I. Welcome, Introductions & Meeting Goals

Ernest Lampe, MD, Policy Council Chair, called the meeting to order at 6:05 pm. He welcomed members, noting the newest Council member, Dr. Dionne Hart, and reviewed the goals for the meeting.

II. Approve Minutes of January 23, 2016

With no changes noted, the following motion was made, seconded and adopted:
Motion: that the minutes of the January 23, 2016 meeting be adopted as amended.

III. Open Notes Initiative
Janet Silversmith, Director of Health Policy, provided Council members with information regarding the OpenNotes Initiative - an effort to improve patient access to clinical notes. Recently, the MN Alliance for Patient Safety (MAPS) and the MN Health Action Group (employer coalition) convened community stakeholders in a discussion on this issue. The initiative is not a specific product/vendor, but rather a “movement” aimed at improving patient understanding and engagement. Currently, the EHRs that can support this functionality (to allow patients electronic access to clinical notes) are supported by Epic, Cerner, and Allscripts. The legal framework for the sharing of such information (HIPAA and state law) is already in place – this effort does not change this.

The question before the committee is whether this is a topic on which MMA might want to take a position. A lengthy discussion followed. Among the comments noted:

- Inclusion of psychiatry notes was questioned (many groups that have adopted OpenNotes have delayed inclusion of mental health services).
- Dr. Heinemann noted that Sanford will be starting OpenNotes following most recent Epic upgrade (with access available from dates of service of May 2016 forward).
- Some noted patient pressure to change/remove information (e.g., mental health) that they don’t want included in their medical record.
- Dr. Shah noted that OpenNotes is available in his practice, and he never changes a patient’s documentation, unless it is factually incorrect.
- Some members urged MMA neutrality on this in order to avoid any mandates/expectations or pressures on physician practices (particularly if it might involved significant EHR upgrades/investment). Letting the marketplace decide the need/demand for this was also suggested.
- Other members supported MMA “encouragement” and/or support of the concept given the emerging data on the value to patients; in addition, some members suggested that if there is going to be pressure and/or interest in this topic by other groups, the MMA should be prepared with a position statement.

Ultimately, the following motion was made, seconded, and adopted:

Motion: that MMA staff draft a policy statement regarding improved patient access to clinical notes. The draft statement will be routed to Council members prior to the next meeting and action will be taken on the statement at the August 2016 Council meeting.

IV. 2016 Annual Conference Policy Forums
In considering policy forum topics for the 2016 Annual Conference, Janet Silversmith noted that the two placeholder topics are physician aid-in-dying and quality measurement. The tentative conference schedule has the forums set for 60 minutes in length (shorter from last year, where they were 90 minutes in length). In addition, the Council was informed that the forums will compete for attendees from
concurrent educational sessions and the Open Issues Forum is also tentatively scheduled to run concurrent with educational sessions.

Council members were supportive of the two policy forum topics. Several members expressed concern about the Open Issues Forum, in particular, running concurrent with other sessions. It was further suggested that conference attendees be provided with more explanation regarding how the Open Issues Forum process works.

V. New Issue Triage
Janet Silversmith informed the Council about a new issue that was submitted by David Thorson, MD, for possible consideration. The idea submitted was CPR training for food service workers. The Council engaged in a discussion regarding whether they should retain the issue, whether the issue should be referred to an MMA committee, or whether the issue should not be pursued further. After discussion, the following motion was made, seconded and adopted:

**Motion:** that the Council table the issue of CPR training for food service workers.

VI. Update: Mental Health Policy Forum Planning
Juliana Milhofer, MMA Policy Analyst, provided the Council with an update on planning for the MMA’s Mental Health Policy Forum. Ms. Milhofer informed the Council that the following of six physicians were convened to serve as the planning committee for the forum:

- Roger Kathol, MD
- Matt Kruse, MD
- David Larson, MD
- Kathryn Lombardo, MD
- Joel Oberstar, MD,
- Patrick Zook, MD

Among the identified potential forum topics presented to the planning committee were the following:

- Mental health and jails
- Psychiatrist shortage
- Emergency room diversion issue
- Hospital bed capacity
- Community mental health infrastructure for adults and children is not meeting the demand
- Primary care and mental health integration
- Reimbursement issues – primary care
- Rural access

The planning committee ultimately concluded that the MMA needed to do more than just host a 2 hour policy forum on the topic. In particular, the planning committee members were supportive of (1) bringing a coalition of interested stakeholders together; and (2) convening a “call to action” summit. These ideas will need to be discussed with the MMA Board of Trustees (May 2016 meeting) so that an assessment of resource capacity can be determined. An update on the Board’s decision will be brought back to the Council at their August 15th meeting.
VII. **Update: MMA Governance Evaluation Work Group**

Council members Stephen Cragle, MD and R. Jay Widmer, MD, Council representatives on the MMA Governance Evaluation Work Group, provided an update on the proposed governance changes (including the Policy Council) for consideration by the House of Delegates at the 2016 Annual Conference.

The Work Group is recommending continuation of the governance changes adopted in 2013, including the permanent dissolution of the House of Delegates. Two changes included are reducing the number of Council seats on the Board of Trustees (from 2 to 1), and adding a medical student seat on the Board. The rationale noted for the reduction in Council seats was the goal to accommodate the smaller Board size and to minimize the number of non-elected Board members. A lengthy discussion followed regarding the proposed changes, including the Council Board seats. A question about Council effectiveness was raised, which led to a brief discussion about the Board’s decision to overturn the Council’s restrictive covenants proposal (February Board meeting). Some concerns were raised regarding the evaluation process used for the governance changes, including the metrics used. No action was taken.

VIII. **New Business**

The next meetings of the Policy Council are as follows:

- Monday, August 15, 6:00 – 8:00 pm
- Thursday-Friday, September 23-24, 2016 – MMA Annual Conference (no Council meeting scheduled during the conference)
- Wednesday, October 12, 5:00 – 8:00 pm

IX. **Adjourn**

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

**Motion:** that the meeting be adjourned at 8:05 pm.