



## Status Report on the Actions of the 2014 House of Delegates

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Resolutions Referred to the Board of Governors are noted with an \*

**Resolution 14-101**  
**Petitioning for Florida Administrative Code**  
**To Update the Patient Notification and Medical Record Retention Rules**  
Collier County Medical Society

House Action: Adopted as amended.

Status: Pending.

*RESOLVED, That the Florida Medical Association petition the Florida Department of Health and Board of Medicine to revise Florida Administrative Code rule 64B8-10.003 in order to remove the potential burden from physicians who are not records owners or records custodians who leave for any reason; and further update the patient notification requirements to include a method more likely to be seen by today's patients.*

**\* Resolution 14-102**  
**Electronic Prescribing Accuracy Fix**  
Lee County Medical Society; Ray Kordonowy, M.D., Delegate

House Action: Referred to the FMA Board of Governors

Board Referral: Council on Medical Services & HC Delivery Innovation

Board Action: The Board approved recommendation to not adopt this resolution. The directives are unclear and unnecessary and the Board supports monitoring for issues related to e-prescribing and updating the Board as needed

*RESOLVED, That the FMA bring this glaring root cause error source for present prescribing habits to the attention of the physicians; and be it further*

*RESOLVED, That the FMA seek a seamless solution be built into the current procedures for electronic prescribing by initiating a productive dialogue with Surescripts and other involved vendors; and be it further*

*RESOLVED, That the FMA hold the industry to a specific timeline/deadline to resolving this very important issue; and be it further*

*RESOLVED, That the solution arrived at is tested and validated as effective in functioning to the stated goal of automatic notification of prescription discontinuation to the pharmacy on record for an individual patient's chart; and be it further*

*RESOLVED, That there be a documentation trail to be discoverable for such changes made, documented and signed in the patient's electronic medical record. This documentation trail should be evident to the prescriber, the software vendor and the pharmacy on record.*

**Resolution 14-103**  
**CPR Training**  
South Florida Caucus

House Action: Adopted.

Status:

1. Included as part of the FMA's 2015 legislative agenda;
2. AMA Delegation submitted resolution for consideration during AMA Interim Mtg. 2014 – Policy H-130.938 adopted in lieu of Res I-211: *RESOLVED, That our American Medical Association support legislation that would encourage high school students be trained in cardiopulmonary resuscitation.*
3. Updated FMA policy compendium P 445.019 School Health.

*RESOLVED, That the Florida Medical Association (FMA) in conjunction with the AMA support legislation to request high school students be properly trained in CPR.*

**\*Resolution 14-104**  
**Disruptive Physicians**  
Broward County Medical Society; Palm Beach County Medical Society

\* House Action: Referred to the FMA Board of Governors.

Board Action: The Board received testimony by Dr. Chandran on behalf of resolution author, Dr. Arthur Palamara. The Chair of the Board of Medicine invited the FMA to give a presentation with recommendations on appropriate language and the matter was scheduled for presentation at the Board of Medicine's Rules Legislative Committee.

*RESOLVED, That the Florida Medical Association request that the Florida Board of Medicine convene a committee to examine these issues and make recommendations to the Board of Medicine for implementation of policy that will remediate "disruptive" or "distressed" physician behavior.*

**Resolution 14-105**  
**Medical School Debt**  
South Florida Caucus

House Action: Adopted as amended.

Status: Included as part of the FMA's 2015 Legislative Agenda; [click here](#)

*RESOLVED, That the FMA in conjunction with the medical schools and residency programs, petition the legislature to fund a Loan Forgiveness program such as the Medical Education Reimbursement and Loan Repayment Program established in Florida Statutes section 1009.65 for physicians practicing in underserved specialties or geographic locations in Florida.*

**\*Resolution 14-106**  
**Medical Workforce Statistics**  
South Florida Caucus

House Action: Referred to the Board of Governors for study.

Board Action:

1. Board of Governors approved providing FMA members the 2013 and 2014 Physician Workforce Annual Reports and additional related studies and analysis to all FMA members and further provide the same information to the 2015 House of Delegates.
2. DOH Workforce Reports and an analysis of each was provided to FMA members via FMA News. Reports can be accessed by clicking [here](#).
3. Click [here](#) for analysis of the 2014 survey  
Click [here](#) for analysis of 2013 survey.

*RESOLVED, That the FMA in conjunction with the Department of Health analyze and report the medical manpower for the state of Florida including medical and surgical subspecialties at the 2015 FMA Annual Meeting.*

**Resolution 14-107**

**Reduced Pharmacy and Patient Access to Opioid Analgesics**

Florida Society Of Interventional Pain Physicians, Florida Academy of Pain Medicine, Florida Society of Physical Medicine And Rehabilitation, Broward County Medical Association

House Action: Adopted as amended.

Status:

FMA President appointed a working group; 10-01-14 the FMA facilitated a conference call and participants included pain associations, pharmacy groups, DEA and a full report was presented to the Board in October, 2014 and February, 2015. The appropriate groups participated on a conference call for the purpose of discussing possible solutions to the issues of perceived medication shortages and unnecessary patient suffering. Groups represented on the call were the FMA, AMA, Florida Society of Physical Medicine & Rehabilitation, Florida Society of Interventional Pain Physicians, Florida Academy of Pain Medicine, Florida Retail Federation, Pharmacy Associations, Drug Enforcement Agency, Florida Attorney General's Office and the Florida Department of Health. All involved agreed the next step should be a face-to-face meeting in an effort to work out an agreement to help preserve access to these medications. The committee asked for continued FMA support in facilitating a dialogue in Tallahassee with all parties.

*RESOLVED, That our Florida Medical Association clarify the extent of pharmacy entitlement to protected health information for purposes of dispensation of controlled substances; and be it further*

*RESOLVED, That our FMA endeavor to meet with authoritative representation of the DEA, the Pharmacy Associations (including Board of Pharmacy and independent pharmacy associations), the pain societies in Florida and other relevant organizations, in an attempt to resolve the issues of perceived medication shortages and unnecessary patient suffering; and be it further*

*RESOLVED, That the FMA write a letter to the Director of the DEA requesting the specific limitations which they impose upon pharmacy dispensing of controlled substances and modify current policy to improve access to these medications for patients with pain.*

### **Resolution 14-108**

#### **Prohibiting Minors from Indoor Tanning**

Florida Society of Clinical Oncology, Florida Chapter American College of Physicians,  
Florida Society of Dermatology and Dermatologic Surgery,  
Florida Chapter American Academy of Pediatrics,  
Hillsborough County Medical Association, Alachua County Medical Society

House Action: Adopted.

Status: Included as part of the FMA's 2015 legislative agenda [click here](#) ; Updated FMA policy compendium P 90.020 Children & Health

*RESOLVED, That the Florida Medical Association (FMA) support current and future legislative efforts to ban the use of indoor tanning amongst minors (under the age of 18); and be it further;*

*RESOLVED, That FMA leadership work with the Council for Healthy Floridians to develop prevention and youth awareness campaigns on the risks of deadly skin cancers.*

### **Resolution 14-109**

#### **FL DOH HPV Vaccination Public Awareness Campaign**

American Congress of Obstetricians and Gynecologists, District XII

House Action: Adopted as Amended.

Status: Updated FMA policy compendium P 485.008 Vaccinations (1st resolve only); further action is pending.

*RESOLVED, That the Florida Medical Association (FMA) provide staff and necessary resources to appropriately advocate as its official public health position that eligible adolescents be vaccinated against HPV as early as 9 but prior to age 26, and be it further*

*RESOLVED, That the FMA champion an effort with the Florida Department of Health to conduct a statewide public education/awareness and vaccination program with the goal of prevention and reduction of HPV transmission in the next three years.*

### **\*Resolution 14-110**

#### **Physician Orders for Life Sustaining Treatment (POLST)**

Diane Gowski, M.D., Delegate

House Action: Referred to the FMA Board of Governors.

Board Action:

1. October, 2014. Resolution was presented to the Board by its author, Diane Gowski, M.D. The Board approved the second resolve and established an Ad Hoc Committee to study Physician Orders for Life Sustaining Treatment (POLST) (as well as the Texas Advanced Directives Act) and determine the applicability of each in Florida.
2. April and May, 2015. Committee met by conference call and in-person.
3. May, 2015. The Board approved recommendation to not adopt the first resolved in 14-110. The Board approved reaffirming as amended FMA Policy P 160.010 Physicians Orders for Life Sustaining Treatment as follows: The Florida Medical Association supports a form entitled "Physicians Orders for Life-Sustaining Treatment" for voluntary statewide use in patients with advanced life limiting illnesses to allow for only an MD or DO signature and requires informed consent of the patient or the legal surrogate.

*RESOLVED, That the Florida Medical Association repeal its current POLST policy statement; and be it further*

*RESOLVED, That the Florida Medical Association board form a committee to study “POLST” for detailed analysis to include input from Palliative Care, Geriatric and Critical Care Medicine physicians and interested FMA members.*

**Resolution 14-112**  
**Natural Gas Fracking: Monitoring To Protect Human Health**  
Duval County Medical Society, Orange County Medical Society

House Action: Adopted as amended.

Status:

1. Updated FMA Policy Compendium 420.038 Public Health
2. AMA Delegation submitted resolution to the AMA 2015 House of Delegations. AMA House adopted Substitute Resolution 508 in lieu of original resolution: *RESOLVED, That our American Medical Association support the full disclosure of chemicals placed into the natural environment during the petroleum, oil and natural gas exploration and extraction process (New HOD Policy); and be it further RESOLVED, That our AMA support the requirement that government agencies record and monitor the chemicals placed into the natural environment for petroleum oil and natural gas extraction and the chemicals found in flowback fluids, to monitor for human exposures in well water and surface water, and to share this information with physicians and the public. (New HOD Policy)*

*RESOLVED, That the FMA favor legislation that requires the full disclosure of chemicals placed into the natural environment for oil & gas extraction, including disclosure of the specific chemicals and wastewater injected, quantities, & locations; and be it further*

*RESOLVED, That the FMA favor legislation that requires the State of Florida to record and monitor this data, to monitor for human exposures, and to share this information with physicians & Floridians; and be it further*

*RESOLVED, That the FMA favor legislation that supports research into the health impacts of oil and gas exploration and extraction in Florida; and be it further*

*RESOLVED, That the FMA favor measures to educate physicians and the public concerning the potential health and environmental effects resulting from oil and gas extraction.*

**Resolution 14-113**  
**A Pilot Program to Encourage Expansion of Postgraduate Training Programs  
in Community Hospitals**  
David E. Winchester, M.D., Delegate,  
Alachua County Medical Society, Florida Chapter American College of Cardiology

House Action: Adopted as amended.

Status: Pending.

*RESOLVED, That the FMA develop a 5 year pilot program where hospitals with successful postgraduate training programs, both academic and non-academic, are partnered with facilities without training programs to identify barriers and develop new postgraduate training programs with regular reports on progress back to the House of Delegates.*

**Resolution 14-114**  
**Clarification of Religious Exemption to Vaccination Requirements**  
Peter Swain, M.D., Delegate

House Action: Adopted as amended.

Status: Updated FMA policy compendium (1st resolve only) P 485.009 Vaccines; further action on this item is pending.

*RESOLVED, That the FMA will work with the Florida Department of Health to protect the health of all residents by requiring parents requesting a religious exemption for their children to not be vaccinated, to state why their religion is opposed to vaccination, and have their religious leader or by way of religious text validate the claim against vaccination and be it further*

*RESOLVED, That the FMA will thus protect the religious exemption for persons with doctrinal prohibitions from vaccination, and protect the health of vulnerable citizens of Florida against vaccine preventable disease, but preventing erosion of vaccination rates below herd immunity thresholds; and be it further*

*RESOLVED, That if the FMA is unsuccessful in making an administrative fix with the Florida Department of Health, the FMA will begin efforts to clarify and validate legitimate religious exemptions from vaccination, and protect the health of Floridians from vaccine preventable diseases.*

**Resolution 14-201**  
**Combating the Medical Certification and its Attempt to Capture  
Into Unproven Certification Programs with its Regulations**  
South Florida Caucus

House Action: Adopted Amended Substitute Resolution 14-201 in lieu of original 14-201, 14-202, 14-203 and 14-204.

Status: AMA Delegation submitted resolution for consideration at AMA Interim Mtg. 2014; [AMA Res.920 Combating the Medical Certification and its Attempted to Capture Into Unproven Certification Programs with its Regulations](#) SUBSTITUTE RESOLUTION 920 ADOPTED IN LIEU OF RESOLUTIONS 926, 928 AND 929 PROPOSED AMENDMENT TO POLICY H-275.924 REFERRED See Policies H-275.924 and D-275.960. RESOLVED, that our American Medical Association amend the Policy H-275.924, Principles on Maintenance of Certification (MOC), to include the following: 11. MOC should be based on evidence and designed to identify performance gaps and unmet needs, providing direction and guidance for improvement in physician performance and delivery of care. 12. The MOC process should be evaluated periodically to measure physician satisfaction, knowledge uptake and intent to maintain or change practice. 13. MOC should be used as a tool for continuous improvement. 14. The MOC program should not be a mandated requirement for licensure, credentialing, reimbursement, network participation, or employment. 15. Actively practicing physicians should be well-represented on specialty boards developing MOC. 16. MOC activities and measurement should be relevant to clinical practice. 17. The MOC process should not be cost prohibitive or present barriers to patient care. RESOLVED, That our AMA encourage specialty boards to investigate and/or establish alternative approaches for MOC; and be it further RESOLVED, That our AMA prepare a yearly report regarding the maintenance of certification process; and be it further RESOLVED, That our AMA work with the American Board of Medical Specialties to eliminate practice performance assessment modules, as currently written, from the requirement of MOC. [Proposed amendment to Policy H-275.924 referred] Specialty boards, which develop MOC standards, may approve curriculum, but should be independent from entities designing and delivering that curriculum, and should have no financial interest in the process.

*RESOLVED, That the FMA acknowledges that the certification requirements within the MOC process are costly, time-sensitive, and result in significant disruptions for the availability of physicians for patient care, and therefore, the current MOC programs should be modified; and be it further*

*RESOLVED, That the FMA opposes any efforts to require Maintenance of Certification (MOC) program as a condition of medical licensure, or as a pre-requisite for hospital/staff privileges, employment in State of Florida/county medical facilities, reimbursement from 3<sup>rd</sup> parties, or issuance of malpractice insurance; and be it further*

*RESOLVED, That the FMA advocates that the lack of specialty board recertification should not restrict the ability of the physician to practice medicine in Florida; and be it further*

*RESOLVED, That the FMA monitor the American Health Legal Foundation who is seeking legislation to prevent hospital staffs and insurance companies from refusing to credential physicians who do not participate in the MOC program; and be it further*

*RESOLVED, That a copy of this resolution be transmitted to the AMA House of Delegates; and be it further*

*RESOLVED, That the FMA produce a yearly report to the FMA House of Delegates regarding the activity and progress in the Maintenance of Certification process, and be it further*

*RESOLVED, That the FMA Delegation to the AMA request a yearly report regarding the Maintenance of Certification process.*

**Resolution 14-202**  
**The Maintenance of Certification Programs are a Serious Problem**  
Duval County Medical Society

House Action: Adopted Amended Substitute Resolution 14-201 in lieu of original 14-201, 14-202, 14-203 and 14-204.

Status: [Refer to Resolution 14-201.](#)

**Resolution 14-203**  
**Recertification/Maintenance of Certification**  
Escambia County Medical Society

House Action: Adopted Amended Substitute Resolution 14-201 in lieu of original 14-201, 14-202, 14-203 and 14-204.

Status: [Refer to Resolution 14-201.](#)

**Resolution 14-204**  
**Maintenance of Certification**  
FL Chapter, American College of Physicians, FL Chapter, American College of Cardiology,  
Florida Society of Clinical Oncology, Florida Society of Rheumatology, Charlotte County  
Medical Society, Pinellas County Medical Association, The Bays Medical Society,  
Indian River County Medical Society, Broward County Medical Association

House Action: Adopted Amended Substitute Resolution 14-201 in lieu of original 14-201, 14-202, 14-203 and 14-204.

Status: [Refer to Resolution 14-201.](#)

**Resolution 14-205**  
**Veterans Administration Patients Access to Care**  
Florida Chapter, American College of Cardiology

House Action: Adopted

Status:

1. October, 2014. Ad Hoc committee appointed.

2. February, 2015. The committee reported that they discussed a number of ideas on how best to approach this issue including implementing a delivery system that would offer full access to all care to all veterans in Florida. The committee believes this issue needs continued monitoring and more data needs to be collected to see if the VA system is working to self-correct the issue of access to care by veterans in Florida.
3. May, 2015. The committee reviewed and outlined the parameters that exist and said that the FMA is limited in how we can assist but we can help make the physician community aware that they can sign up with their local VA Center and be included in the choice network list.

*RESOLVED, That the Florida Medical Association (FMA) President and/or Board of Directors immediately establish an ad hoc committee as an emergency measure to effectively discuss solutions to this VA HEALTHCARE CRISIS; and be it further*

*RESOLVED, That his ad hoc committee will seek widespread participation from all relevant stakeholders including, but not limited to, representative VA officials, VA physicians, VA patient representatives, elected officials or their designees, and other individuals or representatives assigned by the FMA; and be it further*

*RESOLVED, That this ad hoc committee will work toward immediate solutions to this VA healthcare crisis.*

**Resolution 14-206**  
**Specialty Society Section Resolutions at Annual Meeting**  
Specialty Society Section

House Action: Adopted.

Status: Objective accomplished.

*RESOLVED, That the Specialty Society Section be retained in its current form with the ability to submit timely resolutions during its meeting held in conjunction with the Florida Medical Association Annual Meeting directly to the House of Delegates.*

**Resolution 14-207**  
**Composition of FMA Committee on Bylaws**  
Specialty Society Section

House Action: Adopted Substitute Resolution 14-207.

Status: Appointments made – consists of officers and non-officers.

*RESOLVED, The composition of the FMA Committee on Bylaws be comprised of officers and non-officers of the FMA.*

**Resolution 14-301**  
**Oppose Constitutional Amendment to Legalize Marijuana for Medical Conditions**  
Brevard County Medical Society

House Action: Adopted.

Status: Updated FMA policy compendium P 307.002 Medical Marijuana

*RESOLVED, That the Florida Medical Association (FMA) oppose Amendment 2, the constitutional amendment to legalize marijuana for medical conditions.*



**\*Resolution 14-302**  
**Equal Privileges, Equal Liability**  
Florida Society of Dermatology and Dermatologic Surgery

\* House Action: Referred to the FMA Board of Governors.

Board Referral: Council on Legislation.

Board Action: 10-19-14 The Board approved the Council's recommendation to "not adopt".

*RESOLVED, That the Board of Directors of the Florida Medical Association direct staff to introduce legislation mandating that all medical providers, regardless of degree or supervising State Board, who are granted practice privileges by the Florida Legislature [to examine, evaluate, and/or treat patients] equal to those privileges and/or rights of a licensed Florida physician (M.D. or D.O.) be held to the same standard of care as a licensed Florida physician; and that the Board further explore the possibility of working jointly with the Florida Bar to optimize the chance for passage of such legislation.*

**Resolution 14-303**  
**Doctor of Nursing Practice (DNP)**  
Florida Society of Dermatology and Dermatologic Surgery

House Action: Reaffirmed as existing policy.

Status: Updated FMA policy compendium P450.028 Doctor of Nursing Practice; included as part of the FMA's legislative agenda

*RESOLVED, That due to the extreme likelihood that patients treated by a Doctor of Nursing Practice (DNP) will be misled into thinking that their "doctor" is a physician, the Board of Directors of the Florida Medical Association direct staff to introduce legislation mandating that all persons other than M.D.s , D.O.s, dentists, and chiropractors holding themselves out as "doctors" wear a conspicuous name tag or signage which has letters no smaller than 4mm per letter and which fully spells out the exact name of their formal degree (Doctor of Nursing Practice, etc.) and that they further be required to orally state that they are not physicians.*

**\*Resolution 14-304**  
**Compliance Auditor Accountability in Florida**  
South Florida Caucus

\* House Action: Referred to the Board of Governors for study.

Board Referral: Council on Legislation

Board Action:

1. October 2014: Board approved submitting a resolution similar to 14-304, Compliance Auditor Accountability in Florida to the AMA to change federal law to allow compliance auditors to be held liable under state law.

*RESOLVED, That the Florida Medical Association will work with the Florida Legislature to pass a state statute which provides legal remedies to Florida physicians licensed by the Board of Medicine or the Board of Osteopathic Medicine including remedies which allow Florida physicians to sue for monetary damages as well as punitive damages, in state courts, those audit contractors who knowingly or negligently make false claims regarding payments to physicians by any federal program regulated or established by CMS; and be it further*

*RESOLVED, This statute shall apply to all audit contractors who are active, or have been active at any time within the past 10 years, within the State of Florida; and be it further*

*RESOLVED, This statute also authorizes the Florida Department of Health to establish:*

- *A civil penalty of a minimum of \$10,000 for each individual instance of knowingly or negligently making a false claim by an audit contractor.*
- *No maximum monetary penalties.*
- *More than one instance of knowingly or negligently filing a false claim by an audit contractor may be subject to criminal penalties of not less than 1 year in prison for each instance; and be it further*

*RESOLVED, That the Florida Medical Association will work with the Florida Legislature to pass a state resolution demanding the U.S. Congress removes any federal sovereign immunity protections for audit contractors authorized by CMS; and be it further*

*RESOLVED, That if there are already state statutes in existence that substantially provide the remedies listed above, the Florida Medical Association will publish a guide for physicians regarding the relevant state statutes and regulations. This guide will be published both online via the Florida Medical Association website and in Florida Medical Magazine no later than June 1, 2015.*

**\*Resolution 14-305**  
**Medical Marijuana – Legislation to Limit Abuse**  
 Kenneth Woliner, M.D., Delegate

\* House Action: Referred to the Board of Governors.

Board Referral: Council on Legislation.

Board Action: 10-19-14 Board approved recommendation by the Council to defer any action on this resolution until after the November 4th election. The 2014 constitutional amendment failed. No action needed. Will watch any bills proposed during the 2015 session

*RESOLVED, If and only if Amendment #2, "Use of Marijuana for Certain Medical Conditions", is approved by Florida Voters, the FMA would support legislation moving medical marijuana to Schedule II of Chapter 893 and laws similar to the DATA 2000 Act, to prevent the abuse of medical marijuana in the State of Florida.*

**Resolution 14-306**  
**Reduction In NICA Fees**  
 Stephen Babic, M.D.

House Action: Not Adopted.

Status: No further action needed.

**Resolution 14-307**  
**Electronic Medical Records (EMR)**  
 South Florida Caucus

House Action: Adopted

Status: Pending..

*RESOLVED, That the FMA consider advancing legislation that would require all EMR vendors that sell products to Florida physicians be required to maintain and provide access to all patient medical record and abide by the same legal requirements of Florida physicians.*

**Resolution 14-308**  
**Guardianship Reform**  
South Florida Caucus

House Action: Adopted as amended.

Status: FMA prepared to support legislation if filed, updated FMA policy compendium 15.002 – Disabled.

*RESOLVED, That the FMA supports legislation to effectively improve protections of incapacitated persons in the guardianship statutes and processes.*

**Resolution 14-309**  
**Limiting Medical Liability Insurance Profits**  
Capital Medical Society

House Action: Not Adopted.

Status: No further action needed.

**Resolution 14-310**  
**Protecting Patients from Substandard, Unsupervised Providers**  
Sarasota County Medical Society

House Action: Adopted as amended.

Status: One such public messaging effort underway is FMA Cares Initiative television spots featuring every day physicians across Florida give back to their local communities through charitable medical work that helps those in need;

*RESOLVED, That the FMA engage in a public messaging effort to inform Florida's patient population of the unique training of physicians and the importance and necessity of that training in the delivery of quality healthcare; and be it further*

*RESOLVED, That such a public information effort be initiated in a manner as to empower Florida's patients to engage our Florida's legislature during the 2015 legislative session.*

**\*Resolution 14-311**  
**Waiver of Deductible for Emergency Patients**  
Duval County Medical Society

\* House Action: Referred to the Board of Governors for study and report back in 2014.

Board Referral: Council on Legislation

Board Action: 10-19-14 Board of Governors approved recommending to the 2015 House of Delegates that this recommendation be not adopted. The Board will present this recommendation to the 2015 House of Delegates via Board Report C.

*RESOLVED, That the Florida Medical Association as a high legislative priority seek legislation with the Florida legislature mandating that all health insurance companies waive all deductibles and co-payments for their members when seen for emergency care and admitted to the hospital, as well as patients baker acted under emergency psychiatric conditions.*

**Resolution 14-312**  
**Requiring the Use of Motorcycle Helmets**  
Volusia County Medical Society

House Action: Reaffirm as existing FMA policy.

Status: FMA prepared to support legislation if filed; Updated FMA policy compendium P. 10.004 Accident Prevention.

*RESOLVED, That the Florida Medical Association (FMA) support legislation that reinstates the motorcycle helmet law for all riders, regardless of age.*

**Resolution 14-313**  
**Requiring Additional Insurance for Motorcycle Riders**  
Volusia County Medical Society

House Action: Adopted.

Status: [Included as part of the FMA's 2015 Legislative Agenda.](#)

*RESOLVED, That the Florida Medical Association support legislation requiring non-helmeted motorcyclists to procure at least \$40,000 of PIP protection.*

**Resolution 14-314**  
**Electronic Health Record Transfer Fees**  
Escambia County Medical Society

House Action: Adopted as amended.

Status: [Included as part of the FMA's 2015 Legislative Agenda.](#)

*RESOLVED, That the Florida Medical Association seek legislation to prohibit Electronic Health Record (EHR) companies from charging fees to physicians for the transferring of health records between EHR companies.*

**Resolution 14-315**  
**Accuracy in Advertising Medical Services by Medical Providers**  
Orange County Medical Society

House Action: Not Adopted.

Status: [No further action needed.](#)

**Resolution 14-401**  
**Antitrust Activity**  
Brevard County Medical Society

House Action: Adopted as amended.

Status: [AMA Delegation submitted resolution for consideration at AMA Interim Mtg. 2014; Resolution 820 Antitrust Activity – AMA HOUSE REFERRED FOR DECISION RESOLVED, That our American Medical Association study the effects of monopolistic activity by healthcare entities that may have a majority of market share in a region on the patient-doctor relationship; and be it further RESOLVED, That our AMA develop an action plan for legislative and regulatory advocacy to achieve more vigorous application of antitrust laws to protect physicians and physician practices who are confronted with monopolistic activity by healthcare entities.](#)

*RESOLVED, That the FMA encourage the AMA to take action against all potential monopolistic activity. Action may include statements where necessary, when any business acts to endanger the patient-doctor relationship.*

**Resolution 14-402**  
**Beers List**  
Pinellas County Medical Association

House Action: Adopted as amended.

Status: Prepared to support legislation and administrative rules' if file); updated FMA policy compendium P 260.040 Insurance.

*RESOLVED, That our Florida Medical Association (FMA) supports the use of Beers or similar medication criteria for patients solely as part of an educational process to inform physicians on appropriate medication use in clinical practice; and be it further*

*RESOLVED, That our FMA will oppose the use of Beers or similar criteria to deny coverage for medications deemed appropriate for patients by their physicians; and be it further*

*RESOLVED, That our FMA support legislation and administrative rules that prevent insurance companies from denying medications or coverage of medications on "Beers List" prescribed by Florida licensed physicians for their patients and from penalizing physicians, such as through HEDIS Measures or Five Star Performance Ratings, for prescribing these medications based on their best clinical judgment.*

**Resolution 14-403**  
**Ensuring Medicaid Payment Increase to Medicare Rates in 2016**  
Hillsborough County Medical Association

House Action: Adopted.

Status: Included as part of the FMA's 2015 Legislative Agenda; Updated FMA policy compendium P 300.026, Medicaid

*RESOLVED, That the FMA seek legislation that mandates a fine on Medicaid HMO's (beginning in 2016) that do not pay at least at Medicare rates after 2 years of continuous operation, that the fine equal at least 10% of the payment (Medicare rate or above) due to the physician, that the fine be levied and accrue on a monthly basis beginning 30 days after the initial infraction if appropriate payment (Medicare rate or above) is not received by the physician, and that the physician be paid the sum of the payment owed (Medicare rate or above) and all fines levied against the Medicaid HMO.*

**Resolution 14-404**  
**Action to Ensure Access to Healthcare and Choice of Physician**  
Specialty Society Section

House Action: Adopted as amended.

Status: Updated FMA policy compendium P 300.027, Medicaid; pending further action

*RESOLVED, That the Florida Medical Association (FMA) engage in discussions with all other state medical associations and the American Medical Association (AMA) to devise a method to challenge the federal government on its ability to engage in anti-competitive behaviors, price fixing and predatory pricing and initiate a national campaign with willing allies to pass the Medicare Patient Empowerment Act within the FMA budget; and be it further*

*RESOLVED, That the FMA Board of Governors and the Florida Delegation to the AMA ask the AMA: 1) to commit to a well-funded legislative and grassroots campaign to ensure passage of legislation that prohibits everyone including the Federal Government from detrimental anti-competitive price fixing and predatory pricing in the U.S. Congress; and 2) immediately begin its well-funded legislative and grassroots campaign to pass the Medicare Patient Empowerment Act so that all patients can have access to the highest quality of healthcare; and be it further*

*RESOLVED, That the FMA report back to the FMA House of Delegates annually in regards to this matter.*

**Resolution 14-405**  
**Medicaid Expansion Support,**

Owen Linder, M.D., Delegate & Lawrence Floriani M.D., Delegate,  
Pinellas County Medical Association, Florida Chapter, American College Of Physicians, Florida Chapter,  
American College Of Pediatricians, District XII, American Congress of Obstetricians and Gynecologists,  
South Florida Caucus

House Action: Not Adopted.

Status: No further action needed.

**Resolution 14-406**

**Healthcare Access to all Floridians Medicaid Reform HMO/PSN Statewide Expansion  
and Medicaid Eligibility Expansion Through Federal Funding**

Broward County Medical Association, Dade County Medical Association, Palm Beach Medical Society

House Action: Adopted as amended.

Status: Updated FMA policy compendium P 300.028 Medicaid

*RESOLVED, That the Florida Medical Association will publicly support the Medicaid eligibility expansion and federal support and furthermore request and urge that the State of Florida accepts those provisions of the Patient Protection and Affordable Care Act accepting federal dollar support for the Medicaid program and higher physician reimbursement; and be it further*

*RESOLVED, That the Florida Medical Association will publicly support any statewide expansion of Medicaid only if such programs safeguard patient access to care while increasing Medicaid rate payments to Medicare rates for all physicians; and be it further*

*RESOLVED, That the Florida Medical Association (FMA) will publicly support increase access to healthcare through insurance coverage available through expanded Medicaid coverage in Florida(Under PPACA) and/or subsidized health insurance for those under 138% of Federal Poverty Level if such coverage ensures patient access to care through broad networks, coverage of common medical treatments in standard insurance plans and physician compensation at Medicare rates or greater through the state run program and be it further*

*RESOLVED, That the Florida Medical Association establish a Medicaid Expansion Task Force that will work directly with the Agency for Health Care Administration to monitor Medicaid Managed Care Company compliance with Florida law.*

**\*Resolution 14-407**

**Physician Payments Under The Affordable Care Act**  
South Florida Caucus

\* House Action: Referred to the Board of Governors for study with a report back to the House of Delegates.

*RESOLVED, That the Florida Medical Association (FMA) evaluate and study the payment plans by the insurance companies to ensure that the FMA physician members are being properly reimbursed for their services.*

Board Referral: Council on Medical Services and Health Care Delivery Innovation.

Board Action:

1. May, 2015. The Board agreed with the Council and recognizes that the PPACA is impacting health plan payments and further supports working with the AMA to monitor this impact. However, the Council and the Board do not believe that enacting this resolution and conducting an internal study of health plan

payments would be beneficial. The FMA already has numerous policies that support properly paying physicians. In addition, the FMA routinely seeks legislation to address issues related to health plan payments.

2. Board to make its recommendation to the House of Delegates in Board in Board Report D.

**\*Resolution 14-408**

**Physician Adjustments Specific to the State of Florida Regarding Hitech Act Requirements**  
Dade County Medical Association and Palm Beach Medical Society

\* House Action: Referred to the Board of Governors for study.

Board Referral: Council on Medical Services and Health Care Delivery Innovation.

*RESOLVED, That the 2014 Florida Medical Association House of Delegates publishes a formal declaration that the Meaningful Use objectives and measures established by CMS are onerous, do not improve patient outcomes, and add unnecessary and counterproductive expenses and regulatory burdens to the entire medical system; and be it further*

*RESOLVED, That the Florida Medical Association will set up a multispecialty committee of Florida physicians to review the Meaningful Use objectives and measures established by CMS and propose which should be scrapped by CMS with initial findings due for presentation at next year's Florida Medical Association Annual Meeting of the House of Delegates and publication, on or after June 1, 2015, in Florida Medical Magazine; and be it further*

*RESOLVED, That the Florida Medical Association requests that the Florida Department of Health, including the Board of Medicine and the Board of Osteopathic Medicine, implement the following rules:*

*1) The Department of Health will not establish any penalties, fines, restrictions or disciplinary actions to be applied to any physician or physician assistant licensed by the Florida Board of Medicine or the Florida Board of Osteopathic Medicine who fails to meet the Meaningful Use objectives and measures established by CMS 2) Any penalties, fines, restrictions or disciplinary actions placed on a physician or physician assistant licensed by the Florida Board of Medicine or the Florida Board of Osteopathic Medicine for not meeting the Meaningful Use objectives and measures established by CMS are not reportable by the Florida Department of Health. 3) Penalties, fines, restrictions or disciplinary actions for not meeting the Meaningful Use objectives and measures established by CMS may not be considered in any disciplinary hearings by the Florida Department of Health. Penalties, fines, restrictions or disciplinary actions for not meeting the Meaningful Use objectives and measures established by CMS may not be considered in hospital or insurance credentialing. 4) Penalties, fines, restrictions or disciplinary actions for not meeting the Meaningful Use objectives and measures established by CMS may not be entered as evidence in any state medical malpractice cases. 5) Violations of these rules shall carry a civil penalty of \$10,000 per instance. 6) Repeated violations or egregious cases may be subject to up to 1 year in prison for each instance. 7) Punitive damages can be awarded to individual physicians for violations of these rules; and be it*

*RESOLVED, That the Florida Medical Association request that the Florida Office of Insurance Regulation implement the following rule: Penalties, fines, restrictions or disciplinary actions for not meeting the Meaningful Use objectives and measures established by CMS may not be considered by medical malpractice carriers in setting rates or determining insurability.*

Board Action:

1. May, 2015. The Board agreed with the Council and recognizes that many physicians are facing serious problems due to Meaningful Use. The Board and the Council supports working with the AMA to take action at the federal level but do not feel that adopting this resolution would enhance existing FMA policy. The directives in this resolution are overly prescriptive and may be impossible to fulfill. Existing FMA policy already expresses opposition to Meaningful Use. For instance, P 235.005 states the FMA's

- opposition to payment incentive programs that are inconsistent with the AMA's Principles and Guidelines on Pay for Performance
2. Board to make its recommendation to the House of Delegates in Board in Board Report D.

**Resolution 14-409**  
**Medicare Coverage of Hearing Aids**  
Pinellas County Medical Association

House Action: Adopted as amended.

Status: Included as part of the FMA's 2015 Legislative Agenda; AMA Delegation filed a resolution at AMA Interim Meeting (2014) and Resolution 817 was referred.

*RESOLVED, That the Florida Medical Association supports Medicare coverage of hearing aid devices, including external and implantable hearing aid devices; and be it further*

*RESOLVED, That the FMA promote this support by requesting likewise support from the other state medical societies and the AMA.*

**Resolution 14-410**  
**Medicaid Expansion and Network Adequacy**  
Orange County Medical Society

House Action: Not adopted.

Status: No further action needed.

**Resolution 14-411**  
**Medicare Reimbursements**  
Central Florida Caucus

House Action: Not adopted.

Status: No further action needed.