Board of Regents Actions Taken on BOG Resolutions, November 6-7, 2021, Remote Mtg.

Adopted and referred for implementation: (Lines 29 - 122)
3-F20. Readdressing the Issue of Hospital Patient Status
4-F20. Advocating for Coverage of Mental Health Counselor and Marriage and Family Therapist Services under Medicare
10-F20. Seeking Federal Protection for Those that Administer Vaccines
11-F20. Formalizing the Residency Program Closure Process and Preventing Hardships for Trainees
1-F21. Collaborating to Determine Optimal Ways to Incorporate Training in Physician Leadership and Public Policy Advocacy into Internal Medicine Curricula
2-F21. Advocating for Inclusion of Antimicrobial Resistance and Stewardship Education in Medical School Curriculum and Internal Medicine Residency
4-F21. Supporting a Policy to Avoid Conflicts of Interest for Physician Solicitation of Financial Contributions from Patients
6-F21. Facilitating Research and Treatment of Individuals with Post-Acute Covid-19 Syndrome (PACS)
7-F21. Advocating for Pan Asian/Asian American Racial/Ethnicity Data Inclusion and Representation to Promote Health Equity
9-F21. Providing Educational Material to Physicians on the Changes to the “Stark Law” as Announced by CMS in November 2020
12-F21. Providing Support for Lactating Physicians

Adopted as a substitute resolution and referred for implementation: (Lines 124 – 132; 135-159)
5-F21. Addressing Concerns about Private Equity Firms and Their Effect on Medical Care

The Board of Regents approved, as a Consent Calendar, the recommendations regarding the disposition of each of the following 11 resolutions recommended for adoption at the Fall 2021 Board of Governors Virtual Meeting:

BOG Recommends for Adoption/Implementation:

4-F21. Supporting a Policy to Avoid Conflicts of Interest for Physician Solicitation of Financial Contributions from Patients
(RRC Referral Recommendation: Ethics, Professionalism, and Human Rights Committee [EPHRC])

RESOLVED, that the Board of Regents support the creation of a policy, and more detailed guidance in the ACP Ethics Manual, regarding physician involvement in fundraising from patients, which limits any real or perceived conflict of interest with patient care including, but not limited to a) prohibiting physician financial incentives and b) ensuring that physician participation is voluntary and without repercussions.

7-F21. Advocating for Pan Asian/Asian American Racial/Ethnicity Data Inclusion and Representation to Promote Health Equity
(RRC Referral Recommendation: Health and Public Policy Committee [HPPC])

RESOLVED, that the Board of Regents advocates, in collaboration with other stakeholders (including but not limited to the National Academies of Science, Engineering, and Medicine [NASEM], and other organized medicine societies), for the collection and inclusion of the Pan
Asian/Asian American communities’ disaggregated racial/ethnic data in health systems, health
surveys, public health and medical studies, whenever such surveys and studies provide data on
other communities of color. This advocacy can also include requests for major funders of
scientific studies to set standards for data collection ensuring inclusion of Pan Asian/Asian
American communities’ disaggregated racial/ethnic data.

BOG Recommendations for Adoption/Implementation with Amendments:

3-F20. Readdressing the Issue of Hospital Patient Status
(RRC Referral Recommendation: Medical Practice and Quality Committee [MPQC] with input
from Clinical Policy staff on the 2nd resolved clause)
RESOLVED, that the Board of Regents advocates for support of decreased complexity of
inpatient and observation status, and recommends a transparent, consistent reimbursement
of appropriate care; and be it further
RESOLVED, that the Board of Regents advocates for the development of clinical standards for
assigning inpatient and observation status that are based on best available evidence.

4-F20. Advocating for Coverage of Mental Health Counselor and Marriage and Family Therapist Services under Medicare
(RRC Referral Recommendation: MPQC)
RESOLVED, that the Board of Regents advocates for the passage of federal regulation and/or
legislation to mandate Medicare coverage of licensed mental health counselor and marriage
and family therapist services.

10-F20. Seeking Federal Protection for Those that Administer Vaccines
(RRC Referral Recommendation: HPPC)
RESOLVED, that the Board of Regents work with other medical, non-physician clinician, and
public health organizations to seek federal protection for physicians, other clinicians, public
health professionals, and associated team members who educate on, administer or distribute
vaccines, which includes but is not limited to seeking similar legislation to the Freedom of
Access to Clinic Entrances Act for vaccine providers.

11-F20. Formalizing the Residency Program Closure Process and Preventing Hardships for Trainees
(RRC Referral Recommendation: Education Committee [EC] with input from Health Policy staff)
RESOLVED, that the Board of Regents work with the ACGME, CMS, and other relevant
stakeholders to create a formal and transparent residency program closure process,
delineating a hospital’s responsibility to prevent hardships for trainees including, but not
limited to, a reasonable amount of notice to trainees, attempts to relocate trainees prior to
closure, allowing trainees to start work at their accepting institution at a reasonable time
before the day of closing, and assistance in filing for visa extensions.

2-F21. Advocating for Inclusion of Antimicrobial Resistance and Stewardship Education in Medical
School Curriculum and Internal Medicine Residency
(RRC Referral Recommendation: EC)
RESOLVED, that the Board of Regents collaborate with the Association of American Medical Colleges, the American Association of Colleges of Osteopathic Medicine, the Liaison Committee on Medical Education, the Accreditation Council for Graduate Medical Education, the Infectious Diseases Society of America, American College of Clinical Pharmacy, and other pertinent stakeholders, to continue to promote and advocate for education on antimicrobial resistance and stewardship as an enhanced component of the curriculum for medical students and internal medicine residents.

6-F21. Facilitating Research and Treatment of Individuals with Post-Acute Covid-19 Syndrome (PACS)
(RRC Referral Recommendation: Division of Governmental Affairs and Public Policy [DGAPP] staff)
RESOLVED, that the Board of Regents take the following actions to facilitate research and treatment of individuals with Post-Acute Covid-19 Syndrome (PACS):

1. Commend the NIH on its plan to fund comprehensive and coordinated basic research into the prolonged health consequences of SARS-CoV-2 infection, and strongly encourage the NIH to proceed as fast as is considered scientifically appropriate with the funding of well-designed treatment trials, including community-based sites, in light of the anticipated widespread amount of human suffering expected from this condition.

9-F21. Providing Educational Material to Physicians on the Changes to the “Stark Law” as Announced by CMS in November 2020
(RRC Referral Recommendation: DGAPP staff with input from EC staff)
RESOLVED, that the Board of Regents prepare educational material for ACP members which explain the changes in the Stark Law, as well as to provide examples of how these changes may enable ACP members to increase quality and comprehensiveness of care.

12-F21. Providing Support for Lactating Physicians
(RRC Referral Recommendation: HPPC)
RESOLVED, that the Board of Regents develop a position statement that highlights the importance of supporting physicians in achieving their breastfeeding goals, including encouraging hospitals and clinics to develop policies that provide private lactation spaces in close proximity of workspaces and equipped with a phone and computer to address productivity goals, and to offer physicians protected time for lactation without affecting income.

BOG Recommends for Adoption/Implementation as a Substitute Resolution:

1-F21. Collaborating to Determine Optimal Ways to Incorporate Training in Physician Leadership and Public Policy Advocacy into Internal Medicine Curricula
(RRC Referral Recommendation: Council of Resident and Fellow Members [CRFM] with input from HPPC and EC)
RESOLVED, that ACP collaborate with the Alliance for Academic Internal Medicine and the Association of Program Directors in Internal Medicine to determine optimal ways to incorporate training in physician leadership and public policy advocacy into internal medicine curricula and that ACP uses its expertise to assist in developing this advocacy curriculum.
BOG Resolutions extracted from the Consent Calendar:

The Board of Regents extracted Resolution 5-F21 to discuss. Following discussion, the Board of Regents VOTED: to approve the below substitute resolution and recommends referring to the HPPC for implementation with input from Chapters Subcommittee.

5-F21. Addressing Concerns about Private Equity Firms and Their Effect on Medical Care

RESOLVED, that the Board of Regents work actively on developing specific policies for encouraging the collection of data on the scope of private equity group purchases of medical entities, including but not limited to:

1. Contacting other relevant medical organizations such as the American Medical Association and the American Academy of Family Physicians regarding ways to work together to encourage collection of relevant data.

2. Asking national ACP to contact the membership using a methodology developed by national ACP to better understand how the purchase of medical practices and organizations by private equity groups affects our members, patient care, and healthcare access, equity and costs.

Rationale:
At their November 6, 2021 meeting, the Board of Regents (BOR) voted to amend Resolution 5-F21 and refer it to HPPC for implementation with input from Chapters Subcommittee. The BOR reviewed the Health and Public Policy Committee’s policy around the financial motive in medicine and encroachment of private equity firms and their subsequent effect on medical care. The BOR changed the collection of data from chapters to national ACP citing uneven resources among Chapter to address the resolution which could result in skewed data.