NYS Academy of Family Physicians

CONGRESS OF DELEGATES HANDBOOK

June 18-19, 2016

Table of Contents

Official Call of Meeting	
NYSAFP Traditions	
NYSAFP Officer Job Descriptions	6
NYSAFP Commissions Information	<u>C</u>
In Memoriam	11
Procedures of the Congress of Delegates	12
25 & 50 Year Members	19
Delegates and Alternate Delegates of County Chapters	20
Officers and Board of Directors	23
Nominating Committee / Reference Committees	23
Schedule of Events	27
Agenda	27
Past Presidents	29
President's Annual Report	30
Secretary's Annual Report	33
Treasurer's Annual Report	32
Executive Vice President's Annual Report	349
Annual Reports of Commissions	43
Commission on Academy Operations	44
Commission on Family Practice Advocacy	46
Commission on Education	48
Commission on Leadership Development and Nominations	52
Commission on Membership & Member Services	56
Commission on Public Health	62
NYSAFP Foundation Annual Report	63
Resolutions for 2016	64
Resolutions of 2015 Actions	64
NYSAFP Constitution & Bylaws	64
AAFP Bylaws	64
Financial Statement / Auditor's Annual Report	64
Nominee Photos & Bios	

Official Call of Meeting

June 18, 2016

TO: Delegates of Component County Chapters

Resident and Student Associations

FROM: Barbar Keber, MD, Secretary, New York State Academy of Family Physicians

SUBJECT: Official Call of the Annual Meeting

Dear Doctors and Students:

Notice is hereby given, pursuant to Article 3 of the Constitution of the New York State Academy of Family Physicians, Inc., that the regular annual meeting of the Congress of Delegates will be held on Saturday, June 18, 2016, at the Hilton Garden Inn, Troy, New York, at 7:00 a.m. for the following purpose: to receive and act upon the reports of officers and commissions; to receive and act upon the reports that may be placed before the Congress of Delegates; to present the slate of officers for the Board of Directors. At the beginning of this meeting, all delegates will present their credentials which have been duly authorized and signed by their respective county chapter secretary.

The Congress of Delegates will reconvene on Sunday, June 19, 2016 at 8:00 a.m.

Respectfully submitted,

Bah to

Barbara Keber, M.D.

Secretary

NYSAFP Traditions

<u>Upstate-Downstate Balance</u>

The Academy nominating committee has tried to achieve geographic balance in the Board and Presidency. Downstate is New York City, Long Island and Westchester; upstate is everywhere else. Thus the nominating committee recommendation for President-elect (and for Vice President) has been alternated between an upstate member and a downstate member.

Challenge to the Candidate for President-Elect

The nominating committee usually has recommended the Vice President as the candidate for President-elect, though nominations from the floor may be made.

NYSAFP Officer Job Descriptions

DIRECTOR

There are 10 directors; nine are elected for 3 year terms and the new physician director is elected for a 2 year term.

- Attend the COD
- 2. Attend board meetings usually held in March, July and October
- 3. Serve on a commission
- 4. Participate in board and commission conference calls
- 5. Represent NYSAFP at meetings including AAFP or other state chapter meetings
- 6. Must be Active Member in good standing and should have some experience at a local level or as a member of an NYSAFP commission or reference committee of the C.O.D.

SPEAKER AND VICE SPEAKER

- 1. The speaker and vice speaker are members of the Board and are responsible for running the C.O.D. They must be familiar with parliamentary procedure.
- 2. The speaker and vice speaker alternate as presiding officers of the C.O.D.
- 3. The speaker and vice speaker are responsible for planning the Congress, including
 - a. Assigning reference committee chairs
 - b. Reviewing reports of the reference committees
 - c. Reviewing resolutions of reference committees
 - d. Assigning resolutions to reference committees
 - e. Oversee elections
 - f. Provide guidance to reference committees and special committees of the C.O.D.
 - g. Attend board meetings, usually held in March, July and October
 - h. Participate in teleconferences to facilitate the work of the C.O.D.
 - i. May be asked to serve as advisor to students, residents or a commission
- 4. The Bylaws do not limit the number of consecutive terms that a speaker or vice speaker may serve.

PRESIDENT

- 1. Is a member of the Board of Directors
- 2. Is a member of the Executive Committee
- 3. Serves as ex-officio member of all commissions
- 4. Coordinates preparation of commission agendas
- 5. Makes a report at each board meeting and makes an annual report at the C.O.D.
- 6. Attends the AAFP Annual Leadership Forum and C.O.D.

7. Attend local chapter meetings

PRESIDENT-ELECT

- 1. Becomes president upon completion of the president's 1 year term or should the President die or resign.
- 2. Is a member of the Board of Directors
- 3. Is a member of the Executive Committee
- 4. Serves as president in the absence of the president
- 5. Participates in preparation of commission agendas
- 6. Must be Active Member in good standing, have previously served on the board and on commissions, demonstrated leadership, be familiar with NYSAFP operations and be willing and able to serve as president.

VICE PRESIDENT

- 1. Is a member of the Board of Directors
- 2. Is a member of the Executive Committee
- 3. Serves as chair or advisor to a commission
- 4. Attends board meetings, commission meetings, the COD and participates in teleconferences
- 5. Represents NYSAFP at meetings including AAFP meetings and other state chapter meetings.

AAFP DELEGATE

- 1. Is a member of the Board of Directors
- 2. Attends AAFP Congress and advises the board of developments in AAFP policies and programs
- 3. Must be an Active Member in good standing
- 4. Term is two years

AAFP ALTERNATE DELEGATE

- 1. Is a member of the Board of Directors
- 2. Attends AAFP Congress and advises the board of developments in AAFP policies and programs
- 3. Must be an Active Member in good standing

- 4. Would replace a delegate if the delegate could not attend the AAFP Congress
- 5. Term is two years

MSSNY DELEGATE

- 1. Is a member of the Board of Directors
- 2. Is a member of MSSNY
- 3. Attend the MSSNY House of Delegates and advise the board of developments in MSSNY policies and programs
- 4. Must be an Active Member in good standing

MSSNY ALTERNATE DELEGATE

- 1. Is a member of the Board of Directors
- 2. Is a member of MSSNY
- 3. Attends the MSSNY House of Delegates if the MSSNY Delegate cannot attend and advises the board of developments in MSSNY policies and programs
- 4. Must be an Active member in good standing

SECRETARY

- 1. Is a member of the Board of Directors
- 2. Is a member of the Executive Committee
- 3. Is responsible for minutes of board meetings

TREASURER

- 1. Is a member of the Board of Directors
- 2. Is a member of the Executive Committee
- 3. Is responsible for reviewing financial records of the Academy
- 4. Is a member of the Commission on Operations
- 5. Is responsible for reporting to the Commission on Operations on the Academy's financial status.

NYSAFP Commissions Information

COMMISSION ON FAMILY PRACTICE ADVOCACY:

Chaired by Marc Price, DO, this commission is responsible for monitoring governmental and legislative developments, and their impact on Family Medicine and Family Physicians. The Commission advocates for Family Physicians on issues that affect them in their professional lives. The Commission has worked with our lobbyists, coordinated the Health Policy Conference, and lobbied in Albany meeting with legislators and key legislative staff.

COMMISSION ON EDUCATION

Chaired by Ephriam E. Back, MD, this commission is responsible for developing policy recommendations and programs to support the education of the next generation of Family Physicians. It has developed programs and mechanisms to recruit and support volunteers to teach medical students and residents. The commission also supports student and resident member activities and participation in the Academy, including programs at the Scientific Assembly – Winter Weekend and National Congress of Resident and Student Members. The Commission also serves as the selection committee for several awards, including high school scholarships, resident awards and the Family Practice Educator of the Year.

COMMISSION ON LEADERSHIP DEVELOPMENT AND NOMINATIONS

Chaired by Jose Tiburcio, MD, this commission's mission is to nurture and support leadership training of Family Physicians and to encourage diversity in Academy leadership. Its current goals are:

- 1. To ensure that officers and directors reflect the demographics of Academy membership
- 2. To train leaders to run an efficient organization that is able to respond rapidly to member needs and interests
- 3. To communicate with all members of the Academy so they can easily understand Academy operations.

COMMISSION ON MEMBERSHIP AND MEMBER SERVICES

Chaired by Jason Matuszak, MD, this commission is responsible for recruiting and retaining members; making recommendations regarding new and existing member services, and

coordinating the annual Winter Weekend – Scientific Assembly as well as the Congress of Delegates

COMMISSION ON OPERATIONS

Chaired by Robert Ostrander, MD, this commission is responsible for finances, personnel, headquarters operations and governance issues. This commission develops and monitors the budget, reviews leases and contracts and develops bylaws amendments.

COMMISSION ON PUBLIC HEALTH

Chaired by Heather Paladine, MD, this commission has three broad areas of action:

- 1. Education of the public to ensure health
- 2. Policy development to promulgate public health measures
- 3. Widening access to care for special populations such as the aging, children and those in underserved areas

Specifically the commission has worked on vehicular safety; the Health Care Reform Act; tobacco and other substance use; HIV and needle exchange; the obesity problem; pharmaceutical company relationships and ethics in research. Many of these are topics of ongoing activities of the commission. The commission will continue to pursue appropriate measures as Academy members raise new topics relating to health care.

In Memoriam

Dale E. Harro, MD

Mohammad M. Kamal, MD

Knolly E. Millett, MD

David Samuel Pointon, MD

Jack Soiefer, MD

Walter M. Sonneborn, MD

Procedures of the Congress of Delegates

The Congress of Delegates will convene on the 18th day of June, 2016 and will be conducted under the Standard Code of Parliamentary Procedure, except where specific action is mandated by the Bylaws of the Academy.

All Resolutions (Major Motions) must be submitted for consideration at least thirty days prior to the meeting of the Congress or at the opening of the Congress by an affirmative vote of two-thirds of the members present.

All Resolutions will be submitted to the reference committee for study and will be reported back to the Congress of Delegates with a recommendation for action at which time it is seconded. (Seconding indicates a wish to consider a motion and not necessarily an endorsement.) It will then be voted on after all Subsidiary Motions have been considered and voted upon.

Subsidiary Motions require seconding and are motions to Postpone Temporarily, Postpone Indefinitely, Postpone Definitely, or Amend the Motion. These Motions are passed by a majority vote. Motions to Limit Debate or Vote Immediately (Call the Question) require a two-thirds vote.

Privilege Motions to Adjourn or Recess require a majority. A Question of Privilege will enable a Delegate to secure immediate decision or action by the Speaker and requires no vote. Incidental Motions to appeal the decision of the Chair requires a majority vote. A Point of Order calls attention to a violation of the rules and may interrupt the Speaker. No vote is required and a ruling is made by the Chair. The Parliamentarian is Council to the Speaker but does not make a ruling.

Motions made to change a Main Motion are:

- 1. Motion to reconsider a Main Motion previously carried or lost.
- 2. Rescind a Main Motion previously carried.
- 3. Amend by a new Motion any Motion previously carried.
- 4. Repeal or amend by implication any Main Motion previously carried which conflicts with the later Motion.

These motions require seconding and a majority vote.

The Reference Committee is responsible for studying the business of the Congress and the performance of the Officers and the Board of Directors of the Academy as well as the future actions and plans of the Academy.

The committee Chair is responsible for the consideration of all pertinent facts and a distilled report to the Congress of Delegates with recommendations for action in the form of a motion.

During debate on the floor no delegate shall speak more than twice on the same question or longer than five minutes at one time unless a motion to suspend the rules is passed by two-thirds vote of the Congress. Only the sponsor of the motion will be permitted to speak a second time on a question before all other delegates desiring to be heard have spoken at least once.

Voting shall be by voice, standing, balloting or a show of hands. Written ballots shall be used whenever a motion to vote by ballot is carried.

The consent calendar is comprised of reports of commissions which have been submitted for information and are not debatable. They will be passed by the Chair to clear the calendar and make them a part of the records of the Congress of Delegates.

POWERS AND DUTIES OF REFERENCE COMMITTEES

The reference committee is created to facilitate the work of the Congress of Delegates. Most items requiring action by the Congress go through the reference committee structure. Instead of debating and hearing testimony on each report and resolutions on the floor, all work is referred by the Speaker to the appropriate reference committee.

The schedule of the reference committee is posted and announced at the opening of the Congress. All persons interested in a particular proposal are invited to present their view during this session.

Every pertinent point should be heard and considered by the Reference Committee. It is necessary that extraneous oration and purely personal or local views be avoided as well as one person monopolizing the testimony for any item or session. The time that is allotted to the Reference Committee to complete its work is brief and the Chair needs to carefully control the meeting so that each item is considered separately and not allow one issue to use up too much of the committee's time.

Suggestions for conducting a Reference Committee:

- 1. Immediately after the first session of Congress, the committee Chair will meet with the Speaker to update the agenda. Prior to the opening of the Congress, the Speaker assigns all commission reports and all Resolutions to the Reference Committees. These assignments are published in the Delegates' Handbook. At the opening of the Congress, there is an invitation made by the Speaker to consider any new resolutions. If these submissions are accepted for consideration by the Congress, these Resolutions will then be assigned by the Speaker to the Reference committees.
- 2. The Chair and Vice-Chair of the Reference Committees are selected prior to the Congress. The Speaker will make assignments for the remainder of the committee members at the first session from those Delegates present.

- 3. The Chair should make every effort to call the meeting to order promptly at the designated time.
- 4. It is not necessary to keep minutes of the deliberations of the committee hearing. The Chair may want to designate a committee member to make brief notes of pertinent discussion that will assist him/her in preparing the committee report. In the situation that there are two strong views expressed about an issue, the Chair will need to take careful notes so that a minority opinion can be accurately reported when the committee report is presented to the Congress.
- 5. After all items have been covered, the Reference Committees will go into executive session and ask all others to vacate the room. The committee will go over the proceedings of the hearing and make sure that the important points are accurately recorded. This will assist the Chair in forming the committee report. It is important that the views of the individual Reference Committee members do not influence the committee findings and interpretation. The role of the Reference Committee is to receive information and opinions and not to make its own "policy" decisions.
- 6. Without deliberately stifling constructive debate, the committee should strive as quickly as possible to handle each item referred to it by:
 - a. Approving
 - b. Disapproving
 - c. Agreeing upon revision to submit to the Congress.
 - d. Matters may be referred for further study or action. This should be referred to the Board of Directors for assignment to appropriate commissions.
 - e. All recommendations need to be clearly stated in the report, BEFORE RECOMMENDING THE FORMATION OF A NEW COMMISSION OR MATTER REQUIRING A FISCAL NOTE, CONSULT WITH THE SPEAKER FOR GUIDANCE.
 - f. The Chair of the Reference Committee cannot permit motions or votes at the hearing since its objective is only to receive information and opinions. The authority to recommend submission of a substitute Resolution comes from the hearing testimony or the maker of the Resolution accepting a "friendly" amendment at the time of discussion.
- 7. After the committee has reached its decisions on all points of the agenda the final report is prepared. It is the responsibility of the Chair to dictate this report immediately after the committee has adjourned. Each committee member will have an opportunity to review the draft before the final copy will be submitted to the Congress. If there is a minority report to be submitted, the Chair may delegate this to a committee member, but again this report must be dictated immediately by that person after the close of the committee meeting.
- 8. The final report must be signed by all committee members.

PREPARING THE REFERENCE COMMITTEE REPORT

The reference committee report should be addressed to the Speaker of the Congress. Each line of each page is to be numbered in sequence (each page to begin with Line 1).

Properly identify each item, including page reference from the Handbook. When considering an amendment to the Bylaws, the complete proposed amendment is to be copied as it appears in the Handbook. When considering a resolution, the resolved portion (s) only are to be copied as presented in the Handbook or as subsequently distributed to the Congress. After properly identifying the item, state the pertinent reason(s) for the action recommended, and then specify recommended action. A statement of reason(s) for the action recommended is necessary, and should be given particularly careful attention on controversial issues.

The order of items in the reference committee report may follow any order. There are, however, a few things to keep in mind:

- 1. In instances where multiple items on the same subject are considered together, order of consideration of the items is determined by action recommended. Items are then presented in the following sequence: recommendation to adopt or refer, recommendation to reject, recommendation to file for reference.
- 2. Recommended action items (calling for adoption or approval) which are considered non-controversial and are resolved with complete agreement will be placed under an Item No and labeled "Miscellaneous". These items are to be placed immediately following all action items which require individual consideration and before the Reaffirmation Calendar and in the file for reference items grouped at the end of the report.
- 3. Resolutions that are found to be either current policy or already addressed in current projects should be placed on the Reaffirmation Calendar. The reference committee will provide a narrative explaining the reason why the resolution is being placed on the reaffirmation calendar. The Reaffirmation Calendar is to be placed following the last item No with the heading "Miscellaneous".
- 4. Reports that contain neither a recommendation nor a proposed statement of policy and are being filed for reference may be considered in sequence at the end of the report.

If testimony in the hearing and the recommendation of the reference committee agree with the recommendations in reports and resolutions to the Congress are as follows:

MISCELLANEOUS

 Any items that are contained in the Delegates' Handbook (Board reports, commission annual reports, resolution) and items of business distributed at the Congress of Delegates can be placed under the heading of Item (number) – Miscellaneous" if the testimony in the hearing and the recommendation of the reference committee agree with the recommendations in these reports and resolutions. However, even if all of these factors have been met, the item can still be in the body of the reference committee report if the reference committee does not want to place the item under this heading.

- 2. Any revised wording (including editorial changes) from the reference committee, even though there was general agreement in the reference committee testimony, may <u>not</u> be included in the "Miscellaneous" item.
- 3. The recommended action for the items under the "Miscellaneous" section must be for adoption.
- 4. Any delegate may ask that an item be removed from under this heading for individual action by the Congress.

REAFFIRMATION CALENDAR

- Discussions during reference committee hearings and reference committee executive
 sessions often reveal that the intent of a resolution is already current or already being
 done by current projects. This then laves the reference committee with the difficult
 decision of recommending "to adopt" or "not to adopt" a policy or proposed project
 that is already in existence.
- 2. These resolutions can be placed on the Reaffirmation Calendar with a narrative explaining why it is being placed on the reaffirmation calendar and identifying the current policy or current project(s).
- 3. As with the items under the heading "Miscellaneous, any delegate may ask that an item be removed from the Reaffirmation Calendar for individual action by the Congress.

PLACING THE ENTIRE REFERENCE COMMITTEE REPORT ON CONSENT CALENDAR

Once the reference committee report is completed, an index page will represent the consent calendar and will be formatted so that it follows the report. For example, Item 1 from the report will be the first item on the consent calendar with Item 2 from the report as the second item on the consent calendar and so on until all items from the report are so indicated on the consent calendar. Once each item number has been listed, the next item will be the last item with the heading of "Miscellaneous" which are items that the testimony in the reference committee hearing indicated support for the item and support for the reference committee recommendation, reaffirm calendar items and lastly the filed for reference items. Based on the consent calendar, the reference committee report will be voted on in one vote by the delegates. However, any item or items may be extracted for debate and these will be voted on separately.

The Consent Calendar should be addressed to the Speaker as follows:

"Mr. Speaker, the Reference Committee on Committee Name has considered each of the items referred to it and submits the following report. The committee's recommendations on each item will be submitted as a consent calendar and voted on in one vote. Any item or items may be extracted for debate. (All page references herein are to the Delegates' Handbook unless otherwise indicated.)

After listing the entire Consent Calendar, the Chair will then state: "Mr. Speaker, the committee moves adoption of the Consent Calendar as listed" (The Speaker will ask for a second and call for a vote for this acceptance.)

- 2. Resolutions: In considering Resolutions the committee may recommend a substitute Resolution or certain revisions of the original. It may recommend approval or disapproval of the Resolution as submitted. The committee report should state any pertinent reasons for its actions as briefly as possible.
- 3. **EXAMPLE**

ITEM 1 – RESOLUTION #, TITLE OF RESOLUTION, SUBMITTED BY:
RESOLVED,
Short narrative of testimony
RECOMMENDATION: The reference committee recommends that
Resolution # be Adopted, Not be Adopted, Referred to or that Substitute Resolution
which reads as follows be adopted in lieu of the first resolved in Resolution #.
RESOLVED CLAUSE ADOPTED AS FOLLOWS;
RESOLVED,

It is customary for the Reference Committee Chair, at the conclusion of the presentation to thank members of the committee, all those who appeared to assist in its deliberations and the secretary who transcribed the report.

It is important for the Chair to remind the members of the Reference Committee to read the report before its distribution to the Congress. At least a majority of the members of the committee must sign the report before it can be distributed. If a Reference Committee cannot reach a unanimous decision on an issue or portion of the report, it is proper that there be a minority report prepared by one or more members of the committee. Please notify the Speaker before the presentation to the Congress so that the minority report can be introduced into the record at the appropriate part of the presentation.

Newspaper reporters may be seated in all Reference Committee sessions. If the debate becomes "dangerous" from the standpoint of public relations, the Chair can entertain a motion

to go into EXECUTIVE SESSION so that all persons may be excluded from the room except those invited by the committee. So far, this has not been necessary.

It is hoped that this outline assists the Chair in preparing the Reference Committee report. If there are any procedural or bylaws questions, do not hesitate to consult the Speaker, Vice Speaker, Executive Vice President or any officer of the Board for guidance. If the officer does not know the answer, it will be researched promptly and reported back to the Chair so that the report completion is not delayed.

25 & 50 Year Members

25 Year Members

Dr. Daniel Arenos Dr. Michele Baltus Dr. Louis Bonavita Dr. Lisa Callahan Dr. Paul Caro

Dr. Paul Cooperman
Dr. Paul Cooperman
Dr. Thomas Coppens
Dr. Robert Dachs
Dr. Jose David
Dr. Martha David
Dr. Eddo De Lang
Dr. John Dermigny
Dr. Rudrama Duggirala
Dr. Stephen Evans
Dr. Joseph Finetti
Dr. Stephen Fishel

Dr. Gaylinn Greenwood Dr. Eva Gregory Dr. Susan Groh Dr. Paul Gross

Dr. Joseph Fusella Dr. Benjamin Gozun

Dr. Patricia Hermogenes

Dr. Tahirul Hoda
Dr. James Hohensee
Dr. Sandra Holland
Dr. George Hughes
Dr. Scott Ippolito
Dr. Eckardt Johanning
Dr. Janet Johnson
Dr. Sabrina Johnson
Dr. William Jorgensen

Dr. William Kuehnling Dr. Gracie Lin Fu Dr. Alan Lorenz

Dr. Claudia Lyon

Dr. Geoffrey Markowski Dr. Michael Martin Dr. Richard McKeever Dr. Donna Meltzer Dr. Edward Merker Dr. Bradford Mersereau

Dr. Anne Motta
Dr. James Panzarella
Dr. Suneel Parikh
Dr. Diane Paukett
Dr. John Pezzulo
Dr. Mark Polisar

Dr. Genevieve Rebuffot-Diacovo

Dr. Robert Reed
Dr. Pamela Sass
Dr. Peter Sayers
Dr. William Schueler
Dr. Norman Scott
Dr. James Spears
Dr. David Spingarn
Dr. Michele St Louis
Dr. Richard Terry

Dr. Christopher Thomas

Dr. Mark Warfel

Dr. Janet Westenberger Dr. James Williams Dr. Sandra Yale Dr. Daniel Young

50 Year Members

Dr. Richard Kaskiw

Dr. John Cahill Dr. Joseph Geller Dr. Elise Korman

Delegates and Alternate Delegates of County Chapters

ADIRONDACK (2)	<u>Delegates</u>	Alternate Delegates
ALBANY (3)	Rene Argubano, MD Ephriam Back, MD	
BRONX/WESTCHESTER (4)	Robert Morrow, MD Soni Mathew, MD	
CHAUTAUQUA (2)	Mark Hagen, MD	
CLINTON (2)		
COLUMBIA (2)		
DELAWARE (2)		
DUTCHESS (2)		
ERIE (4)	David J. Novelli, MD	
FULTON (2)		
GREENE (2)		
JEFFERSON (2)		
KINGS (3)	Margaret Donat, MD Mark Krotowski, MD Charles Francis, DO	
LEWIS (2)		
LIVINGSTON (2)		
NASSAU (4)	Sylvia Chudy, MD Jana Galan, MD Francis Faustino, MD Sam Sandowski, MD	
NEW YORK (4)	Rupal Bhingradia, MD Amanda Harris, MD Daniel Neghassi, MD	Krishna Desai, MD

Martha Simmons, MD

NIAGARA (2) ONEIDA (2) ONONDAGA (3) Phil Kaplan, MD Lawrence Koss, MD ONTARIO (2) ORANGE (2) OSWEGO (2) Corliss Varnum, MD OTSEGO (2) QUEENS (3) Samuel Arce, MD Saulius Skeivys, MD RENSSELAER (2) Rachelle Brilliant, DO KrisEmily McCrory, MD RICHMOND (2) Guido Dibenedetto, MD ROCHESTER (4) Gabriel Guardarramas, MD ROCKLAND (2) SARATOGA (2) Manish Saha, MD SCHENECTADY (2) Chris Murphy, MD SCHOHARIE (2) SOUTHERN TIER (2) Daniel Young, MD STEUBEN (2) ST. LAWRENCE (2)

SUFFOLK (3)

Christine Doucet, MD Keasha Guerrier, MD John Muratori, MD

Lou Verardo, MD

SULLIVAN (2)

TOMPKINS (2) William Klepack, MD

Jamie Loehr, MD

ULSTER (2) Raymond Harvey, MD

Wesley Ho, MD

WARREN-WASHINGTON (2)

WAYNE (2)

YATES (2) Lisa Walk-Reinard, MD

SPECIAL CONSTITUENCIES

MINORITY Sneha Chacko, MD NEW PHYSICIAN Anita Ravi, MD

WOMEN PHYSICIAN

IMG Ani Bodoutchian, MD LGBT Scott Hartman, MD

RESIDENCY PROGRAM CHAPTERS

Albany Family Medicine Residency Program

Bronx Lebanon Hospital Center FMRP

Ellis Hospital of Schenectady Program Isidro Borboa-Orduno, MD Ustav Hanspal, MD

Institute Family Health: Harlem Residency in FM

Mid-Hudson Family Medicine Residency Program Aadya Sharma, MD Hilary Schroeder, MD

Mount Sinai Beth Israel Residency in Urban FM

Northwell Health, Dept. of Family Medicine at Glen Cove

NY-Columbia Presbyterian Family Medicine RP Rebecca Roach, MD

Southside Hospital at Northwell Health Sam Hash, MD Scott Hopkins, MD

St. Joseph's Hospital Family Medicine Residency

University of Rochester/Highland Hospital FPRP Jocelyn Young, DO Amber Robins, MD

RESIDENTS

STUDENTS

Officers and Board of Directors

2015-2016 Board of Directors

President	Tochi Iroku-Malize, MD
President-Elect	Robert Ostrander, MD
Vice President	Sarah C. Nosal, MD
Secretary	Barbara Keber, MD
Treasurer	James Mumford, MD

BOARD OF DIRECTORS

Terms expire 2016

Jose Tiburcio, MD Heather Paladine, MD – Board Chair

Andrew Symons, MD

Terms expire 2017

Russell Perry, MD

Robert W. Morrow, MD

Wayne Strouse, MD

Terms expire 2018

Linda Prine, MD Thomas Molnar, MD KrisEmily McCrory, MD

(term expires) If not noted, term is one year

Speaker, Congress of Delegates	Jason Matuszak, MD
Vice Speaker, Congress of Delegates	Sonya M. Sidhu-Izzo, MD
New Physician	(2017) Pooja Paunikar, MD
Delegate to AAFP Downstate	(2016) Marianne LaBarbera, MD
Alternate Delegate to AAFP Downstate	(2016) George F. Dunn, MD
Delegate to AAFP Upstate	(2017) Andrew Merritt, MD
Alternate. Delegate to AAFP Upstate	(2017) Marc Price, DO
Delegate MSSNY	(2016) Paul Salzberg, MD
Alternate Delegate MSSNY	(2016) Jose 'Jun' David, MD
Immediate Past President	Mark Josefski, MD
Resident Representative Upstate	John Buddenhagen, MD
Alternate Resident Representative Upstate	
Resident Representative Downstate	Aldo Alleva, MD
Alternate Resident Representative Downstate	
Student Representative Upstate	Alexander Paley
Alternate Student Representative Upstate	Howard Lanney

Student Representative Downstate	Cortney Crespo
Alternate Student Representative Downstate	Ben Shuham
Not on the Board of Directors	
Student Delegate Downstate to COD/NC	
Alternate Student Delegate Downstate to COD/NC	Jafeen Ilmudeen
Student Delegate Upstate to COD/NC	Lizzy Wei McIntosh
Alternate Upstate Student Delegate to COD/NC	Jennifer Hu

Nominating Committee

Chair: Jose Tiburcio, MD

2016-2017 Nominations

President-Elect Sarah Nosal, MD

Vice President Marc Price, DO

Secretary Barbara Keber, MD

Treasurer James Mumford, MD

Speaker Jason Matuszak, MD

Vice Speaker Heather Paladine, MD

Andrew Symons, MD

Delegate to AAFP (Downstate) Marianne LaBarbera, MD

Raymond Ebarb, MD

Alt. Delegate to AAFP (Downstate) Tochi Iroku-Malize, MD

New Physician Director Every other year

Three (3) Directors Ani Bodoutchian, MD

Rachelle Brilliant, DO Sneha Chacko, MD

Margarita De Federicis, MD

Scott Hartman, MD

Reference Committee

Committee on Operations

Chair: Jose Tiburcio, MD
Vice Chair: Sam Sandowski,MD
Advisor: Phil Kaplan, MD
Member: Pooja Paunikar, MD
Member: Elizabeth McIntosh
Member: Jocelyn Young, MD
Member: Wesley Ho, MD

Committee on Policy

Chair: Andy Symons, MD
Vice Chair: KrisEmily McCrory, MD
Advisor: Mark Josefski, MD
Member: Daniel Neghassi, MD
Member: Rebecca Roach, MD
Member: Anita Ravi, MD

Member:

Schedule of Events Agenda

Saturday, June 18	Satu	ırdav	v. Jur	ne 18
-------------------	------	-------	--------	-------

7:00 – 8:30 am	Breakfast	Garden Foyer
7:15 – 8:00 am	New Member / Student Orientation	Patio
8:00 am	Annual Meeting Congress Opens Announcement from floor Late Resolutions Nominations from floor	Amphitheater
8:30 – 9:45 am	Reference Committee on Operations	Hoff Room
9:45 – 10:00 am	Break/Vendors	Garden Foyer
10:00 – 11:30 am	Reference Committee on Policy	Tomlinson Room
11:3 – 12:15 pm	Break/Vendors	Garden Foyer
12:15 – 1:15 pm	Awards Luncheon 25 & 50 Year Certificates High School Scholarship Awards Family Doctor of the Year Family Medicine Educator of the Year Convocation of Degree of Fellow	Ferris Ballroom B
1:30 – 3:00 pm	Town Hall Forum – MACRA and Value Based Payment R. Shawn Martin, AAFP Senior Vice President Advancement and Policy and Wanda Filer, M	• • • • • • • • • • • • • • • • • • • •
3:00 – 3:30 pm	Break/Vendors	Garden Foyer
3:30 – 4:30 pm	Students Meet AAFP President	Tomlinson Room

3:30 – 5:00 pm	Elections	Amphitheater
6:00 – 7:00 pm	Cocktails and hors d'oeuvres Music by Michael Hurt (bass) & Larry Gravett (pia	Fireside Grill nno)
7:00 pm	New Board Picture	
7:00 – 9:30 pm	Dinner & Installation of Officers	Sage Ballroom
9:30 – 11:30 pm	President's Reception Dessert	Fireside Grill
Sunday, June 19		
7:30 – 9:00 am	Continental Breakfast	Garden Foyer
8:00 am	Congress Reconvenes Introduction of Guests Wanda Filer, MD AAFP President AAFP Update	Amphitheater
8:30 am	President's Remarks	Amphitheater
8:45 am	Reference Committee Reports	Amphitheater
10:00 am	Refreshment break	Garden Foyer
12:00 Noon	Adjournment	
12:00 Noon	New Board Meets (select Chair)	
1:00 – 4:00 pm	Residents Leadership Training Program	Roebling Library

Past Presidents

William A. Buecheler, MD	1948-1950	Margery W. Smith, MD	1984-1985
Vincent Fisher, MD	1950-1951	Herman P. Saltz, MD	1985-1986
Samuel A. Garlan, MD	1951-1952	Henry J. Dobies, MD	1986-1987
Floyd C. Bratt, MD	1952-1953	Harry Metcalf, MD (President AAFP)	1986-1987
William G. Richtmyer, MD	1953-1954	Richard Sadovsky, MD	1987-1988
Garra Lester, MD	1954-1955	C. Parker Long, MD	1988-1989
J. Hunter Fuchs, MD	1955-1956	Elise Korman, MD	1989-1990
Richard Bellaire, MD	1956-1957	Bruce A. Bagley, MD	1990-1991
Seymour Fiske, MD	1957-1958	Martin E. Panzer, MD	1991-1992
G. Alex. Galvin, MD	1958-1959	Reynold S. Golden, MD	1992-1993
Louis Bush, MD	1959-1960	James D. Lomax, MD	1993-1994
Edward Morgat, MD	1960-1961	Denis Chagnon, MD	1994-1995
Royal S. Davis, MD	1961-1962	Richard Bonanno, MD	1995-1996
Joseph J. Kaufman, MD	1962-1963	Alessandro Bertoni, MD	1996-1997
John J. Flynn, MD	1963-1964	Neil S. Calman, MD	1997-1998
Raymond S. McKeeby, MD	1964-1965	John P. DeSimone, MD	1998-1999
Samuel Lieberman, MD	1965-1966	Steven B. Tamarin, MD	1999-2000
Max Cheplove, MD	1966-1967	Paul J. Okosky, MD	2000-2001
Lawrence Ames, MD	1967-1968	Scott Kirsch, MD	2001-2002
Arthur Howard, MD	1968-1969	Lynda Karig Hohmann, MD, PhD	2002-2003
George Liberman, MD	1969-1970	Henry E. Francis, MD	2003-2004
George G. Hart, MD	1970-1971	Andrew Merritt, MD	2004-2005
Samuel Wagreich, MD	1971-1972	Marianne LaBarbera, MD	2005-2006
Herbert A. Laughlin, MD	1972-1973	Maggie Blackburn, MD	2006-2006
Clement J. Boccalini, MD	1973-1974	S. Ramalingam, MD	2006-2007
Herbert E. Joyce, MD	1974-1975	George F. Dunn, MD	2007-2008
M. Theodore Tanenhaus, MD	1975-1976	Jose 'Jun' David, MD	2008-2009
Norman R. Loomis, MD	1976-1977	Mark H. Krotowski, MD	2009-2010
Alan L. Goldberg, MD	1977-1978	James Greenwald, MD	2010-2011
Stephen W. Blatchly, MD	1978-1979	Neil Nepola, MD	2011-2012
Allan H. Bruckheim, MD	1979-1980	Philip Kaplan, MD	2012-2013
Charles N. Aswad, MD	1980-1981	Raymond L Ebarb, MD	2013-2014
Martin Markowitz, MD	1981-1982	Mark Josefski, MD	2014-2015
James R. Nunn, MD	1982-1983	Tochi Iroku-Malize, MD	2015-2016
Morton M. Safran, MD	1983-1984	L. Thomas Wolff, MD	Honorary

President's Annual Report

Hello colleagues,

It's hard to imagine that a full year has gone by and my term as your president has come to an end. The year has been filled with a multitude of opportunities and challenges that New York family physicians have had to embrace and overcome respectively. My goal was to serve the Academy through advocacy, education, and to continue to promote nationally the great work that you do on a daily basis in both the clinical and academic realms.

The first thing I needed to do was to create a platform to keep you informed of activities I participated in as part of my official duties. Since I am a techie, it made sense to start a twitter handle @NYSAFP_Prez in a similar fashion to what has been done by the national academy. It provided a quick way to catch up on new developments and allowed one to participate in events held across the state from the comfort of one's home/office. I plan on passing on the handle to our incoming president Bob Ostrander and hope this becomes a tradition.

The various meetings and conferences that your leadership participated in during the past year is recorded in the cluster minutes, our Family Doctor journal and of course via twitter, facebook and Instagram. Here is a summary of the past twelve months.

In July I was a guest of the Ohio AFP during their annual assembly where I noted the similarities and differences in getting resolutions passed on a state level as well as how to fundraise to assist with family medicine interest groups and to promote the specialty amongst students. In August, many of us represented NY at the National Conference for Family Medicine Residents and Medical Students (NCFMRMS) where participants from around the country were able to network with the various residency programs based in our state. Thanks to our very own Kelly Madden, we had prime real estate at the convention center for an entire NY aisle. We had an amazing turnout, wore our "I Love NY" t-shirts and proved once again that family medicine does exist in NY!

In September, your leadership attended the AAFP Congress of Delegates to present resolutions that could affect national policy as well as to represent the current position of our state body. In November we met with the leadership of New York Presbyterian regarding the impending closure of their family medicine residency program. Due to the swift and powerful lobbying of students, residents and physicians, this did not happen. That month I also represented our academy at meeting to discuss Integrating Reproductive Health in Primary Care in NY. We supported to concept of studies being done to determine the feasibility of such an endeavor.

In January, we hosted the annual Winter Weekend Scientific Assembly where students, residents and family physicians and other colleagues participated in scholarly sessions and had a chance to network. As usual we had a great showing of medical students from campuses across the state and we were able to provide them with an overview of the myriad of career options open to family physicians here in NY. In February, we attended the ten-state meeting

hosted by Ohio AFP. This allowed NY to discuss the issues pertinent to our members with leaders of other chapters in our area. We reviewed best practices and determined how to best serve our members in our various states.

In March, under the leadership of Marcy Savage, we participated in lobby day in Albany. We met with legislators and their staff to discuss access to healthcare, reproductive health, public health & safety, family medicine growth in NY, equitable payment and other priorities. In April we participated in the Family Medicine Congressional Conference (FMCC) and as usual NY State was well represented by students, residents and practicing family physicians alike. We were provided an interesting review on how the current presidential race and potential outcome in November, will affect health care policy.

In May we attended the annual leadership conference (ACLF/NCCL) where our representatives in the special constituencies lobbied for resolutions to help shape the policies of our national academy. Our leaders learned useful tools for governance, health care policy and received an update on MACRA amongst other issues.

Throughout this period, we attended the NY state cluster meetings where members of our commissions worked tirelessly on advocacy, education, public health, operations, leadership and membership issues. I am proud to say, we have started a great tradition of having multiple NY family physicians, residents and students represented at the national leadership level. A number of us also attended the national cluster meetings over the year, lending the experience gained from our home state to the main academy. We have been involved in a wonderful alphabet soup with regards to practicing in NY: DSRIP, NYSHIP, TCPI, MACRA, DPC, etc. We tried to keep you informed via all forms of communication — live, video, print, social media — on what it means to you here in NY and how we can best navigate this together.

It is now June and we prepare for our 68th Congress of Delegates where we get to discuss issues relevant to our membership and debate academy policy. It's also a great time to network and get updates on various developments within our state that affect how we practice family medicine. We are also concerned about another residency in the NYC area that may be affected by the restructuring of Beth Israel Hospital. We continue to stay informed and to assist to ensure our specialty not only survives, but thrives in NY.

Thank you to the NYSAFP staff, especially Vito, Donna, Kelly and Penny who kept me in the loop via email, texts and phone calls over the year. They did the work and made me look good. Thank you to the board and the commission members who volunteer their time despite their hectic schedules, to ensure the business of our academy gets done. A special thank you to Marcy Savage because she keeps us plugged in with regards to advocacy and with Vito has made us a society whose opinion matters in the legislative arena.

Thanks to my team at Northwell Health (especially Maria & Barbara) who kept things running during this presidential year. A special thank you to my family: my husband Charles and

children (Pierce, Isabella & Miles) who have been a part of this academy and supportive of my work since I was a resident; my parents and siblings who remind me that anything is possible.

It's been an honor to serve you as your president. I look forward to the great things we will accomplish in the future together.

Tochi Iroku-Malize MD MPH MBA FAAFP 68th President NYSAFP June 2016

Secretary's Annual Report

In 2015-2016 I attended and participated in all the NYSAFP Commission Clusters and Board Meetings throughout the year. As Secretary I took part in the Executive Committee conference call meetings as called. In support of our state academy endeavors I attended NYSAFP sponsored activities including Winter Weekend and lead a team during advocacy activities on Lobby Day as well as attended the AAFPs Congress of Delegates and Scientific Assembly. I also attended the FMCC in Washington for the second year lobbying at the national level leading a team of residents, students and other physicians to discuss our agenda at the national level. The sessions attended there also gave our NY team insight into the new Medicare program MACRA.

I also participated in the Education Commission as a member, having served previously as the chair of that commission. I have also participated in the Downstate Consortium, now in the process of being reconfigured with new leadership. As a participant on the Winter Weekend 2016 subcommittee, I participated in the planning of the program. I also participated as a speaker on Clinical Informatics and SAM facilitator for Hypertension.

It has been a pleasure serving our academy.

Barbara Keber M.D., FAAFP Secretary NYSAFP

Treasurer's Annual Report James Mumford, MD, FAAFP May 15, 2016

Introduction

The role of the treasurer is to monitor the financial position and condition of the Academy and to oversee the work of our staff in preparing and maintaining the financial information that the board of directors needs to adequately fulfill its fiduciary duties to the members. In my capacity as treasurer I have been in regular communication with the president, president-elect, executive vice president and finance director of the Academy in reviewing financial information and making recommendations regarding the operations, budgeting and investments of the Academy. I also report on the financial condition of the Academy to the Operations Commission and to the board.

I receive copies of all monthly bank statements, expenses of the EVP, balance sheet, accounts receivable, accounts payable, balances in all accounts owned by or managed by the Academy and profit & loss statement.

The Academy and Foundation each have checking and money market accounts. The Academy PAC has a separate account and the Academy manages separate bank accounts for several county chapters:

Bronx-Westchester New York Rensselaer Saratoga Schenectady Suffolk Ulster

The Academy operates on a calendar fiscal year. We generally experience our greatest income in the first and fourth quarters because dues constitute our greatest source of revenue and dues are assessed in the fall. Most members pay their dues between November and March.

We have an annual audit conducted by Slocum, DeAngelus & Associates, PC. Their opinion was "the financial statements referred to above present fairly in all material respects, the financial position of the New York State Academy of family physicians, Incorporated. As of December 31, 2015 the changes in its net assets and cash flows for the years then ended in accordance with accounting principles generally accepted United States of America."

This report examines our finances as of April 30, 2016. Our formal financial statement consists of a balance sheet, which compares assets and liabilities, a profit & loss statement, which illustrates our operational status for the current fiscal year, accounts payable and accounts receivable.

Our balance sheet shows assets of \$1,085,199.40. The breakdown below shows assets that are available to fund our operations. This includes cash accounts that are available to us to pay expenses.

Operating Funds

As of 04/30/2016 we have the following balances in our operating and investment accounts. Amounts from 03/31/2015 have been included for comparison:

	4/30/2016	3/31/2015
General Fund Checking	\$11,141.87	\$41,576.56
Money Market Account	\$132,556.45	\$77,541.23
Manning & Napier investment fund	\$677,916.06	\$777,875.62
PAC	\$2,790.47	\$1,809.17
Foundation Checking	\$15,744.08	\$16,317.42
Foundation Money Market Account	\$2,606.79	\$2,606.15
Foundation Manning & Napier	\$31,478.20	\$32,740.93
County chapter accounts	43,437.71	\$36,223.23
TOTAL:	\$917,671.63	\$986,690.31

We have \$917,671.63 on hand to support operations through the remainder of the year. Since our entire budget for the year is just under a million dollars, we are in excellent shape from an operational perspective. Our dues income tends to decrease dramatically from February until October when next year's invoices are generated by the AAFP.

On the last page of this report, you will find a table showing our Balance Sheet from 2014 and 2015 side by side for comparison. Overall our total assets are about \$70,000 less than last year, in large part due to changes in the value of our Investment Account with Manning and Napier.

Revenues

We have received \$330,920.25 in dues. This is 40% of the 2016 dues budget of \$818,395.00. Total revenues are \$416,163.47.

Expenses

Expenses through April 30 total \$331,547.28 which is 33% of the \$999,519.80 budget for operating expenses. Our operating surplus through April 30 is \$84,623.25.

Accounts Payable & Accounts Receivable

We have a positive cash balance of \$41,923.11 in our accounts payable and receivable: \$9,243.65 payables and \$51,166.76 (exhibitor, NYSAFP Foundation) in receivables.

Conclusion

We are in good operating condition but should consider cost reduction options to contain the projected operating deficit.

I want to express my appreciation of the attention to detail of our staff in managing the Academy's finances particularly our finance director, Donna Denley, and our EVP, Vito Grasso who share primary responsibility for our overall financial management. Additionally, our education director, Kelly Madden, has worked very hard to contain costs in our education programs and to produce profits that have helped make our educational programs affordable to members.

I would also like to express my gratitude to the Membership of the Academy for allowing me to serve as treasurer. I believe we are in a good financial position and are prepared to advance the interests of our members in the coming year.

·	Dec 31, 15	Dec 31, 14
ASSETS		
Current Assets		
Checking/Savings		
1001-00 · NYSAFP Money Purchase		
Plan Trust	54.55	54.55
1000-00 · General Fund Checking	46,502.44	36,524.29
1010-00 · Money Market Account	2,549.39	2,539.45
1072-00 · Manning & Napier	677,916.06	777,875.62
1100 · Ulster County	2,791.46	2,491.85
1110 · Suffolk County	3,983.15	5,180.65
1130 · Bronx-Westchester County	17,391.87	12,272.81
1140 · New York County Chapter	5,722.35	4,337.79
1150 · Schenectady Local Chapter	4,030.06	4,919.36
1160 · Saratoga Local Chapter	9,782.67	6,880.27
1170 · Rensselaer Local Chapter	2,447.41	2,447.41
Total Checking/Savings	773,171.70	855,524.05
Other Current Assets		
1100-00 · Accounts Receivable	146,559.64	146,559.64
1200-00 · Due from Foundation	52,970.05	31,970.01
1750-00 · Pre-paid Expenses	9,036.84	9,036.84
Total Other Current Assets	208,566.53	187,566.49
Total Current Assets	981,738.23	1,043,090.54
Fixed Assets		
1550-00 · Office Equipment	119,713.07	119,713.07
1551-00 · A/D Office Equipment	-113,853.52	-113,853.52
1575-00 · Capital Lease Equipment	35,381.30	35,381.30
1576-00 · A/D Capital Lease Equipment	-35,381.30	-35,381.30
Total Fixed Assets	5,859.55	5,859.55
TOTAL ASSETS	987,597.78	1,048,950.09
LIABILITIES & EQUITY		
Liabilities		
Current Liabilities		
Accounts Payable		
2000 · *Accounts Payable	230.55	-2,076.38
Total Accounts Payable	230.55	-2,076.38
Credit Cards		
MC US Airways	0.00	19,068.07
Hyatt Chase Visa	-334.04	1,438.50
Amex	1,924.35	18,442.69
Total Credit Cards	1,590.31	38,949.26
Other Current Liabilities		
2000-10 · Accrued Payable	15.40	25,653.96
2100-00 · County Dues Payable 2100-10 · Suffolk County Payable	42,440.84 7,676.85	7,302.45 5,689.85

2100-20 · Bronx-Westchester		
Payable	24,650.77	13,215.71
2100-40 · Ulster County Payable	3,388.85	2,590.05
2100-50 · New York County		
Payable	13,959.03	5,686.89
2100-60 · Schenectady Local		
Chapter Payab	4,759.56	5,038.16
2100-70 · Saratoga Local Chapter		
Payable	13,547.07	7,742.27
2100-80 · Rensselaer Local		
Chapter Payabl	2,447.41	2,447.41
2125-00 · Deffered Income Dues	365,894.13	365,894.13
2150-00 · Deferred Income-		
Winter Weekend	24,710.00	24,710.00
Total Other Current Liabilities	503,489.91	465,970.88
Total Current Liabilities	505,310.77	502,843.76
Total Liabilities	505,310.77	502,843.76
Equity		
3999-99 · Retained Earnings	546,106.33	555,064.79
Net Income	-63,819.32	-8,958.46
Total		
Equity	482,27.01	546,106.33
TOTAL LIABILITIES & EQUITY	987,597.78	1,048,950.09

Executive Vice President's Annual Report

Vito F. Grasso, MPA, CAE

Membership

The following chart presents changes in our membership by category between January 2015 and January 2016:

	1/1/2015	1/1/2016	Difference
Active	2613	2670	57
Supporting (Includes Non-FP)	17	18	1
Resident	699	727	28
Student	2138	2254	116
Life	2873	268	-5
Inactive	30	30	0
Honorary (new)	1	1	0
Total	5771	5968	197

Our Active membership has grown by 14.3% over the last 10 years. We have increased membership in all categories except Supporting and Life.

Overall membership has increased by 26% in the past 10 years.

Our 2015 Active Member retention rate was 92.7%. The National Active Member Retention is 94.2%. Both down slightly from 2014.

For 2015 we converted 65.4% of our Resident Membership to Active (residency completion 2015). Our Resident membership has increased by 10.6% over the last five years.

Retention rate of 2015 New Physicians is 82.7%. AAFP retention rate is 88.3%.

The AAFP estimates that we have 73.2% of the market share in New York. The national average is 76.5%. This is up slightly from 2014.

Finances

The report of our auditor, Slocum & DeAngelus, is provided in a separate report to this Congress.

Finance Director Donna Denley has done an excellent job of managing our finances and working with our auditor throughout the year to assure that all revenue and expenses are properly accounted for.

Advocacy

Our Advocacy efforts continue to produce results and serve the interests of members and their patients. At the national level we are aggressively monitoring and reporting on developments with value based payment models that will replace the SGR formula rescinded by MACRA which the Academy strongly supported. We also recruited 11 members to serve as Key Contacts for the AAFP with members of NY's congressional delegation. We had 15 members attend the 2016 FMCC – the largest delegation at the conference.

We have remained actively engaged in aggressive advocacy across a wide spectrum of policy issues. We have worked closely in conjunction with other medical societies in joint advocacy on matters of general concern to the medical community.

We were successful in defeating a proposal that would have reduced the medical liability excess pool and would have restricted access to the pool by primary care physicians.

We continue to advocate for a single payer healthcare system. Our support of Assembly Health Committee Chairman's legislation to create New York Health as a single payer system for NY was widely acknowledged by Assemblyman Gottfried in hearings conducted in 2014 by the Health Committee throughout the state.

Education

We continue to produce excellent educational programs under the leadership of our Education Commission and the direction of our education director, Kelly Madden. Our regional family medicine conferences received high evaluations from participants. We produced an ALSO course for the University of New Mexico.

The Education Commission implemented a successful change in format for the Winter Weekend in Lake Placid. The conference was produced at the Conference Center and we contracted for room blocks with several hotels which afforded members a variety of options in lodging. The 2017 WW will be held in Saratoga Springs.

Communications

Our quarterly journal, *Family Doctor, A Journal of the NYSAFP*, continues to receive very positive support from readers and advertisers. Our editor, Penny Richmond-Ruhm, and our

editorial board comprised of Rich Bonanno, MD; Rachelle Brilliant, DO; Robert Bobrow, MD; and Robert Ostrander, MD have produced consistently high quality issues featuring current articles that have been accredited for CME.

Our weekly electronic newsletter, **NYSAFP Weekly eNEWS**, is our principle vehicle for communicating current and breaking news.

We also post regularly on our Facebook and Twitter accounts.

Leadership

We have continued to support delegates to the Ten-State Conference, the Annual Chapter Leadership Forum, the National Conference of Special Constituencies and the National Conferences of Resident and Student Members. These important regional and national conferences are consistent sources of leadership development for Academy members.

Resident & Student Activities

We have continued to support resident and student activities within the Academy. Our primary commitment has been financial subsidies for our resident and student members to attend NYSAFP and AAFP meetings. We also encourage resident and student members to serve on our commissions and to participate in our Congress. Several residency programs have formed local chapters and can send delegates to our Congress of Delegates.

Governance

Our commission structure continues to provide an effective and efficient vehicle for member involvement in directing the affairs of the Academy. More than 80 members served on commissions this past year. Our commissions dealt with a broad range of issues and concerns on behalf of members and were expertly managed by our team of volunteer chairs and professional staff. I appreciate the efforts of those individuals and would like to acknowledge them here:

Commission Chair Staff

Advocacy: Marc Price, DO Marcy Savage Education: Ephriam Back, MD Kelly Madden

Leadership: James Mumford, MD Penny Richmond-Ruhm

Membership: Jason Matuszak, MD Donna Denley

Operations: Bob Ostrander, MD Vito Grasso, MPA, CAE

Public Health: Heather Paladine, MD Ron Rouse

I confer regularly with the president, president-elect and vice president to keep our leadership team apprised of developments that may require policy decisions. These communications also afford the opportunity for me to obtain membership perspective on issues and opportunities as they may occur. Our executive committee meets monthly by conference call. These meetings provide an additional and expanded vehicle for me to keep our leadership updated regarding Academy operations.

Conclusion

I greatly appreciate the leadership and commitment of Dr. Iroku-Malize. She has been accessible and active and has represented the Academy with enthusiasm and integrity. She has contributed generously to our communications programs and has been available to represent us at several important public policy meetings and forums. It has been a pleasure to work with her and her consistent support has been a welcome enhancement to the working environment for the entire staff. She has represented us well at state and national meetings.

Change remains a constant factor in health care and in medicine. I have observed, with increasing concern, the impact which this is having on Academy members. The dreams and aspirations which so many members had upon making the decision to become a physician and then deciding to specialize in Family Medicine, have been severely strained by developments in insurance, regulation and technology which have dramatically altered the practice environment and the physician-patient relationship. We have been fortunate to have leaders who have been undeterred by the stress and persistence of change. Each time we are confronted with some new policy, program or practice our leadership has marshalled the fortitude and creativity to respond. In this regard, our members are very well served by the men and women who share their commitment to Family Medicine and their concern for the patients they serve and the profession they have chosen.

We have been successful in producing quality programs with professionalism and efficiency. It is my pleasure to work with an outstanding leadership and staff and I deeply appreciate that opportunity.

Annual Reports of Commissions									
	—[43]—								

Commission on Academy Operations

Robert Ostrander, MD, Chairman

Members:

Ebarb, MD, Ray
Iroku-Malize, MD, Tochi – President
Johnston, MD, Belinda
Josefski, MD, Mark – Immediate Past President
Krim, DO, Julia – Resident
Krotowski, MD, Mark
Merritt, MD, Drew
Molnar, MD, Tom
Mumford, MD, Jim – Treasurer
Nosal, MD, Sarah – Vice president
Ostrander, MD, Robert – Chairman
Pauniker, MD, Pooja
Salzberg, MD, Paul

The Commission met in person on August 8, 2015, October 17, 2015 and March 13, 2016.

Finances

The Commission reviewed the Treasurer's report at all meetings. Our formal financial statement consists of a balance sheet which compares assets and liabilities, a profit & loss statement which illustrates our operational status for the current fiscal year, accounts payable and accounts receivable. This statement included the operating accounts, money market accounts, Foundation accounts, the PAC account and the county chapter accounts. The statement also included a review of our investment account with Manning & Napier. Overall, the Academy is financially stable with an adequate cushion of capital to cover expenses for the next 12 months.

The Commission reviewed the 2016 budget proposal and submitted it to the Board for approval.

There was discussion regarding reporting of financial information by chapters which manage their own funds. Dr. Iroku-Malize recommended that we not remit dues until a chapter provides a report on their balance. Dr. Mumford recommended that we provide each chapter with a report with specific information to provide. The Commission approved a motion was made to recommend that the board authorize staff to advise county chapters who manage their own accounts to provide information at least annually on their account balances.

Calendar

The Commission reviewed the official calendar and proposed cluster dates to the Board.

New Business

The Commission reviewed a report on the strategic plan prepared by the past presidents committee. The Commission accepted the recommendation of the past presidents committee that elements of the plan be referred to appropriate NYSAFP commissions. The Commission reviewed elements of the plan assigned to it and made changes based on the current relevance of goals and objectives articulated in the plan. Additionally, the Commission noted those items that had been achieved.

The Commission approved a proposal to open a dialogue with health insurance plans around issues of concern to members. Dr. Ostrander has had discussions with Excellus about several issues. The Commission recommended that the effort to have discussions with plans begin with expansion of Dr. Ostrander's discussions with Excellus.

The Commission recommended, and the board approved, support for members of the board and for two residents from the Rochester FMRP advocacy track to attend the 2016 Family Medicine Congressional Conference. NY sent 17 members to the FMCC – the largest delegation of any chapter.

AAFP Commission Appointments

Education: Kelly Madden
Finance: Jim Mumford, MD
Health of the Public & Science: Jason Matuszak, MD

Vivian Jiang, MD

Membership: Tochi Iroku-Malize, MD, MPA

Sarah Nosal, MD

Quality & Practice: Marc Price, DO

<u>Summary</u>

It has been a very busy year for the Operations Commission and an eventful year for the Academy. Minutes of each Commission meeting can be found on the NYSAFP website.

It has been a privilege being the Chairman of the Operations Commission for the past year and I wish to offer my gratitude to all members of the Commission, especially Vito Grasso for agenda and minutes preparation and Dr. Mumford for preparation of the financial reports with assistance from our finance director, Donna Denley.

Commission on Family Practice Advocacy

The Advocacy Commission met for three regular meetings during this past year, in the summer and fall of 2015 and once in the spring of 2016. We discussed and acted upon resolutions passed at the 2015 congress of delegates as assigned by the Board and developed initiatives as suggested by NYSAFP members. We discussed advocacy issues which affected the practice of family medicine, our Academy members and our patients, developed positions on healthcare related bills and healthcare related NYS budgetary issues as identified by our lobbyists, Weingarten, Reid and Savage (WRS) and submitted this information to the NYSAFP Board for consideration. Our efforts were successful in defeating potential legislation mandating continuing education for pain management and addiction. We were also, through combined efforts with MSSNY, other physician specialty groups and medical liability carriers able to defeat legislation which would change the statute of limitations to the detriment of physicians. We also spent much of our efforts during the current session working to promote out NYSAFP policies within the 2016 fiscal budget and were able to defeat a \$25 million cut to the state excess medical malpractice program while, at the same time, securing continued funding for the Doctors Across New York program. Additionally, we continued our support of proposed legislation towards a single payer health care system in New York.

On Lobby Day in March 2016, we were guided by our lobbyists from WRS to visits with key legislators, staffers and members of the department of health. Included in these visits were the chair of the assembly health committee, sponsors of many healthcare related bills and home town legislators of those members attending lobby day.

We continue to advocate for passage of collective negotiations bills in both houses and we will continue to advocate for meaningful medical liability reforms. We will continue to advocate against proposed legislation which only serve to increase the "hassle factors" of our members. We also continue to remain instrumental in finding new ways to decrease the primary care shortage our state by advocating for more family medicine exposure for medical students by requiring a family medicine rotation as a condition for licensure in New York and by addressing physician burnout.

I wish to thank the members of this commission for their contributions to our discussions and Marcy Savage and Bob Reid of WRS for continuing to make our success a priority. We are fortunate to live and practice in the state of New York and look forward to continuing to advance our cause.

Respectfully submitted,

Marc Price, DO, Chair, on behalf of members Christine Doucet, MD, Vice Chair Rachelle Brilliant, DO Philip Kaplan, MD, Advisor Anita Ravi, MD Venis Wilder, MD Leon Zoghlin, MD Elizabeth Lynn-Ong, MD Lalita Abhyanker, MD John Buddenhagen, MD Jennifer Hu, MD Jafeen Ilmudeen, MD Howard Lanney, MD, Zane Martingale, MD Lauralee Yalden, MD Marcy Savage, Staff

Commission on Education

The Education Commission conducted three formal meetings over the past year. Two were conducted during clusters and one was conducted by telephone. We had great participation by commission members for all meetings, in addition to multiple email and other telephone discussions. Kelly Madden, our staff liaison, was very proactive and attentive, keeping track of Education Commission agendas, initiatives, and other projects.

A. Mission:

A revised mission statement was approved at the August 8, 2015 meeting:

Education Commission Mission:

The Education Commission of NYSAFP supports the continuing professional development and lifelong learning of family physicians, family medicine trainees, and members of the healthcare team. The Commission will strive for patient centered education and promotion of physician wellness with a focus on the Family Medicine core competencies.

Education Commission priorities include creating opportunities to expose students to the specialty of Family Medicine, assisting established and developing Family Medicine Residencies in the state, and innovating continued medical education.

As Family Medicine is a rapidly evolving and changing discipline, central to the mission of the Education Commission is to address those changes improving the practice of our members, the healthcare of our patients, and the health of our communities.

B. Conference Planning:

Continuing Medical Education events remain a central piece of our strategy to fulfill the mission of the Education Commission. We continue to support a single statewide meeting and scientific assembly held during Winter Weekend, in addition to several Regional Family Medicine Conferences. In 2015-16, successful RFMC conferences were held in Albany and Rochester. We try to have an Education Committee member on each such conference committee.

While the financial performance of these conferences has been mixed, we have generally run in the black and the number of persons attending NYSAFP conferences has continued to increase each year. Since 2008, we have had a steady increase in the number of attendees, although we clearly have a lot of work to reach more NYAFP members.

The Commission is actively investigating venues other than Lake Placid for future Winter Weekend conferences, as well as another state-wide conference, possibly to be held during the summer. The Commission approved and endorsed Winter Weekend 2017 to be held in Saratoga Springs. The commission is looking into hosting Winter Weekend every other year in Lake Placid to alternate with Saratoga Springs, if that venue is successful.

Table 1: Conferences 2013-2016

Year	Conference	Number of Guests (including faculty, students & residents)	# of faculty	# of students	# of residents	Profit / Loss	Date
2013	Winter Weekend - 2013	219	44	82	9	\$7,212	01/16/13
2013	ALSO IC - 2013	20	5	NA	NA	\$5,700	02/17/13
2013	Downstate RFMC - 2013	84	12	10	13	\$3,780	04/13/13
2013	Rochester RFMC - 2013	48	11	0	1	-272	05/18/13
2013	Capital RFMC - 2013	99	11	2	7	\$7,000	09/07/13
2014	Winter Weekend 2014	213	31	68	19	\$22,000	01/23/14
2014	Rochester RFMC	39	10	2	0	\$1,428	03/15/14
2014	Capital RFMC - 2014	94	17	0	7	\$250	09/06/14
	DRFMC - 2014 (& Expanding					-\$1,602	
2014	Horizons)	142	12	20	35		10/18/14
2015	Winter Weekend 2015	187	39	47	25	-2800	01/22/15
2015	Capital RFMC - 2015	61	8	0	4	\$10,000	09/12/15
2015	Rochester RFMC	38	6	3	0	-\$750	10/10/15
2016	Winter Weekend - 2016	206	31	58	26	\$9,000	1/26/2016
2016	ALSO IC - May '16	28	6	0	0	pending	5/27/2016
2016	Capital RFMC - 2016						9/17/2016

Table 2: Total number of all conference participants per year:

Number of participants	2008	2009	2010	2011	2012	2013	2014	2015	2016
	351	384	337	425	484	470	488	286	

C. Pre-medical and Medical Student Education:

- As noted in Table 1, The Board through the Education Commission continues to support and subsidize medical student attendance (and student-specific programming) at NYSAFP conferences.
- Alex Paley, Courtney Crespo, Benjamin Shuham and Howard Lanney are the student leaders of the NYSAFP Student Initiatives Sub-committee. They have worked hard to formalize NYSAFP student involvement, the student election process to the Board, and speakers at FMIG meetings.
- We have updated and revised the NYSAFP physician database, so as to allow students to search for mentors and/or speakers to speak with interested students or student groups.
- The Education Commission revised the Student Externship Application (which is offered
 with support from the AAFP). The Commission reviewed applications and selected
 students to receive the NYSAFP student scholarship. The application is aimed to have
 participants perform clinical work and Family Medicine research (develop a research
 question, formulate a valid methodology with mentor, acknowledge the possible

- advantages and limitations to certain study designs, implement the study design and aim to complete the research.)
- With the increasing number of Family Medicine residents joining NY programs after graduating from approved off-shore medical schools, the Commission has made contacts with Family Medicine Interest Groups at some of these schools.
- We have also reached out to NYCOM and other osteopathic medical schools and residencies to invite them to participate in NYAFP activities. This will become more important as osteopathic residency education will be transitioning to ACGME accreditation (see below).

D. Residency Education:

- The Commission supported the NYS residency contingent who attended the AAFP
 National Conference of Family Medicine Residents and Medical Students, held in Kansas
 City in August 2015. Kelly Madden organized a hospitality reception with NYS residents
 and students and NY banner which increased visibility to NY residency programs.
 Twelve residency programs participated in the conference and contributed to the NYreception.
- We organized and supported meeting space and lunch for the NY Program Directors meetings at the Fall FMEC meeting and at the Spring AFMRD conferences. These meetings were a valuable forum for NY program directors to discuss residency issues and to plan to work together on common residency initiatives.
- As a result of the NY PD meeting at the 2015 Spring AFMRD conference, the NYSAFP has
 developed a new list-serve to improve communication among NY residency program
 directors, associate directors, and department chairs.
- Members of the Education Commission have reached out to the NY AOA only accredited residencies, which will be affected by the new changes requiring all DO residencies to become certified by the ACGME. We offered an AOA morning session at Winter Weekend 2016 which was presented by Drs. Barbara Capozzi, DO and Michael Oliverio, DO (Executive Director NYS Chapter of ACOFP). The Commission supports the collaboration with the AOA.
- The commission reviewed applications and selected the NY Family Medicine Educator of the year.

E. Other Initiatives:

- ALSO We continue to be involved in ALSO instructor courses and organized an
 instructor course which was held this Spring in Albuquerque, NM. We continue to
 promote ALSO education throughout the State and advocate for increased ALSO courses
 in the NYC region.
- 2. Downstate NY FM Consortium This group, with representatives from many of the NYC medical schools and physicians was formed to work on issues and initiatives relevant to NYC medical schools, programs and physicians. At the last meeting, the suggestion was to expand the initiative to the entire state. There have been preliminary discussions regarding this proposal, but no clear decision regarding further directions.
- 3. BIP the "Balancing Incentive Program" teaching diabetes prevention has been successful in the Bronx and there may be additional expansion opportunities into other

areas of New York State. The NYSAFP Foundation has been the lead organization for this activity, which was funded by the NYS Medicaid office as a "Balancing Incentives Project." The purpose of the project was to demonstrate the viability of implementing the CDC's Diabetes Self-Management Program in the South Bronx. The project also was meant to demonstrate several other key elements:

- health care providers and their professional society can work together with public health officials and communities to build on the strengths of each
- community members could be trained to lead groups in this established and tested program, and coordinate with community health care providers
- health informatics could be developed to support these activities
- linkages with community groups and interventions could be accepted by the American Board of Family Medicine for a group project to fulfill Maintenance of Certification part IV
- this type of collaboration across sectors could not only succeed, but be sustainable

NYSAFP did all of this, and also recruited and trained health care providers—family docs, NPs, and PAs to use academic detailing to drive the project forward.

The Academy's Foundation made some money, and it appears that community based diabetes self-management might be incorporated in the Medicaid Delivery Redesign project, making it generalizable and sustainable across the State. Dr. Morrow suggested this project be made available in the Upstate area and other communities throughout the state.

Ephraim E. Back, MD - Chair
Samuel Sandowski, MD - Vice Chair
Brian Daniels, MD – Member
Jun David, MD - Past President
Vivian Jiang - Resident
Hyowoun Jyung - Resident
Barbara Keber, MD - Member
KrisEmily McCrory, MD, FAAFP - Member
Robert Morrow, MD - Member
Daniel Neghassi, MD - Member
Denise Octaviani, DO - Member
Alexander Paley - Student
Mayur Rali, MD, FAAFP - Member
Kelly Madden -staff

Commission on Leadership Development and Nominations

The commission met 3 times this year:

- August 8, 2015 at Islandia, Long Island, NY in conjunction with the summer cluster.
- October 15th, 2015 by teleconference prior to the fall cluster.
- March 13th, 2016 as part of the winter cluster in Albany.

Summer Cluster Meeting – August 8, 2015

The Commission worked on the following

1. Review and approve minutes from March, 2015 meeting

2. Discussed commission's responsibilities.

One of the main goals for the commission will be to design programs for the developing leadership skills of the members. Some of the duties might coincide with the Education or Membership Commission.

3. National Conferences of Constituency Leaders (NCCL):

Three of the five delegates have participated in the conference for the last two years. Members discussed current selection process for delegates and whether changes were needed to bring in more potential NYSAFP members with leadership potential. Also discussed resident participation in NCCL as possible future focus. In addition, Sonia Sidhu-Izzo was elected as convener for IMGs and Venis Wilder was elected as convener for minorities at the 2015 meetings.

4. Nominees for 2016 NYSAFP Board Elections:

Letter of solicitation was sent out following fall meeting, with descriptions of the duties and responsibilities of the positions. Penny Ruhm sent an email to all NYSAFP members requesting nominations.

5. Commission Membership Performances/Participation Review

Membership commission to provide evaluation of all commission members for incoming NYSAFP president. Members asked to think of other ways that we can make this process useful and engage all interested members.

6. Leadership Programs (2015-2016)

- a. Winter Weekend
- b. COD
- c. Possible speaker to be invited during COD lunch break

Discussed physician burnout, resiliency, and the role of the Leadership Commission to address these issues in possible collaboration with the Education Commission. Discussed audience for leadership programs – should we focus primarily on residents or broaden focus? Possibly reach out to residency directors to get more involvement from residents for these programs. Discussed providing chief resident forum for presenting best practices and/or initiating possible award for residency involvement.

7. Writing Competition – Feb – April

Funding of \$500 has been approved by the board.

Request for competitors will be sent during the month of February. Deadline for submissions will be by the end of April. Members emphasized the importance of storytelling and recommended 'resiliency' as a possible theme for this year's writing contest entries

Fall Cluster Meeting - Teleconference, October 15, 2015

The Commission worked on the following:

1. Reviewed and approved of Minutes from August 8, 2015 meeting

2. National Conference of Constituency Leaders (NCCL) – May 5-7, 2016

Solicitation Results/ Potential 2016 Candidates: Currently have eleven potential representatives for ten slots, including seven first time candidates. Selection process is underway and includes:

- Bio Sheet & CV Due October 30; Distribute to Leadership members
- NCCL Candidates chart showing area(s) of interest
- Survey Monkey poll re: preferred candidates
- Approval/ discussion Will schedule a short conference call to discuss NCCL candidates and Winter Weekend presentation mid to late November

3. Nominees for 2016 NYSAFP Board Election

Penny will send to solicitation letter to membership in December/ January. All Commission members to identify potential candidates and encourage leadership positions.

4. Leadership Programs 2015-2016

a. Winter Weekend – 2 part presentation on burnout. 1 hour for overview presentation (Jun David) and 1 hour (twice presented) on specific strategies/activities to re-energize/avoid burnout. Penny will confirm timing with Kelly and inquire about budget. Dr. Verardo will research presenter/resources from "Seak". Dr. Greenwald will contact Dr. Allen

5. NYSAFP Strategic Plan – Objective 7: Retaining Scope of Practice

Proposed Strategies from Strategic Plan

- **1.** Advocate our right and ability to provide obstetrical services, maintain hospital privileges, etc.
- **2.** Educate our Members about the disadvantages of giving up a part of their scope of practice, warn them about the consequences.
- **3.** Consider whether we want to focus our efforts on only those physicians who have been practicing for several years or do we also advocate changes in medical school curriculum design and residency training to strengthen our scope of practice?

Commission members discussed the origin and specifics of this objective as presented in the strategic plan. Data presented is limited and additional information is needed to determine. Dr. Greenwald will research "changing scope of practice and the group will discuss further to determine if this is an issue.

Winter Cluster - March 13, 2016

The Commission worked on the following:

- 1. Review/ Approval of Minutes 10/15/15
- 2. National Conference of Constituency Leaders (NCCL) May 5-7, 2016

2016 Representatives:

- 1. Women's Rep KrisEmily McCrory; Alternate Laurel Dallmeyer
- 2. Minority Rep Sneha Chacko; Alternate Stella King
- 3. New Physician Rep Anita Ravi; Alternate Rupal Bhingradia
- **4.** IMG Rep Ani Bodoutchian; Alternate Margarita DeFedericis
- **5.** GLBT Rep –Scott Hartman; Alternate Venis Wilder

Guidance documents to be sent to each representative:

- NYSAFP Priority Areas
- 2015 attendees report summary
- Administrative Forms

6. Nominees for 2016 NYSAFP Board Election

Solicitation Letter sent Feb. 2; due date April 11; were resent the week of March 14

Nominees Below (to Date):

- a. President Robert Ostrander, MD
- b. President-Elect Sarah Nosal, MD
- c. Vice President Marc Price, MD
- d. Secretary Barbara Keber, MD
- e. Treasurer Jim Mumford, MD

- f. Speaker COD Jason Matuszak, MD
- g. Vice-Speaker Heather Paladine, MD, Andrew Symons, MD
- h. AAFP Delegate (downstate) Marianne LaBarbera, MD Ray Ebarb, MD
- i. Alt. AAFP Delegate Tochi Iroku-Malize, MD
- j. Three (3) Directors Ani Bodoutchian MD, Margarita DeFedericis MD, Sneha Chacko, MD, Scott Hartman, MD, Rachelle Brilliant, MD

7. Commission Member Evaluations

Form to evaluate commission member to chairs – mid-March
Form to evaluate commission chairs to members – mid-March
Discussion regarding the need for a consistent/ formal evaluation process for all parts of the organization, including the functioning of the BOD. Investigate current resources, if any, used for this purpose.

8. Leadership Programs – Winter Weekend

- a. Winter Weekend review Successful session on "burnout". Need for continuing programs and resources to address this ongoing issue.
- b. COD next meeting
- c. Public Speaking
- d. Presentation Skills

Potential new topics for residency program: financial management; coding for procedures. June COD program will focus on financial management skills for residents with a speaker on personal financial management and a representative from a financial planning group.

Respectfully Submitted

Jose Tiburcio, MD (Chair),
Samuel Arce, MD (Vice Chair),
James Greenwald, MD (Past President),
Charles Francis, DO,
Soni Mathew, MD, MBA, FAAFP,
Michael Mendoza, MD, MPH, MS, FAAFP,
Chris Murphy, MD, Louis Verardo, MD, FAAFP,
Neubert Philippe, MD (Commission Members),
Aldo Alleva, MD,
Ji Kim, MD (resident),
Elizabeth Wei McIntosh (student),
Penny Ruhm (Staff)

Commission on Membership & Member Services

Constitutionally Assigned Commission Function

- Consider applications for membership and continuation of membership and investigate the qualifications of applicants.
- Monitor county chapter activities and organize county chapters in areas where no such chapters exist.
- Identify and develop proposals for member benefits, review proposals by staff and implement any member benefits programs approved by the Board of Directors

Other Commission Responsibilities

- Congress of Delegates Planning
- Member Communications
- Sponsorship and Support

Meetings:

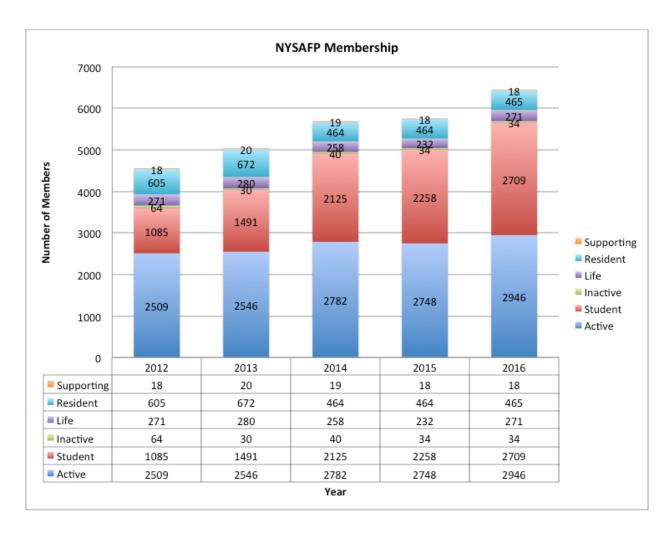
August 8, 2015 October 17, 2015 March 13, 2016

Membership Updates

Total membership has grown substantially over the last 5 years with over 40% growth since 2012. The bulk of growth has been fueled my medical student growth with 1600 additional members, representing nearly 150% growth. Active member growth has steadily risen with 400 additional members, representing 17.4% growth. Resident membership has shown a substantial drop, with 23% membership loss representing 140 members during the same period, and a loss of 207 from the peak of 672 in 2013. The drop in resident members deserves extra attention, given the number of residents who stay on and practice in New York State after residency. The growth in student membership also deserves further evaluation given the shear magnitude of the change, since active student participation at state academy events, while increasing over the last several years, has not shown the same magnitude of dramatic change.

•		
•		

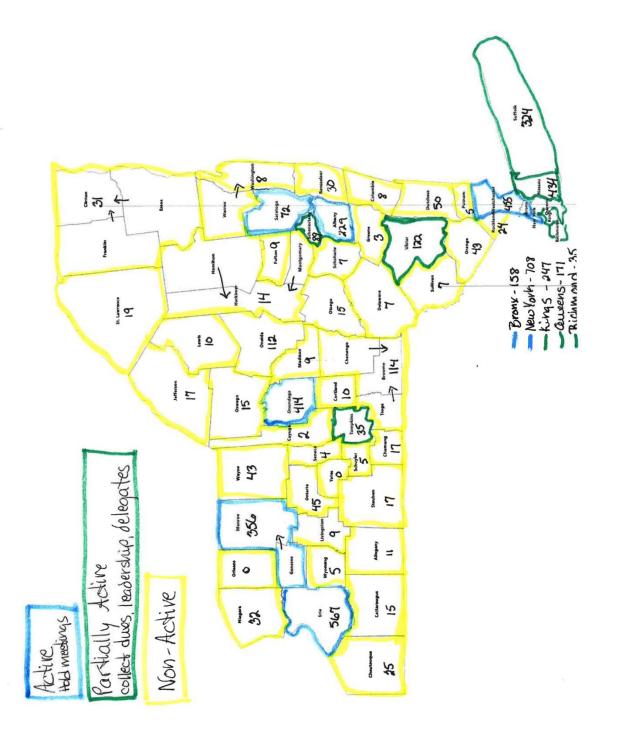
	2012	2013	2014	2015	2016	2012-2016 Trend
Active	2509	2546	2782	2748	2946	17.4%
Student	1085	1491	2125	2258	2709	149.7%
Inactive	64	30	40	34	34	-46.9%
Life	271	280	258	232	271	0.0%
Resident	605	672	464	464	465	-23.1%
Supporting	18	20	19	18	18	0.0%
Total	4552	5039	5689	5754	6444	41.6%



The membership commission is concerned about the aging of the Active membership and the possible effects of Boomeritis on organized medicine.

Demographic		tive Percent		orary Percent		tive Percent		fe Percent		dent Percent		dent Percent	Suppo (F		Suppo (non			tals Percent
													Count	reiceili	Count	reiceili		
0-20	1	0.04	0	0.00	0	0.00	0	0.00	1	0.20	0	0.00	0	0.00	0	0.00	2	0.04
20-24	0	0.00	0	0.00	0	0.00	0	0.00	1	0.20	352	21.76	0	0.00	0	0.00	353	6.97
25-29	56	2.14	0	0.00	0	0.00	0	0.00	204	39.84	793	49.01	0	0.00	0	0.00	1053	20.78
30-34	292	11.14	0	0.00	0	0.00	0	0.00	204	39.84	107	6.61	0	0.00	0	0.00	603	11.90
35-39	332	12.66	0	0.00	3	8.57	0	0.00	59	11.52	23	1.42	0	0.00	0	0.00	417	8.23
40-44	318	12.13	0	0.00	3	8.57	0	0.00	18	3.52	10	0.62	1	8.33	0	0.00	350	6.91
45-49	352	13.42	0	0.00	4	11.43	0	0.00	5	0.98	4	0.25	1	8.33	1	25.00	367	7.24
50-54	314	11.98	0	0.00	6	17.14	1	0.38	7	1.37	0	0.00	2	16.67	0	0.00	330	6.51
55-59	417	15.90	0	0.00	4	11.43	5	1.89	1	0.20	0	0.00	1	8.33	1	25.00	429	8.46
60-64	335	12.78	1	100.00	7	20.00	12	4.55	0	0.00	0	0.00	4	33.33	0	0.00	359	7.08
65-69	152	5.80	0	0.00	4	11.43	29	10.98	0	0.00	0	0.00	2	16.67	2	50.00	189	3.73
70-74	10	0.38	0	0.00	3	8.57	54	20.45	0	0.00	0	0.00	1	8.33	0	0.00	68	1.34
75->	0	0.00	0	0.00	0	0.00	163	61.74	0	0.00	0	0.00	0	0.00	0	0.00	163	3.22
Unknown	43	1.64	0	0.00	1	2.86	0	0.00	12	2.34	329	20.33	0	0.00	0	0.00	385	7.60
Ages Totals	2622	100.00	1	100.00	35	100.00	264	100.00	512	100.00	1618	100.00	12	100.00	4	100.00	5068	100.00
Average Ages		48.40		64.00		55.26		78.28		31.31		26.19		58.50		59.25		42.23

County Chapter Activities



i		Deleg	ates / Alt	ernates (a	as of Hand	lbook Prin	t date			
Active	Dues	2010	2011	2012	2013	2014	2015	Leadership	County	Members
Yes	Yes			1	1	1		Director, Alt Del MSSNY	NY Albany	229
									NY Allegany	11
Yes	Yes	3		1	2		2	Director	NY Bronx	158
									NY Cattaraugus	15
									NY Cayuga	2
									NY Central Mohawk Valley: Herkimer, Hamilton & Montgo	r 14
									NY Chautaugua	25
									NY Chemung	17
									NY Clinton (Also includes Franklin & Essex counties)	31
									NY Columbia	8
									NY Cortland	10
									NY Delaware	7
									NY Dutchess	50
Yes	Yes	2	3	3	2	1	2	Director, Speaker	NY Erie	567
									NY Fulton	9
					1				NY Greene	3
							1		NY Jefferson	17
	Yes	3	1	2	3	3	2		NY Kings	247
									NY Lewis	10
									NY Livingston	9
									NY Madison	9
	Yes	2	2	2	3	3	3/2	Secretary	NY Nassau	434
						<u> </u>			NY Niagara	32
Yes	Yes	3	3/2		2	3/2	4/4	VP, Treasurer, Dir	NY New York	708
103	105		3,2			5,2	- '' ' -	V1,110050101,511	NY Oneida	112
Yes	Yes	2	2	3	3	2	2	AAFP Del	NY Onondaga	414
1.05	100	1				- -	<u> </u>	Pres-Elect	NY Ontario	45
									NY Orange	43
									NY Orleans	1
		1			1				NY Oswego	15
		1							NY Otsego	15
									NY Putnum	5
	Yes	1	2		3	3	2	Director	NY Queens	171
						<u> </u>	1	2	NY Rensselaer	30
	Yes	1	1	1			1	AAFP Del	NY Richmond	35
Yes	Yes	1			2		1		NY Rochester (Includes Monroe and Genesee)	356
					1		1		NY Rockland	24
Yes	Yes				2/3		<u> </u>	Alt AAFP Del	NY Saratoga	72
	Yes	2	1	1	1			7.007.0.01.0.00	NY Schenectady	89
									NY Schoharie	7
									NY Schuyler	5
						1			NY Seneca	4
						<u> </u>			NY Southern Tier Broome, Tioga, Chenango	114
					—				NY St. Lawrence	19
						1			NY Steuben	17
					 	-	 	President, New Phy, Alt		
	Yes	3/1	4	4	2	2	3/2	AAFP Del	NY Suffolk	324
		-/-	<u> </u>	- 		<u> </u>	- / -	MSSNY Del	NY Sullivan	7
	Yes	2	1	1	1	1	1		NY Tomkins	35
	Yes	1	1	1	2	1/1	2		NY Ulster	122
		1		<u> </u>	<u> </u>		- -	Vice Speaker	NY Warren Washington	8
									NY Wayne	43
	Yes				 				NY Westchester w/Bronx	455
	163								NY Wyoming	5
		1	1	1	1	1	1	Director	Yates	Tompkins
		1			-			Director	1000	5246

Active - Has meetings

The commission is acutely aware of and concerned with the number of county chapters that are inactive. Solutions for this problem are being actively developed. Considerations include making combined chapters or driving local programs to actively engage constituents.

Member Benefits

The commission continues to review and add programs that provide value to the membership and which may offer discounts for member use. It is unclear how much or which members benefits are utilized by members. This may be an area to actively research with an eye toward finding benefits members find truly useful.

Congress of Delegates Planning

The Membership Commission directs the planning and scheduling of the yearly Congress of Delegates (COD), along with Mr. Grasso and staff. This year's Congress of Delegates is scheduled for Saturday, June 18th and Sunday, June 19th at the Hilton Garden Inn in Troy, NY.

A template format as well some tips for resolution writing has been sent to all commission chairs/members as well as to all chapter presidents. The commission will review all submitted resolutions for format and apprise the writer of and suggested changes in format prior to publishing in the COD handbook.

The COD schedule will remain largely the same improving the function of the reference committees with addition of more senior members to assist in formulating the consent calendar.

Brief schedule outline:

- New member orientation/Breakfast
- Opening of Annual meeting/COD
- Reference Committee Hearings
- Awards luncheon
 - FPOTY
 - FMEOTY
- Town Hall Session moderated by NYSAFP Past President, Marianne LaBarbera
 - Shawn Martin AAFP, Division of Government Relations and the Robert Graham Center for Policy Studies in Family Medicine and Primary Care
 - o Wanda Filer, MD, President AAFP
 - We expect the audience to participate in a well-rounded and informative discussion as always.
- Elections
- President's address
 - Robert Ostrander, MD
- Report of the Reference Committees
- Activities of the Congress of Delegates
- Leadership program for residents

Communications

The Quarterly Journal continues to be available online and mailed to all active members. This journal has enduring content for CME credit as well as peer-review items.

The electronic newsletter is sent by email on a weekly basis. The engagement statistics are moderately worse than industry standards and leave room for improvement.

- Open Rate: 20.76% [Percent of who actually open the email vs 80% who delete or send to spam without reading] (MultiView Avg: 29%)
- Click-to-Opens: 8.04% [Percent of people who receive the email who click an embedded link to access more content] (MultiView Avg: 15%)

Website redesign is underway after changing vendors in the last year following unrealized commitments from the previous vendor.

The Career Center –FP Jobs Online with HEALTHeCareers has been in place for the last 2+ years. It provides good reach and royalty income. The use of this site remains suboptimal, however. Discussions regarding the possible optimization of this site occurred but no formal process has been decided on at this time.

Social Media

- Facebook page: www.facebook.com/NYSAFP
 - o 357 Likes (i.e. friends)
 - Nearly 80% year over year growth (200 last year)
- Twitter:
 - @NYSAFP
 - 730 Followers
 - 140% year over year growth (300 last year)
 - Event specific hash tags e.g. #NYSAFP, #nysafpww2016, #lobbyday, #wintercluster, #NYSAFPCOD

Sponsorship and Support

The commission continues to research non-dues and non-event revenue sources including advertising (newsletter/journal, website) and affinity programs.

I would like to thank the members of the Membership Commission for their service and dedication to the Academy and to the patients of New York. A special thanks to Ms. Donna Denley and the staff of the NYS Academy for all of their hard work.

Respectfully Submitted,
Jason Matuszak, MD, Commission Chair & NYSAFP Speaker
Russell Perry, MD, Vice-Chair
Ani Bodoutchian, MD
Sneha Chacko, MD
George Dunn, MD Past President
Stephania Hasan, MD
Wesley Ho, MD, member
Alexandra Isakova, DO
Marianne LaBarbera, MD Past President
Sonya Sidhu-Izzo, MD, member and Vice-Speaker of the COD
Andrew Symons, MD, member
Ben Shuham, Student
Donna Denley, Academy Staff

Commission on Public Health

The Commission addressed the following areas (details of our actions are posted on the NYSAFP website in our minutes).

Behavioral Medicine/Substance Use - This was a major focus on the commission in the past year. Based on a member survey/needs assessment, we developed office visit protocols for both depression/anxiety and substance abuse. These are being finalized and then will be posted on the NYSAFP website, and possibly in the Family Doctor journal.

Single Payer - We continue to highlight this issue in our agenda. With the approval of the board, we rewrote a resolution in support of single payer to bring to the AAFP COD this fall. We also plan to identify counties that have less representation in MSSNY so that we can target NYSAFP members in those counties to join.

End of Life Care – We developed a list of resources and links for physicians to use. This is being finalized and then can be posted on the NYSAFP website.

Resolutions - The Commission approved nine proposed resolutions to the NYSAFP Congress of Delegates on a variety of member interests. Of the ten resolutions initially proposed by our commission last year that were sent to the AAFP COD, seven were passed fully or in part and two were referred to the board.

I would like to thank the members of the Commission for their time, energy, and thoughtfulness on these issues. I would particularly like to thank Ron Rouse, staff, and Bill Klepack, Vice-chair, for their expertise and support of the commission and of me as a chair, and Scott Hartman, who took a lead role in editing and revising many of our resolutions this year. We look forward to a productive 2016-17 year.

Heather Paladine, M.D., Chair

William Klepack, M.D., Vice-chair Ron Rouse, staff Margarita DeFedericis, M.D. Scott Hartman, M.D. Emily Holt, M.D. (resident)

David Levine (student)

Alexa Mieses (student)

Linda Prine, M.D.

David Spingam, D.O.

Yorgos Strangas, M.D. (resident)

Wayne Strouse, M.D.

Sarah Unseth (student)

NYSAFP Foundation Annual Report Jose David, MD President

The Foundation remains focused on a limited number of activities since our strategic decision several years ago to downsize and refrain from large scale fundraising or programs.

We essentially exist as a charitable and educational vehicle with status as a non-profit tax deductible organization to contract with government entities and to receive philanthropic gifts.

We supported two student externships in 2015 and continued our support for resident and student participation in educational programs of the Academy.

Our financial report reflects the downsizing of the Foundation. We had 2015 revenues of \$8,204.95. We had expenses of \$8,045.44 for an operating excess of \$159.51. Most of our expenses are management fees and contributions paid to the Academy to support Academy educational programs.

Our investment fund with Manning & Napier had a balance of \$31,479.72 on December 31. This represents dividends of \$463.69, gains of \$8.51 and a change in market value of - \$1,466.83.

The Foundation will continue to operate as a vehicle for contracting with the State and as a repository for funds which donors may wish to provide to support educational or charitable projects.

We are fortunate to have a dedicated and capable staff, made available to the Foundation through the Academy. I particularly want to thank our executive vice president, Vito Grasso, and our director of finance, Donna Denley, for their outstanding work in behalf of the Foundation.

Jun David, MD	Richard Bonanno, MD	Mark Josefski, MD			
President	Trustee	Trustee			
Vito Grasso	Neil Calman, MD	Neil Mitnick, DO			
EVP & Trustee	Trustee	Trustee			

All Congress of Delegates information is available on our website at: http://www.nysafp.org/index/about-us-1/congress-of-delegates-50.html

Resolutions for 2016

Appendix A link

Resolutions of 2015 Actions
Disposition of 2015 Resolutions Sent to AAFP

NYSAFP Constitution & Bylaws

Appendix B link

AAFP Bylaws

Appendix C: <u>AAFP Bylaws online</u>

Financial Statement / Auditor's Annual Report

Appendix D link

Nominee Photos & Bios

Appendix E link