



Resident 2 Consent Calendar

National Conference of Family Medicine Residents and Medical Students
July 27-29, 2017 - Kansas City, MO

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

3
4 **Item 1:** Adopt Resolution No. R2-502 “Make a Statement Opposing Department of
5 Health and Human Services Department Cuts to the reproductive Health Programs and
6 Funding” (p. 1)

7
8 **Item 2:** Not Adopt Resolution R2-503 “Improve Physician Wellness Through Providing
9 Travel Credit from Commercial Airline Partners” (pp. 1-2)

10
11 **Item 3:** Not Adopt Resolution R2-504 “Harm Reduction Strategies to Prevent Opioid
12 Overdose-related Events” (p. 2)

13
14 **Item 4:** Not Adopt Resolution R2-505 “Supporting Family Physicians in Advocating for
15 Healthier Practice Environments” (pp. 2-3)

16
17 **Item 5:** Adopt Substitute Resolution No. R2-506 “Implementing Objective Assessment
18 of Resident Physician Burnout” in lieu of Resolution No. R2-506 (p. 3)

19
20 **Item 6:** Adopt Resolution No. R2-507 “The Medicare and Medicaid Funding Shortage –
21 Impact for Puerto Rico” (pp. 3-4)

22
23 **Item 7:** Adopt Resolution No. R2-508 “Addressing Unmet Need: Personal Financial
24 Education” (p. 4)

25
26 **Item 8:** Not Adopt Resolution No. R2-509 “Affiliating International Student Members
27 with AAFP State Chapter” (pp. 4-5)

28
29 **REAFFIRMATION CALENDAR:**

30 (A) Resolution No. R2-501 “Student Loan Refinancing Program” (p. 5)



Resident 2 Reference Committee Report

National Conference of Family Medicine Residents and Medical Students
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1 **The Resident 2 Reference Committee has considered each of the items referred**
2 **to it and submits the following report. The committee's recommendations will be**
3 **submitted as a consent calendar and voted on in one vote. Any item or items may**
4 **be extracted for debate.**

5
6 **ITEM NO. 1: RESOLUTION R2-502: MAKE A STATEMENT OPPOSING DEPARTMENT OF**
7 **HEALTH AND HUMAN SERVICES DEPARTMENT CUTS TO THE REPRODUCTIVE**
8 **HEALTH PROGRAMS AND FUNDING**

9
10 RESOLVED, That the American Academy of Family Physicians issue a statement in
11 support of reproductive health access and education programs and against the cuts to
12 such programs by the Department of Health and Human Services.

13
14 The reference committee heard significant testimony in favor of this resolution from a
15 geographically diverse resident group, without opposing testimony. Testimony acknowledged
16 that the AAFP has recently been very active in supporting funding of reproductive health
17 programs. The reference committee recognized the timeliness of this issue, and to date, the
18 AAFP has not yet issued a statement specifically addressing the funding cuts recently proposed
19 by the Trump administration to cancel the five-year grants handed out by President Barack
20 Obama's administration in 2015 as of June 2018. Testimony emphasized that this funding
21 affects more than just abortion, and would also impact general women's health procedures
22 (e.g., colposcopy), gender transition, and hormone therapy, among others. Furthermore,
23 testimony showed there is strong data showing abstinence only education increases teen
24 pregnancy, while broader reproductive health education decreases teen pregnancy.

25
26 **RECOMMENDATION: The reference committee recommends that Resolution No. R2-502**
27 **be adopted.**

28
29 **ITEM NO. 2: RESOLUTION R2-503: IMPROVE PHYSICIAN WELLNESS THROUGH**
30 **PROVIDING TRAVEL CREDIT FROM COMMERCIAL AIRLINE PARTNERS**

31
32 RESOLVED, That the American Academy of Family Physicians collaborate with
33 commercial airline partners to provide undesignated travel credits to family medicine
34 residents to alleviate the financial burden of travel so that residents will have the
35 opportunity to travel to promote resident wellness, i.e., visit family, friends, or leisure,
36 and be it further
37

38 RESOLVED, That the American Academy of Family Physicians suggest travel credit in
39 the amount of \$500 or equivalent frequent flyer mileage.

40
41 The reference committee heard testimony solely from the author in favor of the resolution.
42 Testimony included how this partnership could be beneficial for airlines as a public relations
43 tactic, however, the committee discussed how commercial airlines are already providing charity
44 miles to other health related organizations such as, Make-a-Wish and Doctors without Borders.
45 The reference committee agrees with the spirit of the resolution but recognizes that wellness
46 means different things to different people. The reference committee recognizes that the AAFP
47 has made physician wellness an increasing priority and one of the top strategic objectives.

48
49 **RECOMMENDATION: The reference committee recommends that Resolution No. R2-503**
50 **not be adopted.**

51
52 **ITEM NO. 3: RESOLUTION R2-504: HARM REDUCTION STRATEGIES TO PREVENT**
53 **OPIOID OVERDOSE-RELATED EVENTS**

54
55 RESOLVED, That the American Academy of Family Physicians evaluate data regarding
56 buprenorphine first programs and safe injection sites as harm reduction models to
57 reduce mortality from opioid-related deaths.

58
59 The reference committee heard testimony solely from the author in favor of the resolution.
60 Testimony reflected that the AAFP does have numerous resources on chronic pain and opioid
61 abuse but nothing thus far specifically with regard to buprenorphine first programs and safe
62 injection sites. The reference committee agreed that opioid abuse is a significant health
63 concern. However, the reference committee felt that the resolved clause as written is outside
64 the scope of the AAFP. Data collection and evaluation can be lengthy and expensive. The
65 reference committee questioned whether the AAFP is the most appropriate organization to
66 perform this. Furthermore, it is unclear from the resolved clause what the author would want the
67 AAFP to do with the data.

68
69 **RECOMMENDATION: The reference committee recommends that Resolution No. R2-504**
70 **not be adopted.**

71
72 **ITEM NO. 4: RESOLUTION R2-505: SUPPORTING FAMILY PHYSICIANS IN ADVOCATING**
73 **FOR HEALTHIER PRACTICE ENVIRONMENTS**

74
75 RESOLVED, That the American Academy of Family Physicians consolidate resources
76 into a toolkit to assist family medicine physicians in advocating for more sustainable
77 practices in their hospitals, clinics and other practice settings.

78
79 The reference committee heard testimony solely from the author in favor of the resolution. The
80 reference committee reviewed 2016 Congress of Delegates (COD) Resolution No. 403, adopted
81 in 2016, "Climate Change and Health" which addressed environmental sustainability. The
82 resolution was subsequently referred to the Commission on Health of the Public and Science,
83 and ultimately accepted for information by the commission. The commission responded that
84 "information on environmental sustainability is readily available from other sources so felt it
85 would be duplicative for the AAFP to provide this information." The reference committee felt
86 Resolution No. 403 closely paralleled this resolution.

87 The committee furthermore recognized the title of the resolution as potentially misleading, as
88 healthier practice environments could refer to emotional or physical wellbeing of employees.
89 The reference committee also felt the resolved clause as written, does not fully explain the
90 assumed intent of the resolution and could be interpreted to mean various forms of sustainability
91 (e.g., financial, workforce) and thereby, does not stand on its own.

92
93 **RECOMMENDATION: The reference committee recommends that Resolution No. R2-505**
94 **not be adopted.**

95
96 **ITEM NO. 5: RESOLUTION R2-506: IMPLEMENTING OBJECTIVE ASSESSMENT OF**
97 **RESIDENT PHYSICIAN BURNOUT**

98
99 RESOLVED, That the American Academy of Family Physicians encourage and/or
100 collaborate with the Accreditation Council for Graduate Medical Education to develop
101 objective measures to assess resident physician burnout, and be it further

102
103 RESOLVED, That the American Academy of Family Physicians adopt an alternative
104 strategy to objectively measure family medicine resident burnout on a national scale if
105 working through the Accreditation Council for Graduate Medical Education is not a
106 feasible option.

107
108 The reference committee heard testimony in favor of the resolution. Testimony reflected the
109 need for the AAFP to accurately and specifically quantify medical student and resident burn out
110 in order to better evaluate the current AAFP efforts surrounding this issue. The author noted that
111 this could possibly be conducted in the ACGME annual survey in an effort to quantify the
112 changes being made in family medicine residencies. The reference committee updated the
113 language of the first resolved clause to more specifically state the intent of the author to
114 “quantify” the data versus just “assess”. The reference committee did not feel the second
115 resolved clause was necessary.

116
117 **RECOMMENDATION: The reference committee recommends that Substitute Resolution**
118 **No. R2-506 be adopted in lieu of Resolution No. R2-506, which reads as follows:**

119
120 **RESOLVED, That the American Academy of Family Physicians encourage and/or**
121 **collaborate with the Accreditation Council for Graduate Medical Education to**
122 **develop objective measures to quantify resident physician burnout.**

123
124 **ITEM NO. 6: RESOLUTION R2-507: THE MEDICARE AND MEDICAID FUNDING**
125 **SHORTAGE – IMPACT FOR PUERTO RICO**

126
127 RESOLVED, That the American Academy of Family Physicians support equal funding
128 for Medicaid and Medicare in Puerto Rico similar to the 50 states and District of
129 Columbia, and be it further

130
131 RESOLVED, That the American Academy of Family Physicians write a letter to the
132 Centers for Medicare and Medicaid Services to uncap Puerto Rico’s federal Medicare
133 and Medicaid Funds.

134
135 The reference committee heard testimony solely from the author in favor of the resolution.
136 Testimony reflected that capped Medicare and Medicaid payments, a fixed federal matching

137 rate, and salary disparity between family physicians in the U.S. and Puerto Rico are causing
138 family physicians to leave Puerto Rico. The reference committee agreed that these types of
139 payment issues are a significant concern for the AAFP. For example, in response to the
140 proposed 2017 Medicare Physician fee schedule, the AAFP wrote a strong letter in support of
141 increase in Medicare allowables in Puerto Rico. The reference committee feels the resolved
142 clauses, which asks for further AAFP action to increase equitable Medicare and Medicaid Funds
143 to Puerto Rico, are in line with the priorities of the AAFP. The reference committee encourages
144 the AAFP to support these efforts in all applicable U.S. territories.

145
146 **RECOMMENDATION: The reference committee recommends that Resolution No. R2-507**
147 **be adopted.**
148

149 **ITEM NO.7: RESOLUTION R2-508: ADDRESSING UNMET NEED: PERSONAL FINANCIAL**
150 **EDUCATION**

151
152 RESOLVED, That the American Academy of Family Physicians include education at the
153 National Conference of Family Medicine Residents and Medical Students addressing
154 personal financial issues such as budgeting, insurance, tax planning and retirement
155 planning, and be it further
156

157 RESOLVED, That the educator of a session at the National Conference of Family
158 Medicine Residents and Medical Students addressing personal financial issues be a
159 certified financial planner who does not sell financial products to receive payment in the
160 form of sales commissions.

161
162 The reference committee heard testimony solely from the author in favor of the resolution. There
163 was significant interest on the part of the reference committee in better preparing residents to
164 handle personal finances and there are currently no clear-cut resources addressing this. There
165 was particular interest in the second resolved clause calling for a certified financial planner who
166 does not sell financial products, to avoid a conflict of interest.

167
168 **RECOMMENDATION: The reference committee recommends that Resolution No. R2-508**
169 **be adopted.**
170

171 **ITEM NO. 8: RESOLUTION R2-509: AFFILIATING INTERNATIONAL STUDENT MEMBERS**
172 **WITH AAFP STATE CHAPTER**

173
174 RESOLVED, That international student members be affiliated with state chapters to
175 promote family medicine as a specialty of choice.
176

177 The reference committee heard testimony in favor of the resolution, and none opposing. The
178 testimony noted the importance of allowing International Medical Students the same
179 opportunities as traditional student members. The reference committee recognizes that the
180 AAFP Bylaws have very specific guidelines on defining membership type and that currently
181 chapters can request information on international members in their area to engage them at the
182 state level. The reference committee agrees with the spirit of the resolution but felt the resolved
183 clause was too vague. It is unclear what privileges the author desires to be included in
184 affiliation with a chapter (e.g full voting rights, ability to serve as delegates, or simply access to
185 state resources).

186 **RECOMMENDATION: The reference committee recommends that Resolution No. R2-509**
187 **not be adopted.**

188
189 **REAFFIRMATION CALENDAR**

190 The following item A is presented by the Reference Committee on the Reaffirmation
191 Calendar. Testimony in the Reference Committee hearing and discussion by the
192 Reference Committee in Executive Session concurred that the resolutions presented in
193 Item A is current policy or are already addressed in current projects. At the request of
194 the National Congress of Family Medicine Residents, any item may be taken off the
195 Reaffirmation Calendar for an individual vote on that item. Otherwise, the Committee
196 will request approval of the Reaffirmation Calendar in single vote.

197
198 (A) Resolution No. R2-501 entitled, "Student Loan Refinancing Program," the resolved
199 portion which reads as printed below:

200
201 RESOLVED, That the American Academy of Family Physicians study the feasibility of
202 creating a loan refinancing program in partnership with a financial institution to reduce
203 the effect of loans on physicians' finances and student choice.

204 The reference committee heard testimony in support of the resolution. Testimony reflected that
205 loan burden can adversely affect the family medicine workforce. The reference committee
206 agreed that loan repayment is a significant issue for students and residents. The AAFP currently
207 partners with a student and physician consolidation and refinancing program, SoFi. SoFi allows
208 refinancing of existing private and federal loans. As a part of its benefit program, Sofi offers an
209 additional rate discount to medical students and physicians who are current members of the
210 AAFP.

211
212 **RECOMMENDATION: The Reference Committee recommends that Item A on the**
213 **Reaffirmation Calendar be approved as current policy or as already being addressed in**
214 **current projects.**

215
216 **I wish to thank those who appeared before the reference committee to give testimony**
217 **and the reference committee members for their invaluable assistance. I also wish to**
218 **commend the AAFP staff for their help in the preparation of this report.**

219 Respectfully submitted,

220

221

222

223

Vivian Jiang, MD, Chair

224

225 Vicky Bakhos, MD

226 Selim Sheikh, DO

227 Nelly Song, MD

228 Natalie Britt, MD

229 Raman Nohria, MD