

MEDICAL SOCIETY OF THE STATE OF NEW YORK 2019 HOUSE OF DELEGATES

Report of the Reference Committee on Reports of Officers and Administrative Matters
Presented by: Ernesto Diaz-Ordaz, MD, Chair

Madame Speaker and Members of the House of Delegates:

Your Reference Committee recommends the following consent calendar for acceptance:

RECOMMENDED FOR FILING FOR INFORMATION

1. Board of Trustees Report 1-HOD-2019 – Financial Statements for the Year Ended December 31, 2018
 - a. The Report of the Certified Public Accountants for the year ended December 31, 2018
 - b. Medical Society of the State of New York Political Action Committee
 - c. The Empire State Medical, Scientific and Educational Foundation, Inc.
 - d. The Medical, Educational and Scientific Foundation of New York, Inc.
2. President's Report – HOD-2019
3. Treasurer's Report – HOD-2019
4. Secretary's Report – HOD-2019
5. Executive Vice President's Report – HOD-2019

RECOMMENDED FOR ADOPTION

6. 2019 Reports of Officers and Administrative Matters Sunset Report
7. Resolution 204 – Pardon D. John Natale
8. Resolution 211 – Continuing Certification of Medical Competence
9. Resolution 214 – Continued Grandfather Stats for Taking Board Exams
10. Resolution 215 – The Term Physician
11. Resolution 216 – Advancing Gender Equity in Medicine
12. Resolution 217 – MSSNY Policy on Gender Equity in Medicine
13. Resolution 218 – Membership Expansion and Representation of Diverse Physician Organizations
14. Resolution 221 – Physician Competency and Age Discrimination

RECOMMENDED FOR ADOPTION AS AMENDED OR SUBSTITUTED

15. Resolution 207 – State Societies and the AMA Litigation Center
16. Resolution 213 – MOC Moratorium
17. Resolution 220 – Representative of County Operative Functions at Council

RECOMMENDED NOT FOR ADOPTION

18. Resolution 200 – Reconsidering the Need for an Increased Physician Workforce
 19. Resolution 201 – Study of State and National Health Service Corps Needs
 20. Resolution 202 – Government Monies Paid to Help Train Physicians
 21. Resolution 203 – NYS Licensure and Registration Fees
 22. Resolution 205 – Clear Disclosure of Advertisers at the House of Delegates
 23. Resolution 208 – Getting JAMA to Support the Interests of Physicians
 24. Resolution 209 – Initial Certification of Medical Competence
 25. Resolution 212 – Notification of Certification of Medical Competence
 26. Resolution 219 – Supporting NYS Medical Students, Residents, Fellows
1. Board of Trustees Report 1-HOD-2019 – Financial Statements for the Year Ended December 31, 2018

- a. The Report of the Certified Public Accountants for the year ended December 31, 2018
 - b. Medical Society of the State of New York Political Action Committee
 - c. The Empire State Medical, Scientific and Educational Foundation, Inc.
 - d. The Medical, Educational and Scientific Foundation of New York, Inc.
2. President's Report – HOD-2019
 3. Treasurer's Report – HOD-2019
 4. Secretary's Report – HOD-2019
 5. Executive Vice President's Report – HOD-2019

THE REFERENCE COMMITTEE RECOMMENDS THAT ITEMS 1-5 BE ACCEPTED AND FILED FOR INFORMATION.

6. 2019 REPORTS OF OFFICERS AND ADMINISTRATIVE MATTERS SUNSET REPORT

THE REFERENCE COMMITTEE RECOMMENDS THAT THE 2019 REPORTS OF OFFICERS AND ADMINISTRATIVE MATTERS SUNSET REPORT BE ADOPTED.

7. Resolution 204 Pardon Dr. John Natale

THE REFERENCE COMMITTEE RECOMMENDS THAT RESOLUTION 204 BE ADOPTED

Resolution 204 asks that that our MSSNY petition President Donald J Trump for the purpose of obtaining a pardon for Dr. Natale, offering some solace for the loss of his career and good name.

The reference committee heard testimony that Dr. Natale was convicted and served a prison sentence, based on a coding error, despite having been cleared of the original charge of Medicare fraud in the matter. The AMA and MSSNY supported the overturning of his conviction several years ago, but did not prevail. Those who testified at the reference committee hearing felt strongly that Dr. Natale has ben unfairly treated, and agreed that MSSNY should ask the President to pardon him.

8. Resolution 211 Continuing Certification of Medical Competence

THE REFERENCE COMMITTEE RECOMMENDS THAT RESOLUTION 211 BE ADOPTED.

Resolution 211 asks MSSNY to

1. adopt the position that verifiable demonstration of currency and competence in medical practice should include as an acceptable alternative to continuing board certification by the appropriate medical specialty board(s) written attestation of good professional standing in the appropriate community(s) of practice by a minimum of two (2) peers also in good professional standing with the same community(s) of practice; and to
2. adopt the position that verifiable demonstration of currency and competence in medical practice should include as an acceptable alternative to continuing board certification by the appropriate medical specialty board(s) satisfactory completion of a minimum of fifty (50) hours every two (2) years of continuing medical education experiences related to the specialty(s) of medicine in which one currently practices, in accordance with the current practices of the appropriate medical specialty(s) and to
3. adopt the position that verifiable demonstration of currency and competence in medical practice should include as an acceptable alternative to continuing board certification by the appropriate medical specialty board(s) Validated self-assessment of current cognitive knowledge following no fewer than twenty (20) hours every two (2) years from the above cited continuing medical education experiences.

The reference committee heard only testimony in support of alternatives to current approaches to Maintenance of Certification.

9. Resolution 214 Continued Grandfather Status for Taking Board Exams

THE REFERENCE COMMITTEE RECOMMENDS THAT RESOLUTION 214 BE ADOPTED.

Resolution 214 asks that

1. the duly licensed physician should be the only requirement for practice of medicine; and
2. that the American Board of Medical Specialties (ABMS) keep the promise of their “grandfather” clause; and resolves
3. that MSSNY feels there should be more than one pathway to participation in insurance companies, hospital privileges and other organizations (e.g. ambulatory surgery centers). We encourage the ABMS to work with the other societies to find what pathways ensure physician competency and pursuit of lifelong learning.

The reference committee heard testimony clearly supportive of the goals of the resolution, and no objections.

10. Resolution 215 The Term Physician

THE REFERENCE COMMITTEE RECOMMENDS THAT RESOLUTION 215 BE ADOPTED

Resolution 215 asks that MSSNY

1. seek the passage of state regulation and/or legislation that mandates that the term physician be limited to those people trained in accordance with ACGME guidelines and have an MD, DO or a recognized equivalent physician degree and asks
2. that term not be used by any other organization or person involved in or representing a group that provides patient care by allied health professionals and
3. that MSSNY send a resolution to American Medical Association to seek the passage of federal regulation and/or legislation that mandates that the term physician be limited to those people trained in accordance with ACGME guidelines and have an MD, DO or a recognized equivalent physician degree and
4. that the term not be used by any other organization or person involved in healthcare.

The reference committee heard testimony strongly in favor of the resolution.

11. Resolution 216 Advancing Gender Equity in Medicine

THE REFERENCE COMMITTEE RECOMMENDS THAT RESOLUTION 216 BE ADOPTED

Resolution 216 asks that MSSNY

1. promote pay structures based on objective, gender-neutral criteria; and
2. promote and/or develop educational programs to help empower physicians of all genders to negotiate equitable compensation; and
3. advocate for training to identify and mitigate implicit bias in compensation decision making for those in positions to determine salary and bonuses, with a focus on how subtle differences in the evaluation of physicians of different genders may impede compensation and career advancement; and
4. collect and analyze comprehensive demographic data and produce a report on gender equity, including, but not limited to, membership; representation in the House of Delegates; reference committee makeup; and leadership positions within MSSNY, and disseminate this report to the House of Delegates and the MSSNY membership beginning with the Annual Meeting in 2020 and continuing yearly thereafter, with recommendations to support ongoing gender equity efforts.

Testimony on this resolution was extremely positive, and the reference committee was urged to recommend MSSNY's strong endorsement.

12. Resolution 217 MSSNY Policy on Gender Equity in Medicine

THE REFERENCE COMMITTEE RECOMMENDS THAT RESOLUTION 217 BE ADOPTED.

Resolution 217 asks that MSSNY

1. support institutional, departmental and practice policies that promote transparency in defining the criteria for initial and subsequent physician compensation; advocate for pay structures based on objective, gender-neutral criteria; and
2. encourage a specified approach, sufficient to identify gender disparity, to oversight of compensation models, metrics, and actual total compensation for all employed physicians; promote training to identify and mitigate implicit bias in compensation determination; recommend elimination of the question of prior salary information from job applications for physician recruitment in academic and private practice; and
3. create an awareness campaign to inform physicians about their rights under the Lilly Ledbetter Fair Pay Act and Equal Pay Act, which took effect in 2009, restoring protection against pay discrimination, and establish educational programs to help empower all genders to negotiate equitable compensation

The reference committee heard only strong support for this resolution.

13. Resolution 218 Membership Expansion and Representation of Diverse Physician Organizations

THE REFERENCE COMMITTEE RECOMMENDS THAT RESOLUTION 218 BE ADOPTED.

Resolution 218 asks that MSSNY study the issue of representation of diverse and/or ethnic physician not-for-profit organizations at its HOD along with outreach and membership incentives and submit appropriate policy recommendations to the MSSNY Bylaws Committee.

The reference committee heard testimony in support of studying ways to increase participation by members of diverse or ethnic physician organizations in MSSNY, including possible incentives that could include representation with sufficient membership.

14. Resolution 221 Physician Competency and Age Discrimination

THE REFERENCE COMMITTEE RECOMMENDS THAT RESOLUTION 221 BE ADOPTED

Resolution 221 asks that MSSNY seek guidance from legal counsel toward formulating policy on age-related issues, physician competence, and patient safety.

The reference committee heard many comments about the need to enable physicians to continue in practice and contribute to the public welfare if competent, the complexity of determining requirements for various specialties, and the lack of evidence of the reliability of age-related testing.

15. Resolution 207 State Societies and the AMA Litigation Center

RECOMMENDATION A:

THE REFERENCE COMMITTEE RECOMMENDS THE FOLLOWING SUBSTITUTE AMENDMENT BE ACCEPTED IN LIEU OF RESOLUTION 207:

Resolved, That the MSSNY submit a resolution to the AMA House of Delegates, stating that when seeking a state medical society's support of an amicus brief on a legal matter, especially one pertaining to an issue in that state, that the AMA Litigation Center consider the state medical society's point of view in developing the argument, and maintain full disclosure during the drafting of the amicus or change in strategy.

RECOMMENDATION B:

THE REFERENCE COMMITTEE RECOMMENDS THAT RESOLUTION 207 BE ADOPTED AS AMENDED.

Resolution 207 asks that MSSNY

1. engage the AMA, its BOT and its Litigation Center in order to forge a path that would facilitate greater consideration of MSSNY interpretation of AMA policy permitting wider participation in Litigation Center initiatives, and
2. that the MSSNY AMA delegation introduce a resolution to the AMA HOD to forge a path that would facilitate greater consideration of federation medical society's interpretation of AMA policy in order to permit wider participation in Litigation Center.

The reference committee heard testimony that about an amicus brief on which the AMA sought MSSNY's support without sharing their argument or considering MSSNY's concerns about the approach to be taken. As a result, MSSNY could not sign on despite its strong desire to express support for the AMA's position.

16. Resolution 213 MOC Moratorium

RECOMMENDATION A: THE REFERENCE COMMITTEE RECOMMENDS THAT RESOLUTION 213 BE AMENDED BY DELETION OF THE THIRD RESOLVED.

Resolved, That the Medical Society of the State of New York call for an immediate end to the high stakes examination components as well as an end to the Quality Initiative (QI)/Practice Improvement (PI) components of MOC; and be it further

Resolved, That the Medical Society of the State of New York call for retention of CME and Professionalism Components (how physicians carry out their responsibilities safely and ethically) of MOC only; and be it further

~~Resolved, That the Medical Society of the State of New York call for a reduction of fees charged to the minimum level necessary (preferably under \$100 per annum); and be it further~~

Resolved, That the Medical Society of the State of New York petition the ABMS for the restoration of certification status for all diplomates who have lost certification status solely because they have not complied with MOC requirements; and be it further

Resolved, that Medical Society of the State of New York bring this matter to our AMA for final resolution of this matter for the benefit of ALL physicians.

RECOMMENDATION B: THE REFERENCE COMMITTEE RECOMMENDS THAT RESOLUTION 213 BE ADOPTED AS AMENDED.

The reference committee heard testimony strongly in favor of the resolution but felt that the specific recommendation regarding fees is too prescriptive to support.

17. Resolution 220 Representation of County Operative Functions at Council

RECOMMENDATION A: THE REFERENCE COMMITTEE RECOMMENDS THAT RESOLUTION 220 BE AMENDED BY DELETION OF THE THIRD RESOLVED.

RESOLVED, that MSSNY grant the County Medical Societies a Federation Representative to voice the unique operational challenges faced by the counties at MSSNY Council; and be it further

RESOLVED, that MSSNY grant the selected Federation Representative a term limit of three years as nominated and chosen by the majority vote cast by the County Executives that partner with MSSNY; and be it further

~~RESOLVED, that MSSNY grant the selected Federation Representative support in the functions needed to gather and effectively represent the partnering county medical societies.~~

RECOMMENDATION B: THE REFERENCE COMMITTEE RECOMMENDS THAT RESOLUTION 220 BE ADOPTED AS AMENDED.

The reference committee heard widespread support for the value of county medical society staffs' ability to bring operational issues to the attention of the MSSNY Council. Because of the lack of specificity surrounding the degree of support being sought from MSSNY it was felt that the resolution should be adopted as amended.

18. Resolution 200 Reconsidering the Need for an Increased Physician Workforce

THE REFERENCE COMMITTEE RECOMMENDS THAT RESOLUTION 200 NOT BE ADOPTED

Resolution 200 asks that MSSNY

1. reassess whether it is really in the best interests of physicians or patients to increase the supply of physicians; and
2. advocate that the AMA also reassess whether it is really in the best interests of physicians or patients to increase the supply of physicians

The reference committee heard testimony that the matter of physician supply has been studied numerous times in recent years, with all results indicating an increasing shortage of physicians. Delegates representing more rural parts of New York State were particularly forceful in their comments asserting a current an ongoing problem with physician supply.

19. Resolution 201 Study of State and National Health Service Corps Needs

THE REFERENCE COMMITTEE RECOMMENDS THAT RESOLUTION 201 NOT BE ADOPTED

Resolution 201 asks that MSSNY

1. study the need for more capacity and use of State and National service programs for health or other public service work such as Job Corps, AmeriCorps, Peace Corps, Senior Corps, National Health Service Corps, Doctors Across NY, loan forgiveness programs and defense service in New York State; and

2. request the American Medical Association to study the need for more capacity and use of the National service programs for health or other public service work such as Job Corps, AmeriCorps, Peace Corps, Senior Corps, National Health Service Corps, Doctors Across NY, loan forgiveness programs and defense service; and
3. that after the completion of public service work such as Job Corps, AmeriCorps, Peace Corps, Senior Corps, National Health Service Corps, Doctors Across NY, the participants would be eligible for meaningful scholarships/benefits/loan forgiveness for further training and education in healthcare, health related infrastructure, and public health.

The reference committee concurred with testimony in favor of increasing capacity and use of state and national service programs, and of directing funding to support participants' education in the health professions through scholarship and loan forgiveness programs. The committee felt it necessary to recommend not adoption because of a belief that the kind of study called for is not in the purview of MSSNY.

20. Resolution 202 Government Monies Paid to Help Train Physicians

THE REFERENCE COMMITTEE RECOMMENDS THAT RESOLUTION 202 NOT BE ADOPTED

Resolution 202 asks that MSSNY

1. advocate and seek legislation for government monies for physician education, to be paid directly to physicians, both in and out of training; and
2. propose and advocate that the AMA support legislation for government monies for physician education to be paid directly to physicians, both in and out of training.

The reference committee heard no testimony on this resolution but felt that issues of payment for teaching physicians are up to the individual to discuss with the academic institution. It was also noted that government funding to teaching hospitals is based on the many responsibilities they hold insofar as administrative and other support of residency training programs.

21. Resolution 203 NYS Licensure and Registration Fees

THE REFERENCE COMMITTEE RECOMMENDS THAT RESOLUTION 203 NOT BE ADOPTED

Resolution 203 asks that that MSSNY explore the feasibility of NYS offering a discount on the registration and licensure fee for physicians who are members of the MSSNY and its component county societies with a report back at the 2020 House of Delegates meeting.

While the reference committee members found the concept of seeking a discount on licensure and registration fees for MSSNY members appealing, it was pointed out that previous efforts to secure special treatment by the State of New York for MSSNY members have failed, because it hasn't been demonstrated that MSSNY members offer a service to the state that would warrant their special treatment. It was also noted that the licensure fee is currently used in part to support the activities of MSSNY's Committee for Physician Health.

22. Resolution 205 Clear Disclosure of Advertisers at the House of Delegates

THE REFERENCE COMMITTEE RECOMMENDS THAT RESOLUTION 205 NOT BE ADOPTED

Resolution 205 asks that MSSNY develop a policy that prior to any presentation by a paid vendor at the House of Delegates, that is, an advertiser, that it be clearly announced to the delegates that the following is a paid advertisement.

There was no testimony on this resolution at the reference committee but noted that such announcements are always clearly stated and that the advertising aspect of such presentations is typically obvious.

23. Resolution 208 Getting JAMA to Support the Interests of Physicians

THE REFERENCE COMMITTEE RECOMMENDS THAT RESOLUTION 208 NOT BE ADOPTED.

Resolution 208 asks that MSSNY take the position and urge that the AMA either modify the orientation of JAMA so that it is clearly supportive of physicians, or start a new national journal that will be, and should take this position.

The reference committee heard only negative testimony on this resolution. Delegates noted that the Journal of the AMA is widely respected because of its editorial independence and basis on science.

24. Resolution 209 Initial Certification of Medical Competence

THE REFERENCE COMMITTEE RECOMMENDS THAT RESOLUTION 209 NOT BE ADOPTED

Resolution 209 asks that MSSNY

1. adopt the position that physicians being credentialed in New York State by hospitals and insurance companies should have initial board certification by a member board of one of the three federally-recognized medical specialty board groupings — the American Board of Medical Specialties (ABMS), the American Osteopathic Association (AOA), or the American Board of Physician Specialties (ABPS), following successful completion of a postgraduate medical education program approved by the Accreditation Council on Graduate Medical Education (ACGME) and
2. adopt the position that Board eligibility is an acceptable alternative in the case of graduates of postgraduate medical education programs approved by the Accreditation Council on Graduate Medical Education (ACGME), provided that the appropriate board certification is achieved within five years of successful completion of such approved postgraduate medical education programs.

The reference committee acknowledges the real concerns of physicians in certain specialties about less qualified individuals claiming expertise in their specialty. Still, the larger issue by more delegates is the increasing power of specialty boards to cripple a physician's ability to practice if their certification requirements are not met.

25. Resolution 212 Notification of Certification of Medical Competence

THE REFERENCE COMMITTEE RECOMMENDS THAT RESOLUTION 212 NOT BE ADOPTED.

Resolution 212 asks that MSSNY advocate the practice of reporting only those board certification(s) a physician currently holds when such information is requested by third parties.

The reference committee heard no testimony on this resolution, and the members felt that the resolved clause was unclear.

26. Resolution: 219 Supporting NYS Medical Students, Residents, Fellows

THE REFERENCE COMMITTEE RECOMMENDS THAT RESOLUTION 219 NOT BE ADOPTED

Resolution 219 asks that MSSNY

1. offer complimentary membership to all New York State residents who are medical students, residents, and fellows studying and/or training in New York State for the duration of their training; and
2. offer complimentary application fee for its Research Poster Symposium to all medical students, residents, and fellows who are MSSNY members.

The reference committee heard testimony about the financial concerns of medical students and residents, but also comments from younger members about the importance of feeling invested in the organization. Membership is currently free for all medical students throughout their medical school years, and free for the first year of membership in the resident category.

The committee was informed that past experience with free membership offers has shown that they do not significantly increase membership.

The poster symposium is a very popular membership activity, with many residents joining MSSNY for a free first year for the opportunity to participate. There are significant costs associated with the poster symposium, and most residency programs cover the cost of participation by their residents as an important educational experience.

Your chair is grateful to the Reference Committee members, namely, Jennifer Congdon, MD, Robert Frankel, MD, Kevin Hastings, DO, and G. Michael Ortiz, MD.

Your Reference Committee wishes to express its appreciation to Philip Schuh, CPA, Garfunkel Wild, PC, and Eunice Skelly for their help in the preparation of this report.

Ernesto Diaz-Ordaz, MD

Jennifer Congdon, MD

Robert Frankel, MD

Kevin Hastings, DO

G. Michael Ortiz, MD