The Reference Committee on Financial and Organizational Affairs, having met on Friday, May 17, 2019, with all members present, submits the following report:

(1) TMA President Report 1 – Nominations for Board of Governors, Texas Medical Liability Trust

RECOMMENDATION:

Madam Speaker, your reference committee recommends that the recommendation in President’s Report 1 be adopted.

This report recommends approval of Dr. Luis M. Benavides, as a nominee of the TMLT Board of Governors, to be placed before TMLT policyholders for election.

(2) Board of Councilors Report 4 – Emeritus Nominations

RECOMMENDATION:

Madam Speaker, your reference committee recommends that the recommendations in Board of Councilors Report 4 be adopted.

This report recommends that the TMA House of Delegates elect Mary C. Spalding, MD, and Josie Williams, MD, to emeritus membership in the Texas Medical Association.

Your reference committee heard testimony in support of BOC Report 4.

(3) Board of Councilors Report 5 – Honorary Nominations

RECOMMENDATION:

Madam Speaker, your reference committee recommends that the recommendation in Board of Councilors Report 5 be adopted.

This report recommends that the TMA House of Delegates elect Richard M. Holt, MD; Wesley Stafford, MD; Jane Stafford, MD; Harris M. Hauser, MD; Milton Altschuler, MD; and John D. Milam, MD, to honorary membership in the Texas Medical Association.

Your reference committee heard testimony in support of BOC Report 5.

(4) Board of Councilors Report 6 – Sunset Policy Review

RECOMMENDATION:

Madam Speaker, your reference committee recommends that the recommendations in Board of Councilors Report 6 be adopted.

This report recommends that: (1) Policies 245.010, 160.019, and 160.012 be retained; (2) policies 195.029 and 105.017 be deleted; and (3) policy 165.004 be retained as amended.

Your reference committee heard testimony in support of BOC Report 6.
(5) Board of Trustees Report 14 – Inactive County Medical Societies

RECOMMENDATION:

Madam Speaker, your reference committee recommends that the recommendations in Board of Trustees Report 14 be adopted.

This report recommends that the Texas Medical Association: (1) define an active county medical society as one that provides the following annually: (a) a list of the reporting year’s elected officers and delegates with their terms of office; (b) a list of the reporting year’s meetings with attendance noted; (c) confirmation of the county medical society annual membership dues rate; and (d) evidence of filing county medical society annual federal nonprofit tax returns, such as IRS Form 990; (2) allow county medical societies with 50 or fewer members to reduce the number of required officers to three: president, president-elect, and secretary/treasurer; and (3) refer Board of Trustees Report 14-A-19 to the Council on Constitution and Bylaws for recommended bylaws amendments to implement recommendations 1 and 2.

Your reference committee heard testimony in support of BOT Report 14.

(6) Board of Trustees Report 15 – Sunset Policy Review

RECOMMENDATION:

Madam Speaker, your reference committee recommends that the recommendation in Board of Trustees Report 15 be adopted.

This report recommends that policies 105.018 and 160.018 be retained.

Your reference committee heard testimony in support of BOT Report 15.

(7) Council on Constitution and Bylaws Report 1 – Inactive Specialty Societies

RECOMMENDATION:

Madam Speaker, your reference committee recommends that the recommendation in Constitution and Bylaws Report 1 be adopted.

This report recommends that TMA amend TMA Bylaws Chapter 3, House of Delegates, Section 3.20, Composition, Subsection 3.227, Specialty societies qualifying for delegate representation and renumber the listing accordingly.

Your reference committee heard testimony in support of CCB Report 1.

(8) Committee on Membership Report 2 – Women in Medicine Section
Council on Socioeconomics Report 3 – Gender Disparities in Physician Compensation
Resolution 112 – Equal Pay for Equal Work

RECOMMENDATION A:

Madam Speaker, your reference committee recommends that Resolution 112 be amended by substitution as follows:
RESOLVED, That the Texas Medical Association adopt policy to oppose discrimination in physician compensation and promote the principle of equal pay for equal work; and be it further

RESOLVED, That TMA create: (1) implicit bias training for all physicians and (2) an education campaign to unify TMA around improving conditions for women physicians; and be it further

RESOLVED, That TMA policy containing references to “sex” or “gender” reflect proper usage of the words. The *AMA Journal of Ethics* suggests “sex” be used when referencing the biological differences between males and females and “gender” be used when referencing the complex psychosocial self-perceptions, attitudes, and expectations people have about members of both sexes; and be it further

RESOLVED, That TMA establish a Women in Medicine Section whose purpose is to: (1) strengthen engagement and representation of female physicians in organized medicine through the development of relevant policy, programming, and services, and (2) closely monitor gender equity in medicine; and be it further

RESOLVED, That TMA Bylaws, Chapter 3, House of Delegates, Section 3.25, Sections, be amended as follows:

**3.25 Sections**

**3.255 Women in Medicine Section:** The House of Delegates shall have a section named the Women in Medicine Section. Any TMA physician member may become a member of the section, and female physicians who are TMA members are members of the section automatically. The section shall have the authority to elect one voting delegate to serve in the House of Delegates. The section shall elect an alternate delegate who may serve as provided in 3.32. The section will be directed by an elected governing council and governed by operating procedures approved by the House of Delegates. The operating procedures shall provide the purposes, organization, and procedures of the Women in Medicine Section.

**RECOMMENDATION B:**

Madam Speaker, your reference committee recommends that amended Resolution 112 be adopted in lieu of Committee on Membership Report 2 and Council on Socioeconomics Report 3.

This resolution and two reports requested actions on issues related to gender equity and better service to and representation of women in medicine. Testimony received was supportive of all three items. Your reference committee felt that a revised resolution best captured the sentiments of all three items.

(9) Committee on Physician Health and Wellness Report 1 – Policy Review and Amendment to Committee Charge

**RECOMMENDATION:**

Madam Speaker, your reference committee recommends that the recommendations in Committee on Physician Health and Wellness Report 1 be adopted.

This report recommends that:

(1) Policy 95.014 be deleted, and (2) TMA Bylaws Section 10.621 be amended as follows:
10.621 Committee on Physician Health and Wellness. It shall be the duty of this
committee to promote healthy lifestyles in Texas to medical students, residents, and
physicians; to provide advocacy and support for and education on physician wellness;
and to promote prevention of potentially impairing conditions. And to identify, strongly
urge evaluation and treatment of, and review rehabilitation provided to physicians with
potentially impairing conditions and impairments. The committee shall be required to
report its activities to the Board of Councilors. The committee shall maintain liaison with
the Texas Medical Board and the Texas Physician Health Program. The committee shall
be responsible also for making recommendations to the Council on Legislation in
instances where there are needed changes in the laws relative to physician wellness and
potentially impairing conditions. The committee shall provide responsible advocacy and
support, provide education and physician health and wellness topics, and promote
prevention of potentially impairing conditions.

Your reference committee heard testimony in support of Physician Health and Wellness Report 1.

(10) Committee on Physician Health and Wellness Report 2 – Sunset Policy Review

RECOMMENDATION:

Madam Speaker, your reference committee recommends that the recommendation in Committee
on Physician Health and Wellness Report 2 be adopted.

This report recommends that policy 265.019 be retained.

Your reference committee heard testimony in support of Physician Health and Wellness Report 2.

(11) Patient-Physician Advocacy Committee Report 2 – Sunset Policy Review

RECOMMENDATION:

Madam Speaker, your reference committee recommends that the recommendation in Patient-
Physician Advocacy Committee Report 2 be adopted.

This report recommends that policy 245.009 be retained.

(12) Council on Practice Management Services Report 1 – Patient-Centered Medical Responsibilities,
Resolution 101-A-18

RECOMMENDATION A:

Madam Speaker, your reference committee recommends that the recommendation in Council on
Practice Management Services Report 1 be amended.

RESOLVED, That the Texas Medical Association support a patient-centered medical
record checkup campaign encouraging individuals to ensure they have an up-to-date
medical record summary in the month of May that is accessible in a disaster; and be it
further
RESOLVED, That the Texas Medical Association applaud House Concurrent Resolution No. 143, designating May 1 as Texans Medical Record Checkup Day, adopted by the 86th Texas House of Representatives, supports a legislative proclamation each May encouraging individuals to have access to or possess an accurate summary of their medical record in the event of a disaster.

RECOMMENDATION B:

Madam Speaker, your reference committee recommends that Resolution 101-A-18 be adopted as amended.

Your reference committee heard testimony in support of this report. Additional testimony indicated that the 86th Texas Legislature has already addressed this issue of designating an official day to promote a patient-centered medical record checkup.

(13) Council on Practice Management Services Report 3 – Establish a Standing Committee on Health Information Technology

RECOMMENDATION:

Madam Speaker, your reference committee recommends that the recommendations in Council on Practice Management Services Report 3 be adopted.

This report recommends that:

1. TMA establish a standing Committee on Health Information Technology, and

2. TMA Bylaws Chapter 10, Committees, Section 10.52 be amended to include a new section for the Council on Practice Management Services, with a new subsection, 10.521, Committee on Health Information Technology to read as follows, and the remainder of the chapter be renumbered accordingly:

   10.52 Committee on Science and Public Health. Council on Practice Management Services

   10.521 Committee on Cancer. Committee on Health Information Technology: The purpose of this committee shall be to (1) Promote the safe and effective use of technology that supports practice efficiency, quality improvement activities, and management of population health; (2) monitor and influence state and federal laws, regulations, and programs impacting physician and patient use of technology; (3) develop association policy related to health technology; (4) collaborate with other professional organizations and governmental agencies working on health technology issues and serve as the association's voice and advocate; and (5) oversee development of health information technology education and resources for physicians.

Your reference committee heard testimony in support of Practice Management Services Report 3.
RECOMMENDATION A:

Madam Speaker, your reference committee recommends that the recommendations in Council on Socioeconomics Report 4 be amended.

(1) That the select committee on Medicaid, CHIP, and the Uninsured be made a standing committee called the Committee on Medicaid, CHIP, and the Uninsured, reporting to the Council on Socioeconomics.

(2) That the number of members of the committee initially be set at 15 to allow broad representation to address the programs and activities of the committee.

(3) That TMA Bylaws Chapter 10, Committees, Section 10.53 be amended to include a new subsection, 10.531, Committee on Medicaid, CHIP, and the Uninsured to read as follows, and to renumber the remainder of the chapter accordingly:

10.531 Committee on Medicaid, CHIP, and the Uninsured. The committee shall: (1) research and formulate TMA policy on Medicaid, CHIP, and indigent care; (2) track regulatory initiatives related to these programs; and (3) research and develop legislative recommendations to improve patient care and service delivery for recipients of Medicaid and CHIP services and for the uninsured.

(4) That the TMA Council on Constitution and Bylaws evaluate and recommend an appropriate number of members for this committee and all other TMA governance bodies.

RECOMMENDATION B:

Madam Speaker, your reference committee recommends that the recommendations in Council on Socioeconomics Report 4 be adopted as amended.

Your reference committee heard spirited debate from members of the select committee against the recommendations of the Council on Socioeconomics. Additional testimony from several members of the Board of Trustees and Council on Socioeconomics cited strong support for the recommendations to establish a standing committee to protect the work of the committee and elevate its status.

RECOMMENDATION: Council on Science and Public Health Report 6 – Task Force on Behavioral Health

RECOMMENDATION:

Madam Speaker, your reference committee recommends that the recommendations in Council on Science and Public Health Report 6 be adopted.

This report recommends that:

(1) The Task Force on Behavioral Health be designated a subcommittee of the Council on Science and Public Health, renaming the task force as the Subcommittee on Behavioral Health.
(2) TMA amend the charge of the council in the TMA Bylaws Section 9.808 as follows:

The purposed of this council shall be to (1) advance the scientific basis of medical practice; (2) anticipate high-priority public health, behavioral health, and medical science issues and develop policy on these issues; (3) advance the association as a leader in medical science and advocacy in public and behavioral health; (4) provide physicians with evidence-based public health and scientific information; and (5) communicate association policy and expertise on public health, behavioral health, and medical science.


(16) Texas Delegation to the AMA Report 3 – Texas Delegation Operating Procedures Changes

RECOMMENDATION:

Madam Speaker, your reference committee recommends that the recommendation in Texas Delegation to the AMA Report 3 be adopted.

This report recommends that the TMA House of Delegates approve the following amendment to the Texas Delegation’s Operating Procedures:

5.0 Delegate Review Committee

5.3 The committee shall evaluate the candidacy for reelection of each delegate who has (1) served six (6) terms, or (2) who will be past the age of 75 at the time of reelection, or (3) who, in judgment of the committee, is substantially retired from his or her activities in the profession of medicine, whether that be clinical practice, teaching, or administration.

Your reference committee heard testimony in support of Texas Delegation to the AMA Report 3.

(17) Resolution 101 – Saturday-Sunday Meeting Schedule for the Texas Medical Association

RECOMMENDATION:

Madam Speaker, your reference committee recommends that Resolution 101 be referred.

RESOLVED, That all meetings of the Texas Medical Association be moved to a Saturday-Sunday format from the current Friday-Saturday format; and be it further

RESOLVED, That this resolution be referred to the Board of Trustees to study the feasibility and economic impact on physicians and the association and report back to the House of Delegates in 2020.

Your reference committee heard extensive testimony in support of the concept of this resolution without mandating that TMA move its meetings to a Saturday-Sunday format without appropriate study on the financial ramifications to the association and its members and therefore recommends referral.
Resolution 102 – Written Testimony at TMA Reference Committees

RECOMMENDATION A:

Madam Speaker, your reference committee recommends that Resolution 102 be amended.

RESOLVED, That the Texas Medical Association House of Delegates reference committees may receive written testimony prior to the meeting of the House of Delegates for resolutions and recommendations assigned to the reference committees from any member of the Texas Medical Association, in a format to be determined by the Speaker of the House of Delegates, and be it further

RESOLVED, That written testimony received on resolutions and recommendations before the reference committee should be considered carefully by the reference committee along with in-person testimony prior to the formation of its recommendations to the House of Delegates.

RECOMMENDATION B:

Madam Speaker, your reference committee recommends that Resolution 102 be adopted as amended.

Your reference committee heard testimony that there are numerous avenues to provide testimony beyond written testimony. Other testimony received was all in support of the concept of this resolution.

Resolution 103 – Gratitude for Continuing Medical Education Courses

RECOMMENDATION:

Madam Speaker, your reference committee recommends that Resolution 103 be adopted.

This resolution resolves that the Texas Medical Association House of Delegates express its gratitude for the continuing medical education courses offered to TMA members courtesy of the TMA Insurance Trust.

Your reference committee heard enthusiastic and overwhelming appreciation for TMA Insurance Trust’s sponsorship of the TMA Education Center.

Resolution 104 – Alternate Delegates May Address the House of Delegates

RECOMMENDATION:

Madam Speaker, your reference committee recommends that Resolution 104 be referred to the Council on Constitution and Bylaws for study and report back.

This resolution resolves that the alternate delegates to the Texas Medical Association House of Delegates be allowed to address the house on matters pending before the House of Delegates without being credentialed as a delegate and that under these circumstances may suggest but cannot make any changes to the content of any resolution or recommendation being considered by the House of Delegates.
Your reference committee heard limited testimony in support of this resolution citing the desire to allow alternate delegates a voice within the House of Delegates. Your reference committee believes this issue needs further study and recommends referral.

(21) Resolution 105 – Pharmacies Practicing Medicine

RECOMMENDATION A:

Madam Speaker, your reference committee recommends that Resolution 105 be amended.

RESOLVED, That the Texas Medical Association work with the state legislature to pass a law declaring that pharmacies in Texas may not require physicians to disclose any patient medical records information beyond basic diagnoses as a condition for filling a prescription; and be it further

RESOLVED, That TMA work with the Texas Medical Board and the Texas State Board of Pharmacy to prevent pharmacists from engaging in conduct that is defined as “the practice of medicine,” including, but not limited to, alteration of dosage, duration, frequency, or quantity of a prescription while in the execution of their duties; and be it further

RESOLVED, That pharmacists may not rely on corporate policy as justification to usurp the orders of a physician lawfully acting under the Texas Medical Practice Act.

RECOMMENDATION B:

Madam Speaker, your reference committee recommends that the first Resolved of Resolution 105 be adopted as amended.

Your reference committee heard testimony in support of the resolution with amendment to the first Resolve.

(22) Resolution 106 – Establish a Coalition of Medical Societies to Protect Competition and Sustainability in the Health Insurance Marketplace

RECOMMENDATION:

Madam Speaker, your reference committee recommends that Resolution 106 be referred for study and report back.

This resolution resolves that: (1) TMA, in collaboration with other state and specialty medical societies, create and provide support for a permanent coalition that, through political advocacy and public outreach, advocates for incremental health care reform that preserves patient choice, physician autonomy, competition in the health insurance marketplace, and sustainability within the health care system; (2) TMA, in collaboration with other medical societies, search out and provide support for a distinct entity whose purpose is to study the current health care system and compare it to other systems as a means to develop and support model state and national legislation that is responsible, incremental, and sustainable; (3) TMA, in collaboration with other medical societies, search out and provide support for a distinct entity whose function is to educate the public on issues pertinent to potential health care legislation. This entity will promote greater public awareness of the benefits of competition in health care and the health insurance
resolution to the AMA House of Delegates.

Your reference committee heard testimony in support of the concept of this resolution citing the existing Coalition of State Medical Societies and the work of the American Medical Association. Testimony also cited the need to work with existing organizations and coalitions. Your reference committee believes this resolution should be referred for study.

(23) Resolution 107 – Physician Dispensing of Prescriptions

RECOMMENDATION:

Madam Speaker, your reference committee recommends that Resolution 107 be referred for study and report back.

This resolution resolves that physicians licensed by the Texas Medical Board (TMB) be allowed to prescribe, dispense, and sell prescriptions, over-the-counter medications, and medical devices to patients in Texas with regulation only by TMB.

Your reference committee heard conflicting testimony both in support of, and in opposition to, this resolution. There is existing TMA policy in favor of allowing physicians to dispense certain pharmaceuticals. Therefore, your reference committee recommends referral with report back.

(24) Resolution 108 – Initial Assessment and Treatment Recommendation by Specialists

RECOMMENDATION A:

Madam Speaker, your reference committee recommends that Resolution 108 be amended.

RESOLVED, That the Texas Medical Association recognize that the best practice of patient care dictates that it is the responsibility of the consultant physician to develop the diagnosis and treatment in the initial evaluation of a referred patient, while it is recognized under limited circumstances that an initial evaluation may be conducted by a nurse practitioner or physician assistant.

RECOMMENDATION B:

Madam Speaker, your reference committee recommends that Resolution 108 be adopted as amended.

Your reference committee heard testimony primarily in support of this resolution. However, there was also testimony that supported the appropriate use of non-physician practitioners, especially in providing follow-up care. Therefore, your reference committee recommends adoption as amended.

(25) Resolution 109 – Licensure Status on TMA Membership Applications

RECOMMENDATION:

Madam Speaker, your reference committee recommends that Resolution 109 be referred for study with report back.
This resolution resolves that a county medical society board of censors’ examination of an applicant be limited only to the applicant’s licensure status with the TMB; the membership application be updated to reflect the examination of only the applicant’s licensure status (when applicable); and TMA bylaws be amended accordingly.

Your reference committee heard testimony from county medical society leaders who requested referral of this complex issue with report back.

Resolution 110 – Blue Cross and Blue Shield of Texas Charitable Requirements as a Not-for-Profit Corporation

RECOMMENDATION A:

Madam Speaker, your reference committee recommends that Resolution 110 be amended.

RESOLVED, That the Texas Medical Association express its disappointment to Blue Cross Blue Shield of Texas on its decision to contract with a foreign-based, multinational health care firm to open 10 primary care medical centers in Dallas and Houston to compete against local primary care practices owned and operated by TMA members; and be it further

RESOLVED, That the Texas Medical Association collaborate with primary care specialty organizations and other specialty societies to conduct a comprehensive study of these market developments, with appropriate stakeholders, to assess their current and prospective positive and negative influences on the delivery of health care in Texas; and be it further

RESOLVED, That the study include, but not be limited to, an analysis of geographic market concentration of health insurers doing business in Texas; how vertical integration of Texas’ health care markets are impacting clinical practice choices, patient choice, and the viability of physician-owned, community-based practices; and how predatory and anticompetitive managed care business practices are hurting the stability and viability of physician-owned practices; and be it further

RESOLVED, That as part of the aforementioned study, the Texas Medical Association develop a data-driven multi-year strategy to include any public policy options that assure fair business practices and enforceable protections from predatory behavior and adverse patient consequences, and that empowers physicians to compete and thrive in Texas’ health care markets, and be it further

RESOLVED, That such study be prepared and submitted to the House of Delegates no later than May 2020.

RECOMMENDATION B:

Madam Speaker, your reference committee recommends that Resolution 110 be adopted as amended.

Your reference committee heard passionate testimony in support of the intent of this resolution. Your reference committee discussed that a data-driven strategy implies that such strategy is backed by appropriate research and study; therefore, it recommends the resolution be adopted as amended.
Resolution 111 – Opposing Legislation That Mandates Physician Discrimination

RECOMMENDATION:

Madam Speaker, your reference committee recommends that Resolution 111 be adopted.

This resolution resolves that the Texas Medical Association support removal of "opposite sex" as a requirement for affirmative defense to prosecution within the Texas Penal Code and that TMA oppose legislation or regulation that mandates physicians and other health professionals discriminate against or limit access to health care for a specific patient population.

Your reference committee heard testimony in support of this resolution.

Address of the President

RECOMMENDATION:

Madam Speaker, your reference committee recommends that the House of Delegates recognize TMA President, Dr. Douglas W. Curran, for his commitment, dedication and hard work during his year as TMA president, with a strong focus on membership and advocacy. He made time to visit numerous group practices and county medical societies.

Board of Trustees Report 12 – Celebration of Louis J. Goodman, PhD

RECOMMENDATION A:

Madam Speaker, your reference committee recommends that the TMA House of Delegates adopt Board of Trustees Report 12.

Board of Trustees Report 12 was extracted from “Informational Reports” and referred for action. Testimony received questioned the process by which the Board of Trustees renamed the TMA building. Additional testimony received supported the board’s action. According to TMA Bylaws, Section 4.203, Financial, The Board of Trustees shall have charge of all association properties and monies and shall manage its financial affairs, after the manner and with the usual authority of boards of directors of corporations under the laws of the State of Texas.

RECOMMENDATION B:

Madam Speaker, your reference committee recommends that the TMA House of Delegates adopt Resolution 001-A-19 as follows:

Whereas, Louis J. Goodman, PhD, CAE, has been a member of the Texas Medical Association staff for 32 years, having served as the executive vice president and chief executive officer for more than 22 of those years; and

Whereas, During the tenure of Dr. Goodman as the EVP/CEO, TMA has experienced rapid growth in membership, financial assets, and reputation as well as significant legislative success for the physicians of Texas and the rest of the nation; and

Whereas, Under Dr. Goodman’s leadership, TMA was named America’s Best Medical Society; and
Whereas, Dr. Goodman has steadfastly adhered to three principles during his career with TMA:
(1) a system of shared values, beliefs, and goals that govern TMA staff behavior and
performance; (2) an open-information flow of ideas, freedom to make decisions, and
opportunities for personal expression; and (3) a partnership among staff, elected and appointed
leaders, and the membership to do what is best for patients and healers; and

Whereas, Significant accomplishments for TMA and Texas physicians under Dr. Goodman’s
direction include the return of millions of dollars to Texas physicians as a result of the passage of
an amendment nullifying Medicare recoupment in the Omnibus Budget Reconciliation Act,
historic state tort reform legislation that became the model for the entire country, and the repeal
of the Medicare Sustainable Growth Rate formula; and

Whereas, Under Dr. Goodman’s leadership, TMA has achieved these and many other significant
results with a relatively constant staff complement by continually striving to increase efficiency,
focus, and accountability; and

Whereas, The TMA headquarters building was dedicated to honor the legacy of Dr. Goodman
and renamed the Louis J. Goodman Texas Medical Association building on Tuesday, March 5; and

Whereas, Dr. Goodman will retire as the full-time EVP/CEO in 2019; therefore be it
RESOLVED, That the Texas Medical Association House of Delegates show its sincere gratitude
and support to Louis J. Goodman, PhD, executive vice president/chief executive officer of the
Texas Medical Association on this day, Saturday, May 18, 2019.

Respectfully submitted,

David T. Lam, MD, chair
Lisa Go, MD
Shannon B. Hancher-Hodges, MD
Kalarickal J. Oommen, MD
Graves T. Owen, MD
Pervaiz Rahman, MD
Lisa Louise Swanson, MD