Report of the Reference Committee on Policy

Reference Committee Chair: Mr. Speaker, the Reference Committee on Policy 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?

17A. CONSENT CALENDAR

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

1. Resolution 17-02 “Loser Pays Tort Reform”: Adopt Resolution 17-02 as amended
2. Resolution 17-04 “Support an HPV Vaccine Mandate for School Entry in New York State”: Refer to the Board
3. Resolution 17-05 “Screening, Intervening, and Advocating to Address Food Insecurity”: Adopt Resolution 17-05 as amended
4. Resolution 17-07 “Oppose Non-Evidence Based Restrictions to Telemedicine Abortion”: Adopt Resolution 17-07
5. Resolution 17-09 “Use of ‘Reparative’ or ‘Conversion’ Therapy”: Adopt Resolution 17-09 as amended
6. Resolution 17-12 “Redefine Screening in High-Risk Populations to be Considered Preventative Screening”: Not Adopt Resolution 17-12
7. Resolution 17-13 “Coverage of Follow-up Care for Abnormal Screening Tests”: Refer to the Board
8. Resolution 17-14 “Reversing the Diabetes Epidemic Through Implementation of the National Diabetes Prevention Program in NYS”: Refer to the Board

Mr. Speaker, the Committee moves adoption of the Consent Calendar as listed.
Resolution 17 – 02. 

SUBJECT: Loser Pays Tort Reform
SUBMITTED BY: Robert Ostrander, MD

RESOLVED that the New York State Academy of Family Physicians (NYSAFP) supports “loser pays” tort reform for medical malpractice and personal liability cases in New York State, whereby the losing plaintiff and plaintiff’s attorney shall be jointly and severally liable for the costs of defendant’s legal and related fees, up to a cap established by legislation, and be it further

RESOLVED that the NYSAFP leadership and contracted advocates shall seek sponsors for legislation that establishes “loser pays” tort reform for medical malpractice and personal liability cases in New York State, whereby the losing plaintiff and plaintiff’s attorney shall be jointly and separately liable for the costs of defendant’s legal and related fees, up to a cap established by legislation, and be it further

RESOLVED that the NYSAFP shall seek collaboration with MSSNY, HANYS, other specialty medical societies, municipalities and their associations, and other stakeholders to pursue “loser pays” tort reform for medical malpractice and personal liability cases in New York State, whereby the losing plaintiff and plaintiff’s attorney shall be jointly and separately liable for the costs of defendant’s legal and related fees, up to a cap established by legislation, and be it further

RESOLVED that the NYSAFP and other stakeholders will undertake a public relations campaign to educate the public about the medical malpractice and personal injury tort system and the benefits of “loser pays” tort reform.

After hearing testimony that was overwhelmingly in favor of the first three resolutions, the reference committee recommends their acceptance; however, due to concerns raised regarding a possible financial note associated with a public relations campaign, the reference committee recommends elimination of the fourth resolve. This change was discussed with the maker of the resolution.

The reference committee recommends amending Resolution 17-02 by deletion of the fourth resolved.

RESOLVED that the New York State Academy of Family Physicians (NYSAFP) supports “loser pays” tort reform for medical malpractice and personal liability cases in New York State, whereby the losing plaintiff and plaintiff’s attorney shall be jointly and severally liable for the costs of defendant’s legal and related fees, up to a cap established by legislation, and be it further

RESOLVED that the NYSAFP leadership and contracted advocates shall seek sponsors for legislation that establishes “loser pays” tort reform for medical malpractice and personal liability cases in New York State, whereby the losing plaintiff and plaintiff’s
attorney shall be jointly and separately liable for the costs of defendant’s legal and related
fees, up to a cap established by legislation, and be it further

RESOLVED that the NYSAFP shall seek collaboration with MSSNY, HANYS, other
specialty medical societies, municipalities and their associations, and other stakeholders
to pursue “loser pays” tort reform for medical malpractice and personal liability cases in
New York State, whereby the losing plaintiff and plaintiff’s attorney shall be jointly and
separately liable for the costs of defendant’s legal and related fees, up to a cap established
by legislation.

Mr. Speaker, the reference committee recommends Resolution ’17-02 be adopted as amended.

Mr. Speaker, the Committee considered Resolution 17 – 04.

SUBJECT: Support an HPV Vaccine Mandate for School Entry in New York State
SUBMITTED BY: New York County Chapter

RESOLVED the New York State Academy of Family Physicians (NYSAFP) supports
mandating a HPV vaccine for school entry in 6th grade, just as other applicable ACIP
recommended vaccines are mandated for school entry at an appropriate grade in New York State,
and be it further

RESOLVED, that the NYSAFP’s delegates to the American Academy of Family Physicians
(AAFP) Congress of Delegates will present a resolution directing the AAFP to work with state
chapters to support state specific legislation that mandates the HPV vaccine for school entry in
6th grade, just as other applicable ACIP recommended vaccines are mandated for school entry at
an appropriate grade.

While the Reference Committee heard unanimity in support of the goal of increasing HPV
vaccination rates, there was passionate debate on both sides on the best strategy for achieving
this goal; therefore, the Reference Committee recommends referral to the Board for further
discussion on the best method for achieving this goal.

Mr. Speaker, the Committee recommends that 17-04 be referred to the Board.

Mr. Speaker, the Committee considered Resolution 17 – 05.

SUBJECT: Screening, Intervening & Advocating to Address Food Insecurity
SUBMITTED BY: New York County Chapter

RESOLVED, that the New York State Academy of Family Physicians (NYSAFP) will support
efforts to universally screen patients for food insecurity, using tools like the validated Hunger
Vital Sign™, and connect patients to federal nutrition programs and resources; and be it further

RESOLVED, that the NYSAFP delegates to the AAFP COD bring forth a resolution directing the AAFP to create a policy to support a strong and effective national nutrition safety net for vulnerable, low-income individuals by protecting and defending the federal nutrition programs [16] from block grants, structural changes, and budget cuts, and by ensuring all people in the U.S. have access to the nutrition they need to live healthy and productive lives; and be it further

RESOLVED, that the NYSAFP will educate its members on the health implications of food insecurity, health benefits of the federal nutrition programs, promising interventions to address food insecurity in health care settings, and advocacy opportunities to address food insecurity at the local, state, and national level.

The Reference Committee heard testimony acknowledging the importance of this topic with several speakers expressing concern regarding the potential addition of a mandate. After discussion with the maker, the Reference Committee suggests removing the word “universally” to alleviate this concern.

The reference committee recommends that amending the first resolved by deleting the word “universally,” so that it reads as follows:

RESOLVED, that the New York State Academy of Family Physicians (NYSAFP) will support efforts to screen patients for food insecurity, using tools like the validated Hunger Vital Sign™, and connect patients to federal nutrition programs and resources; and be it further resolved

Mr. Speaker, the Committee recommends that Resolution 17-05 be adopted as amended.

Mr. Speaker, the Committee considered Resolution 17-07

SUBJECT: Oppose Non-Evidence Based Restrictions to Telemedicine Abortion

SUBMITTED BY: Public Health Commission

RESOLVED, that the New York State Academy of Family Physicians (NYSAFP) opposes legislation that would prohibit telemedicine access to medication abortion or impose restrictions on access to medication abortion using telemedicine that are not placed on other medical services, and be it further

RESOLVED, that the NYSAFP delegation to the AAFP COD bring forth a resolution directing the AAFP to oppose the singling out of medication abortion services as service to ban from telemedicine care, or impose restrictions that are not placed on other telemedicine services.
The Reference Committee heard discussion overwhelmingly in support of this resolution.

**Mr. Speaker, the Reference Committee recommends that Resolution 17-07 be adopted.**

Mr. Speaker, the Committee considered Resolution 17 – 09.

**SUBJECT:** Use of “Reparative” or “Conversion” Therapy

**SUBMITTED BY:** Scott Hartman, MD & Anita Ravi, MD

RESOLVED, the New York State Academy of Family Physicians (NYSAFP) will develop a policy statement aligned with AAFP policy, stating that: “The NYSAFP opposes the use of ‘reparative’ or ‘conversion’ therapy of lesbian, gay, bisexual or transsexual individuals. The NYSAFP recommends that parents, guardians, young people, and their families seek support and services that provide accurate information on sexual orientation and sexuality, increase family and school support, and reduce rejection of sexual minority persons of all ages” and, be it further

RESOLVED, the NYSAFP will support lobbying efforts to encourage passage of legislation banning the use of reparative therapy aimed at changing a person’s sexual orientation.

The Reference Committee heard overwhelming support for this resolution. It was pointed out that the language has changed such that transgender would be more appropriate and it would also be appropriate to expand the resolution to include gender identity. The makers of this resolution concurred.

**The reference committee recommends the first resolved be amended to substitute “transgender” for “transsexual” as follows:**

RESOLVED, the New York State Academy of Family Physicians (NYSAFP) will develop a policy statement aligned with AAFP policy, stating that: “The NYSAFP opposes the use of ‘reparative’ or ‘conversion’ therapy of lesbian, gay, bisexual or transgender individuals. The NYSAFP recommends that parents, guardians, young people, and their families seek support and services that provide accurate information on sexual orientation, gender identity, and sexuality, increase family and school support, and reduce rejection of sexual minority persons of all ages” and, be it further

Also, the reference committee recommends the second resolved be amended to add “or gender identification,” as follows:

RESOLVED, the NYSAFP will support lobbying efforts to encourage passage of legislation banning the use of reparative therapy aimed at changing a person’s sexual orientation or gender identification.

Mr. Speaker, the reference committee recommends Resolution 17-09 be adopted as amended

Mr. Speaker, the Committee considered Resolution 17-12.
SUBJECT: Redefine Screening in High Risk Populations to be Considered Preventative Screening

SUBMITTED BY: Wayne Strouse, MD

RESOLVED that the definition of preventative health screening include the screening of patients who are at high risk, and be it further

RESOLVED that the redefining of preventative health screening to include the screening of patients at high risk be adopted by the State of New York, and be it further

RESOLVED that the New York State Academy of Family Physicians (NYSAFP) delegation to the American Academy of Family Physicians (AAFP) COD bring a similar resolution to have the AAFP advocate with Congress to redefine preventative screening in any federally mandated insurance coverage to include the screening of patients at high risk.

While the Reference Committee heard significant support for the intent of the resolution, it was identified that the NYSAFP does not have the authority to create a definition for preventative health screening for other entities. It was further felt that recrafting this resolution was beyond the scope of this committee and therefore the Reference Committee recommends not adopting this resolution.

Mr. Speaker, the reference committee recommends that Resolution 17-12 not be adopted.

Mr. Speaker, the Committee considered Resolution 17 – 13.

SUBJECT: Coverage of Follow-Up Care for Abnormal Screening Tests

SUBMITTED BY: Wayne Strouse, MD

RESOLVED that the New York State Academy of Family Physicians (NYSAFP) advocate through the New York State Insurance Commissioner, the New York State Department of Health, and the New York State Legislature to require all insurance companies selling health insurance in the State of New York to cover the cost of follow-up procedures, surgery, laboratory testing and diagnostic procedures, that may be needed to further evaluate and manage an initial positive preventive health screening test, and be it further

RESOLVED that the NYSAFP advocate that the out of pocket costs for follow-up procedures, surgery, laboratory tests and diagnostic procedures, that may be needed to further evaluate and manage an initial positive preventive health screening test, be affordable, deemed as no more than the co-pay or coinsurance cost to see a specialist, and be it further

RESOLVED that the NYSAFP delegation to the American Academy of Family Physicians (AAFP) COD bring a resolution to direct the AAFP advocate with Congress to modify any federally mandated insurance coverage to limit out of pocket costs for follow-up procedures, surgery, laboratory tests, and diagnostic procedures, that may be needed to further evaluate and manage an initial positive preventive health screening test, in high risk individuals to no more
than the cost of a specialist copay in order to bring this exceedingly important benefit to all of our patients nationwide.

The Reference Committee heard support for the intent of the maker, but there was also concern about the specific steps needed to advocate for such a broad concept. It was felt by the Reference Committee that this level of detail should be explored, and thus recommends referral to the Board.

**Mr. Speaker, the Committee recommends that 17-13 be referred to the Board.**

Mr. Speaker, the Committee considered Resolution 17-14.

**SUBJECT:** Reversing the Diabetes Epidemic Through Implementation of the National Diabetes Prevention Program in NYS

**SUBMITTED BY:** Education Commission

RESOLVED, that the Education Commission design and carry out training of our members to support the CDC’s National Diabetes Prevention Program (NDPP) in NYS, using the collaborative model piloted by the NYSAFP with community and public health groups in the Bronx and elsewhere [1] and include the development of facilitators to act as academic detailers and teachers in their communities and places of work, and be it further

RESOLVED, that the Advocacy and Public Health Commissions shall write proposals to be presented to the Commissioners of Health of the NYSDOH and NYCDOH-MH to actively promote and support the NDPP in New York State; including community-based programs that make the NDPP accessible and, be it further

RESOLVED, that the NYSAFP shall work with diabetes prevention/self-management collaboratives and community initiatives throughout New York State and, be it further

RESOLVED, that the NYSAFP plan and coordinate efforts with collaborating diabetes prevention/self-management programs to produce reliable outcomes data using an Implementation Science design with appropriate governmental and private funding.

The Reference Committee heard no testimony either for or against the resolution, however felt that the resolution had merit and should be explored further.

**Mr. Speaker, the Committee recommends that 17-14 be referred to the Board.**

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 Ms. Kelly Madden and Mr. Ron Rouse for assisting the Committee in preparing this report.

CHAIR: KrisEmily McCrory, MD, FAAFP
VICE-CHAIR: Pooja Paunikar, MD
ADVISOR: Mark Josefski, MD, FAAFP
MEMBER: Laurel Dallmeyer, MD
MEMBER: Keasha Guerrier, MD
MEMBER: Wesley Ho, MD