French Lick, IN

July 20, 2019

This report is not policy and it will not become policy until acted upon by the IAFP Congress of Delegates.

Item 1 - Mr. Speaker, your reference committee first considered RESOLUTION 19-01 entitled “Religious Exemptions” on page 84, the resolved portion reading:

RESOLVED, that the American Academy of Family Physicians (AAFP) should not make a statement regarding religion representing all their members, and be it

RESOLVED, that the American Academy of Family Physicians (AAFP) will support allowing religious exemptions to allow the free exercise of religion which will protect conscience and religious freedom rights.

Mr. Speaker, testimony was heard regarding the context of the resolution and associated issues. The committee observed conflicting interpretations over the statement made by the AAFP, and the spirit behind it. It was noted during the Reference Committee’s discussion that there is existing AAFP policy that protects individual physician’s moral and ethical beliefs. After careful review of the referenced AAFP statement, the Committee struggled to identify any statement regarding the religion of all members, and further observed that the AAFP statement seemed to advocate for disenfranchised patients. The Committee would like to note that they reviewed highlights of the proposed changes to non-discrimination regulations in depth.

RECOMMENDATION: The reference committee recommends that Resolution 19-01 be Not Adopted.

Item 2 - Mr. Speaker, your reference committee next considered RESOLUTION 19-02 entitled “Primary Cares Initiative” on page 85, the resolved portion reading:

RESOLVED, that the Indiana Academy of Family Physicians (IAFP) advocates for inclusion of Indiana in the Centers for Medicare and Medicaid Services Primary Cares Initiative, working with the Indiana State Medical Association (ISMA) and the American Academy of Family Physicians (AAFP) where possible.

Mr. Speaker, testimony was heard largely in favor of the resolution, with additional clarification provided.

RECOMMENDATION: The reference committee recommends that Resolution 19-02 be Adopted.

Item 3 - Mr. Speaker, your reference committee next considered RESOLUTION 19-03 entitled “Primary Care Medicaid Doctors and Unannounced Changes” on page 86, the resolved portion reading:

RESOLVED, that the Indiana Academy of Family Physicians (IAFP) dialogue with Family and Social Services Administration (FSSA) in order to streamline the process in order to maintain continuity of care for patients and their primary care physicians, and be it further
RESOLVED, that the Indiana Academy of Family Physicians (IAFP) forward this resolution to the Indiana State Medical Association (ISMA) for likewise implementation.

Mr. Speaker, testimony was heard in favor of this resolution with accompanying suggestions on changes the language. It was thought that the resolution could not stand on its own, so the substitute resolution was created.

RECOMMENDATION: The reference committee recommends that SUBSTITUTE Resolution 19-03 be Adopted:

RESOLVED, that the Indiana Academy of Family Physicians (IAFP) advocate to Indiana Family and Social Services Administration (FSSA) to stop the unnecessary reassignment of patients during brief insurance lapses or common FSSA administrative errors.

Item 4 - Mr. Speaker, your reference committee first considered RESOLUTION 19-04 entitled "Provision of Vaccines" on Page 87 the resolved portion reading:

RESOLVED, that the Indiana Academy of Family Physicians (IAFP) advocate for the provision of vaccinations and coverage for vaccinations for their patients by entities that are in existence maintaining continuity of care in the primary care office, and be it further

RESOLVED, that the Indiana Academy of Family Physicians (IAFP) pass this resolution on to the Indiana State Medical Association for consideration/implementation.

Mr. Speaker, testimony was heard in favor of the resolution. There was discussion about the difficulties physicians face in being able to administer vaccines within their clinics. Many times, this may relate to ability to bill and be reimbursed for the vaccines. It was discussed that there are innovative commercial entities that help to eliminate barriers to accessing vaccines by providing these services within the medical home.

RECOMMENDATION: The reference committee recommends that SUBSTITUTE Resolution 19-04 be Adopted:

RESOLVED, that the Indiana Academy of Family Physicians (IAFP) advocate for policies that support vaccination services within the medical home, including innovative vaccine delivery services.

Item 5 - Mr. Speaker, your reference committee next considered the first recommendation of the Chairman of the Board (page 27). The recommendation reads as follows:

I request that we continue to support financially the Executive Leadership Team to be in attendance at the Ten State meeting and ACLF/NCCL when planning our budget in the future.

Mr. Speaker, testimony was heard in favor of continued attendance to the meetings.

RECOMMENDATION: The reference committee recommends that the first recommendation of the Chairman of the Board be adopted.

Item 6 - Mr. Speaker, your reference committee next considered the second recommendation of the Chairman of the Board (page 27). The recommendation reads as follows:
I ask for an extension of the Task Force looking at the Commission and Committee structure of the IAFP to allow us to look and make recommendations to next year's Congress on the structure and future directions of the current Commissions and Committees of the IAFP.

Mr. Speaker, testimony was heard in favor of taking more time to think about the structure of our existing committees and commissions.

RECOMMENDATION: The reference committee recommends that the second recommendation of the Chairman of the Board be adopted.

Item 7 - Mr. Speaker, your reference committee next considered the first recommendation of the President (page 29). The recommendation reads as follows:

We continue to fight against criminal prosecution of physicians for providing medical care per our existing policies.

Mr. Speaker, testimony was heard that was in support of the recommendation. It was noted by the reference committee that the AAFP has an existing policy that supports the spirit of this recommendation.

RECOMMENDATION: The reference committee recommends that the first RECOMMENDATION of the President be adopted.

Item 8 - Mr. Speaker, your reference committee next considered the second recommendation of the President (page 29). The recommendation reads as follows:

We work together with other medical societies to seek legislation to remove advertising for electronic cigarettes from the airwaves.

Mr. Speaker, testimony was heard in favor, however; it was suggested that the language be changed to include broader media outlets, rather than just the airwaves. The testimony included very important points about regulatory momentum that is moving in this direction, and support for regulation of these products in the same manner as tobacco products.

RECOMMENDATION: The reference committee recommends that the second RECOMMENDATION of the president be adopted.

Item 9 - Mr. Speaker, your reference committee next considered the recommendation of the Speaker (page 38). The recommendation reads as follows:

Recommendation: For all future resolutions and recommendations, starting with the 2019 Congress of Delegates, the IAFP will follow the defined actions related to the following phrases:

- Establish policy – This action will establish a policy of the IAFP expressing its opinion regarding the issue at hand. It does NOT require the IAFP to actively engage in pursuing or supporting this policy.
- Support – This action will establish a policy as defined above and will compel the IAFP to actively support the policy including, but not limited to supporting legislation, sending a letter, or meeting with stakeholders, ONLY if the IAFP is explicitly asked to engage or if the policy debate is initiated by another party.
Advocate – This action will establish a policy as defined above and will compel the IAFP to actively support the policy including, but not limited to seeking/supporting legislation, sending a letter, or meeting with stakeholders.

Seek Legislation – This action will establish a policy as defined above and will compel the IAFP, alone or as a part of a coalition, to actively seek legislation supporting the policy.

Mr. Speaker, testimony was heard in favor of this recommendation. It was suggested that this be added to the instructions of the Congress.

RECOMMENDATION: The reference committee recommends that the RECOMMENDATION of the speaker be adopted.

Item 10 - Mr. Speaker, your reference committee next considered the recommendation of the Commission on Legislation and Government Affairs (page 75). The recommendation reads as follows:

I have one recommendation: That the IAFP approach the IOA regarding a closer legislative relationship going forward as they possess a robust primary care focus.

Mr. Speaker, testimony was heard in favor of this recommendation. It was noted by Dr. Lovins that the Strategic Plan of the IAFP includes this recommendation.

RECOMMENDATION: The reference committee recommends that the RECOMMENDATION of the Commission on Legislation and Government Affairs be adopted.

Item 11 – File for information the following items:

- Report of the Chairman of the Board (except the recommendations) p 27
- Report of the President (except the recommendations) p 29
- Report of the President-Elect p 31
- Report of the AAFP Delegation p 32
- Report of the Speaker of the Congress p 38
- Report of the Nominating Committee p 39
- Report of the IAFP Foundation p 70
- Report of the IAFP Political Action Committee p 71
- Report of the Commission on Education and CME p 72
- Report of the Commission on Health Care Services p 74
- Report of the Commission on Legislation p 75
- Report of the Commission on Membership and Communications p 81
- Report of the Research Day Committee p 83

Mr. Speaker, this concludes the Report of the Reference Committee. I wish to thank those who appeared before the Reference Committee to give testimony.

I would also like to thank Phil Scott, DO; Rebecca Mason, MD; and Cynthia Heckman-Davis, MD, for serving on the committee and assisting with the preparation of this report.

Respectfully Submitted,

Juan Carlos Venis, MD, MPH
Reference Committee Chair