Board of Regents Actions Taken on BOG Resolutions, November 7-8, 2020, Remote Meetings

Adopted and referred for implementation: (Lines 166-182; 34-57; 184-190; and 59-163)

3-S19. Allowing Patients Covered under Federal Health Insurance Programs to be Able to Use Prescription Drug Coupons and Co-pay Cards

4-S19. Developing Policy on Provisions of Inducements that Encourage Utilization of Allied Healthcare Services and Practitioners without Exception

7-S19. Enhancing the Ability for Clinicians to Provide Advance Care Planning Services to Medicare Beneficiaries by Removing Cost Burdens

3-F19. Recommending the Initial Referral Appointment with an Internal Medicine Subspecialist Be Conducted by a Physician

4-F19. Ensuring that ACP Guidelines Incorporate the Potential Adverse Effects of Polypharmacy

10-F19. Optimizing Data Coming from Pharmacy Benefit Manager Systems to Improve Drug Pricing Transparency

1-F20. Advocating for Visitation and Support of Hospitalized Individuals with Intellectual and Developmental Disabilities or a Physician Defined Need

2-F20. Studying the Impact of the SARS-CoV-2 Pandemic and Developing Policy to Insure Safe Operation of Post-Acute Care Services, Long-term Care and Residential Facilities during Healthcare Emergencies

6-F20. Creating a Multi-Partisan Commission to Examine the U.S. Preparations for and Response to the COVID-19 Pandemic to Inform Future Efforts

7-F20. Promoting Policy Standards for Workplace Violence Prevention and Management

8-F20. Studying the Impact of and Advocating for Assistance with the Public Service Loan Forgiveness Program

9-F20. Developing Public Policies to Protect All Essential Workers during Public Health Crises

12-F20. Supporting the Mental Health of Medical Students

Adopted as a reaffirmation: (Lines 192-203)

5-F20. Defining Physician Practice Styles in ACP Policy

13-F20. Updating ACP Policy to Define Ownership of Patient Medical Records

The Board of Regents

VOTED: to approve, as a Consent Calendar, the recommendations regarding the disposition of each of the 15 resolutions adopted at the Fall 2020 Board of Governors Virtual Meeting:

BOG Recommendations for Adoption/Implementation with Amendments:

7-S19. Enhancing the Ability for Clinicians to Provide Advance Care Planning Services to Medicare Beneficiaries by Removing Cost Burdens

(RRC referral recommendation: Coding and Payment Policy Subcommittee (CPPS) with input as needed from Medical Practice and Quality Committee [MPQC])

RESOLVED, that the Board of Regents strongly advocates for CMS and other insurers to entirely remove any cost-sharing requirement for codes 99497 and 99498.

3-F19. Recommending the Initial Referral Appointment with an Internal Medicine Subspecialist Be Conducted by a Physician

(RRC referral recommendation: Council of Subspecialty Societies [CSS] with input from MPQC)
RESOLVED, that the Board of Regents work collaboratively through the CSS and existing relationships with member societies that, when requested by the referring physician and other than in circumstances where it would result in significant delays in care adversely impacting patient outcomes, the initial referral encounters with internal medicine subspecialty consultants be conducted by a physician, rather than by an advanced practice practitioner.

**4-F19. Ensuring that ACP Guidelines Incorporate the Potential Adverse Effects of Polypharmacy**  
(RRC referral recommendation: Clinical Guidelines Committee)

RESOLVED, that the Board of Regents advocates for and works with stakeholders and guideline developers to ensure that ACP treatment guidelines incorporate the potential adverse effects of polypharmacy and reduce the burden of medication overload.

**1-F20. Advocating for Visitation and Support of Hospitalized Individuals with Intellectual and Developmental Disabilities or a Physician Defined Need**  
(RRC referral recommendation: Ethics, Professionalism, and Human Rights Committee [EPHRC] with input from Health and Public Policy Committee [HPPC])

RESOLVED, that the Board of Regents advocates that hospitals/health care systems revise their “No Visitors” policy to allow persons with cognitive or intellectual deficits and/or developmental disabilities or a physician defined need to have a designated support person while in their institution.

**2-F20. Studying the Impact of the SARS-CoV-2 Pandemic and Developing Policy to Insure Safe Operation of Post-Acute Care Services, Long-term Care and Residential Facilities during Healthcare Emergencies**  
(RRC referral recommendation: HPPC)

RESOLVED, that the Board of Regents reviews the impact of SARS-CoV-2 pandemic on post-acute care services, long-term care and residential facilities to better understand the emergency needs of such care (including managing gaps in staffing and resources) when responding to natural disasters and public health emergencies; and be it further

RESOLVED, that the Board of Regents collaborates with other stakeholders in using this evidence to develop policy and guidance for public health authorities to ensure safe operation of post-acute care services, long-term care, and residential facilities during public health emergencies and natural disasters, with policy recommendations to include but not be limited to:

a) Planning for adequate funding and access to resources  
b) Planning for emergency staffing of health care and maintenance personnel  
c) Planning for ensuring safe working conditions of staff  
d) Planning for mitigation of the detrimental effects of increased isolation of residents during emergencies or pandemic or something similar

**6-F20. Creating a Multi-Partisan Commission to Examine the U.S. Preparations for and Response to the COVID-19 Pandemic to Inform Future Efforts**  
(RRC referral recommendation: HPPC [1st clause] and the AMA Delegation [2nd clause])
RESOLVED, that the Board of Regents work with other appropriate organizations to advocate for the creation of a multi-partisan commission composed of scientists, public health experts, legislators and other stakeholders to examine the U.S. preparations for and response to the COVID-19 pandemic, in order to inform future public policy and health systems preparedness; and be it further

RESOLVED, that the Board of Regents bring forth a resolution requesting that our AMA advocate for the creation of a multi-partisan commission composed of scientists, public health experts, legislators and other stakeholders to examine the U.S. preparations for and response to the COVID-19 pandemic, in order to inform future public policy and health systems preparedness.

7-F20. Promoting Policy Standards for Workplace Violence Prevention and Management
(RRC referral recommendation: HPPC with input from EPHRC)

RESOLVED, that the Board of Regents creates policy to support healthcare workers by promoting the development of clear institutional procedures to promote workplace safety and prevent and address workplace violence, including physical and verbal violence, sexual harassment, racism, and other forms of discrimination; and be it further

RESOLVED, that such a policy recognizes the need for interprofessional collaboration and the input from disciplines with expertise in workplace violence prevention in order to support reduction of workplace violence to ensure a safe and supportive workplace for all.

8-F20. Studying the Impact of and Advocating for Assistance with the Public Service Loan Forgiveness Program
(RRC referral recommendation: HPPC [1st & 2nd clauses] and Education Committee [3rd clause])

RESOLVED, that the Board of Regents study the impact of the Department of Education (DOE) Public Service Loan Forgiveness Program on all physicians and physicians-in-training with a current or rejected application in this program; and be it further

RESOLVED, that the Board of Regents partner with other relevant stakeholders to advocate on behalf of physician trainees and physicians who have active applications in the DOE Public Service Loan Forgiveness Program by directly interfacing with the DOE to ensure improvements in the transparency and simplification of the approval process, and development of a fair appeals process for rejected applications; and be it further

RESOLVED, that the Board of Regents work to create resources for students, trainees, and physicians that educate them in the important details and pitfalls of the application process for the DOE Public Service Loan Forgiveness program.

9-F20. Developing Public Policies to Protect All Essential Workers during Public Health Crises
(RRC referral recommendation: HPPC with input from the EPHRC)

RESOLVED, that the Board of Regents develop public policies to protect all essential workers during public health crises, with a focus on marginalized and at risk populations to mitigate adverse outcomes; and be it further
RESOLVED, that the Board of Regents issue a policy supporting the creation of workplace protections for all essential workers during public health crises, to help ensure adequate protective equipment and physical distancing in every aspect affecting occupational health including communal housing and close quarters in the workplace.

12-F20. Supporting the Mental Health of Medical Students
(RRC referral recommendation: Education Committee with input from the EPHRC on the 1st and 3rd clauses)

RESOLVED, that the Board of Regents advocates for medical student access to free, confidential, and easily available non-punitive mental and behavioral health and substance use disorder services; and be it further

RESOLVED, that the Board of Regents advocates for the education of medical students in the recognition of the signs and symptoms of burnout, mental and behavioral health conditions, and substance use disorders; and be it further

RESOLVED, that the Board of Regents study the opportunity to collaborate with other stakeholders including the American Medical Association and Association of American Medical Colleges to study the incidence of and risk and protective factors for depression and suicide among physicians, residents, and medical students.

BOG Recommendations for Adoption/Implementation as a Substitute Resolution:

3-S19. Allowing Patients Covered under Federal Health Insurance Programs to be Able to Use Prescription Drug Coupons and Co-pay Cards
(RRC referral recommendation: MPQC)

RESOLVED, that the Board of Regents work collaboratively through the CSS and existing relationships with member societies that, when requested by the referring physician and other than in circumstances where it would result in significant delays in care adversely impacting patient outcomes, the initial referral encounters with internal medicine subspecialty consultants be conducted by a physician, rather than by an advanced practice practitioner.

4-S19. Developing Policy on Provisions of Inducements that Encourage Utilization of Allied Healthcare Services and Practitioners without Exception
(RRC referral recommendation: MPQC)

RESOLVED, that the Board of Regents will develop policy on provisions of inducements by all individuals and entities that encourage utilization of their allied healthcare services and/or healthcare practitioners, without exceptions.

10-F19. Optimizing Data Coming from Pharmacy Benefit Manager Systems to Improve Drug Pricing Transparency
(RRC referral recommendation: MPQC with input from the Medical Informatics Committee [MIC])
RESOLVED, that the Board of Regents advocate for Pharmacy Benefit Managers to offer patient-specific drug pricing transparency at the point of care, preferably through incorporation into EHR systems.

BOG Recommendations for Reaffirmation:

5-F20. Defining Physician Practice Styles in ACP Policy

RESOLVED, that the Board of Regents will officially define as policy the various types of physician practice styles that include but are not limited to primary care physician and hospitalist.

13-F20. Updating ACP Policy to Define Ownership of Patient Medical Records

RESOLVED, that the Board of Regents update policy to reflect that the patient medical record is created and owned by the physician, but patients are only allowed to have a copy of those records.