

**2019 House of Delegates
Resolution Index -100s**

Resolutions	Subject/Introduced By
101	LSMS Policies to be Sunset in 2019
102	LSMS Directives to be Sunset in 2019
103	Updating House of Delegates Apportionment for Small Chartered/Affiliated Medical Societies
104	Creating a New Lifetime Membership Category
105	Transitioning of Dues Exempt Members to Legacy Members
106	Updating Full Dues Equivalent for Lifetime and Legacy Membership Categories
107	Adding Specialty Medical Society Representation on the LSMS Council on Legislation

RESOLUTION 101

SUBJECT: LSMS Policies to be Sunset in 2019

INTRODUCED BY: Paul Perkowski, MD Speaker
Steen Trawick, MD, Vice-Speaker

WHEREAS, LSMS Policies are scheduled to be sunset five years after adoption by the LSMS House of Delegates, therefore be it

RESOLVED, that the following LSMS policies be sunset by the House of Delegates.

80.01 Health Care Delivery Models - Direct Primary Care

The LSMS supports alternative practice models such as Direct Primary Care, which allow physicians to practice medicine in a manner which reduces burdens and administrative overhead created by third party payors.

Authority Note: Added R305-14

90.02 Health Care Facilities - Violence in Healthcare Facilities

It is the policy of the LSMS that optimal patient care can only be achieved when patients, healthcare workers and all other persons in healthcare facilities are protected against violent acts occurring within healthcare facilities. Further, the policy of the LSMS is to encourage adoption of policies and laws that provide a maximum category of offense and criminal penalty against individuals who commit violent acts against healthcare workers in healthcare facilities.

Authority Note: Added R304-14

93.01 Retail Health Clinics - Retail Health Clinics

The LSMS supports the eight guidelines established by the AMA on June 13, 2006 for the operation of in-store Retail Health Clinics. For retail health clinics operating in Louisiana, the medical providers of such health clinics should adhere to the same standard of medical care as other licensed health care providers in the state and be subject to the licensure and oversight authority of the Louisiana State Board of Medical Examiners.

The LSMS supports policies which require retail health clinics to disclose in a conspicuous manner the name of the collaborating physician associated with the retail clinic and whether the physician is licensed and domiciled in Louisiana.

Authority Note: R127-06; reaffirmed R101-11; amended R303-14

100.10 Health Care Reform - Price Controls

The LSMS is opposed to the imposition of price controls in our health care delivery system whether through fee controls, global budgets, expenditure targets, premium caps, percentage of payroll caps or any other method of price controls and supports the establishment of a more effective medical market to achieve cost effectiveness in our health care delivery system.

Authority Note: R303-93; reaffirmed R101-03; reaffirmed sub R101-08; reaffirmed R103-13; reaffirmed R101-18

110.01 Health Information - ICD-10 Transparency and Conversion

The policy of the LSMS is to oppose the required replacement of the ICD-9CM code set with the ICD-10CM code set for identifying and reporting diagnosis and procedures and to advocate for the halt of implementation of ICD-10CM due to the gross impediment to patient care ICD-10CM will impose.

Authority Note: Added R406-14

121.04 Eligibility, Benefits & Coverage - Physician Notification of Patients in Health Insurance Exchange Grace Period

It shall be the policy of the LSMS that physicians should have meaningful notice from the health insurance issuer when an insured with a qualified health plan purchased with an advance premium tax credit begins the 90 day grace period for failure to pay premiums. Such notice should be provided by a health insurance issuer at any point in which the physician requests information from the health insurance issuer regarding an insured's eligibility, an insured's coverage or health plan benefits, or the status of a claim or claims for services provided to an insured. The health insurance issuer should provide such notice in the same manner through which the physician sought the information from the health insurance issuer or through the manner that the physician normally receives claim remittance advice information. Further, the information provided by the health insurance issuer to the physician should be binding on the health insurance issuer and in the event the health insurance issuer provides information which indicates the insured is eligible for services and does not inform the physician that the insured is in the 90 day grace period the health insurance issuer should be precluded from recouping payments.

Authority Note: Added R401-14

121.07 Eligibility, Benefits & Coverage - Reference Pricing

The LSMS policy is to advocate for the inclusion of the concept of a schedule of benefits/provider fee schedule system with balance billing as one option in a pluralistic array of choices regardless of whether it is called Benefit Payment Schedule, Reference Pricing, Fixed Indemnity or some other than current name so long as the plan is free to establish its payments, physicians are free to establish their fees and patients and physicians are free to determine how to resolve any difference between payments and fees.

Authority Note: Added R408-14

150.02 Medicaid - Physician Freedom to Accept Medicaid

The LSMS opposes any effort to impose a penalty on a physician for declining to accept Medicaid patients.

Authority Note: Added R404-14

150.03 Medicaid - Medicaid Managed Care Financial Incentives

The LSMS encourages the use of monetary incentives provided to enrollees of Medicaid managed care plans to incentivize the Medicaid recipient to make good health choices so the monetary incentives may only be used to purchase healthcare products and services.

Authority Note: Added R410-14

170.01 Medical Marijuana - General Policy

The policy of the LSMS is to support the current 1991 law in Louisiana that permits the use of medical marijuana.

Authority Note: Added R205-14

242.01 Environmental Health - UV Tanning

The LSMS supports the FDA warning that UVA tanning booths and sunbeds pose potential significant health risks and should be discouraged. The LSMS endorses an educational campaign regarding the skin health and aging hazards of UVA overexposure, in particular from tanning parlor facilities.

The LSMS opposes the use of indoor tanning devices by minors as devices emit UVA and UVB radiation and because overexposure to UV radiation can lead to the development of skin cancer.

Authority Note: R36-89; reaffirmed 1999; reaffirmed R101-06; reaffirmed R101-11; amended R301-14

280.11 Tobacco - Increased Tax on Cigarettes

The LSMS supports an increase in the state excise tax on tobacco products.

Editorial Note: See also Taxes (270). Authority Note: R23-90; amended R101-2000; reaffirmed R101-06; reaffirmed R101-11; amended by R407-14

RESOLUTION 102

SUBJECT: LSMS Directives to be Sunset in 2019

INTRODUCED BY: Paul Perkowski, MD Speaker
Steen Trawick, MD, Vice-Speaker

WHEREAS, LSMS directives are sunset after two years or upon completion, therefore be it

RESOLVED, the following LSMS directives be sunset as they were completed during 2018.

Directive – Updating EMS Protocols: The LSMS seek legislation to amend Louisiana Revised Statute 40:1133.14, which requires, as a last resort, the Emergency Medical Services Committee of the LSMS to approve an emergency medical service protocol for a parish without an organized or functional local parish medical society. (R201-18)

Directive – PMP Reporting for Opioids: 1. The LSMS seek and support legislation to revise the provisions of the Louisiana Uniform Controlled Substances Act La. R.S. 40:978(F)(2) to require that if a health professional licensing board becomes aware of a prescriber’s initial failure to comply with this subsection, as verified by the data of the Prescription Monitoring Program, the board shall notify the prescriber of the relevant statutory requirements and inform the prescriber of the need to correct or amend their prescribing practices. 2. The LSMS will seek and support revisions to require that if a health professional licensing board becomes aware of a prescriber’s pattern of continuing or repeated failure to comply with this Subsection, as verified by the data of the PMP, the board shall treat such notification as a complaint against the licensee. (R204-18)

Directive – Nutritional Alternatives in Clinic and Hospital Systems: The LSMS will encourage clinic and hospital systems and all medical and/or health facilities that offer and/or serve food to offer known nutritious alternatives through their food services to visitors, patients, staff personnel and volunteers, with special attention to the needs of the diabetic population, as traditionally would be offered to patients only and when medically ordered. (R301-18)

Directive – Medicaid Professional Services Fee Schedule: The LSMS submit a written request to the Secretary of the State of Louisiana’s Department of Health, Medicaid Program Director and appropriate committees and members of the Louisiana State Legislature (if necessary) requesting an increase in the Louisiana Medicaid Professional Services Fee Schedule (LMPSFS) up to 120% of the Medicare fee schedule. Additionally, the LSMS should seek support from other like-minded health care associations and organizations. (L1-18)

RESOLUTION 103

SUBJECT: Updating House of Delegates Apportionment
For Small Chartered/Affiliated Medical Societies

INTRODUCED BY: Board of Governors

WHEREAS, the LSMS Bylaws, Article XXII, Section E require both chartered and affiliated parish medical societies to have 25 Full Dues Equivalent LSMS members in order to receive one delegate and one alternate delegate to the LSMS House of Delegates, and

WHEREAS, the Acadia Parish Medical Society and the Avoyelles Parish Medical Society are chartered societies with less than 25 Full Dues Equivalent LSMS members; and

WHEREAS, the Terrebonne Medical Society and the Washington Parish Medical Society are affiliated societies with less than 25 Full Dues Equivalent LSMS members; and

WHEREAS, this was not the intent of previous changes to the LSMS Bylaws; therefore be it

RESOLVED, the LSMS Bylaws Article XXII, Section E be amended by addition to read as follows:

E. Delegates to the House of Delegates of the LSMS

Delegates to the House of Delegates of the Louisiana State Medical Society are apportioned based on the recorded membership in the office of the LSMS Secretary-Treasurer on November 1st of each year.

Delegate apportionment is calculated as follows:

Medical Districts receives one delegate and one alternate for every 25 Full Dues Equivalent LSMS members as defined in Subsection D of this Article XXII. Each Medical District will annually elect its delegates and alternate delegates with voting rights based on the Full Dues Equivalent method as defined in Subsection D of this Article XXII.

Within the delegates apportioned to each Medical District:

1. A Chartered Parish Society **with 24 or fewer Full Dues Equivalent LSMS members** will receive one delegate and one alternate delegate. **A Chartered Parish Society with more than 24 Full Dues Equivalent LSMS members will receive one delegate and one alternate delegate** for each 25 Full Dues Equivalent LSMS members as defined in Subsection D of this Article XXII.
2. An Affiliated Parish Society **with 24 or fewer Full Dues Equivalent LSMS members** will receive one delegate and one alternate delegate. **An Affiliated Parish Society with more than 24 Full Dues Equivalent LSMS members will receive one delegate and one alternate delegate** for each 25 Full Dues Equivalent LSMS members as defined in Subsection D of this Article XXII.
3. For both Chartered and Affiliated Parish societies, ~~two~~ **one** delegate and ~~two~~ **one** alternate delegate positions should be filled by **an** eligible officers of the Society, chosen by the Societies' bylaws.
4. The President of a Chartered or Affiliated Parish Medical Society will submit a letter to the LSMS Secretary-Treasurer by January 1st each year reporting the number and names of officers and elected Parish Medical Society delegates.
5. The remainder of the Medical Districts apportioned delegates, which includes those LSMS members who are not members of a Chartered or Affiliated Society will be nominated and elected by the Medical District. Nominations may be made by any member of that Medical District.

RESOLUTION 104

SUBJECT: Creating New Lifetime Membership Category

INTRODUCED BY: Board of Governors

WHEREAS, the creation of a new membership category is necessary if the “transitioning of dues exempt members to legacy members” resolution passes, and

WHEREAS, approximately 700 active practicing members are currently over the age of sixty-five (65), and

WHEREAS, in a 2014 benchmark study, which compared the LSMS membership to thirty-one other states, the LSMS led all states with 37% of its total membership consisting of non-dues paying members, i.e. medical students and dues exempt/retired physicians, and

WHEREAS, 50% of LSMS dues exempt physicians continue to maintain their medical license after retirement, therefore be it

RESOLVED, that the LSMS Bylaws, Article IV, be amended by addition to create a new Lifetime Membership category as follows:

Article IV Members – Categories

Section 3 - Lifetime Members

A. Qualifications

A lifetime member

- 1. Must have been an active, academic, or service member of the Louisiana State Medical Society for at least the 5 consecutive years immediately prior to his or her application for lifetime membership;**
- 2. Must be fully retired from the practice of medicine; -**
- 3. Must be licensed by the Louisiana State Board of Medical Examiners.**

B. Rights

A lifetime member is entitled to full parliamentary and societal rights, including the right to vote and the right to hold office.

C. Obligations

A lifetime member

1. Must fulfill the general obligations of membership as specified in Article III Subsection E of these bylaws; and

2. Shall pay 20% of full active LSMS dues.

RESOLUTION 105

SUBJECT: Transitioning of Dues Exempt Members
To Legacy Members

INTRODUCED BY: Board of Governors

WHEREAS, on December 31, 2018 the LSMS had approximately 860 dues exempt members representing fifteen percent (15%) of the overall membership, and

WHEREAS, approximately 700 active practicing members are currently over the age of sixty-five (65), and

WHEREAS, in a 2014 benchmark study, which compared the LSMS membership to thirty-one other states, the LSMS led all states with 37% of its total membership consisting of non dues paying members, i.e. medical students and dues exempt/retired physicians, and

WHEREAS, 50% of LSMS dues exempt physicians continue to maintain their medical license after retirement, and

WHEREAS, dues exempt members continue to receive the same benefits, products and services as dues paying members, therefore be it

RESOLVED, that the LSMS Dues Exempt Member Category be renamed as Legacy Members, and be it further

RESOLVED, the LSMS Bylaws, Section 2 Dues Exempt Members be amended by deletion and addition as follows:

ARTICLE IV Members – Categories

Section 2 ~~Dues Exempt~~ **Legacy** Members

A. Qualifications

A ~~dues exempt~~ **legacy** member

1. Must fulfill the general qualifications of membership as specified in Article III Subsection A of these bylaws; **be a doctor of medicine or a doctor of osteopathy;**
2. Must have been active, academic, or service member of the Louisiana State Medical Society for at least the 5 consecutive years immediately prior to his or her application for dues-exempt membership;
3. **2.** Must be fully retired from the practice of medicine; but **and**
4. **3. Must** Need not be licensed by the Louisiana State Board of Medical Examiners if he or she is not actively practicing medicine.

In a like manner, (1) dues-exempt status may be granted a member, regardless of age, who is fully retired from the practice of medicine due to disability; and (2) reduced rates for dues and special assessments may be granted a member, regardless of age, whose practice of medicine is limited to 20 hours or less per week due to disability.

Active, academic, or service members, regardless of age, who practice medicine more than 20 hours a week pay dues and special assessments in an amount equal to that regularly paid by members in their category of membership.

B. Rights

A dues-exempt **legacy** member is entitled to full parliamentary and societal rights, including the right to vote and the right to hold office.

C. Obligations

A dues-exempt **legacy** member

1. Must fulfill the general obligations of membership as specified in Article III Subsection E of these bylaws; but
2. Shall pay no dues and no special assessments.

RESOLUTION 107

SUBJECT: Adding Specialty Medical Society Representation
on the LSMS Council on Legislation

INTRODUCED BY: Board of Governors

WHEREAS, each year legislation may be filed impacting a certain medical specialty, and

WHEREAS, in recent years when specialty specific legislation has been filed the LSMS did not have a member of its Council on Legislation licensed in that particular specialty, and

WHEREAS, the LSMS works collaboratively at the state Capitol with other medical associations, particularly the larger specialty medical societies, and

WHEREAS, a closer relationship and direct line of communication between the the LSMS and certain specialty medical societies could lead to increased efficiency and effectiveness in our governmental affairs efforts, and

WHEREAS, a collaborative and direct relationship may lead to increased LSMS membership, therefore be it

RESOLVED, the LSMS Bylaws Article IX, Section 2 Council on Legislation be amended by deletion and addition as follows:

A. Members

The Council on Legislation shall be composed of one member from each medical district as delimited in Article XXII Subsection F of these bylaws, one member from the Young Physician Section, one member from the Resident Section, one member from the Medical Student Section, ~~and~~ one member from the LSMS Alliance, **and one member from each specialty medical society that was represented in the most recent LSMS House of Delegates.**

There shall be an alternate for each member of the Council. The alternate: is chosen from the same medical district, ~~or~~ section **or specialty medical society**; must meet the same qualifications as the member; is elected in the same manner as the member; is seated only in the absence of the member; is entitled to all of the rights of the member when seated; and, is entitled to

reimbursement for travel expenses while attending a Council meeting; and may attend any meeting of the Council.

B. Selection

District members Members of the Council and alternates shall be elected by the Medical Districts prior to the LSMS Annual Meeting. At the time on the agenda of the House of Delegates Meeting that elections are conducted, each district that was required to hold an election will announce the results of its elections. If any Medical District fails to elect its District Councilor or Alternate District Councilor, the LSMS Board of Governors shall appoint a member from that medical district to fill the vacancy. The Young Physician Section member and alternate are elected by the House of Delegates. The Resident Section Member and alternate are nominated by the Resident Section and elected by the House of Delegates. The Medical Student Section member and alternate are nominated by the Medical Student Section and elected by the House of Delegates. The LSMS Alliance member and alternate are selected by the LSMS Alliance. **Specialty medical societies are represented by the current president of the society or his designee provided that the designee is a current officer of the specialty medical society and an active member in good standing of the Louisiana State Medical Society.**

C. Term

A **District members** member of the council and alternates shall serve terms of two (2) years, except the **The Young Physician Section member and alternate, and the Resident Section member and alternate, the Medical Student Section member and alternate, the LSMS Alliance member and alternate, and the specialty medical society members and alternates** shall serve a term of one (1) year. Terms are staggered so that Councilors and Alternate Councilors representing even-numbered districts shall be elected in even-numbered years and Councilors and Alternate Councilors representing odd-numbered districts shall be elected in odd-numbered years. A member may serve a maximum of four terms, not necessarily consecutive, and not including terms as alternate.

The term of a member begins at the time of his election.

A **district and/or section** vacancy shall be filled for the unexpired portion of the term by the Board of Governors, except during the Annual Meeting. If a **district and/or section** vacancy becomes apparent during the Annual Meeting, it will be filled by election by the Medical District **or Section** during that meeting. **LSMS Alliance and/or specialty medical societies vacancies will be filled by the respective organization for the remainder of the unexpired term. These appointees must be confirmed by the Board of Governors.**

A council member with more than two unexplained absences during his term will be dropped from the council roster.

D. Organization

The council shall annually select its own vice-chair.

E. Meetings

Meetings shall be held at the call of the chair.

F. Duties

1. To direct all of the state and federal legislative activities of the Society provided such directions are not in conflict with the actions and policies of the House of Delegates;
2. To advise the Society as to the course of action deemed desirable to obtain its legislative goals;
and
3. To present in writing at each Annual Meeting of the House of Delegates a detailed report of its activities during the preceding year.

RESOLUTION 106

SUBJECT: Updating Full Dues Equivalent for
Lifetime and Legacy Membership Categories

INTRODUCED BY: Board of Governors

RESOLVED, that the LSMS Bylaws, Article XXII, Section D be amended by deletion and addition to account for the creation new Lifetime and Legacy Membership categories as follows:

Article XXII Medical Districts

D. Full Dues Equivalent

Full Dues Equivalent equals the assigned Unit Count, as defined by the Louisiana State Medical Society below, to each LSMS member based on the percentage of assessed dues paid.

Any **member paying full dues** ~~non-discounted member~~ in the following membership categories will receive a Unit Count of 1.0 – Active, Academic, ~~Dues Exempt~~.

Any **Active or Academic member paying less than full dues** ~~discounted member~~ will receive a Unit Count based on the percentage of the discount calculated as (100% - percentage of discount)/ 100.

Any **member paying full dues** ~~non-discounted member~~ in the following membership categories will receive a Unit Count of .5 – Part-Time, and Military, **Lifetime and Legacy**.

The Louisiana State Medical Society will use the Full Dues Equivalent method within each Medical District to determine voting rights for (1) selecting district councilors for the Board of Councilors as outlined in Article XIV, Subsection A, (2) selecting members and alternate members for the Council on Legislation per Article IX, Subsection 2A, and (3) for

determining apportionment to the LSMS House of Delegates per Subsection E of this Article XXII.