MINUTES

MMA POLICY COUNCIL
TUESDAY, AUGUST 25, 2015
6:00 PM – 8:00 PM
MINNESOTA MEDICAL ASSOCIATION-JOHN MURPHY CONFERENCE ROOM
MINNEAPOLIS, MN

Members Present
Ernest Lampe, MD, Chair
Peter Amadio, MD (via phone)
Leah Anderson
Elisabeth Bilden, MD
Terence Cahill, MD (via phone)
Stuart Cameron, MD
Stephen Cragle, MD
Mark Eggen, MD (via phone)
Alexander Feng
Elizabeth Fracica (via phone)
Jessica Heiring, MD
Kenneth Kephart, MD
Matthew Kruse, MD
Kathryn Lombardo, MD
Noel Peterson, MD (via phone)
Neil Shah, MD
David Thorson, MD

Members Absent
David Agerter, MD
Michael Baich, MD
James Dehen, MD
Ramnik Dhaliwal, MD
Robert Grill, MD
Daniel Heinemann, MD
Meltiady Issa, MD
Evan James
Christopher Johnson, MD
Lisa Mattson, MD
Kimberly McKeon, MD
Steven Meister, MD
Douglas Pryce, MD
Christopher Rief, MD
Christopher Thiessen, MD
Kimberly Tjaden, MD
Sally Trippel, MD
Jon Van Loon, MD
Craig Walvatne, MD
Robert (Jay) Widmer, MD
Thomas Witt, MD

Staff Present
Eric Dick
Juliana Milhofer
Janet Silversmith

I. Welcome, Introductions & Agenda Review
Ernest Lampe, MD, Policy Council Chair, called the meeting to order at 6:05 pm. All attendees introduced themselves.

II. Approve Minutes of May 20, 2015
During review of the May meeting minutes, a concern was raised regarding the summary of the any willing provider/freedom of choice discussion. In particular, Dave Thorson, MD expressed concern with the note on the bottom of page 2, “small groups can’t compete on quality.” He did not recall that part of the discussion and also expressed concern with the accuracy of that statement. Others noted that they did
recall the statement, but its context may not be entirely clear. Ultimately, the Council agreed to adopt the minutes as written. Council members directed staff to reflect the concern with the statement in the August meeting minutes.

**Adopted Motion:** that the minutes of the May 20, 2015 meeting be approved.

### III. Policy Recommendation: Narrow Provider Networks

In follow up to the May meeting, Janet Silversmith presented a draft policy statement for the Council’s consideration. There was a lengthy discussion regarding political feasibility and current trends in the market. There was also discussion regarding “highest quality care” and “best care” with respect to physicians’ ability to refer patients without undue system/group interference.

After significant deliberation, the Council ultimately concluded that better information and clarity about network design and composition was the most appropriate and feasible direction for MMA. There was strong support for supporting patient choice of physician, but there was also recognition that some patients are willing to sacrifice broad choice in favor or more affordable insurance coverage. As such, the Council expressed concern for supporting public policies that could have the real or perceived potential to further increase the cost of insurance. It was noted that the adequacy and accuracy of network information that is available at the point of purchase is very poor. In addition, it was noted that provider-defined networks (whether integrated systems or ACO-type systems) also try to contain patients within their network. There was strong support for the idea that physicians deserve protection from business practices/policies that seek to penalize or constrain physicians’ decisions about care they believe is in the best interest of their patients.

**Motion:** that the Policy Council submit the following recommendation for consideration by the MMA Board of Trustees:

Consistent with the goal of promoting a patient-centered health care system, the MMA will advocate for transparency in network design and benefits in order to allow patients to make fully informed decisions about their choice of physician. Physicians should not be penalized or otherwise constrained from referring patients to the physicians or practices they believe would provide the best care to their patients.

The motion passed unanimously.

### IV. Annual Conference Planning: End-of-Life and Value-Based Payment Policy Forums

Janet Silversmith provided a brief update on the planning committee’s initial plans for the two policy forums to be held at the 2015 MMA Annual Conference. Further feedback and ideas were provided by Council members, including potential videos to share during the end-of-life forum, areas of focus for the value-based payment forum, and whether or not a panel would be useful to include at the value-based payment forum. There was strong support for focusing on participant discussion and input over education. Brief level-setting education/information was agreed to be important, but adding other speakers and/or panelists was rejected.
V. Annual Conference Planning: Open Issues Forum

Janet Silversmith provided a brief update on the two open issues that have been submitted to date. With the 90-minutes allocated for the forum, she noted that there is an opportunity for the Council to submit topics for which broader member input would be useful. She suggested several topics for the Council’s consideration – medical cannabis expansion to include intractable pain; physician aid-in-dying/physician-assisted suicide; Minnesota’s conscientious beliefs vaccine exemption; and, alternatives to the provider tax. Council members expressed support for advancing all of these topics. Two additional topics were also suggested – changes to increase use of the prescription monitoring program, and radon disclosure for rental properties.

VI. New Business & Adjourn

Council members were reminded that there will be a Council reception on Friday, September 25, 5:00-6:00 pm during the Annual Conference.

There being no time for additional business, the following motion was made, seconded and adopted:

**Motion:** that the meeting be adjourned at 8:00 pm.

Minutes submitted by
Janet Silversmith