

KCMS Resolutions for 2015

1. Protecting the Physician-Patient Relationship
2. Prior Authorizations
3. Bylaws Amendment to Change Requirements for Membership in the Young Physicians Section
4. EHR and Meaningful Use
5. Medicaid Sustainability and Inadequate Reimbursement
6. Physician Non-Compete Agreements

B-6 – Protecting the Physician-Patient Relationship (ADOPTED AS AMENDED)

RESOLVED, that the WSMA establish policy that supports efforts to protect the sanctity of the physician-patient relationship and the freedom of health providers to provide evidence-based medically accurate health care services and information to patients in all care settings. (Directive to Take Action)

B-7 – Prior Authorizations (ADOPTED)

RESOLVED, that the WSMA support efforts that uphold the physician-patient relationship, rather than insurance companies and other third parties in directing the course of patient care (Directive to Take Action); and BE IT FURTHER

RESOLVED, that the WSMA support efforts with the Office of the Insurance Commissioner, private and government insurance benefit managers, and other appropriate entities, to minimize and streamline the prior authorization process for medications, imaging tests and procedures, including those for an immediate therapeutic need (Directive to Take Action); and BE IT FURTHER

RESOLVED, that in the best interest of thoughtful, evidence-based, cost and time-efficient patient care, the above efforts include initial denials and peer-to-peer requests be done in writing by a qualified health care provider who is clinically comparable to the ordering provider. (Directive to Take Action)

B-8 – Bylaws Amendment to Change Requirements for Membership in the Young Physicians Section (ADOPTED)

RESOLVED, that Article IV, Section 4(a) of the WSMA Bylaws be amended as follows:

a. the Young Physician Section is composed of physician members of this Association who are either: (i) under 40 years of age or (ii) within the first eight (8) ~~ten~~ (10) years of professional practice after residency and fellowship training. (Directive to Take Action)

C-5 – EHR and Meaningful Use (ADOPTED AS AMENDED)

RESOLVED, that the WSMA and its AMA Delegation support legislative and other efforts to revise the Meaningful Use program to assure that the EHR requirements are valuable, effective and efficient in supporting physician services and patient care. (Directive to Take Action)

C-6 – Medicaid Sustainability and Inadequate Reimbursement (ADOPTED)

RESOLVED, that the WSMA reaffirm its policies that address the deficiencies in the Medicaid payment schedules for all physicians in order to avoid limiting patient access to health care. (Reaffirm HOD Policy)

C-7 – Physician Non-Compete Agreements (REFERRED)

RESOLVED, that WSMA both advocate for and support legislative or regulatory actions to implement reasonable standards in prohibit physician non-compete agreements when physicians enter into an agreement with an entity that is by legal definition Corporate Practice of Medicine (i.e., “non-profit” or not physician owned).related to size of the employment group, geography, duration, patient information, buy-out options and agreement term limits in order to promote physician access, support established physician-patient relationships and physicians’ abilities to serve in the communities of their choice. (Directive to Take Action); and BE IT FURTHER

RESOLVED, that the WSMA should conduct a poll of members to determine what is “reasonable” in the context of limiting the extent of non-compete clauses for physicians practicing in Washington (Directive to Take Action); and BE IT FURTHER

RESOLVED, that tax-exempt public or private entities should be prohibited from requiring or enforcing any non-compete clause that would limit patients’ access to a health care provider of their choice. (New HOD Policy)