

MINUTES

MMA POLICY COUNCIL

WEDNESDAY, OCTOBER 14, 2015

5:00-8:00 PM

MIDLAND HILLS COUNTRY CLUB

ROSEVILLE, MN

Members Present

Ernest Lampe, MD, Chair

David Agerter, MD

Leah Anderson

Elisabeth Bilden, MD

Terence Cahill, MD

Stephen Cragle, MD

Jessica Heiring, MD

Kenneth Kephart, MD

Matthew Kruse, MD

Kathryn Lombardo, MD

Lisa Mattson, MD

Kimberly Tjaden, MD

Sally Trippel, MD

Jon Van Loon, MD

Members Absent

Peter Amadio, MD

Michael Baich, MD

Stuart Cameron, MD

Ramnik Dhaliwal, MD

James Dehen, MD

Mark Eggen, MD

Alexander Feng

Elizabeth Fracica

Robert Grill, MD

Daniel Heinemann, MD

Meltiady Issa, MD

Evan James

Christopher Johnson, MD

Kimberly McKeon, MD

Steven Meister, MD

Noel Peterson, MD

Douglas Pryce, MD

Christopher Rief, MD

Neil Shah, MD

Christopher Thiessen, MD

Craig Walvatne, MD

Robert (Jay) Widmer, MD

Thomas Witt, MD

Staff Present

Eric Dick

Teresa Knoedler

Juliana Milhofer

Janet Silversmith

Note: Due to a lack of quorum at the meeting, all motions noted in the minutes were subsequently finalized electronically.

I. Welcome & Opening Remarks

Ernest Lampe, MD, Policy Council Chair, called the meeting to order at 5:23 pm. He welcomed members and reviewed the goals for the meeting.

II. Approve Minutes of August 25, 2015

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

Motion: that the minutes of the August 25, 2015 meeting be adopted as amended.

III. Telehealth Task Force – Report & Recommendations

Kathryn Lombardo, MD, Chair of the Telehealth Task Force presented an overview of the Task Force’s work, including its charge, meeting frequency, membership, principles, and policy recommendations. There was interactive discussion throughout the presentation of principles and policies, including sharing of examples of the use of telehealth within Council members’ practices.

Following some questions and further discussion, the following motion was made, seconded, and adopted (with at least a 2/3 majority):

Motion: that the Council accept the Telehealth Task Force report, principles, and policies and recommend adoption of the same by the MMA Board of Trustees.

IV. 2015 Open Issues Forum Consent Calendar

Dave Agerter, MD, facilitator of the 2015 Open Issues Forum, reviewed the prepared consent calendar for the 8 open issues considered at the 2015 MMA Annual Conference. After a call for extractions from the calendar, the following open issues were extracted – Open Issues #2 (physician-assisted suicide/physician aid-in-dying), #3 (vaccine exemptions), #4 (medical cannabis program expansion), and #5 (provider tax).

With the noted items extracted, the following motion was made, seconded and adopted:

Motion: that the remainder of the consent calendar be adopted as recommended and the recommended items be forwarded for consideration to the MMA Board of Trustees.

Note that this motion passed with a 2/3 majority, meaning any changes by the MMA Board of Trustees will require a 2/3 majority of the Board.

Each extracted item was discussed:

Open Issue #2 (physician-assisted suicide/physician aid-in-dying): The Council had a lengthy discussion about the two recommendations associated with this item. The first recommendation would refer the issue of physician aid-in-dying to the MMA Board of Trustees for further analysis and member input. The second recommendation would amend existing MMA policy (240.21) by striking that portion of the policy that includes language opposing physician involvement in assisted suicide. The intent of the two recommendations was to create a “neutral” MMA policy position on the topic during the course of further MMA Board analysis and consideration. There were a variety of opinions expressed on the value, message, and impact of the second recommendation (to strike language from current policy).

After a lengthy discussion, the following motion was made, seconded, and adopted (with at least a 2/3 majority):

Motion: the Council recommends, in Recommendation 1, referral to the MMA Board of Trustees the issue of physician aid-in-dying as proposed in the consent calendar.

After a lengthy discussion, the following motion was made, seconded, and adopted (with less than a 2/3 majority):

Motion: the Council recommends, in Recommendation 2, that the MMA Board of Trustees amend existing MMA policy (240.21) as follows:

240.21 Decisions Near End of Life The MMA endorses the AMA Council on Ethical and Judicial Affairs recommendations adopted at the 1991 AMA Annual Meeting as follows:

1. The principle of patient autonomy requires that physicians must respect the decision to forego life-sustaining treatment of a patient who possesses decision-making capacity. Life-sustaining treatment is any medical treatment that serves to prolong life without reversing the underlying medical condition. Life-sustaining treatment includes, but is not limited to, mechanical ventilation, renal dialysis, chemotherapy, antibiotics and artificial nutrition and hydration.
2. There is no ethical distinction between withdrawing and withholding life-sustaining treatment.
3. Physicians have an obligation to relieve pain and suffering and to promote the dignity and autonomy of dying patients in their care. This includes providing effective palliative treatment even though it may foreseeably hasten death.
4. ~~Physicians must not perform euthanasia or participate in assisted suicide. The societal risks of involving physicians in medical interventions to cause patients' deaths is too great to condone euthanasia or physician-assisted suicide. (HD-SR30-1992)~~

Open Issue #3 (vaccine exemptions): Council members sought clarification on the interaction between the proposed policy (to support repeal of the current “conscientious beliefs” exemption) and the secondary recommendation to repeal MMA policy. It was clarified that the intent was to sunset current policy in support of the exemption should the Board ultimately approve the initial recommendation to seek a repeal of current law. With that clarification, the following motion was made, seconded, and adopted (with at least a 2/3 majority):

Motion: the Council recommends that the MMA Board of Trustees adopt Recommendation 1 (to adopt new MMA policy) and Recommendation 2 (to archive existing policy 110.22) as proposed in the consent calendar.

Open Issue #4 (medical cannabis program expansion): This item was extracted in order to seek clarity on the recommended policy statement. There was minimal additional discussion. With the clarification, the following motion was made, seconded and adopted (with at least a 2/3 majority):

Motion: the Council recommends that the MMA Board of Trustees adopt Open Issue #4 as proposed in the consent calendar.

Open Issue #5 (provider tax): A brief clarification was sought on this item, noting that it did not reflect new policy for proposed financing mechanisms, but rather was essentially a restatement of MMA opposition to the tax. With the clarification, the following motion was made, seconded and adopted (with at least a 2/3 majority):

Motion: the Council recommends that the MMA Board of Trustees adopt Open Issue #5 as proposed in the consent calendar.

V. **Tort Reform: 2014 Open Issues Forum**

At its October 2014 meeting, the Policy Council agreed to retain for future discussion the issue of tort reform, which was submitted as part of the 2014 Open Issues Forum. At its May 2015 meeting, the Council requested a staff memo to provide background information and education on the topic.

Teresa Knoedler, MMA Policy Counsel, reviewed the content of her background memo. With noted appreciation for the clear information and presentation, the following motion was made, seconded, and adopted (with at least a 2/3 majority):

Motion: the Council recommends that the MMA Board of Trustees not pursue additional action on the issue of tort reform at this time, with the exception of possible education and information (similar to that shared in the memo).

VI. **Election of Council Chair**

Dave Agerter, MD, MMA President-Elect, noted the nomination of Ernest Lampe, MD, for another 1-year term as Chair of the MMA Policy Council. With no additional nominations, the following motion was made, seconded, and adopted (with at least a 2/3 majority):

Motion: that Ernest Lampe, MD, be elected to another 1-year term as Chair of the Policy Council.

VII. **New Business**

Ernest Lampe, MD, Chair, announced that the Council will likely schedule another January meeting/retreat to finalize action on several outstanding topics. During discussion, it was noted that a Saturday date would again work well for most members. It was also noted that teleconference connections would be made available at this, and future meetings (to the extent feasible), as a way to ensure participation from more Council members.

VIII. **Adjourn**

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

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