

# MMA Policy Council - Issues to Deliberate in 2018

Survey Results

Minnesota Medical Association

Minnesota Medical Association  
MMA Policy Council - Issues to Deliberate in 2018

|  |
|--|
| <b>Survey Title: MMA Policy Council - Issues to Deliberate in 2018</b>     |
| <b>Report Type: Advanced Frequency</b>                                     |
| <b>Start Date:</b> 12-Feb-18   |
| <b>Data Sources</b>  |
| <b>Data Source 1:</b> Single-Use Link                                      |
| Invitations Delivered: 39   Responses Received: 29   Response Rate: 74.36% |
| <b>Total Number of Responses in This Report:</b> 29                        |

Minnesota Medical Association  
MMA Policy Council - Issues to Deliberate in 2018

Below are some issues that the Policy Council discussed during their assessment of a 2018 work plan:

1. **MinnesotaCare Buy-In (Protections for Medical Groups):** Assess whether a disproportionate share type financing mechanism should be considered.
2. **Mental health:** There are several areas in the mental health space that the Policy Council can explore. This includes bed availability, suicide prevention, prevention of mental illness, insurance reimbursement, expanding access to mental health care, etc.
3. **Electronic health records:** Explore policy options for accelerating EHR adoption.
4. **Principles for health care reform:** Review and identify potential gaps and questions.
5. **Conscience and religious freedom protection:** What additional policy or action is needed around this issue?
6. **Sustainability of health systems in rural areas:** Rural communities have unique strengths, challenges, and needs. Assess the state of rural health care, and what can be done to ensure that rural communities are equipped to deliver quality, affordable health care; and that people who live in remote areas have access to a basic standard of care.
7. **Removal of the personal belief and immunizations exemption:** MMA already has policy on this issue. Is there something additional that needs to be done in regards to this?
8. **Definition of a hospital community "benefit":** Is the definition of what constitutes a hospital community benefit sufficient, and if not, what criteria is needed to more effectively quantify the amount of community benefits provided by any one nonprofit hospital.

Please rank the top three issues that you think the Policy Council should work on this year.

| Responses  | Rank   |        |        | Weighted Score | Relative Weighted Score | Overall Rank |
|--|--------|--------|--------|----------------|-------------------------|--------------|
|  | Rank 1 | Rank 2 | Rank 3 |                |                         |              |
| Mental health  | 12     | 4      | 4      | 48             | 100                     | 1            |
| Sustainability of health systems in rural areas            | 4      | 7      | 7      | 33             | 69                      | 2            |
| MinnesotaCare Buy-In (Protection for Medical Groups)       | 6      | 5      | 3      | 31             | 65                      | 3            |
| Principles for health care reform                          | 4      | 6      | 3      | 27             | 56                      | 4            |
| Electronic health records                                  | 1      | 3      | 4      | 13             | 27                      | 5            |
| Conscience and religious freedom protection                | 1      | 1      | 3      | 8              | 17                      | 6            |
| Removal of the personal belief and immunizations exemption | 1      | 1      | 2      | 7              | 15                      | 7            |
| Definition of a hospital community "benefit"               | 0      | 2      | 3      | 7              | 15                      | 7            |
| <b>Total Responses</b>                                     |        |        |        |                |                         | <b>29</b>    |

If there are other issues not listed in the previous question that you think should be addressed by the Policy Council, please specify below.

Response Text

Equity of coverage for conditions - ie, coverage of medical and surgical therapy for inflammatory bowel disease without higher copays, deductibles for biologic therapy

Pharmacy costs - which are now more than medical provider costs

Related issues are: Single Payer Health Insurance in Minnesota; Physician "burn-out", cause and treatment.

Minnesota Medical Association  
MMA Policy Council - Issues to Deliberate in 2018

|   |
|---|
| How would single payer improve our health care system?  |
| Continued funding of teaching health centers and public service loan forgiveness programs   |
| Mandatory universal background checks for gun sales   |
| No  |
| Update the definition of "professionalism" and "collegiality" in health care from an ethical perspective that can be applied to present day situations. |
| gun violence, sanctity of physician/patient relationship, maternal substance abuse and mandatory reporting,   |
| Advanced directives (eg. Honoring choices), Palliative care and End of Life Care practice governance  |
| cost of insurance vs overall benefit vs universal health care. No payment advantage   |