

**2020 Congress of Delegates
NYSAFP
June 14, 2020
Virtual Event**

Saturday, June 6, 2020

Vice Speaker, Dr. Rachelle Brilliant, presented announcements and introduced New York State Academy of Family Physicians (NYSAFP) president, Dr. Barbara Keber, to open the Assembly portion of the Annual Meeting.

Dr. Barbara Keber convened the Assembly at 8:00 AM. She explained the meeting would be conducted as a virtual event and would be produced by CMI using the Big Marker platform. Delegates will receive a link via email which will allow them to sign on to the platform to participate in the June 14th session when elections will occur, and reference committee reports will be presented.

Dr. Keber accepted late resolutions which were referred to reference committees and which will be published in Google Docs folders for viewing by members. Members may comment on resolutions in Google Docs all week until the comment period closes at 11:59 PM on Friday, June 12th.

AAFP president-elect Dr. Ada Stewart presented remarks via a pre-recorded video.

Dr. Keber announced the winner of the 2020 Family Physician of the Year Award – Dr. Wayne Strouse. Dr. Strouse was introduced and gave remarks accepting the award.

Dr. Keber made remarks summarizing her year as president. She thanked the board, commission members and staff for their work and support. She closed the Assembly and introduced the speaker, Dr. Andrew Symons.

Dr. Symons convened the Congress at 9:15 AM. He explained that elections and reference committee reports would occur on Sunday, June 14th. That session will begin at 8:00 AM and will be conducted as a virtual event using the Big Marker platform and produced by CMI. He also described how the reference committees would operate. He said resolutions would be posted in Google Docs folders today (June 6th) and delegates would receive links to the folders to allow them to make comments or raise questions about each resolution. Reference committees will meet on June 13th to review comments and prepare reports. There will be three reference committees; two will consider resolutions and one will consider three bylaws amendments.

Dr. Symons said Dr. Jason Matuszak would serve as parliamentarian and that the Congress would operate on The Standard Code of Parliamentary Procedure.

Dr. Symons called upon the secretary, Dr. Raymond Ebarb, to determine whether a quorum was present. Dr. Ebarb confirmed the presence of a quorum of 1/3 of registered delegates. The speaker declared the Congress in session.

IN MEMORIAM

Dr. Symons requested a moment of silence for colleagues and friends who have passed away since the last meeting. In particular, he acknowledged the service to the Academy of Dr. Russell Perry who served as secretary and who died suddenly on January 3rd this year and Mr. Steve Weingarten, a founding partner of the firm which has represented the NYSAFP as lobbyists for more than 25 years. Steve passed away on April 28th. He also acknowledged the passing of Drs. Harry Metcalf and Harold Joyce. Dr. Metcalf passed away on May 17th. Dr. Metcalf was an honorary past president of the NYSAFP and past president of the AAFP. Dr. Joyce passed away on October 25, 2019. Dr. Joyce also served as president of the AAFP and NYSAFP.

Dr. Symons announced receipt of the reports of officers and commissions which appear in a consent agenda and will be filed for information unless a member wishes to withdraw an item. An item so removed will be assigned to a reference committee for further study.

REFERENCE COMMITTEES

Dr. Symons announced the members of the reference committees:

REFERENCE COMMITTEE SESSION ONE

Chair: Thomas Molnar, MD
Vice Chair: Rupal Bhingradia, MD
Advisor: Mark Josefski MD
Member: Jocelyn Young, MD
Member: Ivonne McLean, MD
Resident: Jane Smpson, MD
Student: George Alvarez
Staff: Kelly Madden
Staff: Penny Ruhm

REFERENCE COMMITTEE SESSION TWO

Chair: Daniel Neghassi, MD
Vice Chair: Pooja Paunikar, MD
Advisor: Phil Kaplan, MD
Member: Stella King, MD
Member: Daniel Cunningham, MD
Resident: Sophia Conroy
Student: Jessica Meyer
Staff: Vito Grasso
Staff: Ron Rouse

REFERENCE COMMITTEE SESSION THREE

Chair: Jason Matuszak, MD
Vice Chair: Marc Price, DO
Member: Wesley Ho, MD
Member: Jun David, MD
Member: Mark Krotowski, MD
Staff: Donna Denley
Staff: Jill Walls

Dr. Symons adjourned the session at 10:30 AM.

Staff and the speakers conducted a training session for delegates on how to use Google Docs to comment on resolutions and how to participate in the virtual COD on June 14th using Big Marker.

Saturday, June 13, 2020

Reference committees met concurrently by virtual platforms beginning at 8:00 AM. The committee reviewed testimony on resolutions and prepared reports with recommendations for review by the Congress on June 14th. The reports were posted in Google Docs and links were sent to delegates and alternates so they could read the reports.

Sunday, June 14, 2020

8:00 AM: Vice Speaker Dr. Rachelle Brilliant, DO made announcements regarding procedures for participating in a virtual meeting. A tutorial video was shown to refresh instructions previously shared with registrants regarding how to participate.

Dr. Symons opened the Congress.

Secretary Dr. Raymond Ebarb announced the presence of a quorum.

Dr. Brilliant announced that she will preside over elections. She explained how voting would occur. A link will be emailed to delegates to facilitate voting.

ELECTIONS

Dr. Brilliant introduced Dr. McLean, chair of the Commission on Leadership & Nominations, who presented the slate of candidates recommended by the Commission.

The candidates recommended by the Commission are:

President-Elect	Jim Mumford, MD
Vice President	Andrew Symons, MD
Secretary	Scott G. Hartman, MD
	Christine Doucet, MD
Treasurer	Thomas Molnar, MD
Speaker	Rachelle Brilliant, DO
Vice Speaker	Linda Prine, MD
Delegate to AAFP (Downstate)	Sarah Nosal, MD
Alt. Delegate to AAFP (Downstate)	Ray Ebarb, MD
Three (3) Directors	Jocelyn Young, DO
	Lalita Abhyankar, MD
	Francis Faustino, MD, FAAFP
	Kristin Mack, DO, MS
	Sudeep Ross, MD, MBBS, MBA
Delegate to MSSNY	Ani Bodoutchian, MD
	Daniel Young, MD, FAAFP
Alternate delegate to MSSNY	Paul Salzberg, MD

Dr. Brilliant explained that a candidate who loses and election may be nominated for an office in a subsequent election.

She announced that the newly elected board would meet by Zoom immediately after adjournment of the COD to elect a board chair and an at-large member of the executive committee.

There were no nominations for the office of president-elect. **Dr. Brilliant declared Dr. Mumford the winner and offered congratulations.**

Dr. Brilliant requested nominations for the office of vice president. There were no nominations for the office of vice president. **Dr. Brilliant declared Dr. Symons the winner and offered congratulations.**

Dr. Brilliant requested nominations for the office of secretary. There were no nominations. She advised the candidates (Drs. Hartman and Doucet) to leave the platform while delegates discussed the election. After confirming that the candidates had left Dr. Brilliant invited delegates to comment on the candidates.

Dr. Hartman won the election. Dr. Brilliant offered congratulations.

Dr. Brilliant invited nominations for the office of treasurer. There were none. Dr. Brilliant declared **Dr. Molnar the winner** and offered congratulations.

Dr. Symons invited nominations for the office of speaker. There were none. He declared **Dr. Brilliant the winner** and offered congratulations.

Dr. Brilliant invited nominations for the office of vice speaker. Dr. Bodoutchian nominated Dr. Christine Doucet. Dr. McCorry seconded the nomination. Dr. Brilliant asked Drs. Prine and Doucet to leave the platform.

Dr. Doucet won the election. Dr. Brilliant offered congratulations.

Dr. McCorry nominated Dr. Prine for director. That nomination was seconded.

Drs. Faustino, Mack and Abhyankar were elected. Dr. Brilliant congratulated them.

Dr. Brilliant invited nominations for AAFP delegate. There were none. **She declared Dr. Sarah Nosal the winner** and offered congratulations.

Dr. Brilliant invited nominations for AAFP alternate delegate. There were none. **She declared Dr. Raymond Ebarb the winner** and offered congratulations.

Dr. Brilliant invited nominations for the office of MSSNY delegate. Dr. Jose David withdrew his candidacy. Dr. McCorry nominated Dr. Ani Bodoutchian.

Dr. Bodoutchian won the election. Dr. Brilliant congratulated her.

Dr. Brilliant invited nominations for the office of MSSNY alternate delegate. There were none. **She declared Dr. Paul Salzberg the winner** and offered congratulations.

AAFP president-elect Dr. Ada Stewart installed officer and directors.

Dr. Matuszak took the oath of office as president and made inaugural remarks.

Dr. Symons announced that the board will meet immediately after today's session to election a chairperson and a director-at-large to serve on the executive committee. He introduced Dr. Stewart for the Fellows convocation.

Dr. Stewart introduced each Fellow and offered remarks and congratulations.

Dr. Keber presented president's awards. The first award was for the Family Medicine Educator of the Year for 2020. The honoree is Dr. Mark Josefski. Dr. Josefski accepted the award and made remarks.

She also presented awards to:

Marcy Savage
Ivonne McClean, MD
Francis Faustino, MD
Andrew Symons, MD

Dr. Symons congratulated the awardees. He also announced that the AAFP has cancelled the live 2020 COD and will conduct the meeting as a virtual event in October. He said the rules announced, so far, include limits on resolutions. The COD will only accept resolutions introduced by chapters, will limit chapters to two resolutions and will only consider resolutions which address exigent matters for the Academy.

REPORTS OF THE REFERENCE COMMITTEES

Dr. Symons explained the rules for receiving reports of the reference committees.

Dr. Symons reported that all officer and commission reports have been placed on a Consent Calendar. He asked if anyone wanted to extract any item from that Consent Calendar. No one extracted any reports from officers or commissions from the Consent Calendar. **The Consent Calendar of officer and commission reports was approved by acclamation.**

Dr. Symons introduced Dr. Thomas Molnar for the report of reference committee one.

Report of Reference Committee One

Dr. Molnar: Mr. Speaker, Reference Committee One 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 20-01 “X the X Waiver”**
ADOPT SUBSTITUTE RESOLUTION 20-01
2. **Resolution 20-03 “Confidentiality Protection for Non-Policy Holders in Healthcare Billing”** **ADOPT AMENDED RESOLUTION 20-03**
3. **Resolution 20-05 “Support Family Physicians Providing Gender Affirming Care for Youth”** **ADOPT AMENDED RESOLUTION 20-05**
4. **Resolution 20-07 “Close the US Detention Centers, Provide Humanistic Care to Migrants”** **ADOPT AMENDED RESOLUTION 20-07**
5. **Resolution 20-09L “In Memoriam Harry Metcalf, MD”**
ADOPT AS AMENDED
6. **Resolution 20-11L “In Memoriam Steve Weingarten”**
ADOPT AS AMENDED
7. **Resolution 20-13L “End Police Brutality and Reform Criminal Justice”**
ADOPT SUBSTITUTE RESOLUTION & REFER TO BOARD THE REMAINING CLAUSES OF THE ORIGINAL RESOLUTION
8. **Resolution 20-15L “Addressing the Role of Financial Health as a Social Determinant of Health”** **ADOPT SUBSTITUTE RESOLUTION**
REFER TO BOARD REMAINING CLAUSES OF THE ORIGINAL RESOLUTION

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

Dr. Symons invited members to extract items. Item 2 was extracted. The remainder of the Consent Calendar was accepted.

Mr. Speaker, the Committee considered Item 1 on the Consent Calendar, Resolution 20-01

SUBJECT: “X the X Waiver”

RESOLVED, that the New York State Academy of Family Physicians (NYSAFP) work to provide increased Continuing Medical Education (CME) to promote the widespread practice of MOUD, and be it further

RESOLVED that New York State Academy of Family Physicians (NYSAFP) delegation bring a resolution to the American Academy of Family Physicians (AAFP) Congress of Delegates that the AAFP advocate for repeal of the Harrison Act of 1914, which poses an unnecessary barrier for physicians seeking to apply the evidence-based approach of MOUD, a prevalent chronic disease with high mortality risk, and be it further

RESOLVED, that the New York State Academy of Family Physicians (NYSAFP) delegation bring a resolution to the American Academy of Family Physicians(AAFP) Congress of Delegates in support of lobbying to repeal any waiver of the Harrison Act and elimination of the X-waiver requirement for buprenorphine prescribing.

The reference committee heard overwhelming support in favor of the resolution; however in response to the comments received, decided to broaden the scope of the resolution and to oppose any future requirements that may limit the ability to prescribe. After researching the Harrison Act, it was determined to be more of historical significance. The educational component was considered important and encouraged.

The committee recommends the substitute resolution to read:

RESOLVED, that the New York State Academy of Family Physicians (NYSAFP) work to provide increased Continuing Medical Education (CME) to promote the widespread practice of **medications for opioid use disorder** MOUD, and be it further

~~RESOLVED that New York State Academy of Family Physicians delegation bring a resolution to the American Academy of Family Physicians (AAFP) Congress of Delegates that the AAFP advocate for repeal of the Harrison Act of 1914, which poses an unnecessary barrier for physicians seeking to apply the evidence-based approach of MOUD, a prevalent chronic disease with high mortality risk, and be it further~~

RESOLVED, that the New York State Academy of Family Physicians (NYSAFP) delegation bring a resolution to the American Academy of Family Physicians (AAFP) Congress of Delegates requesting the AAFP to lobby for the ~~repeal of the Harrison Act~~ and elimination of the X-waiver, **and oppose any additional future** requirements **that limit the ability to prescribe** buprenorphine prescribing.

Mr. Speaker, the Committee recommends: **ADOPTING SUBSTITUTE RESOLUTION 20-01. SR 20-01 was adopted on consent.**

Mr. Speaker, the Committee considered Item 2 on the Consent Calendar, Resolution 20-03:

SUBJECT: “Confidentiality Protection for Non-Policy Holders in Healthcare Billing”

RESOLVED, that the New York State Academy of Family Physicians (NYSAFP) lobby New York State so that all insurers not send an explanation of benefits to the policy-holder when sensitive medical care, including but not limited to, care related to family planning, HIV, sexually-transmitted infections, mental health, pregnancy and childbirth, is received by a dependent, and be it further

RESOLVED that the New York State Academy of Family Physicians (NYSAFP) lobby in support of a New York state law to require insurers to send an explanation of benefits only to the patient via mail or email when a written request is provided by the patient, and be it further

RESOLVED that the New York State Academy of Family Physicians (NYSAFP) delegation bring a resolution to the American Academy of Family Physicians (AAFP) Congress of Delegates to advocate for a federal law or policy that would exempt the requirement of an explanation of benefits when sensitive medical care, including but not limited to, care related to family planning, HIV, sexually-transmitted infections, abortion care, mental health, substance use treatment, pregnancy and childbirth, is received by a dependent.

*The reference committee heard significant testimony in support of this resolution; NYSAFP has existing policy (Resolution 07-05) that also supports the spirit of this resolution. The committee recommends a substitute resolution which combines the existing policy with the new resolved clauses. In addition, we are expanding the focus from adolescents to **all non-policy holders**. In addition to minors receiving confidential services, which are defined by New York State law, adults who are non-policy holders may also require these services. The reference committee reviewed information regarding how these laws have been enacted in other states and notes that both EOBs and medical bills are encompassed by confidentiality.*

RESOLVED that the New York State Academy of Physicians (NYSAFP) ~~agrees to~~ **will** advocate to prevent ~~the inadvertent~~ violations of confidentiality that occur when health insurance explanations of benefits or medical bills are sent to **non-policy holders for confidential services**. ~~the homes of adolescent patients and insure that adolescents with coverage be able to use their health insurance plans to obtain confidential services without triggered reports that release sensitive medical information to their parents.~~

RESOLVED that the New York State Academy of Family Physicians (NYSAFP) ~~lobby in support of~~ **advocate for** a New York state law to require insurers to send an explanation of benefits ~~or~~ **medical bill for confidential services** only **via the patient's preferred route of communication** ~~to the patient via email~~ when a written **or verbal** request is provided by the patient, and be it further

RESOLVED that the New York State Academy of Family Physicians (NYSAFP) delegation bring a resolution to the American Academy of Family Physicians (AAFP) Congress of Delegates to advocate for a ~~federal law or~~ policy that would exempt the requirement of an explanation of benefits when **confidential services** ~~sensitive medical care~~, including but not limited to, care related to family planning, HIV, sexually -transmitted infections, abortion care, mental health, substance use treatment, pregnancy and childbirth, ~~are~~ **is** received by a **non-policy holder** ~~dependent~~.

Mr. Speaker, the Committee recommends: **ADOPTING AMENDED RESOLUTION 20-03.**

Item 2 had been extracted by Dr. Klepack. Dr. Klepack said there was an error in the first RESOLVED clause which says “medical bills are sent to non-policy holders.” It should be “policy-holders” because EOBs are not sent to non-policy holders.

Dr. Strouse explained that the intent is to assure that EOBs are not sent to anyone other than the patient when confidential services have been provided. He proposed the following amendment:

RESOLVED that the New York State Academy of Physicians (NYSAFP) ~~agrees to~~ **will** advocate to prevent ~~the inadvertent~~ violations of confidentiality that occur when health insurance explanations of benefits or medical bills are **not** sent to **non-policy holders anyone other than the patient for confidential services.** ~~the homes of adolescent patients and insure that adolescents with coverage be able to use their health insurance plans to obtain confidential services without triggered reports that release sensitive medical information to their parents.~~

The amendment was defeated.

Dr. Prine proposed the following amendment:

RESOLVED that the New York State Academy of Physicians (NYSAFP) ~~agrees to~~ **will** advocate to prevent ~~the inadvertent~~ violations of confidentiality that occur when health insurance explanations of benefits or medical bills are sent to **non-policy holders for confidential services provided to non-policy holders.** ~~the homes of adolescent patients and insure that adolescents with coverage be able to use their health insurance plans to obtain confidential services without triggered reports that release sensitive medical information to their parents.~~

Dr. Molnar noted that under NYS law confidentiality is not limited and can encompass anything that the patient wants to remain confidential. He also noted that no EOB or bill is required if no cost-sharing payment is required.

The amendment was approved.

The amended resolution reads:

RESOLVED that the New York State Academy of Physicians (NYSAFP) ~~agrees to~~ **will** advocate to prevent ~~the inadvertent~~ violations of confidentiality that occur when health insurance explanations of benefits or medical bills are sent to **non-policy holders for confidential services provided to non-policy holders.** ~~the homes of adolescent patients and insure that adolescents with coverage be able to use their health insurance plans to obtain confidential services without triggered reports that release sensitive medical information to their parents.~~

RESOLVED that the New York State Academy of Family Physicians (NYSAFP) **advocate for** lobby in support of a New York state law to require insurers to send an explanation of benefits **or medical bill for confidential services** only **via the patient's preferred route of communication** ~~to the patient via email~~ when a written **or verbal** request is provided by the patient, and be it further

RESOLVED that the New York State Academy of Family Physicians (NYSAFP) delegation bring a resolution to the American Academy of Family Physicians (AAFP) Congress of Delegates to advocate for a ~~federal law or policy~~ that would exempt the requirement of an explanation of benefits when **confidential services** sensitive medical care, including but not limited to, care related to family planning, HIV, sexually -transmitted infections, abortion care, mental health, substance use treatment, pregnancy and childbirth, **are** ~~is~~ received by a **non-policy holder** ~~dependent.~~

The amended resolution was unanimously adopted.

Mr. Speaker, the Committee considered Item 3 on the Consent Calendar, Resolution 20-05:

SUBJECT: “NYSAFP Resolution to Support Family Physicians Providing Gender Affirming Care for Youth”

RESOLVED that the New York State Academy of Family Physicians (NYSAFP) write a policy statement supporting family physicians in New York who provide gender affirming care to people including transgender youth, and be it further

RESOLVED that the New York State Academy of Family Physicians (NYSAFP) delegation submit a resolution to the American Academy of Family Physicians (AAFP) Congress of delegates which states that the AAFP opposes the criminalization of family physicians who provide gender affirming care for youth.

The committee supports the resolution; although the committee supports the spirit of the second resolve, the 2019 COD of the American Academy of Family Physicians currently has passed Resolution 509 which speaks to the second resolve of the resolution.

RESOLVED that the New York State Academy of Family Physicians (NYSAFP) write a policy statement supporting family physicians in New York who provide gender affirming care to people including transgender youth, **and opposing the criminalization of said care** and be it further

~~RESOLVED that the New York State Academy of Family Physicians (NYSAFP) delegation submit a resolution to the American Academy of Family Physicians Congress (AAFP) of delegates which states that the AAFP opposes the criminalization of family physicians who provide gender affirming care for youth.~~

RESOLVED that the New York State Academy of Family Physicians (NYSAFP) reaffirms AAFP policy 509 “Oppose Legislation of Physician- Patient Decision Making Child and Adolescent Gender Affirming Care.”

Mr. Speaker, the Committee recommends: **ADOPTING AMENDED RESOLUTION 20-05.**

Mr. Speaker, the Committee considered Item 4 on the Consent Calendar, Resolution 20-07:

SUBJECT: “Close the US Detention Centers, Provide Humanistic Care to Migrants”

RESOLVED that the New York State Academy of Family Physicians (NYSAFP) issue a statement supporting (1) immediate end of the use of detention of asylum seekers, to be replaced with well-established and humanistic effective Alternatives to Detention; (2) immediate end to separation of detained migrant families seeking asylum; (3) immediate implementation of independent medical oversight of migrant detention centers to ensure humanistic standards of medical care are being met and be it further

RESOLVED that the New York State Academy of Family Physicians (NYSAFP) delegation submit a resolution to the American Academy of Family Physicians (AAFP) Congress of Delegates that the AAFP issue a statement supporting (1) immediate end of the use of detention of asylum seekers, to be replaced with well-established and humanistic effective Alternatives to Detention; (2) immediate end to separation of detained migrant families seeking asylum; (3) immediate implementation of independent medical oversight of migrant detention centers to ensure humanistic standards of medical care are being met.

There was overwhelming support for this resolution. After deliberations the committee suggested that the first resolve be separated into three separate resolves so the discussion can be focused on three distinct points. To keep the resolution applicable in the future, the committee recommends using “alternatives to detention” (and not “Alternatives to Detention”) to encompass future definitions.

The committee recommends to not adopt second resolve clause because American Academy of Family Physician has existing policy and instead adopt amended resolve clause below:

SUBJECT: “Close the US Detention Centers, Provide ~~Humanistic~~ Humane Care to Migrants”

RESOLVED that the New York State Academy of Family Physicians (NYSAFP) issue a statement supporting ~~(1)~~ immediate end of the use of detention of asylum seekers, to be replaced with well-established proven and ~~humanistic~~ humane effective alternatives to detention ~~Alternatives to Detention~~; and be it further

RESOLVED that the New York State Academy of Family Physicians (NYSAFP) issue a statement ~~(2)~~ supporting immediate end to separation of detained migrant families seeking asylum; and be it further

RESOLVED that the New York State Academy of Family Physicians (NYSAFP) issue a statement supporting ~~(3)~~ immediate implementation of independent medical oversight of migrant detention centers to ensure humanistic standards of medical care are being met and be it further

RESOLVED that the New York State Academy of Family Physicians (NYSAFP) delegation submit a resolution to the American Academy of Family Physicians (AAFP) Congress of Delegates that the AAFP issue a statement supporting ~~(1)~~ immediate end of the use of detention of asylum seekers, to be replaced with well-established proven and ~~humanistic~~ humane effective alternatives to detention and be it further, ~~Alternatives to Detention~~. ~~(2) immediate end to separation of detained migrant families seeking asylum; (3) immediate implementation of independent medical oversight of migrant detention centers to ensure humanistic standards of medical care are being met.~~

RESOLVED that the New York State Academy of Family Physicians (NYSAFP) reaffirms AAFP policy statement “Health Impacts on Immigration.”

Mr. Speaker, the Committee recommends: **ADOPTING AMENDED RESOLUTION 20-07.**

Mr. Speaker, the Committee considered Item 5 on the Consent Calendar, Resolution 20-09L:

SUBJECT: “Resolution in Memoriam Harry Metcalf, MD”

RESOLVED, that Dr. Metcalf was a major figure in medicine and within the New York State Academy of Family Physicians (NYSAFP) whose career and achievements have brought credit and distinction to Family Medicine and the NYSAFP, and be it further

RESOLVED, that the New York State Academy of Family Physicians (NYSAFP) is deeply indebted to Dr. Metcalf for his significant contributions to Family Medicine and the Academy’s and be it finally

RESOLVED, that the New York State Academy of Family Physicians (NYSAFP) expresses sorrow at his passing and offers sincere condolences to his children Marc (Laura), Eric (Terri) and Christine (Thomas Starck); his grandchildren Nikolaus & Haley, Metcalf, Brooke McMillan, Alexis Metcalf, and Brady & Carly Starck; and his sisters Carol Metcalf and Gail (Jay) Nelson.

The committee read overwhelming support but suggested to combine the first and second resolves into a single resolve.

RESOLVED, **that the New York State Academy of Family Physicians (NYSAFP) is deeply indebted to Dr. Harry** Metcalf, who was a major figure in medicine and within the New York State Academy of Family Physicians (NYSAFP), whose career and achievements have brought credit and distinction to family medicine and the NYSAFP, and be it further

~~RESOLVED, that the New York State Academy of Family Physicians (NYSAFP) is deeply indebted to Dr. Metcalf for his significant contributions to Family Medicine and the Academy’s and be it finally~~

RESOLVED, that the New York State Academy of Family Physicians (NYSAFP) expresses sorrow at his passing and offers sincere condolences to his children Marc (Laura), Eric (Terri) and Christine (Thomas Starck); his grandchildren Nikolaus & Haley, Metcalf, Brooke McMillan, Alexis Metcalf, and Brady & Carly Starck; and his sisters Carol Metcalf and Gail (Jay) Nelson.

Mr. Speaker, the Committee recommends: **ADOPT AMENDED RESOLUTION 20-09L.** _____

Mr. Speaker, the Committee considered Item 6 on the Consent Calendar, Resolution 20-11L:

SUBJECT: “Resolution in Memoriam Steve Weingarten”

RESOLVED, that Steve Weingarten was a major force in the development and enhancement of New York State Academy of Family Physicians’ (NYSAFP/Academy) stature as an effective, credible and respected advocacy organization for Family Physicians, and be it further

RESOLVED, that in his lifetime Steve was a source of care, comfort, support and fun for his family, friends and colleagues and his passing leaves a void for those who loved, knew and worked with him and be it further

RESOLVED, that the New York State Academy of Family Physicians (NYSAFP/Academy) is deeply indebted to Steve for his significant contributions to the Academy's reputation and accomplishments in advocacy and be it finally

RESOLVED, that the New York State Academy of Family Physicians (NYSAFP/Academy) expresses sorrow at his passing and offers sincere condolences to his parents (Richard and Rita Weingarten), his children and granddaughter, his brothers (Mark and Rob) and his partners at Reid, McNally & Savage (Bob Reid, Shauneen McNally and Marcy Savage).

Overwhelmingly supported and committee suggested that resolves 1 and 3 be combined and resolve 2 omitted

RESOLVED, that Steve Weingarten was a major force in the development and enhancement of New York State Academy of Family Physicians' (NYSAFP/Academy) stature as an effective, credible and respected advocacy organization for family physicians, and that the NYSAFP is deeply indebted to Steve for his significant contributions to the Academy's reputation and accomplishments in advocacy and be it further

~~RESOLVED, that in his lifetime Steve was a source of care, comfort, support and fun for his family, friends and colleagues and his passing leaves a void for those who loved, knew and worked with him and be it further~~

RESOLVED, that the New York State Academy of Family Physicians (NYSAFP/Academy) expresses sorrow at his passing and offers sincere condolences to his parents (Richard and Rita Weingarten), his children and granddaughter, his brothers (Mark and Rob) and his partners at Reid, McNally & Savage (Bob Reid, Shauneen McNally and Marcy Savage).

Mr. Speaker, the Committee recommends: **ADOPTING AMENDED RESOLUTION 20-11L.**

Mr. Speaker, the Committee considered Item 7 on the Consent Calendar, Resolution 20-13L:

SUBJECT: "End Police Brutality and Reform Criminal Justice"

RESOLVED that the New York State Academy of Family Physicians encourage more transparency regarding individual law enforcement personnel at the state level and advocate for the repeal of section 50-A of the New York State Civil Rights Law, and BE IT FURTHER

RESOLVED that the New York State Academy of Family Physicians advocate for policies at the state level that will decrease the use of unnecessary police force, specifically to ban chokeholds and strangleholds, require de-escalation, require warnings prior to shooting, exhaust all alternatives prior to shooting, require officers to intervene if another officer uses excessive force, ban shooting at moving vehicles, limit use of force for specific types of resistance, and require police departments to report police use of force or threat of force against civilians, and BE IT FURTHER

RESOLVED that the New York State Academy of Family Physicians advocate for decreasing funding for policing and restoring full funding for schools, health care, and social services in New York State, and BE IT FURTHER

RESOLVED that the New York State Academy of Family Physicians will submit a resolution to the American Academy of Family Physicians Congress of Delegates advocating for federal policies that decrease the use of unnecessary police force including:

- promoting a federal standard that use of force should be reserved only as a last resort,
- prohibition of chokeholds or strangleholds as a federal civil rights violation
- robust data collection on police-community encounters in order to track and eliminate racial inequities
- elimination of federal programs that provide military equipment to law enforcement
- prohibiting the use of no-knock warrants
- changing section 242 of Title 18 of the U.S. Civil Rights law to prohibit “reckless” rather than “willful” deprivation of an individual’s constitutional rights by law enforcement
- prohibiting the use of irritating chemicals, and
- ending the qualified immunity doctrine in federal law which prevents police from being held accountable when they break the law

Overall there was majority support for this resolution, however a number of changes were recommended. Recommend that resolves 2 and 5 be sent to the BOD for public health commission consideration and resolves 1,3,4 be considered as amended. Geographical differences suggested different interpretations of several resolves and current legislation has impacted a number of the specific actions in the resolution. Have consulted with authors (Dr. Daniel Neghassi et. al) of this resolution and they recommended and/or supported these changes.

RESOLVED that the New York State Academy of Family Physicians (NYSAFP) encourage more transparency regarding individual law enforcement personnel at the state level and ~~advocate for~~ **support** the repeal of section 50-A of the New York State Civil Rights Law, and BE IT FURTHER

RESOLVED that the New York State Academy of Family Physicians (NYSAFP) advocate for ~~reinstating~~ bail reform **and ongoing evaluation of bail policies** ~~that was passed in New York State in 2019~~ and BE IT FURTHER

RESOLVED that the New York State Academy of Family Physicians (NYSAFP) advocate for decreasing **reallocating** funding for **from** policing **as regionally appropriate** and restoring full funding for schools, health care, and social services in New York State. ~~and BE IT FURTHER~~

Mr. Speaker, the Committee recommends: **ADOPT SUBSTITUTE RESOLUTION 20-13L**

Mr. Speaker, the Committee recommends:

REFER TO BOARD THE REMAINING CLAUSES OF THE ORIGINAL RESOLUTION 20-13L:

RESOLVED that the New York State Academy of Family Physicians advocate for policies at the state level that will decrease the use of unnecessary police force, specifically to ban chokeholds and strangleholds, require de-escalation, require warnings prior to shooting, exhaust all alternatives prior to shooting, require officers to intervene if another officer uses excessive force, ban shooting at moving vehicles, limit use of force for specific types of resistance, and require police departments to report police use of force or threat of force against civilians, and BE IT FURTHER

RESOLVED that the New York State Academy of Family Physicians will submit a resolution to the American Academy of Family Physicians Congress of Delegates advocating for federal policies that decrease the use of unnecessary police force including:

- promoting a federal standard that use of force should be reserved only as a last resort,
- prohibition of chokeholds or strangleholds as a federal civil rights violation
- robust data collection on police-community encounters in order to track and eliminate racial inequities
- elimination of federal programs that provide military equipment to law enforcement
- prohibiting the use of no-knock warrants
- changing section 242 of Title 18 of the U.S. Civil Rights law to prohibit “reckless” rather than “willful” deprivation of an individual’s constitutional rights by law enforcement
- prohibiting the use of irritating chemicals, and
- ending the qualified immunity doctrine in federal law which prevents police from being held accountable when they break the law

Mr. Speaker, the Committee considered Item 8 on the Consent Calendar, Resolution 20-15L:

SUBJECT: “Addressing the Role of Financial Health as a Social Determinant of Health”

RESOLVED that our New York State Academy of Family Physicians (NYSAFP) operations and finance commission provide a report that investigates the pros and cons, including fiscal projections, of transferring some or all of our Academy's banking to a community credit union or other non-profit entity, and BE IT FURTHER

RESOLVED that the New York State Academy of Family Physicians (NYSAFP) submit a resolution advocating for the American Academy of Family Physicians (AAFP) to investigate the Academy’s feasibility in utilizing Black-owned banks as part of their financial practices, and BE IT FURTHER

RESOLVED that our New York State Academy of Family Physicians (NYSAFP) submit a resolution at the American Academy of Family Physicians (AAFP) Congress of Delegates that advocates for the development of an AAFP Toolkit on financial health, which includes:

- education for clinicians, students and trainees about the association between fringe banking and poor health
- resources members can share with patients to establish financial security
- resources for healthcare systems to implement non-profit and community banking strategies in their organizations, and BE IT FURTHER

RESOLVED that our New York State Academy of Family Physicians (NYSAFP) support public banking initiatives as a form of recognizing their impact on social determinants of health.

Testimony was generally in support of the spirit of this resolution with considerations for appropriate roles for this resolution in making business decisions for the Academy within its current structure. The commission supports resolve 3 as amended and recommends resolves 1,2, and 4 be referred to the BOD for additional discussion.

RESOLVED that our New York State Academy of Family Physicians (NYSAFP) **delegation to the American Academy of Family Physicians Congress of Delegates** submit a resolution ~~at the American Academy of Family Physicians (AAFP) Congress of Delegates~~ that advocates for the development of an AAFP Toolkit on financial health, which includes:

- education for clinicians, students and trainees about the association between fringe banking and poor health
- resources members can share with patients to establish financial security
- resources for healthcare systems to implement non-profit and community banking strategies in their organizations. ~~and BE IT FURTHER~~

Mr. Speaker, the Committee recommends: **ADOPT SUBSTITUTE RESOLUTION 20-15L**

Mr. Speaker, the Committee recommends: **REFER TO BOARD REMAINING CLAUSES OF THE ORIGINAL RESOLUTION 20-15L:**

RESOLVED that our New York State Academy of Family Physicians (NYSAFP) operations and finance commission provide a report that investigates the pros and cons, including fiscal projections, of transferring some or all of our Academy's banking to a community credit union or other non-profit entity, and BE IT FURTHER

RESOLVED that the New York State Academy of Family Physicians (NYSAFP) submit a resolution advocating for the American Academy of Family Physicians (AAFP) to investigate the Academy's feasibility in utilizing Black-owned banks as part of their financial practices, and BE IT FURTHER

RESOLVED that our New York State Academy of Family Physicians (NYSAFP) support public banking initiatives as a form of recognizing their impact on social determinants of health. _____

Mr. Speaker, We move the adoption of the Committee's report.

Mr. Speaker, We would like to thank the members of my Reference Committee. We would also like to thank the members of the Academy who testified electronically for their insight and their cooperation. We would like to thank Kelly Madden and Penny Ruhm for assisting the Committee in preparing this report.

Chair: Thomas Molnar, MD
Vice Chair: Rupal Bhingradia, MD
Advisor: Mark Josefski, MD
Member: Jocelyn Young, DO

Member: Ivonne McLean, MD
Resident: Jane Simpson, DO
Student: George Alvarez, MD
Staff: Kelly Madden, MS
Staff: Penny Ruhm, MS

12:03 PM – Break

12:10 PM – Congress re-convened

Dr. Symons introduced Dr. Neghassi for the report of reference committee two.

Report of Reference Committee Two

Dr. Neghassi: Mr. Speaker, Reference Committee Two 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 20-02 “Multimodal Analgesia Access for Patients” be ADOPTED AS AMENDED**
2. **Resolution 20-04 “Against Criminalizing People Who Obtain an Abortion Across State Lines or Aid Anyone in Obtaining an Abortion Across State Lines” be ADOPTED AS AMENDED**
3. **Resolution 20-06 “Pipeline Program” ADOPT SUBSTITUTE RESOLUTION 20-06**
4. **Resolution 20-08L “Single Payer/Improved Medicare for All—Now” ADOPT SUBSTITUTE RESOLUTION 20-08L**
5. **Resolution 20-10L “Commemoration of Dr. Douglas Henley” be ADOPTED AS AMENDED**
6. **Resolution 20-12L “In Memoriam Dr. Herbert Joyce” be ADOPTED AS AMENDED**
7. **Resolution 20-14L “Support the Establishment of Police Review Boards in Every Community as a Public Health Intervention” ADOPT SUBSTITUTE RESOLUTION 20-14L**

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

Items 3 and 4 were extracted. The remainder of the Consent Calendar was approved.

Mr. Speaker, the Committee considered Item 1 on the Consent Calendar, Resolution 20-02:

SUBJECT: “Multimodal Analgesia Access for Patients”

RESOLVED that New York State Academy of Family Physicians (NYSAFP) form a task force to advise state legislators and insurance company payors on topics involving the opiate epidemic and opioid use disorder (OUD), and be it further

RESOLVED that New York State Academy of Family Physicians advocate at the state legislative level for access to other pharmacological and non-pharmacological alternatives to opiates.

There was no testimony in opposition.

Several members questioned the need for a task force. The maker of the resolution agreed to amend the resolution to delete creation of a task force and focus on lobbying. She specifically agreed to the following language: “lobby state legislators to include health insurance coverage and access to evidence based non-opiate pharmacological & non-pharmacological pain control methods to help combat the opiate crisis.”

Several members noted that there is existing NYSAFP policy in support of using evidence based non-opiate pain control methods.

The Committee recommends amendment of the resolution to combine both RESOLVED clauses to read:

RESOLVED that New York State Academy of Family Physicians (NYSAFP) ~~form a task force to advise state legislators and insurance company payors on topics involving the opiate epidemic and opioid use disorder (OUD)~~ ***lobby state policymakers to eliminate prior authorization and expand coverage for safe and efficacious non-opiate pharmacological & non-pharmacological pain control methods to help combat the opiate crisis.***

Mr. Speaker, the Committee recommends adopting Resolution 20-02 as amended.

Mr. Speaker, the Committee considered Item 2 on the Consent Calendar, Resolution 20-04:

SUBJECT: “Resolution Against Criminalizing People Who Obtain an Abortion Across State Lines or Aid Anyone in Obtaining an Abortion Across State Lines”

RESOLVED that the New York State Academy of Family Physicians (NYSAFP) oppose criminalizing people for crossing state lines to access abortion or to help someone access abortion, and be it further

RESOLVED that the New York State Academy of Family Physicians delegation bring a resolution to the American Academy of Family Physicians (AAFP) 2020 Congress of Delegates directing the AAFP to develop a policy that opposes criminalizing people for crossing state lines to access abortion services, and opposes criminalizing those who help others cross state lines to access abortion services.

There was no testimony in opposition to this resolution. Many members noted that the resolution addresses a very specific threat to patient access to abortion services. Testimony included references to the apparent organized effort to pass restrictive legislation in states to trigger challenges to Roe v Wade that could reach the Supreme Court.

The second RESOLVED clause specifically directs the NY delegation to the AAFP Congress to submit this resolution at the 2020 AAFP COD. The 2020 AAFP COD will be conducted as a virtual event and chapters will be limited to two resolutions. It may be necessary, therefore, to wait until a later AAFP COD to submit this resolution if the NYSAFP COD passes it. The Committee recommends removing reference to the 2020 AAFP COD.

Additionally, both RESOLVED clauses refer to “criminalizing people.” Legislation generally does not criminalize people but, instead, designates specific actions by people as criminal. The Committee, therefore, recommends that both RESOLVED clauses be amended to delete “criminalizing people” and instead to direct opposition to “legislation to make it a crime to cross state lines to access abortion services or to assist someone in crossing state lines to access abortion services.”

The amended Resolution would read:

RESOLVED that the New York State Academy of Family Physicians (NYSAFP) oppose ~~crossing state lines to access abortion or to help someone access abortion criminalizing people~~ for **legislation to make it a crime to cross state lines to access abortion services or to assist someone in crossing state lines to access abortion services**, and be it further

RESOLVED that the New York State Academy of Family Physicians delegation bring a resolution to the American Academy of Family Physicians (AAFP) ~~2020~~ Congress of Delegates directing the AAFP to ~~develop a policy that opposes criminalizing people for crossing state lines to access abortion services, and opposes criminalizing those who help others cross state lines to access abortion services~~ **oppose legislation to make it a crime to cross state lines to access abortion services or to assist someone in crossing state lines to access abortion services.**

Mr. Speaker, the Committee recommends adopting Resolution 20-04 as amended.

Mr. Speaker, the Committee considered Item 3 on the Consent Calendar, Resolution 20-06:

SUBJECT: “Pipeline Program”

RESOLVED that the New York State Academy of Family Physicians delegation put forth a resolution at the American Academy of Family Physicians Congress of Delegates that encourages the AAFP to develop a toolkit to support family physicians interested in starting new

pipeline programs that encourage underrepresented pre-health college students to pursue careers in medicine, and be it further

RESOLVED that the New York State Academy of Family Physicians will put forth a resolution that supports development of a toolkit for family physicians interested in starting pipeline programs, and encourages American Academy of Family Physicians to support and partner with existing pre-health pipeline programs

There was no testimony in opposition to this resolution, but several members commented on deficiencies, including: the absence of a fiscal note; an explanation of why a tool kit was necessary; the emphasis of pipeline programs on mentorship; and whether there may be alternatives to a tool kit to support members who are interested in starting pipeline programs.

Many members cited existing successful pipeline programs. The resolution would require the AAFP to support and partner with existing pre-health pipeline programs but does not identify specific programs or criteria for deciding which programs to support and partner with. Furthermore, it does not identify specific forms of support.

The Committee concluded that the two RESOLVED clauses essentially call for the same action, creation of a tool kit by the AAFP. The second clause adds support and partnership with existing programs.

The Committee concluded that members saw merit in the idea of expanding AAFP support for pipeline programs and for members who wish to create such programs. The resolution, however, is narrowly focused on creating a toolkit and affiliating generally with existing programs. The Committee feels the action stipulated in the resolution is insufficient to actually achieve the purpose of expanding AAFP support for members who wish to create pipeline programs. The Committee recommends a substitute resolution to read:

~~RESOLVED that the New York State Academy of Family Physicians delegation put forth a resolution at the American Academy of Family Physicians Congress of Delegates that encourages the AAFP to develop a toolkit to support family physicians interested in starting new pipeline programs that encourage underrepresented pre-health college students to pursue careers in medicine, and be it further~~

~~RESOLVED that the New York State Academy of Family Physicians will put forth a resolution that supports development of a toolkit for family physicians interested in starting pipeline programs, and encourages American Academy of Family Physicians to support and partner with existing pre-health pipeline programs~~

~~There was no testimony in opposition to this resolution, but several members commented on deficiencies, including: the absence of a fiscal note; an explanation of why a tool kit was necessary; the emphasis of pipeline programs on mentorship; and whether there may be alternatives to a tool kit to support members who are interested in starting pipeline programs.~~

~~Many members cited existing successful pipeline programs. The resolution would require the AAFP to support and partner with existing pre-health pipeline programs but does not identify~~

specific programs or criteria for deciding which programs to support and partner with. Furthermore, it does not identify specific forms of support.

RESOLVED, that the New York State Academy of Family Physicians (NYSAFP) delegation to the American Academy of Family Physicians (AAFP) Congress of Delegates (COD) introduce a resolution to:

- require the AAFP to create a Member Interest Group (MIG) for members who are interested in programs to recruit students from populations historically underrepresented in medicine to pursue medical careers and to support their applications to medical school (pipeline programs),***
- that it compile a directory of existing pipeline programs,***
- that it survey Student and Resident Members to ascertain how many participated in pipeline programs and what features thereof were of particular value to them and***
- that it establish a policy for determining which existing programs it should support and what form that support should take.***

Mr. Speaker, the Committee recommends adopting Substitute Resolution 20-06.

Dr. Iroku-Malize extracted item 3. Dr. Iroku-Malize said formation of a MIG is done by members not by the COD. If 50 members wish to form a MIG they may do so without COD action.

Dr. Nosal moved that reference to formation of a MIG be deleted. The motion was seconded.

Dr. Neghassi explained that the reference committee understood that an attempt has been made by members to form a MIG but has not reached the requisite number of members. He said, further, that there is no prohibition on formation of a MIG by the COD.

The amendment was approved and reads as follows.

RESOLVED, that the New York State Academy of Family Physicians (NYSAFP) delegation to the American Academy of Family Physicians (AAFP) Congress of Delegates (COD) introduce a resolution to:

- ~~-require the AAFP to create a Member Interest Group (MIG) for members who are interested in programs to recruit students from populations historically underrepresented in medicine to pursue medical careers and to support their applications to medical school (pipeline programs),~~***
- that it compile a directory of existing pipeline programs,***
- that it survey Student and Resident Members to ascertain how many participated in pipeline programs and what features thereof were of particular value to them and***
- that it establish a policy for determining which existing programs it should support and what form that support should take.***

Dr. Jocelyn Young proposed an amendment to clarify what constitutes a pipeline program.

RESOLVED, that the New York State Academy of Family Physicians (NYSAFP) delegation to the American Academy of Family Physicians (AAFP) Congress of Delegates (COD) introduce a resolution to:

- ~~-require the AAFP to create a Member Interest Group (MIG) for members who are interested in programs to recruit students from populations historically underrepresented in medicine to pursue medical careers and to support their applications to medical school (pipeline programs);~~
- that it compile a directory of existing pipeline programs to recruit students from populations historically underrepresented in medicine to pursue medical careers and to support their applications to medical school,
- that it survey Student and Resident Members to ascertain how many participated in pipeline programs and what features thereof were of particular value to them and
- that it establish a policy for determining which existing programs it should support and what form that support should take.

The amended was adopted.

Amended Resolution 20-06 was adopted.

Mr. Speaker, the Committee considered Item 4 on the Consent Calendar, Resolution 20-08L:

SUBJECT: “Single Payer/Improved Medicare for All—Now”

RESOLVED, that the New York State Academy of Family Physicians (NYSAFP) reaffirm its support for a Single Payer Healthcare system as the best way to achieve universal healthcare at an affordable price, and be it further

RESOLVED, that the New York State Academy of Family Physicians (NYSAFP) supports Improved Medicare For All as the best method to provide universal healthcare at an affordable price, and be it further

RESOLVED, that the New York State Academy of Family Physicians (NYSAFP) acknowledges the acuity of need for Single Payer healthcare, and the imperative that our failed employer based, multi-payer system be changed as soon as practicable, and be it further

RESOLVED, that the New York State Academy of Family Physicians delegation to the American Academy of Family Physicians COD bring a resolution to that body requiring that the AAFP support Single Payer in the form of Improved Medicare for All as the best way to provide universal, affordable healthcare for all Americans, and be it further

RESOLVED, that the New York State Academy of Family Physicians delegation to the American Academy of Family Physicians COD bring a resolution to that body requiring that the AAFP make Single Payer in the form of Improved Medicare for All one of its top advocacy and lobbying priorities due to the urgent and dire need for universal and affordable healthcare.

The overwhelming majority of comments supported the resolution but there were four members in opposition and many members who supported the resolution also expressed confusion regarding whether Improved Medicare For All refers to specific legislation. The maker explained that he used the term Improved Medicare For All as encompassing a model of a single

payer system endorsed by Physicians for a National Health Plan (PNHP) and described on that organization's website.

The first two RESOLVED clauses reaffirm NYSAFP support for single payer generally. The Committee does not see the need for NYSAFP to reiterate support for single payer. The substance of the resolution addresses endorsement of Improved Medicare For All.

The resolution suggests that the employer-based insurance model of health insurance failed during the COVID-19 pandemic because of intrinsic deficiencies which would be eliminated in a single payer environment. This sentiment is alluded to in the 3rd RESOLVED clause. Comments by members generally concur that the insurance/employer-based model of health insurance failed under the weight of the economic collapse caused by the COVID-19 pandemic.

Comments in opposition suggested that single payer was unlikely to be adopted and that a hybrid system was preferable. Additionally, a member said competition was essential and that single payer would not foster competition. The Committee recognizes that competition exists under the current model of health insurance but has not produced efficiencies or consistently high-quality outcomes and that compensation practices by plans have caused fiscal distress for private practices which has led to a dramatic decline in independence of medical practice.

The maker concedes that PNHP proposal does not include tort reform which has been a major feature of single payer reform advocated by NYSAFP. Furthermore, the PNHP proposal would retain fee-for-service payment. The AAFP has endorsed alternative forms of compensation.

Clearly, the COVID-19 pandemic has had a devastating impact on our health care system because of the inherent flaws of an employer-based insurance model of health care coverage. The Committee believes that the intent of the resolution is to assert that the fatal deficiencies of our health care system have been exposed by the pandemic and that we need to address those deficiencies in comprehensive reform to prepare for future public health disasters.

The Committee recommends the following substitute resolution:

~~RESOLVED, that the New York State Academy of Family Physicians (NYSAFP) reaffirm its support for a Single Payer Healthcare system as the best way to achieve universal healthcare at an affordable price, and be it further~~

~~RESOLVED, that the New York State Academy of Family Physicians (NYSAFP) supports Improved Medicare For All as the best method to provide universal healthcare at an affordable price, and be it further~~

~~RESOLVED, that the New York State Academy of Family Physicians (NYSAFP) acknowledges the acuity of need for Single Payer healthcare, and the imperative that our failed employer based, multi-payer system be changed as soon as practicable, and be it further~~

~~RESOLVED, that the New York State Academy of Family Physicians delegation to the American Academy of Family Physicians – COD bring a resolution to that body requiring that the AAFP support Single Payer in the form of Improved Medicare for All as the best way to provide universal, affordable healthcare for all Americans, and be it further~~

~~RESOLVED, that the New York State Academy of Family Physicians delegation to the American Academy of Family Physicians COD bring a resolution to that body requiring that the AAFP make Single Payer in the form of Improved Medicare for All one of its top advocacy and lobbying priorities due to the urgent and dire need for universal and affordable healthcare.~~

~~*RESOLVED, that closure of the US economy compelled by the need to protect the general public from exposure to the highly contagious and dangerous coronavirus caused millions of Americans to lose their jobs and their employer-provided health insurance, and be it further*~~

~~*RESOLVED, that variations in coverage and payment practices by insurance plans confused providers of health care services and interfered with patient access to health care as emergency rules were implemented to limit patient utilization of services to protect against exposure to COVID-19 and plans acted to protect their financial condition rather than to support providers as they attempted to accommodate patients in a severe public health crisis, and be it further*~~

~~*RESOLVED, that the New York State Academy of Family Physicians (NYSAFP) delegation to the American Academy of Family Physicians (AAFP) Congress of Delegates (COD) will introduce a resolution to require the AAFP to develop a position paper on the failure of the employer-based insurance model to support our health care service delivery system during the COVID-19 crisis, and be it further*~~

~~*RESOLVED, that the NYSAFP delegation to the AAFP COD will introduce a resolution to the AAFP COD to require the AAFP to endorse a single payer health care system as the best way of assuring that the country is prepared for a future pandemic or comparable public health emergency.*~~

Mr. Speaker, the Committee recommends adopting Substitute Resolution 20-08L.

Dr. Price extracted this item. Dr. Price said the first two RESOLVED clauses do not require action or establish policy and should be deleted.

Dr. Strouse said he recommended retaining these two clauses as WHEREAS clauses when the resolution is sent to the AAFP He supports deleting them as RESOLVED clauses.

Dr. Ostrander supported the motion.

The amendment passed. The amended resolutions reads:

~~*RESOLVED, that closure of the US economy compelled by the need to protect the general public from exposure to the highly contagious and dangerous coronavirus caused millions of Americans to lose their jobs and their employer-provided health insurance, and be it further*~~

~~*RESOLVED, that variations in coverage and payment practices by insurance plans confused providers of health care services and interfered with patient access to health care as emergency rules were implemented to limit patient utilization of services to protect against exposure to COVID-19 and plans acted to protect their financial condition rather than to*~~

~~support providers as they attempted to accommodate patients in a severe public health crisis, and be it further~~

~~RESOLVED, that the New York State Academy of Family Physicians (NYSAFP) delegation to the American Academy of Family Physicians (AAFP) Congress of Delegates (COD) will introduce a resolution to require the AAFP to develop a position paper on the failure of the employer-based insurance model to support our health care service delivery system during the COVID-19 crisis, and be it further~~

~~RESOLVED, that the NYSAFP delegation to the AAFP COD will introduce a resolution to the AAFP COD to require the AAFP to endorse a single payer health care system as the best way of assuring that the country is prepared for a future pandemic or comparable public health emergency.~~

Dr. McCrory proposed amending the resolution to change “require” to “direct”. The amendment was approved. The amended resolution reads:

~~RESOLVED, that closure of the US economy compelled by the need to protect the general public from exposure to the highly contagious and dangerous coronavirus caused millions of Americans to lose their jobs and their employer-provided health insurance, and be it further~~

~~RESOLVED, that variations in coverage and payment practices by insurance plans confused providers of health care services and interfered with patient access to health care as emergency rules were implemented to limit patient utilization of services to protect against exposure to COVID-19 and plans acted to protect their financial condition rather than to support providers as they attempted to accommodate patients in a severe public health crisis, and be it further~~

~~RESOLVED, that the New York State Academy of Family Physicians (NYSAFP) delegation to the American Academy of Family Physicians (AAFP) Congress of Delegates (COD) will introduce a resolution to require direct the AAFP to develop a position paper on the failure of the employer-based insurance model to support our health care service delivery system during the COVID-19 crisis, and be it further~~

~~RESOLVED, that the NYSAFP delegation to the AAFP COD will introduce a resolution to the AAFP COD to require direct the AAFP to endorse a single payer health care system as the best way of assuring that the country is prepared for a future pandemic or comparable public health emergency.~~

Dr. Kaplan proposed an amendment to restore the two deleted clauses as WHEREAS clauses.

Dr. Neghassi explained that WHEREAS clauses are not technically part of a resolution and that the delegates to the AAFP will consider including the two clauses in the WHEREAS clauses when this resolution is submitted to the AAFP.

Amended Resolution 20-08L was approved.

Mr. Speaker, the Committee considered Item 5 on the Consent Calendar, Resolution 20-10L

SUBJECT: “Commemoration of Dr. Douglas Henley”

RESOLVED, that the New York State Academy of Family Physicians acknowledges and appreciates Dr. Henley’s long and accomplished services to the American Academy of Family Physicians, and be it further

RESOLVED, that the New York State Academy of Family Physicians congratulates Dr. Henley on his career in Family Medicine and his service to the American Academy of Family Physicians and thanks him for his many achievements in promoting the specialty of Family Medicine and the welfare of Family Physicians.

There was no opposition to this resolution. The Committee concluded, however, that the RESOLVED clauses are redundant and recommends consolidating them. The Committee recommends the following amended resolution:

RESOLVED, that the New York State Academy of Family Physicians acknowledges and appreciates Dr. **Douglas** Henley’s long and accomplished service to the Academy, and ~~be it further~~

~~RESOLVED, that the New York State Academy of Family Physicians congratulates Dr. Henley on his career in Family Medicine and his service to the Academy and thanks him for his many achievements in promoting the specialty of Family Medicine and the welfare of Family Physicians~~

Mr. Speaker, the Committee recommends adopting Resolution 20-10L as amended.

Mr. Speaker, the Committee considered Item 6 on the Consent Calendar, Resolution 20-12L:

SUBJECT: “In Memoriam Herbert Joyce, MD”

RESOLVED, that Dr. Joyce was a major figure in medicine and within the New York State Academy of Family Physicians (NYSAFP) whose career and achievements have brought credit and distinction to Family Medicine and the Academy, and be it further

RESOLVED, that the New York State Academy of Family Physicians (NYSAFP/Academy) is deeply indebted to Dr. Joyce for his significant contributions to Family Medicine and the Academy’s and be it finally

RESOLVED, that the New York State Academy of Family Physicians (NYSAFP/Academy) expresses sorrow at his passing and offers sincere condolences to his children Christine Joyce Miller (Ray), James E. (MaryAnn Even) Joyce and William L. (Anne Harding) Joyce; his grandchildren of Stacey Miller McDermott, Brian Miller, Sarah Genau, Margaret Joyce and Molly Joyce; and his great grandchildren of Tiernan and Lorcan McDermott, William and Alexandra Genau, Adeline and Charlotte Belliveau.

There was no opposition to this resolution. The Committee recommends some editorial changes to delete the acronym NYSAFP and to remove the list of names of Dr. Joyce's family members to avoid risking leaving anyone out:

RESOLVED, that Dr. **Herbert** Joyce was a major figure in medicine and within the New York State Academy of Family Physicians (NYSAFP) whose career and achievements have brought credit and distinction to Family Medicine and the Academy, and be it further

RESOLVED, that the New York State Academy of Family Physicians (NYSAFP/Academy) is deeply indebted to Dr. Joyce for his significant contributions to Family Medicine and the Academy's and be it finally

RESOLVED, that the New York State Academy of Family Physicians (NYSAFP/Academy) expresses sorrow at his passing and offers sincere condolences to his ~~children Christine Joyce Miller (Ray), James E. (MaryAnn Even) Joyce and William L. (Anne Harding) Joyce; his grandchildren of Stacey Miller McDermott, Brian Miller, Sarah Genau, Margaret Joyce and Molly Joyce; and his great grandchildren of Tiernan and Lorean McDermott, William and Alexandra Genau, Adeline and Charlotte Belliveau~~ **family and loved ones.**

Mr. Speaker, the Committee recommends adopting Resolution 20-12L as amended.

Mr. Speaker, the Committee considered Item 7 on the Consent Calendar, Resolution 20-14L:

SUBJECT: "Support the Establishment of Police Review Boards in Every Community as a Public Health Intervention"

RESOLVED, that the New York State Academy of Family Physicians (NYSAFP) supports the establishment of citizen police review boards and the empowerment of existing citizen review boards with the following fundamental requirements:

- Must have an elected membership made up of civilian representatives who live within and reflect the diversity of community
- Must be governed as an independent agency without undue influence of the local police and law enforcement agencies
- Must be granted subpoena, investigatory, disciplinary, and auditing power
- Must be offered sustainable funding, and BE IT FURTHER

RESOLVED, that the New York State Academy of Family Physicians (NYSAFP) Commission on Advocacy enlist and collaborate with a New York State Assembly Member & a New York State Senator to introduce a bill in their respective legislative bodies that would require the establishment of citizen police review boards and the empowerment of existent citizen police review boards with the aforementioned fundamental requirements for every law enforcement agency in the State of New York, and BE IT FURTHER

RESOLVED, that the NYSAFP delegation to the next AAFP Congress of Delegates introduce a resolution that the AAFP support the establishment of citizen police review boards and the empowerment of existent citizen police review boards with the aforementioned fundamental

requirements for every law enforcement agency in the United States of America, and BE IT FURTHER

RESOLVED that New York State Academy of Family Physicians delegates the AAFP support rigorous data collection to monitor and evaluate effectiveness of civilian review boards in decreasing morbidity and mortality in the face of police brutality.

The majority of comments supported the resolution. There were several questions, however, regarding evidence of the effectiveness of civilian review boards in producing reforms or protecting public health. Additionally, several members noted technical deficiencies in the RESOLVED clauses. RESOLVED clauses should be independent of one another so that each could stand alone if the entire resolution was not adopted. The 2nd and 3rd RESOLVED clauses inappropriately refer to requirements for review boards which are delineated in the 1st RESOLVED clause.

The resolution refers to “fundamental requirements” for review boards which includes an “elected membership”. It is not clear that civilian review boards are elected.

The Committee recommends the following substitute resolution to focus the resolution on empowerment of civilian review boards and to declare that police violence is a matter of public health:

RESOLVED, that the NYSAFP supports civilian oversight of police agencies and be it further

RESOLVED, that the NYSAFP supports ongoing monitoring and assessment of the effectiveness of civilian oversight of police agencies in reducing incidents of violence against people by police and be it finally

RESOLVED, that the NYSAFP adopt a policy that police violence is a threat to public health and safety.

Mr. Speaker, the Committee recommends adopting Substitute Resolution 20-14L as amended.

I affirm that this report was approved by all the members of the reference committee. –DN

Mr. Speaker, we move the adoption of the Committee’s report.

Mr. Speaker, we would like to thank the members of my Reference Committee. We would also like to thank the members of the Academy who testified at the Reference Committee for their insight and their cooperation. We would like to thank Vito Grasso and Ron Rouse for assisting the Committee in preparing this report.

Chair: Daniel Neghassi, MD
Vice Chair: Pooja Paunikar, MD
Advisor: Phil Kaplan, MD
Member: Stella King, MD

Member: Daniel Cunningham, MD
Resident: Sophia Conroy, MD
Student: Jessica Meyer
Staff: Vito Grasso
Staff: Ron Rouse

Dr. Price introduced a resolution in memoriam for Dr. Russell Perry. A two-thirds majority was required for acceptance of a resolution from the floor. The resolution was accepted unanimously. The resolution was approved.

Dr. Symons introduced Dr. Jason Matuszak for the report of reference committee three.

Report of Reference Committee Three

Dr. Matuszak: Mr. Speaker, Reference Committee Three 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.

Mr. Speaker, we considered three separate sets of bylaws amendments and, considered each set as one item. Therefore, we will present one consent calendar, with each set of amendments to the Constitution and Bylaws attached as a separate Appendix.

The first set of amendments establish new procedures for operating our Congress of Delegates. These are presented in Appendix A.

The second set of amendments establish provisions for governing the New York Chapter in emergencies. These are presented in Appendix B.

The third set of amendments conform the New York Chapter bylaws with the bylaws of our parent organization, the American Academy of Family Physicians (AAFP) and were developed in consultation with the AAFP. These are presented in Appendix C.

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?

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

1. Bylaws changes #1 - **ADOPT AS AMENDED** in Appendix A
2. Bylaws changes #2 - **ADOPT AS AMENDED** in Appendix B
3. Bylaws changes #3 - **ADOPT AS AMENDED** in Appendix C.

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

Dr. Symons invited extractions. Items 1 and 2 were extracted. The remainder of the Consent Calendar was adopted.

Mr. Speaker, the Committee considered Item 1 on the Consent Calendar, a set of bylaws amendments which establish new procedures for operating our Congress of Delegates. The changes are summarized and detailed in Appendix A.

The Committee read testimony looking for additional information oversight and the actual [Congress of Delegates Policy Operations Manual \(CODPOM\)](#) document and more information about the need for such a document.

The reference committee is aware of some of the history of why this document is necessary. There has been a lack of consistency in documentation related to the policies and operations of the Congress of Delegates, with duplicative and conflicting information presented through different formats. Also, history and precedent has not always been congruent with the stated actions within existing documents or with the tenets of the Standard Code of Parliamentary Procedure. Because of these factors, it was determined there was a need for one codified document to standardize and facilitate the Congress of Delegates procedures. A draft copy of the CODPOM was submitted to the Membership and Operations Commissions for review and comment and then presented to the board at the March Cluster, prior to submission of these proposed bylaws changes.

It is the purview of the Board to manage the operations of the Academy, including the operations of meetings such as the Congress of Delegates. Just as the Congress does not have to approve the Operations Manual of the Academy, the Congress does not need to approve the Operations manual for the COD, only put into place policy that allows it to exist.

The final version of the CODPOM is subject to approval by the Operations Commission and the Board prior to implementation.

The Reference Committee agrees with the testimony that broad oversight is necessary and recommends additional language to the bylaws to ensure that any changes or additions to the CODPOM would need approval by the Operations Commission and the Board prior to implementation.

At the same time, the Reference Committee appreciates the role of Congress in crafting the rules by which Congress operates. As such, we have arranged for the current DRAFT version of the CODPOM to be available to COD attendees. This is to be considered an informational item only and while delegates would be encouraged to submit ideas to the Speaker of the COD regarding potential changes to the document, the CODPOM itself would not be debated at Congress.

The Reference Committee separately considered testimony on the determination of the quorum being moved to the CODPOM. It is our understanding this was done primarily to keep all of the rules in one place, however the Reference Committee agrees that the determination of quorum

should be maintained in the bylaws and as such recommends reverting to the original language for Bylaws, Chapter 9 section 5.

Mr. Speaker, the Committee recommends **ADOPTING AS AMENDED** Bylaws changes #1 as detailed in Appendix A.

Dr. Nosal extracted this item. Dr. Nosal expressed concern regarding whether people had read the proposed amendments. Dr. Symons explained that the amendments have been available for review since March. He also explained that the CODPOM was published for information only. The COD does not have to approve the manual itself. The amendments are for the purpose of authorizing creation of a manual. There were no changes offered for item 1. The amendments proposed in Item 1 were adopted.

Mr. Speaker, the Committee considered Item 2 on the Consent Calendar, a set of bylaws amendments which establish provisions for governing the New York Chapter in emergencies. The changes are summarized and detailed in Appendix B.

The Committee read testimony that the bylaws do not need to address an attack on the United States but should focus on a state of emergency declaration.

The Committee read testimony also focused on the need to permit electronic/virtual meetings. There was testimony received that gave the committee feedback on readability.

Mr. Speaker, the Committee agrees with the testimony presented and recommends **ADOPTING AS AMENDED** Bylaws changes #2 as detailed in Appendix B.

Dr. Nosal extracted this item.

There were no changes offered for the amendments proposed in item 2. The amendments proposed in item 2 were adopted.

Mr. Speaker, the Committee considered Item 3 on the Consent Calendar, a set of bylaws amendments which conform the New York Chapter bylaws with the bylaws of our parent organization, the American Academy of Family Physicians (AAFP) and were developed in consultation with the AAFP.

The changes are summarized and detailed in Appendix C.

The Committee read testimony that was only in agreement with the proposed changes.

Mr. Speaker, the Committee recommends **ADOPTING AS AMENDED** Bylaws changes #3 as detailed in Appendix C.

Mr. Speaker, We move the adoption of the Committee's report.

Mr. Speaker, We would like to thank the members of my Reference Committee. We would also like to thank the members of the Academy who testified at the Reference Committee for their insight and their cooperation. We would like to thank Mrs. Donna Denley and Mrs. Jill Walls for assisting the Committee in preparing this report.

REFERENCE COMMITTEE 3

Chair: Jason Matuszak, MD, FAAFP
Vice Chair: Marc Price, DO
Member: Wesley Ho, MD
Member: Jun David, MD, FAAFP
Member: Mark Krotowski, MD, FAAFP
Staff: Donna Denley
Staff: Jill Walls

There being no further business, the speaker adjourned the Congress at 2:15 PM.

Recorded By,



Vito F. Grasso, MPA, CAE
Executive Vice President