

1                   **ACTIONS TAKEN ON MANDATES OF THE 2016 CONGRESS OF DELEGATES**

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3    **Item #1 Tobacco 21**

4    RESOLVED, that the Indiana Academy of Family Physicians support legislation and initiate  
5    discussions with other stakeholders regarding the increase of the minimum age for legal sales of  
6    tobacco products to 21 years of age.

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8    *Assigned to: Commission on Legislation*

9    *Action taken: Tobacco 21 was included in HB 1578, which also included a cigarette tax increase. The*  
10   *House Ways & Means Committee stripped both from the bill, and it was subsequently not heard in the*  
11   *senate.*

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13   **Item #2 Reducing BAC to 0.05%**

14    RESOLVED, that Indiana Academy of Family Physicians support legislation and initiate discussions  
15    with other stakeholders to prohibit the operation of a vehicle with a BAC of 0.05% or greater.

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17    *Assigned to: Commission on Legislation*

18    *Action taken: This issue was not introduced during the 2017 session.*

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20   **Item #3 Opioid Continuing Medical Education**

21    RESOLVED, that the Indiana Academy of Family Physicians promote mandatory continuing medical  
22    education regarding opioid prescribing for all Indiana prescribing practitioners.

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24    *Assigned to: Board of Directors*

25    *Action taken: It is a longstanding policy of the Academy to oppose legislated CME.*

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27   **Item #4 Recommendation from the Report of the President-Elect**

28    Recommend "that the Indiana Academy of Family Physicians Commission on Education and CME  
29    work to include CME content related to chronic pain management, opioid abuse, and/or treatment of  
30    opioid dependence/addiction at CME events during 2016-2017."

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32    *Assigned to: Commission on Education and CME*

33    *Action taken: Pain management remains a key issue, and was a focus of our legislative update*  
34    *session during the March CME. There was robust discussion about opioid prescribing and reporting on*  
35    *INSPECT, which led to a follow up session at the annual convention, designed to assist members in*  
36    *using INSPECT efficiently and effectively. While not at the level of opioids, there will also be a session*  
37    *on the role nutrition plays in pain management.*

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39   **Item #5 Reproductive Health Care Legislation**

40    RESOLVED, that the Indiana Academy of Family Physicians reaffirm its support of American Academy  
41    of Family Physicians policy which supports a woman's access to a full spectrum of reproductive health  
42    care and opposes non-evidence-based restrictions on medical care and the provision of such services;  
43    and be it further

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45    RESOLVED, that the Indiana Academy of Family Physicians strongly oppose legislative interference in  
46    the patient-physician relationship; and be it further

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48    RESOLVED, that the Indiana Academy of Family Physicians' representatives share with legislators  
49    and the public the implications of non-evidence-based legislative restrictions on medical care and  
50    legislation which interferes with the patient-physician relationship upon the ability of physicians to  
51    provide a full spectrum of reproductive health care.

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2 *Assigned to: Commission on Legislation, Commission on Membership and Communications*  
3 *Action taken: SB 118 "Mandatory Ultrasound Before Abortions" would have extended the time required*  
4 *before an abortion could be performed, which was clearly outside of the medical standard of care. The*  
5 *IAFP worked to oppose the bill. The bill did not advance.*  
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7 **Item #6 Autism Coverage**

8 RESOLVED, that the Indiana Academy of Family Physicians support coverage by policies of accident  
9 and sickness insurance and health maintenance organization contracts of therapies for autism  
10 spectrum disorder; and be it further  
11

12 RESOLVED, that the Indiana Academy of Family Physicians send this resolution to the American  
13 Academy of Family Physicians for implementation; and be it further  
14

15 RESOLVED, that the Indiana Academy of Family Physicians will forward a similar request to the  
16 Indiana State Medical Association.  
17

18 *Assigned to: Commission on Legislation, Commission on Health Care Services*  
19 *Action taken: The resolution was heard by the AAFP Reference Committee on Practice Enhancement.*  
20 *There was discussion about coverage improvements since the implementation of the Affordable Care*  
21 *Act, but the reference committee recognized that there are still gaps in coverage. The resolution was*  
22 *ultimately referred to the Commission on Quality and Practice.*  
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24 **Item #7 Reducing Tobacco Use and Harms Requires Raising Tobacco Tax Rates**

25 RESOLVED, that the Indiana Academy of Family Physicians support legislation to increase Indiana's  
26 cigarette tax rate by at least \$1.00 per pack of 20 and support tax parity on rates on all other tobacco  
27 products; and be it further  
28

29 RESOLVED, that the Indiana Academy of Family Physicians support legislation that dedicates any  
30 new tobacco tax revenues to provide the state tobacco prevention program with a sustainable,  
31 adequate, and reliable funding stream at the levels recommended by the CDC.  
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33 *Assigned to: Commission on Legislation*  
34 *Action taken: A significant tobacco tax increase was included in HB 1578, which also included Tobacco*  
35 *21. The House Ways & Means Committee stripped both from the bill, and it was subsequently not*  
36 *heard in the senate. The tobacco tax was added to the budget at one point but did not end up in the*  
37 *final version. It is likely that there will be another effort to increase the tobacco tax in 2018, but it may*  
38 *be even more difficult to pass as it will not be a budget session.*  
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40 **Item #8 Recommendation from the Report of the Commission on Legislation**

41 Recommend "that it is the recommendation of the reference committee that the board of directors  
42 establish a more efficient decision-making process for times when we need rapid responses to  
43 legislative matters and/or when policy uncertainty exists among the members of the Commission on  
44 Legislation."  
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46 *Assigned to: Board of Directors*

47 *Action taken: The board referenced the 2007 mandate titled "IAFP Positions", which reads:*  
48 *"RECOMMENDED, that the IAFP should grant permission to the COL to formulate IAFP legislative*  
49 *positions for specific bills whenever an immediate position is required. This applies to situations when*  
50 *communication with the President or Executive Committee is not readily available and when IAFP and*  
51 *AAFP policy does not specifically address the issue. Any policy formulated by the COL shall be*  
52 *validated by the Executive Committee or Board of Directors at the next scheduled meeting of such*

1 organization.” This has been the policy which the board and COL have operated under, except when  
2 there was division among the board and/or executive committee, at which time it seemed evident that  
3 the issue in question was not one that IAFFP should vocally support or oppose.