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Resolution NO. R2-501

Student Loan Refinancing Program

Introduced by: Chetan Patel, MD, Columbus, Georgia

WHEREAS, Student loan debt is rapidly growing and is a factor in student choice of medical specialty, and

WHEREAS, income, length of credit history, and current income status can adversely affect a resident’s or new physician’s ability to refinance a student loan for a good rate, and

WHEREAS, a loan of $250,000 paid back at an interest rate of 3.5% instead of 6.8% can reduce repayments by over $150,000, now, therefore, be it

RESOLVED, That the American Academy of Family Physicians study the feasibility of creating a loan refinancing program in partnership with a financial institution to reduce the effect of loans on physicians' finances and student choice.
Resolution NO.  R2-502

Make a Statement Opposing Department of Health and Human Services Department Cuts to the Reproductive Health Programs and Funding

Introduced by: Yakira Teitel, MD, San Francisco, California

WHEREAS, 81 reproductive health education and research programs nationwide learned this month that the five-year grants handed out by President Barack Obama’s administration in 2015 were being canceled as of June 2018, and

WHEREAS, the Trump Administration gave no explanation for the decision, which rescinded $213 million in grant awards specifically aimed at reproductive health education, access, and teen pregnancy prevention, and

WHEREAS, the United States has the worst maternal mortality rates in the Global North, and access to safe and comprehensive reproductive health care is actively being attacked in the current political climate, and

WHEREAS, the American Academy of Family Physicians has a history of making statements in support of access to reproductive health and opposing cuts to reproductive health access and

WHEREAS, at the same time, it ended funding for the grants the Health and Human Services Department proposed sharply increasing funding for abstinence education, and

WHEREAS, the American Medical Association (AMA), American Academy of Pediatrics (AAP), Society for Adolescent Medicine (SAM), and American College of Obstetricians & Gynecologists (ACOG) have official policy statements urging schools to implement comprehensive sexuality education programs and/or criticizing abstinence-only programs as inaccurate and ineffective, and

WHEREAS, the American Academy of Family Physicians’ Family Physicians’ Creed states “I support access to health care for all,” which includes comprehensive reproductive health care and education for patients, now, therefore be, it

RESOLVED, That the American Academy of Family Physicians issue a statement in support of reproductive health access and education programs and against the cuts to such programs by the Department of Health and Human Services.
Resolution NO. R2-503

Improve Physician Wellness Through Providing Travel Credit from Commercial Airline Partners

Introduced by: Yin Zheng, MD, Tampa, Florida
Mehak Gandhi, MD, Gainesville, Florida
Caroline Price, MD, Jacksonville, Florida

WHEREAS, Burnout is defined by emotional exhaustion, decreased depersonalization and sense of reduced accomplishment, and
WHEREAS, family medicine resident burnout rate at the University of North Carolina is reported to be 50%, which is representative of the national average, and
WHEREAS, residents are burdened financially, and
WHEREAS, travel provides the opportunity to de-stress and
WHEREAS, the American Academy of Family Physicians partners with multiple other organizations to promote physician wellness, now, therefore, be it

RESOLVED, That the American Academy of Family Physicians collaborate with commercial airline partners to provide undesignated travel credits to family medicine residents to alleviate the financial burden of travel so that residents will have the opportunity to travel to promote resident wellness, ie visit family, friends, or leisure, and be it further

RESOLVED, That the American Academy of Family Physicians suggest travel credit in the amount of $500 or equivalent frequent flyer mileage.
Resolution NO. R2-504

Harm Reduction Strategies to Prevent Opioid Overdose-related Events

Introduced by: Kevin Kennedy, MD, Seattle, Washington

WHEREAS, In the United States we are in the midst of an opioid epidemic, and

WHEREAS, more than half of drug overdose deaths in the United States are due to opioids, with over 33,000 opioid overdose-related deaths occurring in 2015, and with an average of 91 deaths occurring per day, and

WHEREAS, it has been shown that harm-reduction models in the form of safe injection sites have reduced mortality rates related to opioid overdose, and

WHEREAS, in Vancouver, Canada opioid-related deaths declined by 35% near a safe injection site and by 9% in the whole city, and

WHEREAS, some cities such as New York and Seattle are proposing the creation of safe injection sites, and

WHEREAS, some cities such as Seattle and San Francisco have implemented buprenorphine first programs to prevent opioid overdose-related, now, therefore, be it

RESOLVED, That the American Academy of Family Physicians evaluate data regarding buprenorphine first programs and safe injection sites as harm reduction models to reduce mortality from opioid-related deaths.
Resolution NO.  R2-505

Supporting Family Physicians in Advocating for Healthier Practice Environments

Introduced by:   Lauren Williams, MD, Minneapolis, Minnesota
                Chetan Patel, MD, Colombus, Georgia
                Taneev Escamilla, MD, MPH, Seattle, Washington

WHEREAS, The American Academy of Family Physicians (AAFP) clearly supports the health of communities as evidenced by its efforts of “Family Medicine for America’s Health” and its associated “Health is Primary Campaign,” and

WHEREAS, the environment may arguably represent the largest asset of a healthy community, and

WHEREAS, according to the most recent Environmental Protection Agency (EPA) report, “in 2013, Americans generated about 254 million tons of trash and recycled and composted about 87 million ton of this material, equivalent to a 34.3 percent recycling rate,” and

WHEREAS, according to the Healthier Hospitals initiative, hospitals and health systems produce approximately 11.7 thousand tons of waste each day, or 48 pounds per patient per day, and

WHEREAS, by enrolling in waste reduction programs, 457 hospitals were able to achieve a recycling rate of 24%, diverting 445,722 tons of materials from area landfills, and

WHEREAS, there are many organizations and programs such as GreenHealth and Healthier Hospitals which focus on reducing waste, practice environmental stewardship and incorporate sustainable materials management into healthcare settings, now, therefore, be it

RESOLVED, That the American Academy of Family Physicians consolidate resources into a toolkit to assist family medicine physicians in advocating for more sustainable practices in their hospitals, clinics and other practice settings.
Resolution NO. R2-506

Implementing Objective Assessment of Resident Physician Burnout

Introduced by: Scott Hippe, MD, Boise, Idaho
Josef Bartels, MD, Boise, Idaho

WHEREAS, The American Academy of Family Physicians (AAFP) published a position paper in 2014 titled "Physician Burnout," which offers definitions for the term and identifies physician burnout as a problem that must be dealt with "openly and proactively," and

WHEREAS, burnout among physicians has been shown to affect patient health outcomes, and

WHEREAS, rate of burnout is high among physicians during their years of residency training, and

WHEREAS, resident physician burnout is a treatable entity, with various interventions that have been associated with reduced burnout and increased well-being, and

WHEREAS, measuring levels of burnout among resident physicians would give residency programs information vital to guide the implementation of strategies aimed at reducing resident physician burnout, now, therefore, be it

RESOLVED, That the American Academy of Family Physicians encourage and/or collaborate with the Accreditation Council for Graduate Medical Education to develop objective measures to assess resident physician burnout, and be it further

RESOLVED, That the American Academy of Family Physicians adopt an alternative strategy to objectively measure family medicine resident burnout on a national scale if working through the Accreditation Council for Graduate Medical Education is not a feasible option.
Resolution NO.  R2-507

The Medicare and Medicaid Funding Shortage – Impact for Puerto Rico

Introduced by:  David Cevallos, MD, Manati, Puerto Rico
               Dayhana Pena, MD, San Juan, Puerto Rico

WHEREAS, Puerto Rico has received a fixed federal matching rate of 55% in Medicaid funding while the 50 states and the District of Columbia has received an adjustable rate of 50%-83% based on the states’ per capita income, and

WHEREAS, Puerto Rico’s federal funding for healthcare is capped at $321 million compared to the rest of 50 states and District of Columbia which is uncapped, and

WHEREAS, the increasing needs of Puerto Rico’s aging and underserved population results in exhaustion of allotted Medicaid and Medicare funding before the end of Fiscal Year, and

WHEREAS, the Medicare and Medicaid funding shortage has affected the quality and availability of the healthcare services to the population and has contributed to Puerto Rico’s financial crisis, and

WHEREAS, the Obama Administration identified this issue and proposed the elimination of the Medicare and Medicaid funding cap for Puerto Rico for the 2017 Fiscal Year, however, the proposal was never passed, now, therefore, be it

RESOLVED, That the American Academy of Family Physicians support equal funding for Medicaid and Medicare in Puerto Rico similar to the 50 states and District of Columbia, and be it further

RESOLVED, That the American Academy of Family Physicians write a letter to the Centers for Medicare and Medicaid Services to uncap Puerto Rico’s federal Medicare and Medicaid Funds.
Resolution NO.  R2-508

Addressing Unmet Need: Personal Financial Education

Introduced by: Chetan Patel, MD, Columbus, Georgia

WHEREAS, Personal financial education is lacking in undergraduate and graduate medical education, and

WHEREAS, the financial burden of education on students and residents is increasing, and

WHEREAS, learning financial management can be very confusing and hard to understand without professional guidance, and

WHEREAS, education on budgeting, various forms of insurance, tax planning and retirement strategies is useful to both residents and students, now, therefore, be it

RESOLVED, That the American Academy of Family Physicians include education at the National Conference of Family Medicine Residents and Medical Students addressing personal financial issues such as budgeting, insurance, tax planning and retirement planning, and be it further

RESOLVED, That the educator of a session at the National Conference of Family Medicine Residents and Medical Students addressing personal financial issues be a certified financial planner who does not sell financial products to receive payment in the form of sales commissions.
Resolution NO. R2-509

Affiliating International Student Members with AAFP State Chapter

Introduced by: Jason Schrock, MD, Baton Rouge, Louisiana
Eukesh Ranjit, MD, West Monroe, Louisiana

WHEREAS, Despite the increased interest in family medicine by the international medical student community, international medical students are currently unable to participate in state chapters, and

WHEREAS, the American Academy of Family Physicians (AAFP) defines International Medical Students as medical students who are currently enrolled in a medical school in a country or territory outside the United States that is not accredited by the Liaison Committee on Medical Education (LCME) or the American Osteopathic Association’s Commission on Osteopathic College Accreditation (AOA COCA), and

WHEREAS, the AAFP and state chapters are committed to increasing and supporting the family medicine workforce, from the time a student chooses family medicine through the completion of a satisfying career, and

WHEREAS, student membership raises the awareness, understanding, and the confidence of medical students to choose family medicine, now, therefore, be it

RESOLVED, That international student members be affiliated with state chapters to promote family medicine as a specialty of choice.