



Status Report on Actions of the 2015 House of Delegates

This report includes the status of resolutions adopted or referred to the Board of Governors by the 2015 House of Delegates.
Board referrals are noted with an *

*** Resolution 15-101** **Board Re-Certification** South Florida Caucus

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

RESOLVED, That the FMA formally declares its support of board re-certification through the National Board of Physicians and Surgeons (NBPAS) as equivalent to board re-certification through the ABMS, and further

RESOLVED, That the FMA will present to the Florida Department of Health, the Florida Board of Medicine, and the Florida Board of Osteopathic Medicine, with this formal declaration of support, and work with them to ensure their rules are modified to accept board re-certification through the NBPAS as equivalent to board re-certification through the ABMS, and further

RESOLVED, That the FMA will implement all of the above no later than December 31, 2015, and further

RESOLVED, That the FMA will steadfastly work to ensure acceptance the equivalency of NBPAS board re-certification by the Florida legislature, Congress, and all local, state, and federal departments and agencies, and further

RESOLVED, That the FMA leadership will present a yearly report to the FMA House of Delegates regarding the status of acceptance of NBPAS board re-certification, any related problems, and recommendations for overcoming those problems, with the first report due at the 2016 House of Delegates meeting.

Board Referral: FMA General Counsel assigned to study and present a report to the Board at January 2016 meeting.

01/10/16: FMA General Counsel provided a report on continued certification in medical specialties by the National Board of Physicians and Surgeons (NBPAS) and the American Board of Medical Specialties (ABMS). The Board felt that more information was needed on the certifying organizations and they tabled until time certain (maximum six months) any action on this resolution. FMA President and Chair, Dr. Nobo invited representatives from the NBPAS and the ABMS to present to the Board during the May 2016 meeting in Orlando,

05/14/16: The Board approved adopting Substitute Resolution 15-101 in lieu of original 15-101 and 15-105 as follows:

That the FMA seek legislation to improve the efficiency of the health care markets and eliminate unnecessary administrative and regulatory requirements, health care providers shall not be required, by any public or private entity to comply with maintenance of certification requirements after achieving initial board certification, other than the continuing medical education (CME) requirements set by the health care provider's licensing board.

The Board heard from representatives of ABMS and the NBPAS and each presented informative reports about their organizations and answered all of our questions. At the conclusion of these presentations, the Board spent considerable time discussing board certification and maintenance of certification. After much consideration and debate, the Board approved adopting a substitute resolution.

Fiscal Impact: Costs associated with this resolution did not exceed the current FMA operating budget.

Resolution 15-102
Physician and Medical Staff Member Bill of Rights
South Florida Caucus

House Action: Adopted as amended.

RESOLVED, That the Florida Medical Association will encourage the formation of Medical Staff Advocacy Committees throughout Florida; and be it further

RESOLVED, That the Florida Medical Association will support the Medical Staff Advocacy Committees' role with medical staff issues and communications between physicians and hospitals and any other appropriate agency; and be it further

RESOLVED, That the Physician and Medical Staff Member Bill of Rights allow for physician autonomy with the care of patients; and be it further

RESOLVED, That the Florida Medical Association will report or support such report by a local medical society to the appropriate agency or entity any concern or violation of the Physicians Bill of Rights not resolved by communications between the medical society and hospitals; and be it further

RESOLVED, That the Florida Medical Association should publicly announce the Physician Medical Staff Bill of Rights and send a letter within 30 days urging every medical staff leadership and hospital administration in Florida to adopt and immediately conform with these basic rights; and be it further

RESOLVED, That the Physician and Medical Staff Member Bill of Rights be presented to the American Medical Association as a national model to be distributed to all physicians, hospitals and other entities.

Update: Updated FMA Public Policy Compendium – Reaffirmed P 245.012.

10/10/15: Dr. Ralph Nobo created a working group for the purpose of developing ways to assist FMA members better understand the significance of medical staff bylaws.

10/14/15: FMA submitted Resolution 819 to the AMA for consideration during November 2015 Interim Meeting and it was assigned to Reference Committee J. Reference Committee J reported that they heard mixed testimony and the length and detail of the proposed bill of rights is not something that should be adopted without a thorough review of each component and therefore recommended referral. The AMA House of Delegates agreed and referred Resolution 819.

12/14/15: Dr. Nobo sent a letter to 28 hospitals in Florida encouraging each hospital to conform their medical staff bylaws to the provisions outlined in the FMA's Physician and Medical Staff Member Bill of Right. The letter included the text of the resolution as well as a copy of the Physician and Medical Staff Members Bill of Rights and the name and contact information of FMA staff who can assist should they have additional questions.

Fiscal Note: Costs associated with this resolution did not exceed the current FMA operating budget.

Resolution 15-103
Denouncing the Unethical Practice of Creating Cryopreserved Human Embryo Banks
by Corporate Entities
Lee County Medical Society

House Action: Adopted.

RESOLVED, That the Florida Medical Association supports legislation that ensures human embryos shall not be created by fertilizing donor oocytes with donor sperm except at the specific request of a patient or patients who intend to use such embryos for his/her/their own treatment; and be it further

RESOLVED, Understanding that only patients should be responsible for the disposition decisions of the human embryos they create, the Florida Medical Association strongly denounces the purposeful creation of banks of cryopreserved human embryos, through the combination of donated oocytes and donated sperm, at the request of an in vitro fertilization facility or parent organization rather than patients themselves; and be it further

RESOLVED, Understanding that embryo donation, as is defined by the American Society for Reproductive Medicine, is the donation of cryopreserved embryos from the patients that created them,² calling human embryos that are created through the combination of donated oocytes with donated sperm "donated embryos," at the direction of an in vitro fertilization facility and not patients, misleads the infertile patient into believing said embryos are actually donated by patients, should be considered false advertising, fundamentally unethical and is therefore denounced by the Florida Medical Association.

Update: Added to the FMA's Public Policy Compendium – P 175.006; Included as part of the FMA's 2016 Legislative Agenda – issues to support.

Fiscal Note: Costs associated with this resolution have not exceeded the current FMA operating budget.

Resolution 15-104
Electronic Medical Record End User Survey
Florida Orthopaedic Society

House Action: Adopted.

RESOLVED, That the Florida Medical Association conduct an online survey of its members on the end-user experience with electronic medical records to collect data in the same manner as physicians are graded by patient reported outcomes with the express intention of publishing those results in the society's journal or publication, and further, consider utilizing the sample survey prepared by the Florida Orthopaedic Society.

12-3-15: FMA sent a notice to all members via FMA news inviting them to take a brief survey about end-user experience and satisfaction with EHRs. Click [here](#) for a copy of the survey. Survey results were collected and distributed.

Fiscal Note: Costs associated with this resolution did not exceed the current FMA operating budget.

*** Resolution 15-105**

**End the Monopoly of Certifying Physicians by the ABIM
and Support Development of Meaningful Alternative Certification**
Ellen W. McKnight, M.D., Delegate, Florida Society of Rheumatology,
Florida Allergy, Asthma, and Immunology Society
Escambia County Medical Society in Conjunction with Santa Rosa County

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

RESOLVED, That the FMA strongly rejects the false assertion by the ABIM that there is a crisis of physician incompetency, physicians not staying current, or patient demand for physician participation in MOC; and be it further

RESOLVED, That the FMA supports the time-honored method of using CME credits and state licensure requirements as documentation of physician competency along with his or her good standing with in the medical community; and be it further

RESOLVED, That the FMA recognizes the need to break the monopoly of the ABIM for certifying physicians, that the FMA supports the need for alternate methods of certification, and recognizes the need for the development of organizations such as the "National Board of Physicians and Surgeons", which can fulfill this need.

Board Referral: FMA General Counsel assigned to study and present a report to the Board at January 2016 meeting.

01/10/16: FMA General Counsel provided a report on continued certification in medical specialties by the National Board of Physicians and Surgeons (NBPAS) and the American Board of Medical Specialties (ABMS). The Board felt that more information was needed on the certifying organizations and they tabled until time certain (maximum six months) any action on this resolution. FMA President and Chair, Dr. Nobo invited representatives from the NBPAS and the ABMS to present to the Board during the May 2016 meeting in Orlando,

05/14/16: The Board approved adopting Substitute Resolution 15-101 in lieu of original 15-101 and 15-105 as follows:

That the FMA seek legislation to improve the efficiency of the health care markets and eliminate unnecessary administrative and regulatory requirements, health care providers shall not be required, by any public or private entity to comply with maintenance of certification requirements after achieving initial board certification, other than the continuing medical education (CME) requirements set by the health care provider's licensing board.

The Board heard from representatives of ABMS and the NBPAS and each presented informative reports about their organizations and answered all of our questions. At the conclusion of these presentations, the Board spent considerable time discussing board certification and maintenance of certification. After much consideration and debate, the Board approved adopting a substitute resolution.

Fiscal Impact: Costs associated with this resolution did not exceed the current FMA operating budget.

*** Resolution 15-108**

Opposing the Federation of State Medical Boards Interstate Medical Licensure Compact
Charlotte County Medical Society

House Action: Referred to the Board of Governors with a report back to the House at the 2016 FMA Annual Meeting.

RESOLVED, That FMA oppose participation with the Federation of State Medical Boards' Interstate Medical Licensure Compact; and be it further

RESOLVED, That the FMA's American Medical Association delegation oppose the Federation of State Medical Boards' Interstate Medical Licensure Compact.

Board Referral: FMA General Counsel assigned to study and present a report and recommendation to the Board at January 2016 meeting.

1/10/2016: The Board received a report from the FMA General Counsel. After discussing the licensure compact the Board approved the appointment of an Ad Hoc Committee to study the Federation of State Medical Boards Interstate Medical Licensure Compact and report back in May 2016 with a proposed recommendation. Members include: Dr. Michael Patete; Dr. Jason Goldman; Dr. Corey Howard; Dr. Ron Giffler; Dr. Doug Murphy and Dr. Chris Pittman.

05/14/2016: The Board approved recommending to the 2016 House of Delegates that Resolution 15-108 be not adopted. Refer to Board Report A, Recommendation A-2 in the 2016 Delegate Handbook.

Fiscal Note: Costs associated with this resolution did not exceeded the current FMA operating budget.

*** Resolution 15-109**

Board Certification as Proof of Competency
Orange County Medical Society and Florida Orthopaedic Society

House Action: Referred to the Board of Governors with a report back to the House at the 2016 FMA Annual Meeting

RESOLVED, That the Florida Medical Association (FMA) support legislation which would allow physicians to submit active ABMS or American Osteopathic Association Certification as an alternative pathway for compliance with MD/DO Florida licensure and re-licensure continuing medical education requirements.

Board Referral: Council on Legislation.

10/10/15: The Council brought forth a recommendation to adopt an amended version of this resolution. The Board felt the language needed additional work and referred it back to the Council.

05/14/2016: The Board approved recommending to the 2016 House of Delegates that Resolution 15-109 Board Certification as Proof of Competency be adopted as amended. Refer to Board Report C, Recommendation C-3 in the 2016 Delegate Handbook.

RESOLVED, That the Florida Medical Association (FMA) support legislation which would allow physicians to submit any board certification accepted by the Florida Board of Medicine (BOM) and Florida Board of Osteopathic Medicine (BOOM), that has educational requirements that meet or exceed current requirements for state licensure ~~active ABMS or American Osteopathic association certification~~ as an alternative pathway for compliance with MD/DO Florida licensure and re-licensure continuing medical education requirements with the exception of that required by statute.

Fiscal Note: Costs associated with this resolution did not exceed the current FMA operating budget.

Resolution 15-110
Board of Medicine and Department of Health Rules, Patient Access to Care and
Medical Practice Economics
Broward County Medical Association

House Action: Adopted as amended.

RESOLVED, That the FMA will update physicians and medical societies on a regular basis at least twice a year or as needed about any Board of Medicine rule change and updates.

10/08/15: With physician license renewal on the horizon the FMA published an in-depth article in FMA News on the Department of Health's rules for renewing medical license and tips to avoid delays. A copy of the article can be found [here](#).

10/22/15: FMA Assistant General Counsel prepared a Board of Medicine update on rule changes and this update was published electronically via the FMA News. Report can be accessed [here](#).

Informational Update: For more information on all activity of the Board of Medicine including upcoming meetings, agendas, committee reports, licensing renewal information, forms, annual reports, Florida Statutes and Administrative Codes, etc., [click here](#).

12/2015: At the December Board of Medicine meeting, the FMA proposed Office Surgery rule passed. The Disruptive Behavior Committee met and tasked the FMA with helping the Board determine the best course of action to tackle this behavioral problem. The Wrong Site Surgery Committee met to brainstorm new ways to bring down Florida's wrong site error rates. The Telemedicine Subcommittee met and

approved language that would allow controlled substances to be prescribed through telemedicine for the treatment of psychiatric disorders.

12/11/2015: FMA Assistant General Counsel, prepared an update on Rule 64B8-10.003, FAC: Costs for Reproduction of Medical Records and Rules 64B8-9.009 and 64B15-14.007, FAC – Standard of Care for Office Surgery. A copy of the report was included in the December 11 issue of FMA News and can be found [here](#).

Fiscal Note: Costs associated with this resolution did not exceed the current FMA operating budget.

*** Resolution 15-111**
FMA Opposition to the Sale or Distribution of Aborted Fetal Body Parts

Diane Gowski, M.D. and Angeli Akey, M.D.

House Action: Referred to the Board of Governors.

RESOLVED, That the FMA holds a firm position in opposition to the sale or distribution of aborted fetal body parts by physicians or other persons; and further

RESOLVED, That the FMA opposes any abortion procedure designed to facilitate procurement of fetal body parts for sale.

Board Referral: Council on Medical Education, Science and Public Health.

1/10/2016: The Board adopted adopted Substitute Resolution 15-111 with a title change in lieu of the original resolution as follows:

FMA Supports Federal Law Prohibiting the Sale of Fetal Body Parts

RESOLVED, That the FMA support established federal law that prohibits the sale of fetal body parts.

Fiscal Note: Costs associated with this resolution did not exceed the current FMA operating budget.

Resolution 15-201
Florida Museum of Medicine and Public Health
Duval County Medical Society

House Action Reaffirmed – action already taken.

RESOLVED, That the FMA promote the establishment of a functioning Museum of Medicine and Public Health housed in the Sowder Building and that it be modeled after the public-private partnership that has successfully supported the Florida Agriculture Museum with a 501c3 Direct Support Organization ("DSO") affiliated with the Department of Health; and be it further

RESOLVED, That the FMA seek to convene the relevant stakeholders in the fall of 2015 to further develop the concept of a public-private partnership to support a functioning Florida Museum of Medicine and Public Health and outline a pathway to accomplish said goal.

October 2015: Members of the Ad Hoc Committee on Museum of Medicine and Public Health participated in a stakeholders meeting with representatives from the Duval CMS and the Florida Dept. of Health to discuss a feasibility study.

Fiscal Note: Costs associated with this resolution did not exceed the current FMA operating budget.

Resolution 15-202
FMA Actions
South Florida Caucus

House Action: Adopted as amended.

RESOLVED, That the Florida Medical Association prepare a bi-annual report with full transparency including an explanation of action and/or inaction on each resolution. The report will consist of a list of all resolutions passed by the House of Delegates; identify the efforts made to implement each resolution, including dollars spent on implementation efforts; and an analysis of the success or failure of the efforts of implementing each resolution. The report should be easily accessible online and disseminated electronically to all FMA members.

08/18/15: Status report sent to delegates and county/specialty medical society executives.

09/01/15: Status report sent to delegates and county/specialty medical society executives.

12/14/15: Status report sent to delegates and county/specialty medical society executives.

07/01/2016: Status report sent to all delegates and county/specialty medical society executives.

Legislative Session: Weekly legislative updates during 2016 legislative session via conference call with county/specialty executive directors

Fiscal Note: Costs associated with this resolution did not exceed the current FMA operating budget.

***Resolution 15-203**
Equal Participation by FMA Delegates
Specialty Society Section, Orange County Medical Society

House Action: Referred to the Board of Governors with report back to the House of Delegates.

RESOLVED, That the Florida Medical Association (FMA) Bylaws be amended to provide that each recognized specialty medical society shall be entitled to select annually and send to each meeting of the House of Delegates one delegate for every forty active members of the FMA or fraction thereof within that society.

Board Referral: Committee on Bylaws.

Update: The Committee met several times regarding this issue and collected data from the AMA and other state medical associations regarding delegate entitlements.

05/15/16: The Board approved recommending to the 2016 House of Delegates that Resolution 15-203 be adopted as amended below. Refer to Board Report B, Recommendation B-1 in the 2016 Delegate Handbook:

RESOLVED, That the Florida Medical Association (FMA) Bylaws be amended to provide that each recognized specialty medical society shall be entitled to select annually and send to each meeting of the House of Delegates one delegate for every forty active members of the FMA or fraction thereof within that society, and ensure that counties and specialties are treated the same in regards to submitting resolutions to the House of Delegates.

Fiscal Note: Costs associated with this resolution have not exceeded the current FMA operating budget.

Resolution 15-204
Patient-Shared Billing
South Florida Caucus

House Action: Adopted as amended.

RESOLVED, That the Florida Medical Association (FMA) continue to partner with other specialty groups and other states, such as Texas, California, and New York, and work with the hired joint lobbyists on patient shared billing and other important issues and coordinate with the AMA's efforts to bring patient-shared billing to legislative action; and further

RESOLVED, That patient-shared billing be considered a premier priority and acknowledged as such by the FMA.

Ongoing: The FMA is a member of the Coalition of State Medical Societies and National Specialty Societies with a common commitment to preserve the practice of medicine as a profession, and to preserve the time-honored patient-physician relationship, keeping it free of outside interference. In addition to participation in the Coalition, Florida's AMA Delegation continues to represent Florida physicians and work with delegations from around the country on patient shared billing and other important issues.

10/20&21/15: The FMA participated in a meeting with other coalition members in Washington, D.C. to meet with key members of Congress on federal issues. A report on the advocacy efforts for pro-physician federal reforms was disseminated to FMA members via FMA News. Click [here](#) for an update on important issues.

Fiscal Note: Costs associated with this resolution have not exceeded the current FMA operating budget.

Resolution 15-205
Support of Medical Students, Residents and Fellows
South Florida Caucus

House Action Reaffirmed – action already taken.

RESOLVED, That the Florida Medical Association (FMA) Membership Committee or FMA Board of Governors develop a program that will assist and enhance financial support of participation and recruitment of residents and fellows, in the FMA and County Society/Associations.

Ongoing: Florida medical students and residents are provided free FMA membership; FMA President appointed a committee to study student, resident and young physician content marketing; FMA prepared and plan to distribute "The Physician's First Employment Contract" for new self- employed physicians;

the FMA adopted a strategic plan which includes an emphasis on mentorship and leadership development programs; FMA staff evaluating mobile apps designed to assist students and residents; FMA staff regularly attends resident orientation sessions at Florida medical schools for recruitment and to promote organized medicine awareness; the Resident & Fellow Section organized an annual monthly awareness week.

Fiscal Note: The 2016 FMA operating budget was increased to allow for additional programs and participation by students and residents.

Resolution 15-301

Freedom for Referral Choice

Brian Kirby M.D., Delegate, Florida Society of Rheumatology
Florida Society of Clinical Oncology, Escambia County Medical Society in Conjunction
with Santa Rosa County, Florida Society of Plastic Surgery

House Action: Adopted as amended.

RESOLVED, That the Florida Medical Association support legislation that prohibits hospitals and groups that employ physicians and providers from forcing referrals to specific specialties and services; and be it further

RESOLVED, That those physicians/providers are free to refer to service providers that they feel represent the best in patient care without fear of penalty or loss of employment.

Update: Included as part of the FMA's 2016 Legislative Agenda – issues to support.

Fiscal Note: Costs associated with this resolution did not exceed the current FMA operating budget.

Resolution 15-302

Amending the Veterans Access, Choice, And Accountability Act of 2014

Duval County Medical Society

House Action: Adopted.

RESOLVED, That the Florida Medical Association delegation to the American Medical Association (AMA) ask the AMA to seek federal legislation to amend the Veterans Access, Choice, and Accountability Act of 2014 to provide that (1) Private physicians will be offered contracts at NO LESS than the current Medicare Allowable fees for all procedures and visits and that the Veterans Administration will be directed to hire both full-time as well as part-time primary and specialty physicians in order to provide timely appointments for veterans.

Update: During the AMA Annual Meeting in June, 2015, and prior to the adoption of this resolution in July, 2015, the FMA Delegation submitted Resolution 112 titled "Improving Timely Access to Quality Healthcare for America's Veterans". As a result, the following AMA policy was adopted: [H-510.985 Access to Health Care for Veterans](#): Our American Medical Association: (1) will continue to advocate for improvements to legislation regarding veterans' health care to ensure timely access to primary and specialty health care within close proximity to a veteran's residence within the Veterans Administration health care system; (2) will monitor implementation of and support necessary changes to the Veterans Choice Program's "Choice Card" to ensure timely access to primary and specialty health care within close

proximity to a veteran's residence outside of the Veterans Administration health care system; (3) will call for a study of the Veterans Administration health care system by appropriate entities to address access to care issues experienced by veterans; (4) will advocate that the Veterans Administration health care system pay private physicians a minimum of 100 percent of Medicare rates for visits and approved procedures to ensure adequate access to care and choice of physician; (5) will advocate that the Veterans Administration health care system hire additional primary and specialty physicians, both full and part-time, as needed to provide care to veterans; and (6) will support, encourage and assist in any way possible all organizations, including but not limited to, the Veterans Administration, the Department of Justice, the Office of the Inspector General and The Joint Commission, to ensure comprehensive delivery of health care to our nation's veterans.(Sub. Res. 111, A-15)

Fiscal Note: Costs associated with this resolution did not exceed the current FMA operating budget.

Resolution 15-303
Tightening Childhood Immunization Law to Improve Public Health
Florida Chapter American Academy of Pediatrics

House Action: Adopted.

RESOLVED, That the Florida Medical Association support legislation to improve and provide information given to parents regarding immunizations and the dangers of not immunizing; and be it further
RESOLVED, That the Florida Medical Association support legislation to improve vaccine data exchange between schools, the Department of Education, the Department of Health and parents, by publishing data by school and county of vaccination and non-vaccination rates by a method to be determined by the Department of Health.

Update: Added to the FMA's Public Policy Compendium—P 250.006; Included as part of the FMA's 2016 Legislative Agenda – issues to support.

10/26/2015: Senator Hays filed Senate Bill 646 Childhood Immunizations, requiring certain immunization records to be on file with the State Health Online Tracking System by a specified date; revising exemptions to the school-entry health examination and immunization requirements; requiring the Department of Health, in collaboration with the Florida Chapter of the American Academy of Pediatrics, to prepare an informational video on immunizations for a parent or guardian to view before requesting an exemption; requiring the department to publish immunization and exemption rates for each public and private school on its website by a specified date, etc.

Update: On November 6, 2015 this bill was withdrawn prior to introduction.

Fiscal Note: Costs associated with this resolution did not exceed the current FMA operating budget.

Resolution 15-304
Childhood Immunization Law
Florida Chapter American Academy of Pediatrics

House Action: Adopted as amended.

RESOLVED, That the Florida Medical Association support legislation to ban personal and religious exemptions and to require biennial renewal of medical immunization exemptions.

Update: Added to the FMA's Public Policy Compendium—P 250.006; Included as part of the FMA's 2016 Legislative Agenda – issues to support.

10/26/2015: Senate Bill 646 Childhood Immunizations, was filed by Senator Hayes and withdrawn prior to introduction.

Fiscal Note: Costs associated with this resolution did not exceeded the current FMA operating budget.

***Resolution 15-305**
Make Facility Fees Transparent to Consumers
Orange County Medical Society and Florida Orthopaedic Society

House Action: Referred to the Board of Governors.

RESOLVED, That the Florida Medical Association support legislation that would require health care providers in Florida that charge a facility fee to disclose at the time an appointment is made that there will be a facility fee in addition to the professional fees, and further the amount of the facility fee must also be disclosed.

Board Referral: Council on Legislation

10/10/15: The Board adopted Resolution15-305 as amended:

RESOLVED, That the Florida Medical Association support legislation that would require health care ~~providers~~ facilities in Florida that charge a facility fee to disclose at the time an appointment is made that there will be a facility fee in addition to the professional fees, and further the amount of the facility fee must also be disclosed.

Fiscal Note: Costs associated with this resolution did not exceed the current FMA operating budget.

Resolution 15-306
FeNO Testing should be Regarded as a Standard of Care for the Evaluation and Treatment of Steroid Dependent Asthmatics,
Florida Society of Allergy, Asthma and Immunology Society

House Action: Adopted Substitute Resolution 15-306 adopted in lieu of original 15-306.

RESOLVED, That the Florida Medical Association request that the Department of Health and the Surgeon General of the State of Florida set up a task force which will include allergists and pulmonologists to set up guide lines for the use of FeNO testing in the physician's office.

12/10/15: The FMA sent a letter to Florida's Surgeon General discussing FeNO testing and respectfully asked the Department of Health a set up a task force, which will include allergists and pulmonologists, to establish guidelines for the use of FeNO testing in the physician's office.

Fiscal Note: Costs associated with this resolution did not exceed the current FMA operating budget.

***Resolution 15-308**

Expedited Partner Therapy

American Congress of Obstetricians and Gynecologists, District XII

House Action: Referred to the Board of Governors.

RESOLVED, That the Florida Medical Association support the American Congress of Obstetricians and Gynecologists, District XII Florida to amend section 384.27, Florida Statutes to allow for Expedited Partner Therapy (EPT) in the State of Florida.

Board Referral: Council on Legislation.

10/10/15: The Board adopted Resolution 15-308.

Update: Included as part of the FMA's 2016 Legislative Agenda – issues to support.

HB 941, the Department of Health package sponsored by Representative Julio Gonzalez, primarily made multiple changes to programs overseen by the DOH. Included in the package was a provision that allows a physician licensed under chapter 458 or 459 to provide expedited partner therapy if the patient has an STD, has engaged in sexual activity before the diagnosis and indicates that his or her partner is unlikely to seek clinical services. The package passed unanimously through the Senate and by a vote of 112-3 in the House on the final day of session. This is another positive piece of legislation that promotes public health and accomplishes the directive set forth in this resolution. This bill was signed by the Governor in April 2016.

Fiscal Note: Costs associated with this resolution did not exceed the current FMA operating budget.

***Resolution 15-309**

Florida Based Solution for Graduate Medical Education Funding

Orange County Medical Society

House Action: Referred to Board of Governors for study and report back.

RESOLVED, That the Florida Medical Association seek regulatory or statutory clarification that would enable counties to invest revenue generated from local Tourist Development Taxes to fund Graduate Medical Education and Residency Programs within their communities in order to decrease the physician shortfalls projected in the future and satisfy the desire of the State of Florida to enhance its reputation as a Medical Tourism destination.

Board Referral: Council on Legislation.

10/10/15: The Board approved recommending to the 2016 House of Delegates that Resolution 15-309 be adopted as amended (below). Refer to Board of Governors Report C, Recommendation C-1 in the 2016 Delegate Handbook.

RESOLVED, That the Florida Medical Association support legislation ~~seek regulatory or statutory clarification~~ that would enable counties to invest revenue generated from local Tourist Development Taxes to fund Graduate Medical Education and Residency Programs within their communities in order to decrease the physician shortfalls projected in the future and satisfy the desire of the State of Florida to enhance its reputation as a Medical Tourism destination.

Fiscal Note: Costs associated with this resolution did not exceed the current FMA operating budget.

Resolution 15-310
Florida Consumer Collection Practices Act (FCCPA) Reform
Orange County Medical Society, Florida Orthopedic Society

House Action: Adopted as amended.

RESOLVED, That the Florida Medical Association support legislation that would require debtors to use certified mail to notify creditors and debt collectors that he or she has hired an attorney to represent them and provide a timeframe for creditors and debt collectors to comply with a properly received notification.

10/10/15: Included as part of the FMA's 2016 Legislative Agenda – issues to support. The FMA actively supported legislation in HB 713 and SB 562 which would have accomplished this objective but it was ultimately unsuccessful.

Fiscal Note: Costs associated with this resolution did not exceed the current FMA operating budget.

Resolution 15-312
Free and Charitable Clinics and Physician Volunteer Networks
Palm Beach County Medical Society

House Action: Adopted as amended.

RESOLVED, That the Florida Medical Association support legislation to fund the Florida Association of Free and Charitable Clinics to provide grants to qualified free and charitable clinics, We Care and Project Access Programs for the purpose of the strengthening the capacity of these programs to serve Floridians in need of healthcare.

10/10/15: Included as part of the FMA's 2016 Legislative Agenda – issues to support.

Update: The FMA worked with the Florida Association of Free and Charitable Clinics, Inc. (FAFCC) and was able to successfully secure funds in HB 5001, line 466, in the amount of \$10,000,000 to the FAFCC. The appropriation provides grant funding to support free clinic operating costs and the expansion of

access to health care services for low-income and uninsured persons. Funding will focus on delivery of direct patient care and expansion of clinic and network capacities to provide the same. The allocation methodology ensures that funds are distributed such that the free clinics are able to serve the needs of the greatest number of low-income and uninsured persons.

Fiscal Note: Costs associated with this resolution did not exceed the current FMA operating budget.

Resolution 15-313
Preschool Vision Screening
Florida Society of Ophthalmology

House Action: Adopted.

RESOLVED, That the FMA support legislation that requires the State of Florida to develop guidelines regarding vision screening for children prior to them entering kindergarten; and be it further

RESOLVED, That the FMA support efforts to effectively inform parents on the importance of early intervention and follow-up care for childhood visual abnormalities.

10/10/15: Included as part of the FMA's 2016 Legislative Agenda – issues to support.

Update: FMA Legislative staff monitored bills filed that relate to early childhood development, early childhood intervention for visual abnormalities, etc. Unfortunately this issue was not included in any legislation that passed.

Fiscal Note: Costs associated with this resolution have not exceeded the current FMA operating budget.

***Resolution 15-314**
Waiver for Out-Of-State Licensed Physicians to Provide Volunteer Healthcare Services
to the Indigent and Underinsured
Manatee County Medical Society

House Action: Referred to the Board of Governors to study and report back.

RESOLVED, That the Florida Medical Association support legislation to the Florida House of Representatives and the Florida Senate that provides for the granting, to a physician who is not licensed in the State of Florida, a waiver from the applicable licensing laws of Florida in order to authorize the physician to provide free healthcare to indigent and underinsured individuals in Florida, subject to the physician not imposing any charge for such care and through volunteering for such programs.

Board Referral: Council on Legislation.

10-10-15: The Board approved recommending to the 2016 House of Delegates that Resolution 15-314 be not adopted. Refer to Board Report C, Recommendation C-2 in the 2016 Delegate Handbook.

Fiscal Note: Costs associated with this resolution did not exceed the current FMA operating budget.

***Resolution 15-315**

Healthcare Rights of Conscience

Angeli Akey, M.D. Delegate and Diane Gowski, M.D. Delegate

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

RESOLVED, that the FMA will advocate for Healthcare Rights of Conscience (HROC) for physicians and hereby acknowledges that it is a basic right of individual physicians to freely exercise their right to conscientious objection in their healthcare work without fear of coercion or penalty.

RESOLVED, that the FMA supports HROC legislation to protect physicians from coercion, imposition and any type of penalty by governmental and other outside regulatory measures that would violate the professional integrity of physicians and endanger their right to practice their chosen field of medicine.

Board Referral: Council on Legislation.

10-10-15: The Board approved adopting amended Resolution 15-315 as follows:

RESOLVED, that the FMA will advocate for ~~H~~healthcare ~~R~~ights of ~~C~~onscience (~~HROC~~) for physicians and hereby acknowledges that it is a basic right of individual physicians to freely exercise their right to conscientious objection in their healthcare work without fear of coercion or penalty.

RESOLVED, that the FMA supports ~~HROC~~ healthcare rights of conscience legislation to protect physicians from coercion, imposition and any type of penalty by governmental and other outside regulatory measures that would violate the professional integrity of physicians and endanger their right to practice their chosen field of medicine.

Update: FMA legislative staff monitored HB 401, Protection of Religious Freedom which did not pass out of committees.

Fiscal Note: Costs associated with this resolution did not exceed the current FMA operating budget.

Resolution 15-401
Any Willing Provider
South Florida Caucus

House Action: Reaffirmed as existing policy.

RESOLVED, That the Florida Medical Association and their delegates to the American Medical Association support legislation to enact an Any Willing Provider Act to allow these patients the same opportunity to obtain medical care with the physician of their choice.

Update: The FMA Delegation continues to work with the AMA and other states on this matter.

Fiscal Note: Costs associated with this resolution have not exceeded the current FMA operating budget.

***Resolution 15-402**
**FMA Advocacy for the Repeal of the Alternative
Payment Models (APM) and Merit-Based Incentive Payment System (MIPS)**
Sarasota County Medical Society, Charlotte County Medical Society.

House Action: Referred to the Board of Governors

RESOLVED, That the FMA advocate for the repeal of the Alternative Payment Models (APM) and Merit-Based Incentive Payment System (MIPS) provisions in H.R. 2 in that it will be a logistical impediment to Florida's physicians caring for Medicare recipients; and be it further

RESOLVED, That the FMA through the AMA delegation push the AMA to advocate for repeal of these provisions since they have not been studied in counties with large Medicare populations without fully integrated medical systems in place.

Update: The Board created a Task Force on Alternative Payment Models to examine implications of Alternative Payment Models (APM) and Merit-Based Incentive Payment System (MIPS) provisions in H.R. 2. The Task Force published two papers in the spring issue of the FMA Magazine "*The Health Care Revolution Part 1* and the *Health Care Payment Revolution Part 2: Medicare's new direction brings physicians to a crossroad*". Copies of the articles can be found here <http://flmedical.uberflip.com/i/660283-fma-magazine-spring-2016/35>

Fiscal Note: Staff and member travel costs were incurred to attend meeting in Miami.

Resolution 15-403
Preventing Lab Prior Authorizations
Hillary Hultstrand, M.D., Delegate
Florida Society of Rheumatology, Florida Society of Clinical Oncology,
Escambia County Medical Society in Conjunction with Santa Rosa County, Florida Society of Plastic
Surgeons

House Action: Reaffirmed as existing policy.

RESOLVED, That the Florida Medical Association supports the concept that only those labs that are not routine (or high cost) or not supported by appropriate ICD9/10 codes per Medicare can require a prior authorization.

Resolution 15-404
Outpatient Observation
South Florida Caucus

House Action: Adopted Substitute Resolution 15-404 in lieu of original 15-404.

RESOLVED, That the Florida Medical Association, in conjunction with its delegation to the American Medical Association, and in coordination with the Hospital Association, shall work to assure that both patients and physicians are treated fairly in the process of delineating the hospital admission status of patients.

RESOLVED, That the FMA believes that healthcare facilities should inform patients and their physicians of the financial responsibilities associated with their hospital admission status. In addition, patients and

physicians should promptly be made aware of any changes to hospital admission status and any additional financial obligations.

RESOLVED, that the FMA believes that physicians should have control of any decisions regarding hospital admission status.

Update: The FMA Delegation continues to work with the AMA and other states on this matter.

Fiscal Note: Costs associated with this resolution have not exceeded the current FMA operating budget.

Resolution 15-405
Independent Insurance Consultant, NICA
Stephen Babic, M.D., Delegate

House Action: Adopted Substitute Resolution 15-405 in lieu of original 15-405.

RESOLVED, That the Florida Medical Association shall create a NICA Task Force. The Task Force shall consist of physicians from various specialties and shall include proportional representation from physicians that do not carry medical malpractice insurance. The Task Force shall report back its findings and recommendations to the House of Delegates in 2016.

Update: FMA President and Chair, Dr. Nobo appointed the following members to serve on the NICA Task Force, Dr. Doug Murphy, Dr. Brian Nobie, Dr. Jason Pirozzolo, and Dr. Sergio Seoane.

12/07/15: Task Force met by conference call.

12/11/15: Drs. Murphy, Nobie and Seoane and FMA General Counsel Jeff Scott attended the NICA Board of Directors Meeting in Orlando and presented a series of questions to the Board

01/2016: Dr. Nobo invited the Executive Director of NICA to attend the January 2016 Board meeting present a report on NICA

1/10/2016: The Board received a report from Kenney Shipley, Executive Director of NICA. The NICA Task Force presented their findings and presented one recommendation for the Board's consideration. The Board voted (with one abstention by Dr. Lenchus) to continue supporting NICA, but agreed the FMA should find ways to expand the participation of hospitals that benefit from NICA.

Fiscal Note: Staff and member travel costs were incurred to attend the December 11th meeting in Orlando.

***Resolution 15-406**
Enhanced Patient Care through Information Sharing and Coordination
Collier County Medical Society

House Action: Referred to the Board of Governors.

RESOLVED, That the FMA seek legislation or regulation to require all EHR vendors to utilize standard and interoperable software technology to enable electronic health records sharing across all healthcare delivery systems, including institutional and community-based settings of care delivery, and be it further RESOLVED, That the FMA work with the appropriate local and federal agencies to collaborate with EHR vendors, healthcare providers, healthcare delivery facilities and other stakeholders to enhance

transparency and establish processes to achieve data portability to improve communication between physicians, hospitals, patients and other healthcare settings, and be it further RESOLVED, That the FMA work with the AMA to collaborate the efforts to achieve interoperable systems and information sharing of electronic health information.

Board Referral: Council on Medical Economics and Practice Innovation.

Update: The Board reaffirmed as existing FMA policy.

Resolution 15-407
Health Care Access to all Floridians Medicaid to Medicare Parity
Reform Ho/PSN Statewide Expansion Oversight and Medicaid Eligibility Expansion
through Federal Funding
Broward County Medical Association

House Action Adopted as amended.

RESOLVED, That the FMA reaffirms policy P 300.028, which outlines the Florida Medical Association's position on Medicaid expansion, and further

RESOLVED, That the Florida Medical Association re-establish a Medicaid Expansion Task Force and Grievance committee for physicians to monitor and hold accountability of Medicaid Managed Care Company compliance with Florida State laws. The Task Force shall report back to the House of Delegates in 2016, and further

RESOLVED, that the FMA will publicly announce its position on Medicaid Expansion in a press release after the 2015 Annual Meeting, and further

RESOLVED, that the FMA will offer legislative support to expand Medicaid consistent with FMA policy at the earliest appropriate time.

Update: Ongoing.

Resolution 15-408
Immunization Coverage-Reimbursement and Vaccine Preventable Diseases
Broward County Medical Association

House Action Adopted as amended.

RESOLVED, That the Florida Medical Association take proactive steps and send a public letter of its position about vaccination coverage in Florida to all appropriate third party payers; and be it further

RESOLVED, That the Florida Medical Association will include in the letter and publication that it is united to protect our community by promoting wellness, availability and access to immunizations through cost effective measures and education to eliminate vaccine preventable diseases; and be it further

RESOLVED, That the Florida Medical Association will include in the letter and publication, that immunization and vaccination are preventative care and should be covered by all insurance plans; and be it further

RESOLVED, That the Florida Medical Association will include in the letter and publication and that the FMA will seek legislation to ensure physician and other entities to be covered 100% for all vaccination related costs as preventative care without co-pay and or deductibles at levels properly above costs of storage, administration and other E&M codes and CPT codes associated with immunization.

Update: Ongoing

Resolution 15-409
Out of Network Coverage & Reimbursement
Hillsborough County Medical Association, Florida Orthopedic Society.

House Action Adopted as amended.

RESOLVED, That the Florida Medical Association supports requiring managed care companies to pay provider charges for out of network coverage so that patients are protected; and be it further
RESOLVED, that the Florida Medical Association supports working with the American Medical Association to address the problem of inadequate networks and inadequate out of network reimbursement.

Update: The FMA worked tirelessly on the issue of balance billing and eventually was able to reach a compromise with the bill sponsors: Representative Carlos Trujillo (HB 221) and Senator Rene Garcia (SB 1442). Non-contracted physicians will no longer be able to balance bill PPO patients for ER services, or services provided in hospitals where the patients had no ability to choose the physicians. Physician payment will be the lesser of (1) the physician's charges, (2) the usual and customary charge for similar services in the community where the services were provided, (3) or the mutually agreed upon charge between the physician and insurance company.

If the physician disagrees with the payment rate, the bill provides for a dispute resolution process. The physician or the health insurer may offer to settle the claim dispute. If the offer is not accepted and the final order amount is more than 90 percent or less than 110 percent of the offer amount, the party receiving the offer must pay the final order amount to the offering party. The amount of an offer made by a physician to settle an alleged underpayment by the health insurer must greater than 110 percent of the payment amount the physician received. The amount of an offer made by a health insurer to settle an alleged overpayment to the physician must be less than 90 percent of the alleged overpayment amount by the health insurer. Both parties may agree to settle the disputed claim at any time, for any amount, regardless of whether an offer to settle was made or rejected.

This was an improvement from previous versions of the bill, which would have mandated an unfair arbitration resolution process and set payment at less favorable rates. HB 221 bounced between the House and the Senate until the final moments of session, where it passed 118-1 in the House and unanimously in the Senate.

Fiscal Note: Costs associated with this resolution did not exceed the current FMA operating budget.

Resolution 15-410
Unjustified Consolidation of Health Insurers
Hillsborough County Medical Association, Florida Orthopedic Society

House Action Adopted as amended.

RESOLVED, That the Florida Medical Association continue to work with the American Medical Association to address the issue of anticompetitive consolidation in the health care insurance industry; and be it further

RESOLVED, That the Florida Medical Association continue to enthusiastically supports a competitive health insurance marketplace.

Update: The FMA continues to monitor proposals that would consolidate the health insurance market, including Aetna's proposed acquisition of Humana and Anthem's proposed acquisition of Cigna. The FMA sent letters to state regulators and policy makers opposing Aetna's acquisition of Humana, and met with the Attorney General's office to urge the AG to oppose the merger.

Fiscal Note: Costs associated with this resolution have not exceeded the current FMA operating budget.

***Resolution 15-411**
Eliminating the Medicaid Physician Fee Schedule
Radhakrishna K. Rao, Delegate

House Action: Referred to the Board of Governors for Study

RESOLVED, That the Florida Medical Association supports eliminating the Medicaid Physician Fee Schedule and using the Medicare Physician Fee Schedule to reimburse physicians that serve Medicaid patients.

Board Referral: Council on Medical Economics and Practice Innovation.

10-10-15: The Board approved adopting Resolution 15-411. The consensus of the Council was that this resolution would enhance existing FMA policy. While existing FMA policy calls for raising the Medicaid physician fee schedule to Medicare levels, this resolution goes further by eliminating the Medicaid physician fee schedule altogether. Since the Medicaid physician fee schedule is often confusing and needlessly complex, this would reduce the administrative complexity of billing Medicaid and verifying the accuracy of any payments received. While the Council recognizes that this directive may be difficult to accomplish in the current environment, it remains a meaningful goal.

Fiscal Note: Costs associated with this resolution did not exceed the current FMA operating budget.