

Tochi Iroku-Malize, MD elected to the AAFP board
James Mumford, MD appointed chairman of Organization & Finance

Organization & Finance

ITEM 27 – PHARMACY CHAIN INVESTORS SHOULD NOT SET NATIONAL HEALTH POLICY

Resolution No. 208 from the New York State chapter entitled, “Pharmacy Chain Investors Should Not Set National Health Policy,” the resolved portion is printed below:

RESOLVED, That the American Academy of Family Physicians request the Robert Graham Center to study the issue of proposed mergers between major health care insurance corporations and large pharmacy retailers as regards to the health of the public and our members’ ability to practice patient centered care.

RECOMMENDATION: The reference committee recommends that Resolution No. 208 be referred to Board of Directors.

Health of the Public & Science

ITEM 1 – INSTITUTIONAL RACISM IN THE HEALTHCARE SYSTEM

Resolution No. 401 from the New York State chapter entitled, “Institutional Racism in the Healthcare System,” the resolved portions are printed below:

RESOLVED, That the American Academy of Family Physicians (AAFP) adopt a policy opposing segregation of patient care within the health care system and within health care institutions by race, insurance status, or other demographics, and be it further

RESOLVED, That the American Academy of Family Physicians Center for Diversity and Health Equity develop materials and provide education to increase awareness of how racism is manifested through institutional policies and how segregated care within the health care system is a cause of racial disparities in health outcomes.

RECOMMENDATION: The reference committee recommends that Resolution No. 401 be adopted.

ITEM 2 – MEDICAL AID IN DYING

Resolution No. 402 from the New York State chapter entitled, “Medical Aid in Dying,” the resolved portions are printed below:

RESOLVED, That the American Academy of Family Physicians (AAFP) affirm

that the use of medical aid in dying is an ethical, personal, end-of-life decision when the patient is terminally ill, is suffering and capable of making an informed decision to end his/her suffering through medical aid in dying and that such decision should be made in the context of the doctor-patient relationship, and be it further

RESOLVED, That the American Academy of Family Physicians is neutral regarding whether individual states should permit medical aid in dying, and be it further

RESOLVED, That the American Academy of Family Physicians reject use of the term “assisted suicide” when describing care to assist a patient who has made the decision to end his/her suffering through medical aid in dying and, instead, shall describe such situations as “medical aid in dying,” and be it further

RESOLVED, That the American Academy of Family Physicians maintain a neutral position on medical aid in dying regardless of any position on the matter of any other medical organization, and be it further

RESOLVED, That the American Academy of Family Physicians support state and federal laws which protect physicians from criminal prosecution and civil liability who assist terminally ill patients in ending their suffering pursuant to state or federal laws which permit medical aid in dying.

Resolution No. 403 from the California chapter entitled “Medical Aid-in-Dying is an Ethical End-of-Life Option,” the resolved portions are printed below:

RESOLVED, That the American Academy of Family Physicians acknowledge that use of medical aid-in-dying is an ethical personal end-of-life decision that should be made in the context of the doctor-patient relationship, and be it further

RESOLVED, That the American Academy of Family Physicians seek to modify the current American Medical Association (AMA) policy on end-of-life care with language that recognizes medical aid-in-dying as an ethical end-of-life option when practiced where authorized and according to prescribed law.

RECOMMENDATION: The reference committee recommends that Substitute Resolution No. 402 be adopted in lieu of Resolution No. 402 “Medical Aid in Dying”, Resolution No. 403 “Medical Aid in Dying is an Ethical End-of-Life Option”, Resolution No. 404 “Adopting an Independent AAFP Policy on Medical Aid in Dying, and Resolution No. 405 “Reject “Assisted Suicide” Terminology in Aid-in Dying” as printed below:

RESOLVED, That the American Academy of Family Physicians adopt a

position of engaged neutrality toward medical-aid-in-dying as a personal end-of-life decision in the context of the physician-patient relationship, and be it further

RESOLVED, That the American Academy of Family Physicians **reject the refrain from** use of the phrase “assisted suicide” or “physician-assisted suicide” in formal statements or documents and direct the AAFP’s American Medical Association (AMA) delegation to promote the same in the AMA House of Delegates. **ADOPTED AS AMENDED**

Education

ITEM 2 – WORRISOME LETTER FROM THE ABFM 68 WARNING OF ALLEGED PROFESSIONALISM LAPSES

Resolution No. 602 from the New York State chapter entitled “Worrisome Letter from the ABFM Warning of Alleged Professionalism Lapses,” the resolved portion is printed below:

RESOLVED, That the American Academy of Family Physicians work with our partners at the American Board of Family Medicine to remove voluntary surrender of a license or practice privileges or voluntary limitations as cause for revoking Board Certification.

RECOMMENDATION: The reference committee recommends that Resolution No. 602 be referred to the Board of Directors.

ITEM 5 – INCREASE CONTINUING MEDICAL EDUCATION CREDIT REQUIREMENT TO A MAXIMUM OF 50 PERCENT

Resolution No. 604 from the New York State chapter entitled “Increase Continuing Medical Credit Requirement to a Maximum of 50 Percent,” the resolved portion is printed below:

RESOLVED, That the American Academy of Family Physicians increase the allowable continuing medical education (CME) credit provided for teaching to a maximum of 50 percent of the CME hours required over a 3-year cycle [up to 75 hours of the presently required 150 hours].

RECOMMENDATION: The reference committee recommends that Resolution No. 604 be referred to the Board of Directors. **EXTRACTED – REFERRED TO THE BOARD OF DIRECTORS**

ITEM 10 – VACATING MARIJUANA-RELATED OFFENSES

Resolution No. 610 from the New York State chapter entitled, “Vacating Marijuana-Related Offenses,” the resolved portion is printed below:

RESOLVED, That the American Academy of Family Physicians support the Marijuana Justice Act and other similar legislation that would expunge marijuana-related offenses as a matter of health equity and justice.

RECOMMENDATION: The reference committee recommends that Resolution No. be reaffirmed as current policy.

ITEM 11 – INCREASED RESEARCH FOR PREVENTING AND DIAGNOSING TICK-BORNE DISEASES

Resolution No. 611 from the New York State chapter entitled, “Increased Research for Preventing and Diagnosing Tick-Borne Diseases,” the resolved portions are printed below:

RESOLVED, That the American Academy of Family Physicians advocate for greater federal and private-sector funding that will reduce the risk of tick borne diseases/infections through prevention and environmental measures, and be it further,

RESOLVED, That the American Academy of Family Physicians advocate for greater federal and private-sector funding to develop reliable diagnostic tests for tick-borne diseases, and be it further

RESOLVED, That the American Academy of Family Physicians advocate for greater federal and private-sector funding to research and produce a hold harmless vaccine that will block a tick’s ability to transmit disease, and meet appropriate standards regarding efficacy, cost, and safety including safety for children and adults.

RECOMMENDATION: The reference committee recommends that Substitute Resolution No. 611, which reads as follows be adopted in lieu of Resolution No. 611:

RESOLVED, That the American Academy of Family Physicians support greater federal and private-sector funding that will reduce the risk of tick borne diseases/infections through prevention and environmental measures, and be it further,

RESOLVED, That the American Academy of Family Physicians support greater federal and private-sector funding to develop reliable diagnostic tests for tick-borne diseases, and be it further

RESOLVED, That the American Academy of Family Physicians support greater federal and private-sector funding to research and produce a hold harmless vaccine that will block a tick’s ability to transmit disease, and meet

appropriate standards regarding efficacy, cost, and safety including safety for children and adults.

Advocacy

ITEM 2 - SINGLE PAYER AS A VIABLE OPTION TO AMERICA'S HEALTH CARE CRISIS AND THE NEED TO EDUCATE PHYSICIANS ABOUT SINGLE PAYER

Resolution No. 502 from the New York chapter entitled, "Single Payer as a Viable Option to America's Health Care Crisis and the Need to Educate Physicians About Single Payer," the resolved portions are printed below:

RESOLVED, That the American Academy of Family Physicians (AAFP) include the data and conclusions of Board Report F on Single Payer Health Care System to the 2017 Congress of Delegates in evidence-based AAFP educational programs, continuing medical education activities, and stage presentations at AAFP meetings in the areas of health care policy, health care economics, and health care systems, and be it further

RESOLVED, That the American Academy of Family Physicians actively include support for a single payer national health plan in its advocacy for health system reform.

RECOMMENDATION: The reference committee recommends that Substitute Resolution No. 502, which reads as follows, be adopted in lieu of Resolution No. 502:

RESOLVED, That the American Academy of Family Physicians (AAFP) make available the data and conclusions of 2017 Board Report F on Single Payer Health Care System and 2018 Board Report G on Health Care for All in AAFP education and policy programs in the areas of health-care policy, health-care economics and health-care systems.

ITEM 5 – Oppose the Criminalization of Self-Induced Abortion

Resolution No. 507 from the Massachusetts and New York Chapters entitled "Oppose the Criminalization of Self-Induced Abortion," the resolved portion is printed below:

RESOLVED, That the American Academy of Family Physicians advocate against any legislative efforts to criminalize self-induced abortion. Speakers supported the resolution, stating that the criminalization of abortions would disproportionately affect underserved minority and impoverished women. Several speakers spoke in support of the resolution and advocated that we align our policy with the American College of Obstetricians and Gynecologists and the AMA. The committee did not hear any testimony in opposition of the resolution.

RECOMMENDATION: The reference committee recommends that Resolution No. 507 be adopted.

ITEM 7 – OPPOSE FETAL PERSONHOOD TERMINOLOGY IN GOVERNMENTAL POLICIES AND LEGISLATION

Resolution No. 509 from the New York chapter entitled, “Oppose Fetal Personhood Terminology in Governmental Policies and Legislation,” the resolved portion is printed below:

RESOLVED, That the American Academy of Family Physicians oppose the use of non-scientific language in the domain of reproductive health in governmental policies and legislative initiatives. The committee heard testimony from delegates in support of the resolution emphasizing the importance for the AAFP to focus on scientific terms and oppose non-scientific language. Testimony was heard in support of the resolution. The committee did not hear any testimony in opposition to the resolution. The committee concurred with the testimony.

RECOMMENDATION: The reference committee recommends that Resolution No. 509 be adopted.

ITEM 8 – PREVENT CLOSING OF THE NATIONAL GUIDELINES CLEARINGHOUSE; NATIONAL GUIDELINES CLEARINGHOUSE AND EVIDENCE-BASED RESOURCES FOR FAMILY PHYSICIANS

Resolution No. 510 from the New York chapter entitled, “Prevent Closing of the National Guidelines Clearinghouse,” the resolved portions are printed below:

RESOLVED, That the American Academy of Family Physicians send a letter to the Agency for Healthcare Research and Quality and the Department of Health and Human Services calling for the restoration and permanent funding of the National Guidelines Clearinghouse, and be it further

RESOLVED, That the American Academy of Family Physicians advocate for legislation to make permanent funding for the National Guidelines Clearinghouse, and be it further

RESOLVED, That the American Academy of Family Physicians (AAFP) Executive Vice President immediately following the conclusion of the 2018 AAFP Congress of Delegates request a joint press conference and press statement addressing the closing of the National Guidelines Clearinghouse (NGC) and its perceived impact on the care of patients and calling for restoration and making permanent the funding of the NGC.

Resolution No. 511 from the Connecticut chapter entitled, “National Guidelines

Clearinghouse and Evidence-Based Resources for Family Physicians,” the resolved portions are printed below:

RESOLVED, That the American Academy of Family Physicians, as part of its ongoing efforts to provide family physicians with peer-reviewed, high-quality evidence to make treatment decisions for and with their patients at the point²³ of-care, join with the Agency for Healthcare Research and Quality to advocate for reinstatement of funds to support the National Guideline Clearinghouse website, and be it further

RESOLVED, That the American Academy of Family Physicians, as part the efforts with the Agency for Healthcare Research and Quality to advocate for reinstatement of funds to support the National Guideline Clearinghouse website, advocate for federal legislation to make that funding permanent, and be it further

RESOLVED, That if the American Academy of Family Physicians (AAFP) and the Agency for Healthcare Research and Quality (AHRQ) are unable to reinstate federal funding permanent, that the AAFP encourage AHRQ to reconsider their strategic priorities and reinstate the National Guideline Clearinghouse with the funds that are currently available.

RECOMMENDATION: The reference committee recommends that Substitute Resolution No. 511, which reads as follows, be adopted in lieu of Resolution No. 510 and Resolution No. 511:

RESOLVED, That the American Academy of Family Physicians, as part of its ongoing efforts to provide family physicians with peer-reviewed, high-quality evidence to make treatment decisions for and with their patients at the point²⁶ of-care, join with the Agency for Healthcare Research and Quality to advocate for reinstatement of funds to support the National Guideline Clearinghouse website, and be it further

RESOLVED, That the American Academy of Family Physicians, as part of the efforts with the Agency for Healthcare Research and Quality to advocate for reinstatement of funds to support the National Guideline Clearinghouse website, advocate for federal legislation to make that funding permanent.