# **Colorado Medical Society**

2013 House of Delegates

Reference Committee on Reports and Resolutions/Credentials

#### FINAL DISPOSITION

#### ADOPTED

- 1. Minutes from Board of Directors 9/20/13 meeting
- 2. BOD-3 Motions of the Board of Directors
- 3. Prescription Drug Abuse: Report of WCPIC and Special Advisors
- 4. RES-14-P Pharmacy Benefit Manager Adjudication for Physician Dispensing
- 5. RES-19-P Creation of the Northern Colorado Medical Society

#### **ADOPTED AS AMENDED**

6. BOD-1

Res-5-P - Non-compete-Liquidated Damages Clauses in Physician Employment Contracts

That CMS pursue legislation to make non-compete or liquidated damage clauses unenforceable in instances where a physician is terminated from an employment contract using the without-cause reason for termination; that the timing of such legislation be discretionary to the CMS CEO.

AN EFFORT TO MAKE LIQUIDATED DAMAGES ILLEGAL IN CONJUNCTION WITH "WITHOUT CAUSE" TERMINATIONS IS A WORTHWHILE ENDEAVOR FOR CMS. THE IDEA BEHIND THE ORIGINAL RESOLUTION WAS LESS ABOUT MAKING WITHOUT CAUSE TERMINATIONS ILLEGAL AND MORE ABOUT MAKING LIQUIDATED DAMAGES ASSOCIATED WITH WITHOUT CAUSE TERMINATIONS ILLEGAL.

THE PROCESS FOR ACHIEVING THE GOAL OF MAKING LIQUIDATED DAMAGES ILLEGAL IN CONJUNCTION WITH "WITHOUT CAUSE" TERMINATIONS SHOULD BE A STEPWISE PROCESS THAT SHOULD INCLUDE ASKING EMPLOYERS TO VOLUNTARILY REMOVE THE LIQUIDATED DAMAGE PROVISIONS ASSOCIATED WITH "WITHOUT CAUSE" TERMINATIONS FROM EXISTING CONTRACTS AND TO CEASE AND DESIST FROM INCLUDING THIS PROVISION IN FUTURE CONTRACTS. THESE STEPS SHOULD BE TAKEN BEFORE ANY LEGISLATIVE OR REGULATORY ACTION IS UNDERTAKEN.

EMPLOYED PHYSICIANS SHOULD BE EDUCATED ABOUT LIQUIDATED CONTRACT PROVISIONS ASSOCIATED WITH "WITHOUT CAUSE" TERMINATION CLAUSES.

# 7. RES-1-P Implementation Period for ICD-10

RESOLVED, that the Colorado Medical Society will work with SUPPORT the AMA to IN negotiate NEGOTIATING with ALL payers, INCLUDING THE CENTERS FOR MEDICARE AND MEDICAID SERVICES, to provide a two-year "implementation" period, starting when ICD-10 is implemented, by all payers, including CMS. During this time, payers will not be allowed to deny payment based on specificity of ICD-10 diagnosis, however they will be required to provide feedback for diagnosis determined to be incorrect.

In addition, no payer will be allowed to ask for "take backs" due to lack of ICD-10 diagnosis code specificity FOR ANY CLAIMS SUBMITTED for the aforementioned DURING THAT two-year implementation period; and be at further

RESOLVED, that the Colorado medical Society, if unsuccessful in negotiating an "implementation period" with private payers, will seek legislation to establish an "implementation period", as detailed in the above resolve, in Colorado.

# 8. RES-3-P Inclusion of Gun Safety Counseling in Patient Encounters

RESOLVED, Colorado Medical Society encourages physicians to include inquiry of gun ownership and subsequent discussion of gun safety as a AN standard element of their practice, as appropriate, and will work with the specialty society community to support development of specialty-appropriate guidelines to encourage and support this activity.

# 9. RES-4-P Bylaws Change Regarding Physician Licensure

The applicant must be licensed or otherwise legally qualified to practice medicine in the state of Colorado. The applicant may not hold a license that is currently revoked or suspended by any physicians' licensing authority, in Colorado or elsewhere.

OTHERWISE, AN APPLICANT WILL BE SUBJECT TO REVIEW BY THE COUNCIL ON ETHICAL AND JUDICIAL AFFAIRS.

## 10. RES-5-P Support Federal Budget Proposal for Gun Violence Study

RESOLVED, the Colorado Medical Society strongly supports the inclusion of \$30 million-FUNDING to study the CAUSES AND prevention of gun violence AS PROPOSED in the president's proposed 2014 federal budget and will communicate this support OF THIS STUDY to the Colorado Congressional delegation.

## 11. RES-6-P Integration of Physical and Behavioral Health Care

RESOLVED, CMS SUPPORTS POLICY MEASURES TO FACILITATE THE INTEGRATION OF PHYSICAL AND BEHAVIORAL HEALTH CARE, INCLUDING:

- COLLABORATION AMONG THE DEPARTMENTS AND DIVISIONS RESPONSIBLE FOR THE LICENSING AND REGULATION OF PROVIDERS AND FACILITIES;
- TO EASE OF DATA SHARING BETWEEN CARE PROVIDERS, AND WITH RESEARCHERS, WHILE ALSO PROTECTING PATIENT PRIVACY, AND BE IT FURTHER

RESOLVED, the CMS supports regulatory simplification regarding data sharing, permits and provider licensure to facilitate the integration of physical and behavioral health care, while also protecting patient privacy

RESOLVED, CMS supports payment systems that integrate coverage of physical and behavioral health.

## 12. RES-7-P Workforce-Centered Education Funding

RESOLVED, that the CMS supports a funding structure for STUDENT EDUCATION AT the UNIVERSITY OF COLORADO Anschutz medical campus determined by the workforce and medical needs of Colorado.

## 13. RES-16-P Strengthening Colorado Athlete Concussion Law

RESOLVED, that our CMS Council on Legislation advocate for our RESEARCH, DRAFT AND FILE NEW SUPPORTS Colorado concussion law AND REGULATIONS to WHICH extend to all athletes of all ages in professional and collegiate organizations., USING RECENTLY PUBLISHED GUIDELINES, IN ORDER TO PREVENT CHRONIC TRAUMATIC ENCEPHALOPATHY IN THOSE INDIVIDUALS.

## 14. RES-17-P Discrepancies in Clerkship Cost

RESOLVED, that our CMS, in collaboration with the Colorado Society for Osteopathic Medicine, opposes dissimilitude for medical students applying to clerkships by institutions and programs based on osteopathic or allopathic training;

RESOLVED, that our CMS (a) supports equitable fees for allopathic and osteopathic medical students access to clinical electives, (b) encourages medical schools within our state to do the same, and (c) will continue to monitor and report back at the 2014 CMS conference on any discrepancies in clinical placement fees.

RESOLVED, THAT CMS SUPPORTS AND ENCOURAGES CONTINUED DIALOGUE BETWEEN THE UNIVERSITY OF COLORADO SCHOOL OF MEDICINE AND ROCKY VISTA UNIVERSITY COLLEGE OF OSTEOPATHIC

# MEDICINE REGARDING CLERKSHIP COSTS TO ARRIVE AT A RESOLUTION THAT SATISFIES BOTH PARTIES.

#### 15. RES-18-P Unified Graduate Medical Education

RESOLVED, that the AMA Delegation of the Colorado Medical Society supports a unified accreditation system for allopathic and osteopathic physicians which; (a) grants equal access to application to all residency positions for both osteopathic and allopathic medical students and (b) grants equal access to application to all postdoctoral fellowships for graduates of both osteopathic and allopathic residency programs; and be it further.

RESOLVED, that the Colorado Medical Society charges its AMA Delegation to draft and submit a similar supportive resolution to the AMA House of Delegates A14 meeting.

## REFERRED TO THE BOARD FOR DECISION

- 16. RES-9-P Support of the Direct Primary Care Medical Home
- 17. RES-11-P Support of the Direct Primary Care Medical Home

#### REFERRED TO THE BOARD FOR REPORT BACK

- 18. RES-2-P Limited Role of Organized Medicine in Gun Control
- 19. RES-10-P Employed Physicians and Physician Employers
- 20. RES-13-P Maintenance of Licensure
- 21. RES-15-P Corporate Practice of Medicine

## **NOT ADOPTED**

- 22. RES-8-P Educational Initiatives to Advance Collaboration Among Health Professionals
- 23. RES-12-P Mental Health Payment Parity

## **FILED**

- 24. BOD-2 2012-2013 Informational Items Progress Report
- 25. CMSF-1 Colorado Medical Society Foundation Progress Report
- 26. CMSEF-1 Colorado Medical Society Education Foundation Progress Report