Your Speakers have reviewed all of the resolutions and comments submitted online.

In keeping with, your Speakers recommend the following Consent Calendar for adoption:

RECOMMENDED FOR ADOPTION:

Your Speakers recommend that Resolutions **15-01, 15-02** and **15-13** be adopted and that the remainder of the report be filed.

**15-01: Establishment of a Young Physician Section**

Resolved, that the Connecticut State Medical Society (CSMS) shall establish a section named the Young Physician Section (YPS) which shall be composed of physician members of the Connecticut State Medical Society who are younger than forty (40) years of age or within the first eight (8) years of professional practice, excluding residency and fellowship, and be it further

Resolved, that the YPS shall elect annually one councilor and one associate councilor to 16 each serve a term of one (1) year on the CSMS Council; and be it further

Resolved, that the YPS shall elect annually one delegate and one alternate delegate to the 18 CSMS House of Delegates, each to serve a term of one (1) year; and be it further

Resolved, that the YPS shall appoint annually representatives to the American Medical Association (AMA) Young Physician Section, in accordance with the rules and procedures established by the AMA; and be it further

Resolved, that the YPS shall establish its own purpose, mission, governance and election procedures and shall meet no less than annually; and be it further

Resolved, that the YPS, and all of the representation privileges associated therewith, shall become effective immediately upon close of the 2015 CSMS
House of Delegates, notwithstanding any modifications needed to the CSMS Bylaws.

15-02: Privacy, Personal Use & Funding of Mobile Devices in the Medical Workplace

Resolved, that residents and fellows should not be required to use personal or academic stipend funding to purchase personal mobile devices (tablets, laptops, cell phones, PDAs, etc.) or their data plans for work-related purposes; and be it further

Resolved, that all physicians should retain their right to keep their personal information private and separate from the workplace; and be it further

Resolved, that if a person elects to use their own device, employers should provide full disclosure prior to use regarding their ability to monitor and access personal information; and be it further

Resolved, that the Connecticut State Medical Society work with the American Medical Association, the Accreditation Council of Graduate Medical Education and other interested parties to develop and support policies that protect physicians’ privacy relating to the use of personal technology in the workplace while minimizing financial burden.

15-13: Elimination of Co-Payments for E&M Services Provided in Institutional Settings

Resolved, that the Connecticut State Medical Society support legislation to disallow managed care plans from using co-payments for evaluation and management services provided in inpatient hospital and skilled nursing facility settings.

RECOMMENDED FOR ADOPTION AS AMENDED OR SUBSTITUTED:

Your Speakers recommend that Resolutions 15-04, 15-05, 15-06, 15-10, 15-11 and 15-12 be adopted as amended/substituted and that the remainder of the report be filed.
15-04: Medical Courts Legislation

Resolved, that the Connecticut State Medical Society continue its advocacy efforts to promote the concept of health courts, through actions such as studies and educational meetings, with the end goal to promote legislation seek a bill in the 2016 legislative session that provides for the formation of statewide study committee to include members from the Connecticut State Medical Society, specialty societies, members of the Connecticut State Legislature, members of the Legislative’s Judiciary Committee, members of the malpractice insurance industry, and members of the Trial Lawyers Association for the purpose of researching and eventually providing recommendations in the framework of a legislative bill, to be introduced in 2017, for the formation establishment of medical courts as an alternative to the current adversarial, cumbersome and ineffective system; and be it further

Resolved, that any legislation, formed by the 2016 statewide committee, to transform the current medical malpractice liability system be acceptable to all those interested and impacted parties and that future legislation enacting the recommendations will in all likelihood not be problematic because due to the multi and bi partisan manner in which the recommendations have been formed by the statewide committee; and be it further

Resolved, that legislation supporting the formation of medical courts by enacting the recommendations of the statewide committee formed by legislature in 2016, be introduced and passed in 2017, as soon as practicable.

15-05: Opposing Board Cert/Re-Cert & MOC by State to Obtain/Renew License and by Hospitals or Other Health Care Institutions to Remain as Active Staff

Resolved, that the Connecticut State Medical Society (CSMS) is opposed to any requirement for board certification or re-certification in order to initially obtain or renew his or her license to practice medicine or surgery or any of the specialties designated by the ABMS in the State of Connecticut, and be it further

Resolved, that the CSMS is also opposed to a requirement— for licensure or institutional privileges to practice—deemed Maintenance of Certification as a requirement of licensure or institutional privileges to practice. Maintenance of Certification is a requirement of some specialty boards to pay fees and
demonstrate certain achievements related to continuing education seminars or course completion and other mandates of unproven benefit to patient care, and be it further

**Resolved**, that the CSMS is opposed to hospitals or other health care institutions that require board certification or re-certification for the purpose of removing physicians on active staff who are not currently board certified or re-certified, and be it further

**Resolved**, that CSMS supports the position that hospitals and other health care institutions should continue to use appropriate peer review of patient care to promote quality medical and surgical care as one requirement to maintain institutional privileges to practice.

**15-06: Use Undue Administrative Burdens and the Distractions Thereof as Defense in Malpractice Suits**

**Resolved**, that the Connecticut State Medical Society (CSMS) continue its efforts to alert and educate lawmakers to the potentially serious consequences that administrative burdens imposed by insurers' demands for pre-authorization for drugs, tests, and consultations have on physicians' abilities to properly and safely treat their patient and how this may expose physicians to malpractice suits, and be it further

**Resolved**, that the CSMS accept and promulgate to continue to educate its members and lawmakers that the undue interference from administrative burden has a significant impact on a physician's practice and sufficient ethical and professional justification to allow it to be used whenever appropriate as a legal defense in cases of malpractice, and be it further

**Resolved**, that the CSMS present this resolution at the next New England Delegation meeting for its consideration to be presented at the next appropriate AMA meeting for adoption as AMA policy.

**15-10: Requiring Secondary & Supplemental Insurers to Medicare to Follow Medicare Payments**

**Resolved**, that the Connecticut State Medical Society submit to the AMA Delegation and the New England Delegation, as appropriate, for referral to
the AMA for study and possible action that would require the secondary and supplemental insurers to accept in full the balance of services that are approved and not bundled by Medicare.

15-11: County and Proposing Doctor’s Name on Resolution Throughout its Lifetime

Resolved, that the Connecticut State Medical Society make it a policy that both the sponsoring organization and/or the physician that introduced the resolution are notified at least one time annually whenever there is action being taken to advance the cause of the resolution.

15-12: Study to Revise CPT Coding Evaluation and Management (E&M) Guidelines

Resolved, that the Connecticut State Medical Society request that the AMA CPT Editorial Panel study and consider revising the present CPT guidelines to more accurately and fairly reflect the physician work and time that is involved in the provision of evaluation and management services and discourage the inappropriate bundling of documentation review and discussion into evaluation and management services.

RECOMMENDED FOR REAFFIRMATION:

Your Speakers recommend that Resolutions 15-03 and 15-07 be recommended for reaffirmation and that the remainder of the report be filed.

15-03: Timely Physician Credentialing

Resolved, that the Connecticut State Medical Society seek a bill in the 2016 legislative session that would require insurance companies to render decisions on credentialing new applications within 45 days from receipt of a completed application; and be it further

Resolved, that in the case where a physician is already credentialed with the insurance company, where a change in employment (billing under a different tax ID number) occurs, the physician application must be completed in 30 days; and be it further
Resolved, that a 2016 timely credentialing bill include permitting newly licensed physicians joining a group of participating physicians to bill for services provided by the physician with a retroactive date of the date the application was submitted and deemed completed.

15-07: That Physicians’ Re-Licensure Does Not Require Participation in Maintenance of Certification (MOC)

Resolved, that the Connecticut State Medical Society (CSMS) advise the Board of Health that Connecticut’s current requirements for physicians’ maintenance of licensure (MOL) are sufficient and that the use of MOC is not necessary, and be it further

Resolved, that the CSMS communicate to its members that it definitely does not support the use of MOC as a requirement for MOL.

RECOMMENDED FOR REFERRAL:

Your Speakers recommend that Resolution 15-09 be recommended for referral to the CSMS Council for further study and fiscal review and that the remainder of the report be filed.

15-09: EMR Hassles

Resolved, that the Connecticut State Medical Society’s Committee on Legislation and Committee on Quality of Care study how the use of EMRs can be improved to enhance the care of the patient while simultaneously lessening the burden of its use on physicians; and be it further

Resolved, that EMRs must be inter-operative within the year to prevent risk to the patient from inadequate information, risk to the practice from burdensome calls to obtain information and, risk to the structure of the physician community from purposeful exclusion of information transfer.
RECOMMENDED FOR NON-ADOPTION:

Your Speakers recommend that Resolution 15-08 be non-adopted and that the remainder of the report be filed.

15-08: Improve the Political Effectiveness of the CSMS

Resolved, that the CSMS narrow its focus for the time being to concentrate on reforming the current medical liability system and reducing insurers’ control over doctors.

This concludes the Consent Calendar. We would like to thank everyone who submitted testimony online through our virtual reference committees

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Courtland Lewis, MD, Speaker

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Max Okasha, MD, Vice-Speaker