

Reference Committee on Organization and Finance

2015 Congress of Delegates of the American Academy of Family Physicians

Denver, CO

Alternate Delegate, Polina Sayess, M.D.

Resolution no. 201 “Patient Education Videos for FamilyDoctor.org”

This resolution asked that the AAFP develop a patient education video library for Familydoctor.org, including education about specific procedures, informed consent, and chronic disease management. The reference committee heard overwhelming support for the need for patient education videos on Familydoctor.org and equal concern for the cost to develop the videos. Testimony offered alternatives to the proposed resolution including a contest with residents for development of videos or use of videos already developed by family physicians or other reputable sources.

Outcome: REFERRED to Board

Resolution no. 202 “Expand Online Offerings of the American Family Physician (AFP) Journal”

This resolution sought that the American Family Physician journal offer additional content online that may not be available in print. Those in favor of the resolution testified that a significant amount of content could be made available online making it more organized, searchable, and readily available at point of care. Those opposed expressed concerns about the cost and potential impact on family physicians seeking academic promotion. A representative of the Board of Directors stated that American Family Physician (AFP) has editorial independence on this matter and that some authors may not want their articles published online before being published in print. It was also noted that the AAFP already provides offerings of this type online.

Outcome: NOT ADOPTED

Resolution no. 203 “Climate Change”

*This resolution asked that the AAFP acknowledge that human behavior contributes **significantly to climate change and that AAFP support public policies that limit and monitor the use of fossil fuels and the production of environmental pollutants.** While the reference committee acknowledged the concerns raised, they believe the current policy is comprehensive and addresses climate change. In addition, an article was published in American Family Physician in August 2011 titled, “Slowing Global Warming: Benefits for Patients and the Planet.”*

Outcome: REAFFIRMED as Current Policy

Resolution no. 204 “Nuclear Disarmament”

This resolution sought that the AAFP support the elimination of nuclear weapons, and communicate its support to the Physicians for Social Responsibility. The reference committee heard testimony in support of the first part of the resolution but not the second. The reference committee agreed that the AAFP should support nuclear disarmament out of concern for the devastating effects of nuclear weapons; however, believed it unnecessary to communicate the organization’s support of this issue to the Physicians for Social Responsibility.

Outcome: ADOPTED Substitute Resolution:

- That the AAFP support the elimination of nuclear weapons.

Resolution no. 205 "Implementation of Non-discrimination in Health Care"

This resolution asked the AAFP to lobby for broader health insurance coverage of complementary therapies at the national level. The reference committee heard limited testimony in favor of the resolution. Those speaking against the resolution noted that complementary and alternative medicine (CAM) is a broad category and that many services are not evidence-based. In addition, CAM providers have their own lobbying arm. It was noted that the AAFP is the lobbying force for family physicians and not CAM providers, and the fiscal impact of lobbying could be significant.

Outcome: NOT ADOPTED

Resolution no. 206 "ISTOP Exclusions"

This resolution sought that the AAFP request that the Veterans Administration participate in any and all state prescription monitoring programs, and for the AAFP to advocate that pending full participation in the state prescription monitoring program, the Veterans Administration require that prescribers be required to consult the Prescription Monitoring Program upon prescribing controlled substances and methadone programs monthly, and to communicate with any prescribers listed there. The majority of testimony provided was in favor of encouraging the Veterans Administration to participate in prescription monitoring programs but not require prescribers to consult the Prescription Monitoring Program when prescribing certain medications as a mandate might be a liability issue for some physicians and it is unclear what current VA policies are.

Outcome: ADOPTED Substitute Resolution:

- That the AAFP request that the Veterans Administration participate in any and all state prescription drug monitoring programs.

Resolution no. 207 "Supporting Rural Hospitals"

This resolution asked that the AAFP advocate for and support federal legislation which provides for multiple means of funding to help save our rural hospitals. Positive testimony was provided in support of this resolution. Several examples were given regarding the effects that lack of funding has caused including limited access for vulnerable patients, decreased reimbursement and focus on primary care services, hospitals facing closures and the negative economic impact on the communities that support rural hospitals.

Outcome: ADOPTED

Resolution no. 208 "Age Discrimination Employment Act (ADEA) Exemption"

As discussed at the NHAAP Board meeting in September, this resolution sought that the AAFP work with the appropriate federal policymaking authority to allow credentialing organizations to enact dementia screening programs, thereby creating an exemption to the Age Discrimination Employment Act. Mixed testimony was heard. The reference committee believed that, due to the legal nature of this issue and given that there are already other organizations beginning to address this topic, this resolution should be referred to the Board of Directors for careful consideration on how this might be addressed and whom this would affect.

Outcome: REFERRED to Board

Resolution no. 209 "Hospice: An Integral Part of Family Medicine"

This resolution asked the AAFP to assert that end-of-life care is an integral part of family medicine and family physicians should not be excluded from providing hospice and palliative care or leading such care teams. It was noted that the AAFP has developed a Recommended Curriculum Guideline for Family Medicine Residents on Palliative and End-of-Life Care. This curriculum guideline defines a recommended training strategy for family medicine residents on this topic.

Outcome: ADOPTED Substitute Resolution:

- That the AAFP assert that end of life medical care, including hospice and palliative medicine, is an integral part of the practice of family medicine.
- That the AAFP oppose any efforts to prevent family physicians from service as hospice physicians and medical directors.

Resolution no. 210 "ICD-10 and Its Negative Impact on Family Physician Practices"

This resolution asked the AAFP to continue to follow the negative impact and financial burdens on family physicians by the implementation of ICD-10 and work to relieve them, including such actions as fighting for longer grace periods from audit and payment penalties.

Outcome: ADOPTED

The Congress of Delegates also approved four amendments to the Bylaws of the AAFP:

1. *Membership application process changed to eliminate prior requirement that constituent chapters approved all membership applications; going forward, election to active membership shall be by the Board of the AAFP.*
2. *Membership Application process changed to eliminate prior requirement that constituent chapters approved all membership applications; going forward, election to supporting membership shall be by the Board of the AAFP.*
3. *Acceptance of Membership section of Bylaws changed to reflect that constituent chapters no longer have the ability to determine whether an applicant has a right to become a member but constituent chapters retain the ability to determine whether a member has a right to remain a member.*
4. *The section of Bylaws describing the responsibilities of the President amended to include presiding over any meeting at the annual educational event of the AAFP.*