MINUTES

MMA POLICY COUNCIL
SATURDAY, SEPTEMBER 20, 2014
12:00-1:30 PM
MADDEN’S ON GULL LAKE, GOLF VILLA D
BRAINERD, MN  56501

Members Present
Ernest Lampe, MD, Chair
Leah Anderson
Maya Babu, MD
Michael Baich, MD
Elisabeth Bilden, MD
Terence Cahill, MD
Stuart Cameron, MD
Stephen Cragle, MD
James Dehen, MD
Peter Dehnel, MD
Ramnik Dhaliwal, MD
Laurie Drill-Mellum, MD
Mark Eggen, MD
Alexander Feng
Elizabeth Fracica
Robert Grill, MD
Daniel Heinemann, MD

Members Absent
David Agerter, MD
Peter Amadio, MD
Meltyady Issa, MD
Steven Meister, MD
Jonathan Shelver, MD
Robert (Jay) Widmer, MD

Staff Present
Barb Daiker
Eric Dick
Teresa Knoedler
Juliana Milhofer
Dave Renner
Janet Silversmith

I. Welcome & Introductions
Ernest Lampe, MD, Policy Council Chair, called the meeting to order at 12:15 pm.

II. Approve Minutes of August 26, 2014
With a correction noted to reflect the attendance of Stephen Cragle, MD (via phone), the following motion was made, seconded and adopted:
Motion: that the minutes of the August 26, 2014 meeting be adopted as amended.

III. Distribution of Ballots
Janet Silversmith introduced George Lohmer, MMA CFO, who distributed ballots for the two Council positions on the MMA Board of Trustees. Mr. Lohmer counted all completed ballots.

IV. Debrief: Telehealth Policy Forum
Kathryn Lombardo, MD provided a summary of the forum. She noted that the program included a simulated telehealth encounter. More than one-half of the attendees had no prior telehealth experience, and another 17% had minimal. She noted that the structure of the forum was mostly presentations/educational, with limited time for input from attendees. She suggested that future forums might strive to ensure more time for discussion and sharing of concerns. Among some of the issues that were raised during the forum were licensure; privacy (HIPAA, training, special certifications); regulatory requirements; infrastructure/equipment access; and, reimbursement. She noted that there is little controversy about whether telehealth is part of the future of health care; the issue is how best to accommodate it. The key policy concerns she identified were payment, in particular parity with face-to-face encounters; Medicare limits based on location of patient; Medicaid issues, potentially; and, licensure and disciplinary issues across state lines.

A discussion among Council members followed. Other topics identified that may be worth future consideration were how to monitor quality of care and changes/trends in care; health plan network participation issues; and, how to ensure broad access to all areas of the state.

V. Debrief: Workforce Policy Forum
Alex Feng provided a summary of the workforce forum. Among the topics identified during the forum were issues of reimbursement; leadership training needs of physicians; and, APRN competency.

A lengthy discussion followed. Several Council members expressed strong concerns about the need to more aggressively fight non-physician scope of practice expansion; others noted that in some areas of the state APRN independent practice does not seem to be the desire and access to care often relies on their presence. Some commented that efforts to demand equal pay could be the next logical step on this topic. Others expressed concerns about the expansion of privileges.

Some questions were posed as to whether there are better ways of defining education and training so that it accurately matches scope of practice. It was noted that scope of practice is defined legislatively, not through the educational system. A suggestion was made to support better data collection/analysis to allow comparisons by provider type. Although not fully refined within the forum discussion or by the Council, some of the themes that emerged are competency/performance evaluation, payment, oversight, and training.

VI. Debrief: Open Issues Forum
Noel Peterson, MD, moderator of the open issues forum, presented the results of the open issues ranking exercise – attendees were asked to identify their top three issues for MMA to advance. MMA staff presented a summary of the topics, noting that there may be some logical ways to group the proposals.
(e.g., those lend themselves to reaffirming policy, those that may have only an AMA component). Dr. Peterson suggested that it might be useful to consider using a consent calendar-type process to manage the submitted issues. MMA staff would draft recommendations based on forum input and those could serve as the basis for Council discussions.

After some clarification of how the consent calendar process works, the following motion was made, seconded and adopted:

**Motion:** that a consent calendar process to be used at the next meeting to process the open issue submissions.

A request was made to ensure that the Council receives feedback on how the MMA Board acts on Council recommendations. It was further requested that open issue submission authors be kept apprised of the Council’s and Board’s deliberations.

**VII. Election Results**

ON the first ballot, Dr. Lampe was elected to the MMA Board of Trustees, but a tie result among the other two candidates required a second ballot. After the second ballot, it was announced that Christopher Johnson, MD was elected to fill the other trustee position on behalf of the Policy Council.

**VIII. New Business**

Ernest Lampe, MD, Chair, informed the Council that MEDPAC is an important tool that the MMA uses to support its advocacy work. Council members can expect to receive a solicitation from MEDPAC.

Dr. Lampe announced that the Council will meet next on Wednesday, October 8, 5:00-8:00 pm. In addition, a Council retreat has been scheduled for Saturday, January 10.

**IX. Adjourn**

With no time remaining, the following motion was made, seconded and adopted:

**Motion:** that the meeting be adjourned at 1:30 pm.

Minutes submitted by
Janet Silversmith