

PROCEEDINGS OF THE HOUSE OF DELEGATES

135th ANNUAL MEETING

January 23, 2016

Call to Order

Paul E. Perkowski, MD, Speaker and Thomas "Steen" Trawick, MD, Vice Speaker called the House of Delegates to order at 9:30AM on Saturday, January 23, 2016 at the Shreveport Convention Center in Shreveport, Louisiana.

Dr. Perkowski welcomed all participants and guests and thanked them for making the trip to Shreveport for the meeting. Dr. Perkowski then briefed the House on several items of regular business, which would occur such as the invocation, pledge of allegiance, adoption of the proceedings of the 2015, and adoption of the actions of the Board of Governors. Any delegate has the right to extract any item from either the proceedings of the HOD or BOG to be debated. If anything was extracted from those proceedings, debate on those items only would occur immediately. If nothing was extracted, the honorary resolutions for Community Service and the LSMS Hall of Fame would follow.

Dr. Perkowski explained the process by which resolutions are numbered and categorized. He reiterated the Speakers make only minor editorial changes to the resolve statements of resolutions to clarify their structure prior to publication and mailing to the House. He emphasized most are grammatical or procedural in nature and do not reflect any change to the intent of the resolution. He noted any portion of a resolve can be amended during debate. Because the *whereas* portions of resolutions are dropped once resolves are adopted, each resolve should always be in a form which can stand alone after adoption.

Dr. Perkowski noted the procedures for amendments to resolutions in an effort to both streamline the process and make it easier for the delegates to follow. Amendments can be written on the amendment sheets which are on each table. All amendments should be taken to the back of the room where staff will type them up and give the author of the amendment a specific number for his or her amendment. When the author wishes to introduce an amendment, he will say so and provide the number of the amendment which will then be projected for the House.

Additionally, instead of multiple microphones, the Speakers are trying to use only two indicating pro and con. Delegates should stand at the appropriate microphone if they wish to support or oppose a resolution or a particular amendment.

The procedure for elections for offices elected by the House of Delegates will be outlined by the Committee on Rules and Order of Business. The Speakers have prepared election sheets for all elected offices and previously announced candidates for each office as a slate of candidates which will be presented to the House. As each position comes up for election, the Speakers will indicate the announced candidate(s) and call for any additional nominations

from the floor. Elections for offices with more than one nominated candidate will be as follows: the ballot box will be in the back of the meeting room and after nominations are closed, staff will prepare ballots for distribution. Voting will take place for two hours.

Dr. Perkowski also noted the Committee on Charter and Bylaws has already provided recommendations on resolutions that if passed, will require bylaws changes. If any of those resolutions are adopted, a report will be presented confirming the revised bylaws changes have been approved by the Committee.

Dr. Perkowski noted that Districts which conducted elections in 2015 for the Board of Governors and Council on Legislation are asked to notify the Speakers of the results of those elections. The Speakers will announce the election results to the House of Delegates at the conclusion of the elections voted on by the House.

Report of the Credentials Committee

Dr. Trenton James, II, Chair, reported that a quorum of certified delegates was present and seated.

Report of the Committee on Rules and Order of Business

Dr. Larry Simon, Chair, presented the report of the Committee on Rules and Order of Business which met earlier that day. The Committee recommended the following rules for use by the 2016 House of Delegates:

1. Limitation of Debate: The tradition of previous meetings regarding limitation of debate is as follows: Each speaker addressing an item brought to the floor for a vote is limited to three minutes of debate. Each delegate may return to the floor for one minute for the purpose of rebuttal or to summarize his/her position.
2. Late Resolutions: The Committee reported the following late resolutions met the criteria for being duly considered by the House: L-1, *Membership Delinquency Date* and L-2, *LSMS Council Members*.
3. Elections Procedures for a Single-Day Meeting: Elections for vacant offices and positions during a single-day meeting will be held and conducted in accordance with governing provisions of the Charter and Bylaws of the Louisiana State Medical Society, and the Procedures of the House of Delegates. The date and hour for nominations and elections are as designated on the official agenda of the annual meeting.

The ballot box will be declared open by the Speaker at a time consistent with the official agenda and will remain open for two hours. If no candidate receives a majority of the ballots cast, then a run-off will be held. The ballot box for a run-off will be opened at a time designated by the Speaker and will remain open for a time designated by the Speaker.

4. Procedure for Presentation of Proposed Bylaws and Charter Changes During a Single-Day Meeting: Presentation of proposed bylaws and charter changes during a single-day

meeting will be conducted in accordance with the governing provisions of the Charter and Bylaws of the LSMS and the Procedures of the House of Delegates and as outlined by the Speaker earlier in the day. Some resolutions have proposed bylaws language changes included in the resolves. Those resolves will require a two-thirds vote in order to be adopted. The Speaker has indicated he will remind the House whenever resolutions affecting the bylaws will be considered.

The Bylaws may be amended on approval of two-thirds of the members of the House of Delegates present and voting.

All proposed amendments to the Charter and Bylaws will be referred to the Committee on Charter and Bylaws for review and perfection of language to implement the actions of the House of Delegates.

During a single-day meeting, the Committee on Charter and Bylaws will present its report on proposed bylaws amendments to the House of Delegates by privileged motion entitled to immediate consideration.

The Society may amend any article of the Charter by a two-thirds vote of the voting members registered at any annual meeting provided that such amendments have been presented at the previous meeting of the House of Delegates and subject to the requirements of Article IX of the Charter.

Proposed amendments to the Charter will be referred to the Committee on Charter and Bylaws but the report of the Committee containing the proposed amendments shall be sent officially to each member, district society and parish society at least two months before the meeting at which final action is to be taken.

5. Procedure for filling a Vacant Delegate or Alternate Delegate Position: The filling of all vacancies in the position of delegate or alternate delegate will be conducted in accordance with governing provisions of the Charter and Bylaws of the LSMS and the Procedures of the House of Delegates.

A member of the House of Delegates must be a member of the Louisiana State Medical Society, including fulfillment of the procedure outlined in Article III, Section B of the Bylaws:

B. Method of Selection—A member of a component society becomes a member of the Louisiana State Medical Society when

1. The Secretary of the component society has certified to the Secretary-Treasurer of the Louisiana State Medical Society that the applicant is indeed a member of the component society;
2. The application has been approved by the Board of Governors; and
3. Applicable dues have been received by the Secretary-Treasurer of the Louisiana State Medical Society.

A member must fill a delegate or alternate delegation positions apportioned consistent with their category of membership in the Louisiana State Medical Society.

The report and recommendations of the committee on Rules and Order of Business were approved by the House of Delegates.

Approval of the Proceedings of the 2015 House of Delegates

The Proceedings of the Annual Meeting of the 2015 House of Delegates were approved as published in the Delegates handbook.

Approval of the Actions of the Board of Governors during 2015

The actions taken by the Board of Governors during 2015 were approved as published in the Delegates handbook.

Elections

The following members were elected to serve for 2016-2017:

Board of Governors

President-Elect	William "Beau" Clark, MD
Vice President	Roderick Clark, MD
Speaker, House of Delegates	Paul Perkowski, MD
Vice Speaker, House of Delegates	T. Steen Trawick, MD
Secretary- Treasurer	Richard Paddock, MD
Chairman, Council on Legislation	Robert Bass, MD
First District Councilor	Juan Gershanik, MD
Third District Councilor	Allen Vander, MD
Fifth District Councilor	Ezekiel Wetzel, MD
Seventh District Councilor	Brian Gamborg, MD
Ninth District Councilor	Anthony Blalock, MD
Medical Student Member	Shannon Sparrow
Resident Member	Benjamin Karfunkle, MD
Young Physician Member	Jeremy Henderson, MD
Senior Physician Member	Harold Ishler, MD

Alternate First District Councilor	Richard Dickey, MD
Alternate Third District Councilor	Mark Hebert, MD
Alternate Fifth District Councilor	Adrienne Williams, MD
Alternate Seventh District Councilor	Y. Yoko Broussard, MD
Alternate Ninth District Councilor	Larry Simon, MD
Alternate Medical Student Member	Anthony Naquin
Alternate Resident Member	Claude Pirtle, MD
Alternate Young Physician Member	Vacant
Alternate Senior Physician Member	Trenton L. James, II, MD

AMA Delegation

Term—(January 1, 2016-December 31, 2017)

Delegates

Lee Stevens, MD
Richard Paddock, MD

Alternate Delegates

Ezekiel Wetzel, MD

Alternate Delegate Member-in-Training (January 1, 2016-December 31, 2016)

Jacob Quinton

Council on Legislation (Term 2 years)

First District Councilor	Juan Gershanik, MD
First District Alternate	Richard Dickey, MD
Third District Councilor	Irving Blatt, MD
Third District Alternate	Billy Hillman, Jr., MD
Fifth District Councilor	Ezekiel Wetzel, MD
Fifth District Alternate	Vacant
Seventh District Councilor	John VanHoose, II, MD
Seventh District Alternate	John Noble, MD
Ninth District Councilor	Larry Simon, MD
Ninth District Alternate	Jason Shumadine, MD

Council on Legislation (Term 1 year)

Young Physician Member	Jeremy Henderson, MD
Alternate Young Physician	Vacant
Resident/Fellow Member	Patrick Torres, MD
Alternate Resident/Fellow	Vacant
Medical Student Member	Matthew Cutrer
Alternate Medical Student	Patrick Johnson
LSMS Alliance Member	Rose Kuplesky
LSMS Alliance Alternate	Vacant

Report of the Budget and Finance Committee

T. Steen Trawick, MD, Chair of the Budget and Finance Committee presented the report of the Committee and the proposed 2016 budget on January 23, 2016. He reviewed the Committee's recommendations and answered questions. During this period, Dr. Floyd Buras, representing the past presidents made a motion that the LSMS raise active member dues from \$400 to \$450, which was referred to the Board of Governors for action. Following discussion, the proposed budget for 2016 of \$1,649,000 in projected revenues and \$1,648,834 in projected expenses was adopted by the House as well as the other recommendations in the Report of the Budget and Finance Committee.

Resolutions to the House of Delegates

RESOLUTION 101- Reaffirmed as Written

RESOLVED, as per House of Delegates Action requiring review of existing policies after their five year anniversary or sooner, the following policies are scheduled to be **reaffirmed**.

- 10.01 Abortion – General Policy
- 10.02 Abortion – Public Funding
- 20.01 AIDS – Discrimination Against Patients
- 20.02 AIDS - Prevention
- 20.03 AIDS – Guidelines for Diagnosis and Treatment
- 20.04 AIDS – HIV Testing of Pregnant Women
- 20.05 AIDS – HIV Screening in Pregnancy
- 20.06 AIDS – Post Exposure Chemoprophylaxis
- 20.07 AIDS – Health Care Worker Safety
- 20.08 AIDS – Education in Schools
- 20.09 AIDS – Reporting of HIV as a Communicable & a Sexually Transmitted Disease
- 30.01 Cancer – Funding for the Tumor Registry
- 30.02 Cancer – Discharge of Known Carcinogens
- 40.01 Chemical Dependence – Warnings Against Abuse of Alcohol
- 40.02 Chemical Dependence – Driving While Intoxicated
- 40.03 Chemical Dependence – Insurance Coverage for Treatment of Chemical Dependency
- 40.05 Chemical Dependence – Anabolic Steroid Use of High School Students
- 40.06 Chemical Dependence – Reverse Current DEA Agent of Practitioner Regulations
- 50.01 Durable Medical Equipment – General Policy
- 60.02 Emergency Medical Services – Bureau of Emergency Medical Services
- 60.04 Emergency Medical Services – Community Emergency Medical Services
- 80.02 Health Care Delivery Models – Incentives for Individual Participation
- 90.01 Health Care Facilities – Physician Ownership of Medical Facilities
- 91.07 Hospitals, Organized Medical Staff – Conflict of Interest on Medical Staffs
- 91.08 Hospitals, Organized Medical Staff – Drug Screening/Testing of Medical Staff Members
- 91.09 Hospitals, Organized Medical Staff – Restrictions on the Medical Staff
- 91.12 Hospitals, Organized Medical Staff – Payments to Medical Staff Officers
- 92.01 Nursing Homes – Reimbursement for Multiple Nursing Home Visits
- 100.01 Health Care Reform – Repeal of the Patients Protection and Affordable Care Act

- 100.02 Health Care Reform – Opposition to Individual Mandate
- 100.04 Health Care Reform – Health System Reform in Louisiana
- 100.05 Health Care Reform – Health Access Louisiana
- 100.06 Health Care Reform – Pluralistic Delivery System
- 100.09 Health Care Reform – Fee-for-Service Medicine
- 100.11 Health Care Reform – Cost Effective Health Care System
- 100.12 Health Care Reform – Individually Owned Health Coverage System
- 100.13 Health Care Reform – Medical Home
- 110.03 Health Information – Funding of Health Information Exchanges
- 111.01 Medical Records – Retention of Medical Records
- 111.02 Medical Records – Disposition of Deceased Physicians’ Medical Records
- 111.03 Medical Records – Release of Autopsy Report to Attending Physician
- 120.01 Health Insurance – Health Care Coverage for All Americans
- 120.02 Health Insurance – Standardization of Claims Handling Procedures
- 120.03 Health Insurance – Physician Utilization Review Decisions
- 120.04 Health Insurance – Clinical Decision Making by Third Party Payors
- 120.05 Health Insurance - Voluntary Health Insurance Purchasing Co-Op
- 121.03 Eligibility, Benefits & Coverage – Maternity Care
- 121.06 Eligibility, Benefits & Coverage – Reimbursements in Managed Care Contracts
- 121.08 Eligibility, Benefits & Coverage – Usual, Customary and Reasonable Calculations
- 121.09 Eligibility, Benefits & Coverage – Coverage for Children and Adolescents
- 121.11 Eligibility, Benefits & Coverage – Patient Eligibility for Medical Services
- 122.01 Health Care Quality Initiatives – Disclosure of Utilization Review Criteria
- 123.01 Managed Care – Gag Orders
- 123.02 Managed Care – Peer Review Mechanisms
- 123.04 Managed Care – Regulation of Managed Care Companies
- 130.01 Indigent and Uninsured – Support of Healthcare for the Indigent
- 130.02 Indigent and Uninsured – Health Care for the Indigent, Elderly and Chronically
- 130.04 Indigent and Uninsured – Reimbursement for Care Provided to Hospitalized
- 130.05 Indigent and Uninsured – Health Care for the Uninsured
- 140.01 Administration and Organization – LSMS Policy Compliance
- 140.04 Administration and Organization – Refund of Dues

- 141.01 American Medical Association – LSMS AMA Official Family
- 141.02 American Medical Association – Member-in-Training as AMA Delegate
- 141.03 American Medical Association – Increase or Decrease in AMA Delegation
- 142.01 Boards and Commissions – Procedure for Nominations to State Board and Commissions
- 143.01 Legislation and Regulation – LSMS Legislative Agenda
- 143.02 Legislation and Regulation – Coordination of Legislative Efforts
- 143.04 Legislation and Regulation – Meetings with Area Legislators
- 143.05 Legislation and Regulation – LSMS Presence at Medicaid Budget Hearings
- 150.04 Medicaid – Medicaid Reimbursement for Multiple Physician Visits
- 150.05 Medicaid – Medicare – Medicaid Crossover Payments
- 151.01 Medicaid Funding – Funding of LaCHIP
- 180.02 Medical Research – Biomedical Research
- 190.03 Medicare – Restructuring of Medicare Program
- 190.05 Medicare – Due Process Rights Under Medicare
- 190.06 Medicare – Medicare Evaluation & Management Documentation Guidelines
- 190.07 Medicare – Disclosure of Medicare HMO Policies
- 200.01 Mental Health – Mental Health Care
- 200.04 Mental Health – Mental Health Centers in Louisiana
- 210.02 Physicians – Physician Freedoms in Delivering Health Care
- 210.04 Physicians – Guidelines for Rendering a Second Opinion
- 210.05 Physicians – Home Health Care Services
- 212.02 Licensure and Discipline – Due Process Regarding Sanctions
- 212.03 Licensure and Discipline – Licensure Confidentiality
- 212.05 Licensure and Discipline – Prevent Linking Medical Licensure to Any Public or Private Health Plan
- 212.06 Licensure and Discipline – Multiyear Medical License
- 212.07 Licensure and Discipline- Licensure Fee Exemption for Physicians Over the Age of 75
- 212.08 Licensure and Discipline – Representation on LSBME
- 213.03 Physician Contracts & Payment – Regulation of Physician Fees
- 213.05 Physician Contracts & Payment – Timely Payment of Claims by Health Insurers
- 213.08 Physician Contracts & Payment – Pay for Performance Guidelines
- 213.09 Physician Contracts & Payment – Utilization and Cost of Medical Services

- 213.10 Physician Contracts & Payment – Insurer Explanation of Benefit Forms
- 213.12 Physician Contracts & Payment – Retroactive Claims Denials
- 213.16 Physician Contracts & Payment – Physician Negotiating Units
- 213.17 Physician Contracts & Payment – Inclusion of Payment Schedule in Contracts
- 213.19 Physician Contracts & Payment – Assignment of Medical Insurance Benefits
- 214.02 Physician Patient Relationship – Patient Rights and Responsibilities
- 214.03 Physician Patient Relationship – Home Health Care Referral Influence
- 214.04 Physician Patient Relationship – Diagnostic Imaging Services
- 216.01 Quality of Care – Third-Party Payor Determinations
- 216.02 Quality of Care – Patient Safety
- 217.03 Standard of Care – Comparative Effectiveness Research
- 220.01 Prescription Medications – Atypical Antipsychotic Medications
- 221.01 Prescribing & Dispensing – Physician Dispensing
- 221.02 Prescribing & Dispensing-Usage of Brand & Generic Name for Prescription Medications
- 222.01 Substitution – Generic Substitution by Pharmacists
- 222.02 Substitution – Substitution of Biosimilar Medications
- 230.01 Professional Liability – Current Automobile Driver’s Licensure
- 232.01 Medical Expert Testimony – Rendering Opinions for Reports and Testimony to Third Parties
- 232.03 Medical Expert Testimony – Immunity for Expert Witnesses
- 232.04 Medical Expert Testimony - Physicians’ Testimony in Malpractice Trials
- 233.06 Medical Malpractice – Guidelines for Malpractice Case Reviews by Physicians
- 240.01 Public Health – Louisiana Poison Control Center
- 241.01 Children and Youth – Child Death Review Panel
- 241.02 Children and Youth – School-Based Health Programs
- 241.03 Children and Youth – Evaluation and Treatment of Handicapped Children
- 241.06 Children and Youth – Regional SIDS Centers
- 242.02 Environmental Health - Recycling
- 242.03 Environmental Health – Disposal of Toxic Waste
- 243.01 Immunizations – Childhood Immunizations
- 243.04 Immunizations – Varicella and Hepatitis A Vaccines
- 244.01 Obesity – Contending with Childhood Obesity

- 244.02 Obesity – Nutritional Labeling
- 245.01 Public Health Education – Patient Education for Home Disposal of Sharps
- 245.02 Public Health Education – Sex Education in Schools
- 250.04 Scope of Practice – Unsupervised Non-Health Care Personnel
- 250.06 Scope of Practice – Certification/Recertification of Skilled Care and Therapy Services
- 250.07 Scope of Practice – Naturopathic Physicians
- 250.08 Scope of Practice – Laser Surgery
- 250.09 Scope of Practice – Pain Management
- 250.10 Scope of Practice – Anesthesia Care
- 260.01 Surgery – Postoperative Care
- 280.01 Tobacco – Tobacco Free Society
- 280.04 Tobacco – Smoke Free Work Environment
- 280.05 Tobacco – No Smoking in Health Facilities
- 280.06 Tobacco – Smoking Policy for Public Elementary and Secondary Schools
- 280.09 Tobacco – Sale of Tobacco Products to Minors
- 280.10 Tobacco – Sale of Tobacco Products on all Charity Hospital Properties
- 290.03 Women’s Health – Screening Mammography for Indigent Women
- 290.04 Women’s Health – Insurance Coverage for Screening Mammography
- 290.05 Women’s Health – Mammography Screening in Asymptomatic Women

91.09 Hospitals; Organized Medical Staff - Payments to Medical Staff Officers – Reaffirmed as Amended

The LSMS opposes any removal or attempt at removal of a chief of staff or his / her officers without cause; **any removal must follow due process and the medical staff bylaws.**

RESOLUTION 102 - Adopted

RESOLVED, that beginning with the dues year commencing on January 1, 2018, joint membership in the Louisiana State Medical Society and a parish medical society is no longer required.

Speakers Note: resolution would require a charter change.

RESOLUTION 103 – Adopted by Consent Calendar

RESOLVED, that the LSMS continue to handle dues collection and database management and sharing at no cost to those component societies who partner with the LSMS for this activity and be it further

RESOLVED, that the LSMS continue to offer assistance and resources for membership recruitment and retention at no cost to component societies including but not limited to LSBME physician lists, printed and co-branded materials, legislative communications, full access to the LSMS member and non-member database, and be it further

RESOLVED, that the LSMS welcome the participation of the component society president or his/her representative at the quarterly meetings of the LSMS Board of Governors and meetings of the LSMS Council on Legislation

RESOLUTION 104 – Adopted as Amended; Referred to the BOG

RESOLVED that the LSMS support the creation of a process for the certification of Medical Assistants in Louisiana.

RESOLUTION 105 – Referred to the BOG

RESOLVED, that the LSMS utilize electronic media to broadcast meetings to members.

Fiscal Note: TBD

RESOLUTION 106 - Failed

RESOLVED, that Article IV, Section 6 of the LSMS Bylaws be amended to allow medical students from the University of Queensland in Australia who are in training at Ochsner Health System to become medical student members of the Louisiana State Medical Society.

Article IV, Section 6 - Medical Student Members

- A. Qualifications - a medical student member
1. Must be a medical student, in good standing, in a medical school in Louisiana, which has been approved by the Liaison Committee on Medical Education; or a medical student, in good standing, at the University of Queensland in Australia and training at Ochsner Health System;
 2. Must be a member of the Medical Student Section;

3. Must be of good ethical and moral character;
4. Need not hold a degree of Doctor of Medicine or Doctor of Osteopathy; and
5. Need not be licensed by the Louisiana State Board of Medical Examiners.

RESOLUTION 107 – Adopted

RESOLVED, that the House of Delegates adopt as policy that the LSMS President will transmit quarterly a personal communication addressed to members of the LSMS either by mail or electronically, informing members on the past, current, and future activities of the LSMS and soliciting their comments and recommendations.

RESOLUTION 108 – Adopted as Amended

RESOLVED, that the House of Delegates adopt as policy that the LSMS President personally communicate by written **email** addressed to the Presidents of each Component Medical Society no less often than once a quarter during their term of office informing them of recent, current, and forthcoming LSMS activities and providing an opportunity for component society Presidents to provide input and feedback.

RESOLUTION 109 – Referred to BOG

RESOLVED, that the **LSMS** establish a standing committee tasked with the study of, advocacy for, and expansion of Graduate Medical Education (GME) in the state of Louisiana, and be it further

RESOLVED, the LSMS standing committee on GME includes medical students, residents, young physicians, LSMS officers, and LSMS staff, and be it further

RESOLVED, the LSMS standing committee on GME meets quarterly, beginning in the first quarter of 2016, and be it further

RESOLVED, the LSMS standing committee on GME creates an annual report on GME in Louisiana to be presented each year at the LSMS House of Delegates, including a recommendation on whether or not to continue or disband the standing committee, and be it further

RESOLVED, that Article X of the LSMS Bylaws be amended as follows:

ARTICLE X

Committees of the Louisiana State Medical Society

The committees of the Louisiana State Medical Society shall be standing committees and special committees. All members of any LSMS standing and special committees must be members of the Louisiana State Medical Society.

Section 1—Standing Committees

- A. Listing**
1. CME Accreditation
 2. Medical/Legal Interprofessional
 3. **Graduate Medical Education**

RESOLUTION 110 – Adopted as Amended

RESOLVED, that Article XII, Section A, items 10 and 11 of the LSMS Bylaws be amended as follows:

The House of Delegates is composed of:

10. One delegate or one alternate delegate, per 100 resident and fellow members of the LSMS, **or fraction thereof**;
11. **A total of fifteen delegates and alternate delegates** from **the** LCME accredited medical **schools** in the state, who are members of and designated by the Medical Student Section;

RESOLUTION 201 – Adopted as Amended

RESOLVED the LSMS seek **or** support legislation to allow for physicians to receive **some forms of compensation** when not receiving payment as one of the multiple physicians either primary or consulting on the treatment of a Medicaid patient.

RESOLUTION 203 - Adopted as Amended

RESOLVED that the LSMS work with the AMA to require that the mandating authority cover the financial obligations for those physicians and institutions that do choose to participate in these programs.

RESOLUTION 204 – Adopted

RESOLVED, the Louisiana State Medical Society reaffirms *Policy 71.01 – End of Life- Terminally Ill Patients*, and be it further

RESOLVED, that the Louisiana State Medical Society adopts as new policy that the LSMS finds that physician assisted suicide and euthanasia are fundamentally inconsistent with the physician's role as healer, and be it further

RESOLVED, that the Louisiana State Medical Society will strongly oppose any Louisiana or federal legislative bill to legalize physician assisted suicide or euthanasia, and be it further

RESOLVED, that the Louisiana State Medical Society supports and affirms existing AMA policy as codified in December 2015 opposing physician assisted suicide and euthanasia, and will communicate to the AMA Council on Ethical and Judicial Affairs the LSMS support and affirmation of these existing AMA policies, and be it further

RESOLVED, that the Louisiana State Medical Society will strongly oppose attempts to change the policies of the AMA to a stance of neutrality or support for physician assisted suicide or euthanasia.

RESOLUTION 205 – Referred to BOG

RESOLVED, the state of Louisiana establish a Residency Education Fund through the LA Legislature to ensure adequate resident physician placement, including IMGs, to meet the future health needs of Louisiana citizens, and be it further

RESOLVED, LSMS advocate for the establishment of the Residency Education Fund through the LA Legislature, and be it further

RESOLVED, LSMS take a leadership stance on the Residency Education Fund through the establishment of a standing GME Committee, if such committee has not already been established, and be it further

RESOLVED, LSMS identify existing or undergo new economic modeling for purposes of establishing a white paper on the fiscal rewards of residents to the state of Louisiana.

RESOLUTION 206 – Referred to BOG

RESOLVED, the LSMS establish policy in support of an all-payer expansion of GME funding in Louisiana to maintain residency positions critical to the future health care workforce, and be it further

RESOLVED, the LSMS advocate for all-payer expansion of GME in the LA Legislature and be it further

RESOLVED, the LSMS study the finances of all-payer expansion of GME and produce a report to be reviewed at the 2017 House of Delegates and be it further

RESOLVED, the LSMS task the LSMS standing committee on Graduate Medical Education (GME) with studying the finances of all-payer expansion of GME, should such a committee exist.

RESOLUTION 207 – Referred to BOG

RESOLVED, that the LSMS adopt a policy supporting parity in the number of years of GME training required for IMGs and USMGs to obtain state medical licensure, and be it further

RESOLVED, that the LSMS aggressively pursue, including by legislative means, parity in the number of years of GME training requirement for IMGs and USMGs for licensure, and report back the progress in two years.

RESOLUTION 208 – Adopted as Amended, Referred to BOG

RESOLVED, that the LSMS support physicians freedom of referrals

RESOLUTION 209- Failed

RESOLVED, that the LSMS seek and/or support legislation and or regulations to support the creation and maintenance of loan forgiveness programs for medical student borrowers of both state and federal loans, and be it further

RESOLVED, that the LSMS advocate for continued funding from the state of Louisiana specifically for the relief of medical student loan debt for Louisiana state residents, through the SLRP and/or other loan forgiveness programs, and be it further

RESOLVED, that the LSMS advocate for the expansion of existing Louisiana state funding of medical student loan forgiveness/repayment programs for Louisiana residents practicing in underserved areas of Louisiana.

RESOLUTION 301 – Referred to the AMA Delegation

RESOLVED, the Louisiana State Medical Society request a report on the thoroughgoing review of the *AMA Code of Medical Ethics* by the Louisiana State Medical Society Medical-Legal Interprofessional Committee, including initial recommendations in time for submitting resolutions to the 2016 AMA Annual Meeting.

RESOLUTION 302 - Adopted

RESOLVED, that the Louisiana Delegation to the American Medical Association will strive to ensure that the proposed revisions to the American Medical Association *Code of Medical Ethics* will be circulated to the member societies of the Federation of Medicine six months before final presentation of the *Modernized Code* to the AMA House of Delegates, and be it further

RESOLVED, that the Louisiana Delegation to the American Medical Association will strive to ensure that the proposed revisions to the American Medical Association *Code of Medical Ethics* will be presented to the AMA House of Delegates for a chapter by chapter vote, with the ability to extract individual policy items for debate by the House of Delegates.

RESOLUTION 303 – Adopted

RESOLVED, that the following be added to existing LSMS policy concerning collective bargaining by physicians:

A strike that is lawful may be considered in the face of unjust policy when government or employers refuse meaningful discussions or negotiations and when the striking physicians are motivated by issues of justice and liberty, and be it further

RESOLVED, that the Louisiana Delegation to the AMA will seek to modify AMA policy on collective bargaining and political action by physicians to reflect the policies of the Louisiana State Medical Society.

Resolution 401- Adopted by Consent

RESOLVED, that the LSMS recommends that the minimum legal sales age for tobacco products be increased from 18 to 21 for the state of Louisiana.

RESOLUTION 402 – Adopted by Consent

RESOLVED, the LSMS supports improved screening for breast cancer in rural Louisiana.

RESOLVED, the LSMS will support legislative initiatives to increase funding for mobile breast cancer screening units in rural Louisiana.

RESOLUTION 403 – Referred to BOG

RESOLVED, the Louisiana State Medical Society Council on Public Health continue to study the effects of the prescription drug abuse epidemic in the state of Louisiana, and produce a report for the 2017 Louisiana State Medical Society House of Delegates including but not limited to resources for, and recommendations to LSMS members on additional steps to combat this public health crisis in their practice and their community.

RESOLUTION L1 – Approved as Amended

RESOLVED, that a membership in LSMS and the member's corresponding component society becomes delinquent **90** days after that member's dues become due, and be it further

RESOLVED, that the LSMS reaffirm Article XXIV, Section 1, A, no 5, paragraph 2, which states: **A former member who has been dropped from the membership rolls due to nonpayment of dues may be reinstated within that same year upon payment of the entire amount of annual dues for the year of reinstatement.**

ARTICLE XXIV

Finances

A. Dues

2. *Method of Payment*—Annual **LSMS** dues renewal statements shall be sent to each member no less than two months prior to the annual due date. Dues are due on the member's anniversary date and will become delinquent 60 days after the member's due date. For those component societies that have elected to remain on a calendar year basis their dues will be delinquent 60 days after January 31 each year.

RESOLUTION L2 - Adopted

RESOLVED, that the LSMS Bylaws, Article IX be amended as follows:

1. Standing Councils

A. Members

Each council shall be composed of not less than **nine members and not more** than eighteen members, including the chair. The number of members of a council shall be divisible by three. All members of any LSMS standing council must be members of the Louisiana State Medical Society. Members of councils shall be appointed by the president.

Address of incoming President Dr. Luis M. Alvarado

Ms. Immediate Past President, Past Presidents, Mr. Speaker, members of the Board of Governors, staff members, and honored guests:

50 years ago, I was standing in our family garden in Nicaragua cutting leaves, petals and stems. My grandmother, Laura Merlo, spotted me and said "One day, this boy will be a doctor".

Today, I stand in Shreveport, Louisiana, before some of the best and brightest doctors in the nation, to accept the honor of becoming the President of the Louisiana State Medical

Society. God has truly blessed me and I want to share with you how he guided me from that garden in Nicaragua to here.

Before I tell you my story, there are many people I want to thank, but I know we don't have time for me to thank all of them and I know I will leave some of them out. But in particular tonight, I feel I must mention of course, first and foremost, my wife of 36 years, Elizabeth. Also her father, Luke and sister, Jacqueline. My son, Luis, who is also my manager and he wife, Kelly. My daughter Lizette, an RN at Lakeview and her husband Eric. And my grandchildren: Luis, Enrique, Madeliny, and Isabella. Also, my cousin Marcela who actually introduces me to Elizabeth. And last but not least, my best friends Bobby Bruno and Michael Hollander – who you can tell are my best friends just buy the fact that they made the trip all the way here for me this evening. Now, back to my story:

In 1976, I graduated from LaSalle High School in Nicaragua. It was a school which taught me that compassion and helping the needy were a requirement for life. I heeded that call and I was blessed in 1977 to be the 15th applicant of 500 to be accepted to the medical school in Nicaragua.

My education and training in that medical school led me to vaccinating the poor and treating the wounded in the jungles during the Contra War. It was in that jungle battlefield that God sent me my angel, my now wife Elizabeth, and my life was forever changed. She endured malaria, dysentery, and her first pregnancy without any comfort typically found in the United States a true Hollywood blockbuster these days but, fortunately, for me anyway, led to our romance of a lifetime!

As you might imagine, Elizabeth was anxious for us to move back to her home country. I was anxious, too, but I thought it would mean "good-bye medicine" for me.

Luckily, Tulane Medical School provided me the opportunity I needed to continue my medical career.

In 1995, the torrential Kenner flood forced us to move to the Northshore. What initially seemed a curse soon turned into a blessing. My family and I moved to the wonderful, rural town of Franklinton in Washington Parish. I arrived at an exciting time. I was able to watch Lakeview Regional Medical Center rise from its foundation and provide much needed medical services to the area.

The owners of Lakeview also hired me to work in the Franklinton Rural Health Clinic under then state representative, Dr. Jerry Thomas. Dr. Thomas was instrumental in introducing me to the importance of engaging in the practice of medicine in rural Louisiana. He also guided me in starting and running a private practice. Due to his mentorship and the support of my family and community, I was able to fulfill my true calling of caring for the poor and needy.

Today, I am still blessed to care for the poor and needy of Washington Parish. My heart is bound to the area and I thank God for his many blessings and in leading me there. I look forward to many more years of caring for my community.

While my journey to becoming a leader of physicians is complete, our journey as physicians continues. Our profession faces many challenges and the importance of organized medicine

has never been more evident. I have seen firsthand the difference that organized medicine can make. As a young physician in Franklinton, I was introduced to LSMS and became a member. I saw how resolutions are created, introduced and debated at the House of Delegates.

I learned how those resolutions can become pieces of legislation which are debated at our state legislature. I saw the legislation become laws which help shape the practice of medicine for the betterment of physicians and our patients. Seeing all this made me want to become active in the process and I eventually became president of the Washington Parish Medical Society. LSMS lit a flame deep inside me. I saw that I could become part of a diverse, unified voice that truly has the interest of the physician at heart.

As President of LSMS, I will be your voice and I will always strive for a better healthcare system in Louisiana. I will fight to preserve private practice in our state. Our state contains many rural areas and access to care is critical for the citizens of this state. One of the ways to ensure the citizens of rural Louisiana have access to care is through the promotion and growth of private practices.

As your President, I will make sure that LSMS continues to be an advocate for private practice as well as the development of other programs to meet the demand for care in rural Louisiana.

We are in the midst of a period of rapid growth and change for the health care industry. Electronic Medical Records have become part of all of our lives and the endless possibilities of telemedicine are just beginning to take shape. The LSMS must become a leader in guiding our physicians through these changes. At the same time, we must work to ensure that quality of care is not sacrificed.

While we are dealing with significant changes in how we deliver health care, we are also faced with significant hardships in how we are paid for those services.

As you know, Louisiana faced a 160 million dollar shortfall in Medicaid payments last year.

LSMS needs to continue to lead the conversation and guide our government to preserve healthcare reimbursements in order to maintain access to care for the citizens of this state. At the same time, we need to explore alternatives in order to ensure our physicians are paid fairly for the services they provide.

Access to care is also critically important for the mentally ill of this state. Each day, we are confronted with stories of death and suffering due to the lack of access to quality mental treatment for those that so desperately need it in our state. LSMS must continue to urge the state to address this horrific problem.

As physicians, we must fight for our patients. We must help them get better and live healthier lives. In order to do that, we must also fight for ourselves. We must fight to preserve the practice of medicine and protect our profession.

At some point, there will be another challenge to the medical malpractice limit. When that occurs, we must stand ready to defend it. Limiting damages in malpractice cases lowers insurance costs and assures accessible and affordable healthcare for the public.

Attacks on our profession will also occur in other areas. As we have seen in the last several legislative sessions, attempts will be made by non-physicians to chip away at our scope of practice. A physician-led, patient-centered treatment program assures that the patient receives the right care, from the right professional, at the right time. We must protect physician led medicine.

Finally, we must advocate for meaningful board certification. Board certifications are difficult, expensive and time consuming. Their completion should result in meaningful rewards; either financially or professionally.

It is time that we advocate for meaningful board certifications that reward you for your time and efforts.

In closing, President George W Bush once said:

"In America's ideal of freedom, the exercise of rights is ennobled by service, and mercy, and a heart for the weak. Liberty for all does not mean independence from one another. Our nation relies on men and women who look after a neighbor and surround the lost with love.

Americans, at our best, value the life we see in one another, and must always remember that even the unwanted have worth."

Thank you again for this wonderful honor and I look forward to working with you and for you in the year ahead.