

MINUTES

MMA Committee on Communications

Minnesota Medical Association
John Murphy Conference Room
1300 Godward Street NE, Suite 2500
Minneapolis, MN

Wednesday, January 21, 2009

Members present:

Judith Shank, M.D., Chair
Patrick Irvine, M.D.
Samuel Marquez, M.D.

Staff Present:

Lorrie Holmgren

Members not present:

Julie K. Anderson, M.D.
Maria C. Carrow
Jaspreet Dhaliwal, M.D.
Neal R. Holtan, M.D.
Michael J. Huska, M.D.
Stephen MacLeod, M.D.
Farrah Mateen, M.D.
Keith P. Murphy, M.D.
Vernon L. Sommerdorf, M.D.

I. Call to Order

Judith Shank, M.D., chair, called the meeting to order.

II. Approval of the Minutes

The minutes of the November 12 minutes were approved as written.

III. Communications Update

- a. News Coverage. The Communications Committee reviewed news clips since November, 2008. Main topics of media coverage were the AMA Interim Meeting, transfatty acids, and adolescent sleep needs.
- b. Staff Changes. For budgetary reasons, the MMA has laid off the web writer, and combined the Membership and Products and Services Department.
- c. Advocacy Communications.
 - i. Safety-net programs. The MMA has launched a long-range campaign to raise payment for medical services to people on public programs so that it comes closer to covering practice costs, and a short-term campaign to prevent cuts to these programs in 2009. The MMA conducted media training in December, met with a *Star Tribune* reporter to explain the problem, sent a letter to Gov. Pawlenty and an op/ed to the *Star Tribune*.
 - ii. Day at the Capitol. In addition to preserving the safety net programs, MMA priorities will be protecting the Health Care Access Fund, health care reform and driver safety laws.

- d. Reach Out and Read. Articles will be in the March issue of *Minnesota Medicine*.
- e. Publications Changes. Guided by data from the Communications survey showing that readership of the *Quality Review* was low, the MMA has discontinued that publication. Because the survey found that physicians believe that they would read less information about MMA activities if the *Physician Advocate* were not published, that publication will continue to go to members six times a year, every other month.

IV. Consideration of “Reliable Websites” for the public on the MMA website

- a. The committee reviewed the attached draft criteria and decided to use it as a basis for deciding whether websites should be listed on the MMA website. The committee also directed staff to adapt the criteria for use by the public and post these criteria on the website to guide people to reliable websites.
- b. The committee decided that HON certification should be one factor to consider in linking to a website for the public but should not be required, because it would disqualify excellent websites affiliated with hospitals, universities and clinics. The committee directed staff to add a link to the HON search function so that the public could use it to search for disease specific information.
- c. The committee directed staff to revise the introductory language on the website to make it clear that the MMA is not guaranteeing the accuracy of all the information on the websites listed and including the disclaimer that no website should be considered a substitute for individual medical advice.
- d. The committee does not believe that this page should be considered a high priority or that it calls for significant investment of MMA staff time. We should limit ourselves to the current list of a few reputable sites, add Web MD, which was recommended by physicians in a survey and consider the five recommendations that resulted from the request of the MMA Quality Committee that we expand our list.
- e. The committee directed staff to send the criteria to committee members and invite them to respond to the recommendation of five new websites.

V. Ideas for new design of Physician Advocate

Committee members made the following suggestions for a new design of the Physician Advocate.

- a. They approved of plans to change the size to 8 ½ by 11” and to use more color.
- b. One idea was to provide clear, understandable information about health care reform that points out possible pitfalls as well as advantages to such concepts as health care homes.
- c. They like the idea of highlighting physicians, using color photos, quoting physicians who testified at the Legislature and telling why they were chosen, and showing physicians interacting with legislators at District Dialogues.

- d. They wanted to see not only information about what the MMA has done for them, but also how to get involved, how to get their voice heard, what they can do, what they should know.
- e. They liked the bullet-point articles and short summaries in the current Physician Advocate.
- f. They wanted to see more dynamic colors in the redesign and a punchy vigorous writing style.

VI. Reactions to polybagging

There were mixed reactions to the practice of polybagging special reports with *Minnesota Medicine*. One physician said he would discard it because his specialty society polybagged ads with its journal, and two said they would pay attention to it.

VII. Adjournment.