

Resident 2 Consent Calendar

National Conference of Family Medicine Residents and Medical Students July 27-29, 2023 – Kansas City, MO

RECOMMENDATION: The Resident 2 Reference Committee recommends the following consent calendar for adoption: 3

4 Item 1: Adopt Resolution No. R2-201 on "Incarceration and Health: A Family Medicine
 5 Perspective" (Position Paper)
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7 Item 2: Adopt Substitute Resolution No. R2-202 on "Parity of Pay for Vasectomies"

9 Item 3: Adopt Substitute Resolution No. R2-203 on "Public Comment on Judicial Restriction of

10 Public Health Agency Rulemaking"

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Resident 2 Reference Committee Report

National Conference of Family Medicine Residents and Medical Students July 27-29, 2023

1	The Resident 2 Reference Committee has considered each of the items referred to it and
2	submits the following report. The committee's recommendations will be submitted as a
3	consent calendar and voted on in one vote. Any item or items may be extracted for
4	debate.
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6	ITEM NO. 1: RESOLUTION NO. R2-201: Incarceration and Health: A Family Medicine
7 8	Perspective (Position Paper)
9	RESOLVED, That the American Academy of Family Physicians supports federal
10	legislation that completely removes the Inmate Medicaid Exclusion Policy in order to allow
11	for Medicaid preventive and chronic disease services to be reimbursed for those
12 13	incarcerated, and be it further
14	RESOLVED, That the American Academy of Family Physicians shall develop materials
15	for state chapters to advocate for their respective state to transition from privatized medical
16	care within carceral facilities to non-profit, academic, or governmental organizations.
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18 19	The reference committee heard testimony in support of the resolution. The author of the resolution offered personal experiences with health care inequities within the incarceration
20	system. It was noted that several states, including the District of Columbia, have non-profit
21	entities that deliver health care in prisons.
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23	The reference committee reviewed the testimony and current activities underway by the AAFP,
24	including support for legislation that seeks to reform the Inmate Medicaid Exclusion Policy.
25 26	While the AAFP has not endorsed legislation to repeal the Inmate Medicaid Exclusion Policy, it was noted that opportunities may exist to seek additional reforms within the U.S. Congress.
20 27	While the AAFP doesn't currently track state legislation on incarceration health care, resources
28	could be developed through the Center for State Policy to support chapter advocacy efforts.
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30	RECOMMENDATION: The reference committee recommends that Resolution No. R2-201
31 32	be adopted.
32 33	ITEM NO. 2: RESOLUTION No. R2-202: Parity of Pay for Vasectomies
34	TEM NO. 2. RECOECTION NO. RE-202. Fully of Fuy for Vascetonics
35	RESOLVED, That the American Academy of Family Physicians advocate to seek parity
36	and payment for outpatient contraceptive procedures, and be it further
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RESOLVED, That the American Academy of Family Physicians support efforts of family
 physicians to seek parity and payment for outpatient vasectomies similar to urologists and
 surgeons.

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The reference committee heard testimony in favor of the resolution. The author of the resolutiontestified that, since the Dobbs vs. Jackson decision, there has been an increase in male patients

- requesting vasectomies and expressed concerns that such reproductive health care was not
 covered by insurance companies, which creates barriers to care for many patients. Additionally,
 it was noted that family physicians who provide this care should be reimbursed at the same rate
- 47 as urologists and other surgeons.
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The reference committee reviewed the testimony and discussed current activities. While the AAFP has advocated for parity in payment across government programs, it has not engaged on parity with respect to vasectomies. The reference committee recommended the resolution be modified to reflect that the AAFP's advocacy efforts would include supporting physicians' advocacy efforts. Further, the reference committee broadened the resolution to ensure it is inclusive of all surgical specialties.

56RECOMMENDATION: The reference committee recommends that Substitute Resolution57No. R2-202 be adopted in lieu of Resolution No. R2-202 which reads as follows:

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<u>RESOLVED, That the American Academy of Family Physicians advocate for and support its members in seeking parity and payment similar to surgical specialties for outpatient contraceptive procedures such as vasectomies.</u>

63 ITEM NO. 3: RESOLUTION No. R2-203: Public Comment on Judicial Restriction of Public 64 Health Agency Rulemaking 65

RESOLVED, That the American Academy of Family Physicians develop a policy statement in support of federal agencies' ability to integrate scientific evidence, subject matter experts, and proven public health practices into federal regulation as empowered by federal code, and be it further

RESOLVED, That the American Academy of Family Physicians develop a policy of support of traditional agency rulemaking and a policy in opposition to the "major question doctrine" and "clear statement rules" to improve public health and wellbeing.

74 75 The reference committee heard testimony in favor of the resolution. The author noted that 76 recent cases on mifepristone and the Affordable Care Act's preventative services requirements 77 call into question the court's ability to make sound judicial decisions based on science and 78 evidence-based policies. In addition, concern was raised that future rulemaking could inspire 79 anti-science, anti-evidence-based policies that seek to undermine the integrity of our nation's 80 healthcare system.

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The reference committee reviewed the testimony and reviewed the AAFP's current activities around rulemaking and legal engagement. Staff noted that the AAFP has an established process for signing onto legal arguments in amicus briefs filed in court, and that process requires consideration of both the issue involved and legal advice from counsel based on the circumstances and law then existing. While the reference committee agreed with the intention of the first resolved clause, it was recommended the second resolved clause be struck, as the

88 Federal government already follows traditional rulemaking and opposing guidelines such as the

89 "major questions doctrine" or "clear statement rules" may contradict the process in which the90 AAFP considers engagement in judicial proceedings.

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RECOMMENDATION: The reference committee recommends that Substitute Resolution No. R2-203 be adopted in lieu of Resolution No. R2-203 which reads as follows: RESOLVED, That the American Academy of Family Physicians develop a policy

- 96 <u>statement in support of federal agencies' ability to integrate scientific evidence.</u>
- 97 <u>subject matter experts, and proven public health practices into federal regulation</u>
- 98 as empowered by federal code.

- 99 I wish to thank those who appeared before the reference committee to give testimony
- 100 and the reference committee members for their invaluable assistance. I also wish to

101 commend the AAFP staff for their help in the preparation of this report.

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- 103 Respectfully submitted,
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- 107 Faihza Hill, MD, Designation, Chair
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- 109 Bruno Bittencourt, MD
- 110 John Das, MD
- 111 Ashten Duncan, MD
- 112 Madeline Hazle, MD
- 113 Julie Ngo, MD
- 114 Ciara Voy, MD