

## MINUTES

### MMA POLICY COUNCIL

TUESDAY, NOVEMBER 1, 2016

6:00 – 8:00 PM

AMHERST WILDER FOUNDATION, 451 LEXINGTON PARKWAY

ST. PAUL, MN

#### Members Present

Ernest Lampe, MD, Chair  
Peter Amadio, MD (via phone)  
Leah Anderson, MD  
Terence Cahill, MD  
Stuart Cameron, MD  
Mark Eggen, MD  
Alexander Feng  
Elizabeth Fracica (via phone)  
Dionne Hart, MD  
Daniel Heinemann, MD (via phone)  
Jessica Heiring, MD (via phone)  
Kenneth Kephart, MD  
Matthew Kruse, MD (via phone)

Kathryn Lombardo, MD  
Lisa Mattson, MD  
Douglas Pryce, MD  
Christopher Reif, MD  
George Schoephoerster, MD  
Caleb Schultz, MD (via phone)  
Kimberly Tjaden, MD  
Sally Trippel, MD  
Jon Van Loon, MD (via phone)  
Craig Walvatne, MD  
Thomas Witt, MD (via phone)

#### Members Absent

Michael Baich, MD  
Elisabeth Bilden, MD  
Stephen Cragle, MD  
James Dehen, MD  
Ramnik Dhaliwal, MD  
Robert Grill, MD  
Meltiady Issa, MD  
Evan James

Christopher Johnson, MD  
Kimberly McKeon, MD (via phone)  
Steven Meister, MD (via phone)  
Noel Peterson, MD (via phone)  
Neil Shah, MD  
Christopher Thiessen, MD  
Robert (Jay) Widmer, MD (via phone)

#### Staff Present

Juliana Milhofer  
Janet Silversmith

#### Guests Present

Beth Kangas, ZVMS (via phone)  
Erica Sanders, Med. Student Section

### I. Welcome & Introductions

Ernest Lampe, MD, Policy Council Chair, called the meeting to order at 6:15 pm. All attendees introduced themselves.

### II. Approve Minutes of August 15, 2016

With no changes noted, the following motion was made, seconded and adopted:

**Motion:** that the minutes of the August 15, 2016 meeting be adopted.

III. **Update: Actions from the 2016 House of Delegates**

Ernest Lampe, MD, Chair, summarized the actions taken at the 2016 MMA House of Delegates. In particular, the House agreed to suspend itself until 2018 and, at that time, the Council is expected to report back based on a self-assessment of its structure and role. A lengthy discussion followed as several Council members shared thoughts and ideas regarding potential changes to the Council.

Ultimately, a **motion was made, seconded and adopted** to stop the discussion for now and proceed to other agenda items.

IV. **Policy Recommendation: OpenNotes**

At the April 2016 meeting, Council members considered the issue of patients' electronic access to clinical notes. A request was made at that time that staff draft a policy statement for the group's consideration. After a brief discussion, a **motion was made, seconded and adopted** to recommend to the MMA Board of Trustees the following policy statement:

The MMA supports voluntary efforts to increase patient access to clinical notes and other medical record information as a means to improve patient engagement in care, health literacy, and communication between patients and physicians.

The recommendation was adopted with at least a 2/3 majority.

V. **2016 Open Issues Forum – Panel Recommendations**

In follow up to the Open Issues Forum held during the 2016 MMA Annual Conference, forum panelists, Drs. Lampe, Lombardo, Pryce and Tjaden, developed recommendations on each of the open issues. The recommendations were presented to the Council members.

**A. Minor consent for HPV vaccination**

There was very strong support by the Council members – and by attendees at the Open Issues Forum – for MMA policy on this issue. Proposed language to also address the reporting of immunizations to the Minnesota Immunization Information Connection (MIIC) was dropped from the policy. A **motion was made, seconded, and adopted** that the Council submit the following policy to the MMA Board of Trustees:

The MMA supports legislation that would add HPV vaccination to the list of health services to which minors can consent.

The recommendation was adopted with at least a 2/3 majority.

**B. Pornography as a public health crisis**

The panel's proposed language was as follows:

That the MMA acknowledge the importance of healthy sexual activity and healthy relationship choices and recognizes that widespread use of pornography has become a public health issue of concern. The

MMA urges healthcare professionals to communicate the risks of pornography use to patients and their families and to offer resources both to protect adults and children and to treat individuals suffering from its negative effects.

During discussion, several Council members expressed concern about the role expected of physicians in the statement and some disputed whether the issue was truly a public health concern. It was noted that the USPSTF does not have recommendations in this area. Some other Council members noted that the issue of violence against women is not addressed in the proposed statement. Ultimately, **a motion was made, seconded, and adopted to table** the issue until a future meeting.

### **C. Chemical abuse as a chronic condition**

There was strong support for this proposal, both from the Council members as well as attendees at the Open Issues Forum. Current MMA policy was viewed as lacking in terms of explicit statements regarding the chronic nature of substance use disorders. The Council noted that this proposed position is consistent with that of the US Substance Abuse and Mental Health Services Administration (SAMHSA), which identifies substance use disorders as chronic conditions that are both preventable and treatable. In 2014, about 21.5 million Americans age 12 and older (8.1%) were classified with a substance use disorder in the past year. Of those, 2.6 million abused both alcohol and drugs, 4.5 million abused drugs but not alcohol, and 14.4 million abused alcohol only.<sup>5</sup> Of note, Minnesota has high prevalence rates for alcohol use disorders and lower rates for illicit drug use disorders.<sup>1</sup>

A motion **was made, seconded, and adopted** that the Council submit the following policy to the MMA Board of Trustees:

The MMA identifies substance use disorders as chronic conditions that are both preventable and treatable. Greater attention and increased resources are needed for substance use disorder prevention, treatment, and recovery services in Minnesota.

The recommendation was adopted with at least a 2/3 majority.

### **C. Improved access to contraceptives**

The original issue before the Open Issues Forum was intended to capture input on potential proposals to allow pharmacists to prescribe hormonal contraceptives as a means of both improving access to contraception and reducing unintended pregnancies. To date, California, Oregon and Washington have adopted such laws.

Input from attendees at the Open Issues Forum was mixed – about 1/3 expressed support for such a proposal; about 1/4 expressed opposition; and, nearly 1/3 expressed a preference for some other solution.

Ultimately, the Council supported policy consistent with that of ACOG, which supports over-the-counter access to oral contraceptives over other strategies, including pharmacist prescribing. On the issue of

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<sup>1</sup> National Survey on Drug Use and Health. The NSDUH Report: Substance Use Disorders in Substate Regions: 2008 to 2010. Center for Behavioral Health Statistics and Quality, Substance Abuse and Mental Health Services Administration. September 18, 2012.

pharmacist prescribing, ACOG noted concerns about payment for pharmacist services and the possibility of pharmacists inappropriately refusing to provide oral contraceptives.<sup>2</sup>

A motion **was made, seconded, and adopted** that the Council submit the following policy to the MMA Board of Trustees:

Consistent with the position of the American College of Obstetricians and Gynecologists, the MMA supports efforts to move oral contraceptives to over-the-counter (OTC) status, noting that the benefits in terms of unintended pregnancy outweigh the risks of OTC access and broader use.

The recommendation was adopted with at least a 2/3 majority.

#### **D. Firearm safety**

The panel presented a modification to the original proposal as follows:

The MMA reaffirms existing MMA policy (260.07) as follows: the MMA supports efforts that would 1) encourage physicians, as part of general patient history/questioning, to ask patients/parents if they have a firearm and, if so, if the ammunition is stored apart from the firearm; 2) encourage physicians to ask depressed patients and their families whether they have access to firearms; and 3) encourage physicians to provide information or resources on how to safely store a firearm to patients who choose to keep a firearm in their home.

The MMA promotes responsible gun ownership and supports changes to law that would require criminal background checks on all purchases and transfers/exchanges of firearms, with reasonable exceptions for immediate family and law enforcement and military acting in an official capacity.

The MMA urges state investment in Minnesota's firearm surveillance system to improve data collection, analysis, and research on firearm injury prevention.

During Council discussion, there was debate as to the value of reaffirming existing policy and whether the policy could be read as promoting gun ownership. A motion adopt the panel's recommendation was **made, seconded and defeated** (on a tie vote).

After further discussion, a **motion was made, seconded and adopted** that the Council submit the following policy to the MMA Board of Trustees:

The MMA will promote conversations between providers and patients on responsible firearm ownership and safe storage in the home (much like current conversations on the use of child-restraint systems in the car).

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<sup>2</sup> American College of Obstetricians and Gynecologists. Committee Opinion: Over-the-Counter Access to Oral Contraceptives. Number 544, December 2012. And referring (24) to: Gardner JS, Miller L, Downing DF, Le S, Blough D, Shotorbani S. Pharmacist prescribing of hormonal contraceptives: results of the Direct Access study. J Am Pharm Assoc (2003) 2008;48:212–26.

The MMA supports the growing movement for common-sense changes to gun laws to promote responsible gun ownership and supports efforts in Minnesota to require criminal background checks on all purchases and transfers/exchanges of firearms, with reasonable exceptions for immediate family and law enforcement and military acting in an official capacity.

The MMA urges elected leaders to ensure that law enforcement officials have adequate resources to enforce the laws that hold sellers accountable when they sell firearms to prohibited purchasers.

The MMA supports state investment in Minnesota's firearm surveillance system to improve data collection, analysis, and research on firearm injury prevention.

The recommendation was adopted with at least a 2/3 majority.

**VI. Council Member Terms**

Original Council members drew for the length of their second terms, consistent with the Council's earlier decision to begin to stagger member terms. For those on the phone and absent, terms will be randomly drawn by staff.

**VII. Election of Council Chair**

George Schoephoerster, MD, noted that Ernest Lampe, MD has agreed to run for another 1-year term as Council Chair. A nomination from the floor was made for Lisa Mattson, MD. An electronic ballot will be routed to members to elect the Council chair for 2017.

Given the actions by the 2016 House of Delegates, only one Council member is allowed to serve on the MMA Board of trustees. An electronic ballot will be routed to elect from the two current members, Dr. Lampe and Dr. Johnson.

**VIII. Adjourn**

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

**Motion:** that the meeting be adjourned at 8:20pm.