute Resolution 18-13 "Preserve the Affordability of Physical Therapy" **Be Adopted**
8. Substitute Resolution 18-14 "Oppose "Fetal Personhood" Terminology in Governmental Policies and Legislation" **Be Adopted**
9. Resolution 18-15 "Single Payer as a Viable Option to America's Health Care Crisis and the Need to Educate Physicians about Single Payer" **Be Adopted as Amended**
10. Resolution 18-17 "Institutional Racism in the Health Care System" **Be Adopted as Amended**
11. Resolution 18-18 "Pharmacy Chain Investors Should Not Set National Health Policy" **Be Adopted**
12. Resolution 18-22 "Worrisome Letter from ABFM Warning of Alleged Professionalism Lapses" **Be Adopted as Amended**

13. Resolution 18-25L “Divest of Fossil Fuel Investments” **Not be Adopted**
14. Substitute Resolution 18-28 “Vacating Marijuana-Related Offenses” **Be Adopted**
15. Resolution 18-29 “Congress of Delegates annual meeting change the month from summer time” **Be Adopted**

Mr. Speaker, the Committee moves adoption of the Consent Calendar as listed.

Mr. Speaker, the Committee considered Resolution 18-01. Item 1 on the Consent Calendar.

SUBJECT: Increase CME Continuing Medical Education Credit Requirement to a Maximum of 50 Percent

RESOLVED, that the New York State Academy of Family Physicians (NYSAFP) delegates to the American Academy of Family Physicians (AAFP) Congress of Delegates submit a resolution directing the AAFP to Increase the allowable Continuing Medical Education (CME) Credit provided for teaching to a maximum of 50 percent (75 hours) of the 150 hours required over a 3-year cycle.

There was no testimony in opposition.

Mr. Speaker, the Committee recommends Resolution 18-01 **be adopted**.

Mr. Speaker, the Committee considered Resolution '18-04. Item 2 on the Consent Calendar.

SUBJECT: Supporting Menstrual Equity in New York State

RESOLVED, that the New York State Academy of Family Physicians advocate for policies supporting increased access to menstrual hygiene products, including but not limited to, the provision of menstrual hygiene products in correctional and shelter settings at no cost for the individuals using them.

There was no testimony in opposition.

Mr. Speaker, the Committee recommends that Resolution 18-04 **be adopted**.

Mr. Speaker, the Committee considered Resolution 18 – 06. Item 3 on the Consent Calendar.

SUBJECT: Assessing the Quality of Healthcare Insurers

RESOLVED, that the New York State Academy of Family Physicians (NYSAFP) conduct an annual survey of its members to evaluate the healthcare insurance companies with covered lives in NY State and rate how "Family Physician friendly" they are, as well as how "patient friendly" they are and the results of this survey will be shared with members and healthcare consumers with the goal that the results be available prior to insurance "open enrollment" season.

The Academy has previously used surveys to collect information to inform positions on issues, support those positions and develop programs. There was testimony regarding the value of making such information available to members. The reference committee had concerns about the

clarity of intent of the resolution and how the survey information could be effectively utilized to influence practices of insurance companies. The committee feels there is merit to collecting more information. It would be beneficial to have more thought put into the type of information to be collected and its utilization PRIOR to a mandate for the execution of an annual survey.

Mr. Speaker, the Committee recommends that Resolution 18-06 **be referred to the board.**

Mr. Speaker, the Committee considered Resolution 18 – 07. Item 4 on the Consent Calendar.

SUBJECT: Defining the Causes of Family Physicians' Frustrations and Feelings of Burnout

RESOLVED, that the New York State Academy of Family Physicians poll our membership, as well as non-member family medicine physicians in New York State, to determine the top 5 - 10 "hassles, frustrations, and causes of their feelings of burnout", and that this list be used by the Academy in their dealings with healthcare insurance companies, state agencies, and state senators and members of the State Assembly to find ways to reduce these problems for family medicine physicians.

Testimony highlighted the importance of this issue. In fact, however, the Academy routinely does research and conducts surveys of members on issues including factors which affect the practice experience. A survey of members last year created evidence in support of legislation NYSAFP was able to get introduced this year to limit the practice of prior authorization.

We feel this resolution is not needed because the board and staff have the authority to conduct research, including membership surveys, as necessary and in response to current priorities.

Mr. Speaker, the Committee recommends that Resolution 18-07 **be affirmed.**

Mr. Speaker, the Committee considered Resolution 18-10. Item 5 on the Consent Calendar.

SUBJECT: Gun Violence, Education, and Trauma-informed Care

RESOLVED, that the NYSAFP work to develop and provide educational material and CME programs to its members on gun violence, safe firearm storage, firearm safety, contribution of alcohol and substance abuse to gun violence, the role of media violence and gang membership in firearms use, and trauma-informed care in an easily accessible medium and, be it further

RESOLVED, that the NYSAFP work with local and state agencies as appropriate to develop public health initiatives addressing the effects of gun violence and how to access health services for trauma-informed care for all medical personnel, first responders, and the general public and, be it further

RESOLVED, that the NYSAFP delegates to the American Academy of Family Physicians (AAFP) Congress of Delegates bring forth a resolution directing the AAFP to dedicate resources to the development of physician education and public health initiatives to address the ongoing need for trauma informed care for all medical personnel, first responders, and the general public.

Testimony was given about trauma associated with gun violence, education regarding gun violence, and violence in general. Trauma informed care is not exclusive to gun violence. The committee was uncertain whether there is sufficient evidence in support of the effectiveness of the specified practice of “trauma informed care.”

The Committee recommends deleting reference to trauma-informed care and recommend amending the resolution by deleting the verbiage “trauma-informed care.”

RESOLVED, that the NYSAFP work to develop and provide educational material and CME programs to its members on gun violence, safe firearm storage, firearm safety, contribution of alcohol and substance abuse to gun violence, the role of media violence and gang membership in firearms use, ~~and trauma-informed care~~ in an easily accessible medium, be it further

RESOLVED, that the NYSAFP work with local and state agencies as appropriate to develop public health initiatives addressing the effects of gun violence and how to access health services for ~~trauma-informed~~ care for all medical personnel, first responders, and the general public, and be it further

RESOLVED, that the NYSAFP delegates to the American Academy of Family Physicians (AAFP) Congress of Delegates bring forth a resolution directing the AAFP to work with appropriate federal agencies to develop public health initiatives ~~to address the ongoing need for trauma-informed~~ addressing the effects of gun violence and access to health services for all medical personnel, first responders, and the general public.

Mr. Speaker, the Committee recommends that Resolution 18-10 be **adopted as amended**.

Mr. Speaker, the Committee considered Resolution 18 – 11. Item 6 on the Consent Calendar.

SUBJECT: Streamlining Health care in New York State

RESOLVED that the NYSAFP advocate for a state-wide claims clearinghouse that offers a unified and integrated billing and payment system including all insurers regulated by New York State, mandating these specific components:

- a) Standardized Billing Form.
- b) Standardized Eligibility Verification.
- c) Standard co-payments & deductibles.
- d) Standardized coordination of benefits.
- e) Timely and Periodic Payment.

Testimony supported the general intent of this resolution. The Committee felt the resolution does not provide clear enough direction. The Committee recommends amending the Resolution by adding the phrase for “development of legislation” which we feel gives direction to advocacy efforts.

RESOLVED that the NYSAFP will advocate for development of legislation for a state-wide claims clearinghouse that offers a unified and integrated billing and payment system including all insurers regulated by New York State, mandating these specific components:

- a) Standardized Billing Form.
- b) Standardized Eligibility Verification.
- c) Standard co-payments & deductibles.
- d) Standardized coordination of benefits.
- e) Timely and Periodic Payment.

Mr. Speaker, the Committee recommends that **Resolution 18-11 be adopted as amended.**

Mr. Speaker, the Committee considered Resolution 18 – 13. Item 7 on the Consent Calendar.

SUBJECT: Preserve the Affordability of Physical Therapy

RESOLVED, that the New York State Academy of Family Physicians advocate with the State Department of Health, as well as state senators and assemblymen to pass legislation or regulation to mandate that the patient copay/coinsurance for a Physical Therapy visit may not exceed 20% of the cost the insurer pays for that visit.

Testimony established that access to PT is influenced by the patient share of costs and that PT is often a viable alternative to opioid treatment for pain. The maker of this resolution was uncertain about what would be the best way to address the patient share of cost for PT treatment. There was also testimony regarding the authority to determine the length of treatment necessary.

The Committee recommends amending Resolution 18 – 13 by adding a second resolved clause as follows which reads:

RESOLVED, that the NYSAFP shall advocate for legislation to establish that the referring provider, rather than the insurer, determine the course/length of Physical Therapy

Mr. Speaker, the Committee recommends that **Substitute Resolution 18 – 13 be adopted.**

Mr. Speaker, the Committee considered Resolution '18 – 14. Item 8 on the Consent Calendar.

SUBJECT: Oppose “Fetal Personhood” Terminology in Governmental Policies and Legislation

RESOLVED, that the New York State Academy of Family Physicians (NYSAFP) oppose the use of fetal personhood language in governmental policies and legislative initiatives and, be it further

RESOLVED, that the NYSAFP delegates to the American Academy of Family Physicians (AAFP) Congress of Delegates submit a resolution directing the AAFP to publicly oppose the use of and the concept of ‘fetal personhood’ language in governmental policies and legislation.

There was testimony in support of the importance of supporting autonomy and rejecting disenfranchisement of advocates of reproductive rights in establishing policy regarding reproductive health. The Committee feels the term “fetal personhood” could be interpreted as inflammatory and possibly prevent a much-needed discussion on the need for the removal of non-scientific language from governmental regulations which affect health. Therefore, the committee recommends amending the resolution by replacing “fetal personhood” with the term “non-scientific language in the domain of reproductive health” in a Substitute Resolution 18 -14. The committee was also informed this resolution has been put forth in several other states throughout the country, and as such, it may be more appropriate to support existing resolutions rather than submitting a duplicitous one.

RESOLVED, that the New York State Academy of Family Physicians (NYSAFP) oppose the use of non-scientific language in the domain of reproductive health in governmental policies and legislative initiatives and, be it further

RESOLVED, that the NYSAFP delegates to the American Academy of Family Physicians (AAFP) Congress of Delegates support any resolution directing the AAFP to publically oppose the use of non-scientific language in the domain of reproductive health in governmental policies and legislative initiatives.

Mr. Speaker, the Committee recommends that **Substitute Resolution 18 – 14 be adopted.**

Mr. Speaker, the Committee considered Resolution 18-15. Item 9 on the Consent Calendar.

SUBJECT: Single Payer as a Viable Option to America’s Health Care Crisis and the Need to Educate Physicians about Single Payer

RESOLVED, that the New York State Academy of Family Physicians delegates to the American Academy of Family Physicians Congress of Delegates bring forth a resolution instructing the AAFP to include single payer national health insurance as a viable solution to America’s current healthcare crisis, and be it further

RESOLVED, that the New York State Academy of Family Physicians delegates to the American Academy of Family Physicians Congress of Delegates bring forth a resolution instructing the AAFP to include the data and conclusions of Board Report F in evidence-based Academy educational programs, CME activities, and stage presentations at Academy meetings in the areas of healthcare policy, healthcare economics, and healthcare systems, and be it further

RESOLVED, that the New York State Academy of Family Physicians delegates to the American Academy of Family Physicians Congress of Delegates bring forth a resolution instructing the AAFP to actively include support for a single payer national health plan in its advocacy for health system reform.

The testimony provided supports single payer as a viable solution, and emphasized the need to further educate physicians about this option. Testimony given demonstrated that the AAFP has already presented single payer as a solution at the national level. The committee agrees with the recommendation of the author with striking the first RESOLVED clause as the AAFP has already incorporated single payer into its position on universal health coverage.

The Committee recommends excluding the first RESOLVED clause and adopting the 2nd and 3rd RESOLVED clauses, which read as:

RESOLVED, that the New York State Academy of Family Physicians delegates to the American Academy of Family Physicians Congress of Delegates bring forth a resolution instructing the AAFP to include the data and conclusions of Board Report F in evidence-based Academy educational programs, CME activities, and stage presentations at Academy meetings in the areas of healthcare policy, healthcare economics, and healthcare systems, and be it further

RESOLVED, that the New York State Academy of Family Physicians delegates to the American Academy of Family Physicians Congress of Delegates bring forth a resolution instructing the AAFP to actively include support for a single payer national health plan in its advocacy for health system reform.

Mr. Speaker, the Committee recommends that **RESOLVED clauses 1 of Resolution 18-17 be reaffirmed** and **RESOLVED clauses 2 and 3 be adopted**.

Mr. Speaker, the Committee considered Resolution ‘18-17. Item 10 on the Consent Calendar.

SUBJECT: Institutional Racism in the Health Care System

RESOLVED, that the New York State Academy of Family Physicians (NYSAFP) adopt a policy opposing segregation of patient care within the healthcare system and within healthcare institutions by race, insurance status, or other demographics, and be it further

RESOLVED, that the NYSAFP advocate for equal reimbursement for healthcare services regardless of insurance status of the patient and regardless of practice type, immediately by an

increase in Medicaid rates to match Medicare rates, and ultimately through a universal Medicare-for-All healthcare payment system, and be it further

RESOLVED, that the NYSAFP advocate for fair allocation of charity care funding to hospitals either by allocating funds to hospitals proportional to the amount of charity care provided or by attaching those funds directly to assist patients in accessing essential health services, and be it further

RESOLVED, that the NYSAFP advocate for policies that mandate hospitals track and report quality metrics by patients' race and insurance status, and advocate for policies that impose penalties for the discriminatory practice of medicine (such as multi-tiered system of healthcare delivery) and for enforcement mechanisms for such penalties, and be it further

RESOLVED, that the NYSAFP submit a resolution to the AAFP Congress of Delegates (COD) with the above resolved clauses, and be it further

RESOLVED, that the NYSAFP submit a resolution to the AAFP COD to ask the Center for Diversity and Health Equity develop materials and provider education to increase awareness of how racism is manifested through institutional policies and how segregated care within the healthcare system is a cause of racial disparities in health outcomes.

The Committee heard testimony in support of the sentiments underlying this resolution. There were many questions and concerns about how some actions could be achieved. The Committee recommends separating this resolution.

Mr. Speaker, the Committee recommends that **RESOLVED clauses 1 and 6 of Resolution 18 – 17 be adopted** and **RESOLVED clauses 2-5 be referred to the board.**

Mr. Speaker, the Committee considered Resolution 18 – 18. Item 11 on the Consent Calendar.

SUBJECT: Pharmacy Chain Investors Should Not Set National Health Policy

RESOLVED, that the New York State Academy of Family Physicians (NYSAFP) establish a working group chosen by the President to explore systematically how proposed mergers of pharmacy chains and commercial insurers might affect our members and communities in New York State, and be it further

RESOLVED, that the NYSAFP delegates to the American Academy of Family Physicians (AAFP) Congress of Delegates instruct the AAFP to request the Robert Graham Center study the issue of proposed mergers as regards the health of the public and our members' ability to practice patient centered care.

The Committee heard testimony in support including the concern that these mergers could threaten coordination of care in medical homes.

Mr. Speaker, the Committee recommends that Resolution 18 – 18 **be adopted**.

Mr. Speaker, the Committee considered Resolution 18 – 22. Item 12 on the Consent Calendar.

SUBJECT: Worrisome Letter from ABFM Warning of Alleged Professionalism Lapses

RESOLVED, that the New York State Academy of Family Physicians (NSYAFP) directs it's AAFP Congress of Delegates (COD) delegation to bring forth a resolution to the AAFP COD asking the AAFP to directly relay the displeasure and concern over the ABFM's thinly veiled threats of de-credentialing on the basis of so-called lapse of professionalism even when no wrongdoing is found, and BE IT FURTHER

RESOLVED, that the NYSAFP will submit the following resolution to the AAFP COD:

“RESOLVED that the AAFP will work with our partners at the ABFM to remove voluntary surrender of a license or practice privileges or voluntary limitations as cause for revoking Board Certification”, and BE IT FURTHER

RESOLVED that if the American Board of Family Medicine remains adamant in its hegemony, that the AAFP start the exploration process of alternative, more fair, and less expensive boarding procedures for its members.

The Committee heard testimony that the AAFP is already exploring other avenues of Board certification and therefore the first and third RESOLVED clauses are not needed. The Committee recommends separation of the resolution.

Mr. Speaker, the Committee recommends that **Resolved clauses 1 and 3 of Resolution 18 – 22 be affirmed and the second RESOLVED clause be adopted**.

Mr. Speaker, the Committee considered Resolution 18 – 25L. Item 13 on the Consent Calendar.

SUBJECT: Divest of Fossil Fuel Investments

RESOLVED, that the NYSAFP review its investment portfolio, with the aim to identify investments in companies that derive the majority of their income from the exploration, production, transportation, and/or sale of fossil fuels, and be it further

RESOLVED, the NYSAFP review its investment portfolio, with the aim of identifying investments in companies that engage in non-sustainable environmental practices, and be it further

RESOLVED, that the NYSAFP work in a timely, incremental, and fiscally responsible manner, to the extent allowed by their legal and fiduciary duties, to end all financial investments (divestment) in companies that generate the majority of their income from the exploration, production, transportation, and/or sale of fossil fuels, and be it further

RESOLVED, that the NYSAFP, when fiscally responsible, choose commercial relationships with vendors, suppliers, and contractors, who have demonstrated environmental sustainability practices that seek to minimize their fossil fuel consumption, and be it further

RESOLVED, that the NYSAFP support County chapters in divestment of fossil fuel investments if requested, and be it further

RESOLVED, that the NYSAFP consider creating and/or supporting CME (Continuing Medical Education) to further inform our members, and present a press release to inform our members, patients, the public, and our legislators regarding our divestment of fossil fuels investments, and be it further

RESOLVED, that the New York delegation to the AAFP COD (American Academy of Family Physicians Congress of Delegates) bring a resolution requiring that the AAFP divest its fossil fuel investments.

There was favorable testimony heard in regards to this matter. However, it was noted by executive staff the NYSAFP investment portfolio is currently managed by the AAFP. The AAFP uses a socially conscious fund manager and has a passive management which means there is limited ability to exclude specific stocks and bonds from the account. The Committee concluded that implementation of this resolution would be very difficult under our current participation in the AAFP Pooled Investment Fund.

Mr. Speaker, the Committee recommends that Resolution '18 – 25L **not be adopted**.

Mr. Speaker, the Committee considered Resolution '18 – 28. Item 14 on the Consent Calendar.

SUBJECT: Vacating Marijuana-Related Offenses

RESOLVED that NYSAFP advocate for legislation to vacate marijuana offenses in New York State as a matter of health equity and justice, and be it further

RESOLVED that the NYSAFP bring a resolution to AAFP COD directing the AAFP to support the Marijuana Justice Act and other similar legislation that would expunge marijuana-related offenses as a matter of health equity and justice.

Legal counsel advised that there is no mechanism in NY to expunge or vacate a conviction for possession of marijuana. The first RESOLVED clause, therefore, is not feasible. The Committee recommends striking the first RESOLVED clause and replacing it with a requirement that the

NYSAFP advocate for the Governor to pardon all people who have been incarcerated in NY solely for possession of marijuana. The Committee recommends amending by substitution resolved clause 1 of Resolution 18 – 28.

RESOLVED that NYSAFP call upon the Governor to pardon all persons incarcerated in NY solely for possession of marijuana, and be it further

RESOLVED that the NYSAFP bring a resolution to AAFP COD directing the AAFP to support the Marijuana Justice Act and other similar legislation that would expunge marijuana-related offenses as a matter of health equity and justice.

Mr. Speaker, the Committee recommends that **Substitute Resolution 18 – 28 be adopted.**

Mr. Speaker, the Committee considered Resolution '18 – 29L. Item 15 on the Consent Calendar.

SUBJECT: Congress of Delegates annual meeting change the month from summer time.

SUBMITTED BY: Sal Skeivys, MD

RESOLVED, that the annual meeting of the Congress of Delegates occur from late March to early May.

There was only testimony in support.

Mr. Speaker, the Committee recommends that Resolution 18 – 29L **be adopted.**

Mr. Speaker, I move the adoption of the Committee's report as a whole.

Mr. Speaker, I would like to thank the members of my Reference Committee. I would also like to thank the members of the Academy who testified at the Reference Committee for their insight and their cooperation. I would like to thank Mrs. Penny Richmond Ruhm and Mr. Vito Grasso for assisting the Committee in preparing this report.

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