

# **AAFP Congress of Delegates 2018 Report**

## **By Dr. Tim Alford, Kosciusko**

Your AAFP delegation recently completed its work at the AAFP Congress of Delegates 2018 in New Orleans, LA. The delegation consisted of Dr. Tim Alford - Kosciusko, Delegate; Dr. Katie Patterson - Indianola, Delegate; Dr. Susan Chiarito- Vicksburg, Alternate Delegate; Dr. John Mitchell - Jackson, Alternate Delegate.

The work of the reference committees served up a lot in the way of policy for family doctors in Mississippi as well as around the country. The AAFP Reference Committee work has become much more efficient and relevant to the practicing family physician. Much of the Reference Committee work, rather than remaining dormant for a while, is immediately incorporated and edited into policy during the Congress. You can see policy shifts before your very eyes.

For example, from the Education Committee, it is apparent there is an on-going conversation with the leadership of AAFP and the American Board of Family Medicine (ABFM - Board Certification entity). The Congress' message to the Board this year via our membership and our colleagues back at home is that Board Certification should not be the sole criteria for privileging, credentialing, and payment. Secondly, there is still plenty of room for improvement of the maintenance of certification process as well as the cost. ([Report E Board of Directors](#))

The Congress of Delegates by adopting Substitute Resolution 402 finally took on a relevant end-of-life issue. The Congress adopted a position of "engaged neutrality" toward medical aid in dying regardless of any position on the matter by any other medical organization. In the process, the AAFP ends the use of the term "assisted suicide."

The Congress reasserted graduate medical education (GME) financing reform and strengthened its policy about GME funding, setting the goal of 25% of medical school graduates choosing family medicine by the year 2030 with six principles to guide us toward this goal. ([Board of Directors Report F](#)) The buzz phrase is now "25 by 30!"

AAFP continues to pound away at the issue of prior authorization and feels that getting rid of this hassle factor is subsumed within an overall reformed payment system. This payment model called the APC - APM Payment Model ([Board of Directors Report G](#)) includes a per member per month approach, coverage for non-face-to-face services, fee for service when needed, and prospective payment. Direct Care payment has gained a foothold within this payment model!

Resolution 516, which came out of the Advocacy Committee, asked for expansion of the legislative tool kit to include model state legislation to stake ground for a more favorable primary care spending rate. For example, Rhode Island and Oregon have been successful in substantially increasing their primary care spending percentage to go into effect in the near future.

The Committee on Public Health in its work incorporates into [Board of Directors Report H](#) to accommodate for climate change as part of its environmental and public health concern. There were many appeals from many microphones for AAFP to develop a singular statement concerning the overwhelming evidence for climate change and its profound public health consequences.

There was action taken to develop a national immunization registry for children and adults that could be accessed on-line. Alleluia! There was a request to develop and use evidence-based non-pharmacy interventions for pain control: i.e. medicinal marijuana and acupuncture. Also, there was a request to create policy opposing continued patient segregation of care within the healthcare system by insurance companies and hospitals. For example, some hospitals have outpatient facilities for private insurance and another set of clinics for Medicaid and non-paying patients.

Mississippi was well represented by Dr. Brent Smith of Cleveland who distinguishes us by being President of the AAFP Foundation. He reported significant humanitarian progress among which is substantial giving to free clinics around the country.

Dr. Jason Dees of New Albany is President of the AAFP Political Action Committee and he reported over \$1 million raised in this year alone, making it the second most successful health-related PAC in the country as the AAFP continues to gain more and more clout on the Hill in Washington.

Our Chapter Exec, Beth Embry, remains one of the most respected execs amongst 50 states bringing forth fresh new ideas, always committed to "her doctors." There were 65 members of AAFP registered to attend the Scientific part of the meeting, AAFP's Family Medicine Experience (FMX), which is ongoing at the time of this writing.