2009 House of Delegates Action on Resolutions and Board Reports

Editor’s Note: To read the complete text of resolutions and amendments, visit the members-only section of our Web site: www.wisconsinmedicalsociety.org.

Resolution 1—Withdrawn by author.

Resolution 2 directed the Wisconsin Medical Society (Society) to support the concept of completely free tuition for health care professionals, akin to policies established for free medical education for physicians and nurses in most industrialized countries. It also requested that the Wisconsin Medical Society Delegation to the AMA introduce a similar Resolution at the AMA calling for 100% federal funding for health professionals’ education in the United States. Action: Not Adopted.

Resolution 3 directed the Society to study hospital medical staffs, especially regarding inclusion of membership status to physician assistants and nurse practitioners. It also requested that the Society ask the AMA to study how hospital medical staffs around the country and around the world are including physician assistants and nurse practitioners into the medical staff organizations. Action: Substitute Resolution Adopted.

RESOLVED, That the Wisconsin Medical Society study how hospital medical staffs involve physician assistants and nurse practitioners in the activities of hospital medical staffs—especially concerning patient care, safety, quality and ethical issues; and be it further

RESOLVED, That the Wisconsin Medical Society request our AMA study how hospital medical staffs involve physician assistants and nurse practitioners in the activities of hospital medical staffs—especially concerning patient care, safety, quality and ethical issues.

Resolution 4 directed the Society to charge its Council on Ethics to prepare a statement of apology for organizational racism with a plan to formally deliver the apology to the Cream City Medical Society (CCMS). It further directed the Society to offer collaboration with the CCMS to “Eliminate Minority Health Disparities.” Action: Substitute Resolution Adopted as Amended.

RESOLVED, That the Wisconsin Medical Society will charge the appropriate Council to prepare a statement recognizing and apologizing for historical organizational discrimination with a plan to formally deliver an appropriate statement to the Cream City Medical Society, and other medical groups as warranted, in order to move forward with a goal towards reconciliation and future collaboration with all physicians; and be it further

RESOLVED, That the Wisconsin Medical Society will offer active collaboration in the mission of the Cream City Medical Society to “Eliminate Minority Health Disparities.”

Resolution 5 directed the Society to amend policy ETH-004 to conform to AMA policy E-8.061.


Board Report AA: Revision of Policy ETH-004.


Resolution 6 directed the Society to declare it is unethical for health insurance policies to exclude coverage of complications resulting from procedures which are themselves an “uncovered benefit.” It also directed the Society to inform the Office of the Commissioner of Insurance (OCI) of the
Society policy and inform physicians who are employed by or who sit on appeals boards for health insurance companies of the policy of the Wisconsin Medical Society. Action: Adopted as Amended.

RESOLVED, That the Wisconsin Medical Society declare it is unethical for health insurance policies to exclude coverage of medically necessary treatment of complications resulting from procedures which are themselves an “uncovered benefit;” and be it further

RESOLVED, That the Wisconsin Medical Society inform the OCI of the policy of the Wisconsin Medical Society; and be it further

RESOLVED, That the Wisconsin Medical Society inform physicians who are employed by or who sit on appeals boards for health insurance companies of the policy of the Wisconsin Medical Society.

Resolution 7 directed the Society to support that the purchase of health or medical insurance should be voluntary and no individual should be forced to purchase insurance, nor should any business be forced to provide insurance for its employees. Action: Not Adopted.

Resolution 8 directed the Society to combat all forms of socialized medicine and one-payer systems by supporting positive alternatives such as: 1) real open market for health insurance in the state, so that anyone can buy a policy to fit his or her own personal needs without being required to pay for mandates; and 2) universal access to Health Savings Accounts. Action: Substitute Resolution Adopted.

RESOLVED, The Wisconsin Medical Society work against having a solely single-payer system for health insurance, and instead work toward having an open market with more choices for patients.

Resolution 9 directed the Society to work to repeal the hospital and nursing home bed taxes. It further directed the Society to communicate to the politicians that: (1) taxing the
sick is poor public policy; and (2) there are other ways in which health care should be financed that are more equitable, and which do not depend on federal funds that may or may not be available in the future. *Action: Referred to the Board of Directors.*

**Resolution 10** directed the Society to refer to the appropriate Council a request for further study and recommendations for a strategic initiative on the broad topic of medical liability reform to be presented to the 2010 House of Delegates. *Action: Adopted.*

**Resolution 11** directed the Society to promote legislation that will accomplish the following: (1) limit liability of the Injured Patients and Families Compensation Fund to an actuarially sound level; (2) offer physicians participation in the Fund at several levels according to their needs (for example, $2 million, $4 million, or $6 million of excess liability coverage with different premium levels); (3) make the purchase of excess liability coverage via the Injured Patients and Families Compensation Fund voluntary and allow physicians the option of purchasing any needed excess liability coverage through private carriers. *Action: Referred to the Board of Directors.*

**Resolution 12** directed the Society to reaffirm the importance of freedom in medicine and establish a medical freedom award that would be bestowed upon that individual who has distinguished himself or herself in the ongoing battle to preserve medical freedom. *Action: Not Adopted.*

**Resolution 13** directed the Society to work for enabling legislation in Wisconsin to allow for evidence-based harm reduction strategies along with physician and public education regarding these approaches, so that naloxone may be readily available to persons who may be at risk of opioid overdose death, either in the context of authorized medical treatment of chronic pain or unauthorized use of heroin or prescription opioid analgesics by persons with substance use disorders. *Action: Referred to the Board of Directors.*

**Resolution 14** directed the Society to support the principle that mentally competent, terminally ill patients should have the right and ability to exercise the choice to self-administer life-ending medication. It further directed the Society to support state legislation allowing physicians to prescribe such medications, upon the request of a mentally competent terminally ill patient. It further directed the Society to support inclusion of the safeguards in the Oregon Death with Dignity law and that the Society delegation to the American Medical Association submit a resolution to the 2009 AMA House of Delegates Annual Meeting to introduce similar legislation. *Action: Referred to the Board of Directors.*

**Resolution 15** directed the Society to charge its AMA Delegation with bringing the data aggregation and data sharing issue forward and directed the AMA’s legislative arm to work to minimize Federal regulatory and legislative barriers. *Action: Referred to the Board of Directors.*

**Resolution 16** directed the Society to work to remove regulatory and statutory barriers to data aggregation and data sharing. *Action: Referred to the Board of Directors.*

**Resolution 17** directed the Society to advise the AMA to analyze various health care systems in the United States and globally to develop a “best practices” approach that may be used to improve care and reduce costs on certain chronic disease states. *Action: Not Adopted.*

**Resolution 18** directed the Society to submit a resolution to the AMA House of Delegates that would seek to revise the definition of disruptive clinical behavior. *Action: Referred to the Board of Directors.*

**Resolution 19** directed the Society to work on the ban of all non-emergency use of cell phones when operating a motor vehicle by seeking the passage of appropriate legislation. *Action: Referred to the Board of Directors.*

**Resolution 20** directed the Society to oppose the implementation of the ICD-10 coding system and also to submit to the AMA...
Resolution 22 directed the Society to fully fund the number of delegates and alternate delegates as designated by the AMA, and based on our membership numbers, to attend the annual and interim meetings of the AMA, including the meetings for our medical student, resident and fellow, and young physi-

Carl S. L. Eisenberg, MD, is presented with the prestigious Director’s Award—the Wisconsin Medical Society’s highest honor—by Society Board Chair George M. Lange, MD, FACP, at the 2009 Annual Meeting Inaugural Ceremony April 17.

Society Immediate Past President Steven Bergin, MD, addresses the audience during his farewell speech at the 2009 Annual Meeting Inaugural Ceremony April 17.

a resolution to oppose the implementation of the ICD-10 coding system. *Action: Not Adopted.*

**Resolution 21** directed the Society to report activities of the Wisconsin Medical Society Committees, Councils, and Board of Directors on the Members-only section of the Society Web site following each meeting. Members of those Committees, Councils, and Board of Directors were encouraged to share the appropriate nature of Board actions and deliberations (ie, where not prohibited by active legal proceedings) to allow for helpful input from the membership. Committee, Councils, and Board of Directors members are responsible for sharing, without attributing to author or speaker, appropriate information as a way to bolster the general membership’s knowledge of the Society’s activities and deliberations. *Action: Original Language Substituted With Amendments—Adopted.*

RESOLVED, that the House of Delegates directs that:

- Activities of the Wisconsin Medical Society committees, councils and Board of Directors be reported on the Members-only section of the Society Web site in advance and following each meeting.
- Members of those Committees, Councils, and Board of Directors are encouraged to share the appropriate nature of Board actions and deliberations (ie, where not prohibited by active legal proceedings) to allow for helpful input from the membership.
- Committee, Councils, and Board of Directors members are responsible for sharing, without attributing to author or speaker, appropriate information as a way to bolster the general membership’s knowledge of the Society’s activities and deliberations.

Carl S. L. Eisenberg, MD, is presented with the prestigious Director’s Award—the Wisconsin Medical Society’s highest honor—by Society Board Chair George M. Lange, MD, FACP, at the 2009 Annual Meeting Inaugural Ceremony April 17.

Society Immediate Past President Steven Bergin, MD, addresses the audience during his farewell speech at the 2009 Annual Meeting Inaugural Ceremony April 17.
cian sections. It further directed the Society to discuss and establish clear criteria for funding the campaign expenses of those among our membership seeking elected AMA office, with an eye towards more fully funding their efforts. 

Action: Adopted as Amended.

RESOLVED, That the Wisconsin Medical Society AMA delegation, including the medical students, residents and young physicians delegate section delegates members be proactive in establishing future budgets that include allocations for meetings, elections, and other expenses and forwarding them to the Finance Committee during the annual budget process, with the intent to reasonably fully fund the number of delegates and alternate delegates as designated by the AMA, and based on our membership numbers, to attend the annual and interim, and other meetings of the AMA, including the meetings of the AMA for our medical student, resident, and young physician sections; be it further

RESOLVED, That the Board of Directors discuss and establish clear criteria for funding the campaign expenses of those among our membership seeking elected AMA office, with an eye towards more fully funding their efforts:


Board Report BB: Medical Personnel Involvement In Torture—Adopted with the Addition of

Resolved:

RESOLVED, That the Wisconsin Medical Society send a letter to the President of the United States in support of the AMA letter dated April 17, 2009 regarding participation of physicians in torture and coercive interrogation.


Board Report C: Strategic Plan. Action: Referred to the Board of Directors.

Editor’s Note: Society members are encouraged to submit ideas year round. While most Wisconsin Medical Society policy changes are determined annually by the House of Delegates, the Society reminds all members that ideas, proposals, and resolutions can be submitted at any time through the Society’s member communication form found on our Web site. Items submitted are referred to strategic councils for further study, and recommendations will be considered at a future Board of Directors meeting.
The mission of the Wisconsin Medical Journal is to provide a vehicle for professional communication and continuing education of Wisconsin physicians.

The Wisconsin Medical Journal (ISSN 1098-1861) is the official publication of the Wisconsin Medical Society and is devoted to the interests of the medical profession and health care in Wisconsin. The managing editor is responsible for overseeing the production, business operation and contents of Wisconsin Medical Journal. The editorial board, chaired by the medical editor, solicits and peer reviews all scientific articles; it does not screen public health, socioeconomic or organizational articles. Although letters to the editor are reviewed by the medical editor, all signed expressions of opinion belong to the author(s) for which neither the Wisconsin Medical Journal nor the Society take responsibility. The Wisconsin Medical Journal is indexed in Index Medicus, Hospital Literature Index and Cambridge Scientific Abstracts.

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