The policy manual is a compendium of current policies that are sustaining and should be maintained, and action policies should only be maintained until they are accomplished. The Health and Public Policy Committee will annually review the policy manual in conjunction with the Chapter's State legislative agenda.
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**Autopsies**

Results of Autopsies Performed by Medical Examiner

**Resolved**, it is the policy of NYACP that NYACP advocates that a medical examiner release a copy of autopsy findings to the decedent’s attending physician unless the family requests otherwise.

**Coding and Nomenclature**

Code to Identify the Admitting Physician

**Resolved**, it is the policy of NYACP to advocate that Medicare and all insurers should utilize a code that identifies the physician primarily responsible for the patient's care, whose reasonable charges for evaluation and management services will not arbitrarily be denied on the basis of the presence of other physicians' charges, regardless of the site of service.

**Drugs: Advertising**

Inappropriate Use of Physician Prescribing Practices by PhRMA

**Resolved**, that the American College of Physicians (ACP) opposes the practice of selling and/or disseminating physician-specific prescribing data for commercial purposes and advocates against this practice.

Is Consumer Pharmaceutical Advertising Ethical?

**Resolved**, that it is the policy of NYACP that it considers targeted lay press advertising of prescription medications to be unethical.

**Resolved**, it is the policy of NYACP that each pharmaceutical manufacturer should voluntarily provide disease-oriented information to the public rather than product-oriented information.

Supporting the FDA in Appeals to US v Caronia Regarding Unsubstantiated Claims by Pharmaceutical Representatives

**Resolved**, that the Board of Regents supports the FDA in any appeals process brought forward with regard to United States v. Caronia based on clinical standards and ethical ideals.
Drugs: Coverage

Achieving Physician Reimbursement for Anticoagulation Monitoring

Resolved, NYACP will advocate to achieve appropriate physician reimbursement for anticoagulant monitoring including telephonic monitoring among governmental and private insurers.

Tiers of Co Payments for Medication Coverage

Resolved, it is the policy of NYACP to support reduction or elimination of medication co-payments for low income individuals, in order to preserve the ability of such individuals to receive necessary medications.

Drugs: Labeling and Packaging

Herbal Supplements

Resolved, it is the policy of NYACP to advocate that the FDA require warning labels for herbal supplements-known in the medical literature to have potential harmful side effects.

Drugs: Substitution

Standards of Generic Drugs

Resolved, it is the policy of NYACP that the FDA should require that generic drugs be held to the same standards for purity, bioavailability, stability and consistency as the brand name drugs of the same chemical composition.

Firearms

Assault Weapons

Resolved, it is the policy of NYACP to support the passage and enforcement of laws to ban assault weapons as well as distribution of ammunition and to control the ownership and use of all firearms.

Gun Associated Violence as a Public Health Issue

Resolved, that NYACP will take an active part in educating the public in the health hazards of firearms.
Health Insurance

Durable Medical Equipment Companies Provide Cost Information

Resolved, that it is the policy of NYACP to advocate for legislation requiring Durable Medical Equipment (DME) companies to provide patients, for whom DME has been prescribed, information on cost as well as purchase and rental options; and be it further

Resolved, that it is the policy of NYACP to advocate for legislation requiring DME companies to supply patients with equipment prescribed by their physician and to obtain approval from the prescribing physician if a substitution is required.

Immunizations

Resolved, that it is the position of the NYACP that all insurers should cover immunizations with adequate reimbursement, as recommended by the Advisory Committee on Immunization Practices.

Uniform Healthcare Bills Written in Average Health Literacy

Resolved, that it is NYACP policy to advocate for legislation or regulation to require bills for healthcare provider services and products, as well as insurance explanation of benefits, be uniform and written so that patients with average health literacy can understand them.

Health Insurance: Access to Care

Focusing on the Underinsured

Resolved, that the Board of Regents advocates for a study of the impact of underinsurance on access to care, the delivery of preventive services, and clinical outcomes.

Medical Care for the Homeless

Resolved, it is the policy of NYACP to support care for underserved populations, including the homeless, by supporting volunteerism and legislation that provides “Good Samaritan” protections for physicians who volunteer for such service.

Prior Authorization for Classes of Drugs

Resolved, that it is the policy of NYACP to continue to monitor prior authorization requirements for medications by all payers.
Health Insurance: Claim Forms and Claims Processing

Health Promotion Visits

Resolved, that NYACP supports the policy that all health insurers shall provide reimbursement of at least one adult health promotion visit per year for the purpose of implementing appropriate screening, prevention and counseling.

Single Electronic Billing System

Resolved, that it is NYACP policy to support the development of an interoperable electronic claims methodology across payers.

Health Insurance: Single Payer

Proposal for a Single Payer System

Resolved, that the American College of Physicians develop a proposal for a single-payer system, including not-for-profit models, based on current legislative proposals or one created by the ACP; and be it further

Resolved, that a single payer system model developed by the American College of Physicians (ACP) be used to facilitate the discussion on the best model to achieve universal access including comparing and contrasting it to the College’s position on a pluralistic system.

Health Manpower

Workforce Shortages

Resolved, that NYACP will support initiatives to increase healthcare workforce capacity, with a focus on urban and rural shortage areas.

Hospitals

If Hospital Considers Reporting an Incident of Possible Professional Medical Misconduct, Hospital Should First Notify the Physician

Resolved, that it is the policy of NYACP to encourage its members to advocate at their hospitals to ensure that medical staff Bylaws protect the rights of physicians to due process, and that actions which may result in reporting to the National Practitioner Databank, such as reduction in privileges or removal from the staff only occur after all such due process rights are fully exercised.

Resolved, that it is the policy of NYACP to encourage its members to advocate policies in their hospitals that that all reports made by a hospital to the National Practitioner Databank regarding actions taken against a physician are reviewed by the physician, and his/her comments taken into account prior to the language being finalized.
Hospitals (continued)

Opposition to For-Profit Hospitals

Resolved, it is the policy of NYACP to oppose the development of for-profit hospitals New York.

Promoting Collaboration between Long-term Facilities and Hospitals to Reduce Overall Healthcare Costs and Improve Patient Care

Resolved, that the American College of Physicians Board of Regents study whether allowing financial collaboration between hospitals and long-term facilities (LTFs) would be potentially beneficial to patients, hospitals, and LTFs; and be it further

Resolved, that if a financial collaboration between hospitals and long-term facilities is found to be potentially advantageous, the American College of Physicians advocates for legislative and/or regulatory changes that would make the arrangements permissible.

Human Immunodeficiency Virus (HIV)

HIV Infection as a Communicable Disease

Resolved, it is the policy of NYACP that HIV infection be treated as a communicable disease to be diagnosed and treated as other similar illnesses.

HIV Infection Reporting Mechanism

Resolved, it is the policy of NYACP that Health Care Providers involved in the care of a patient should have open and free access to the HIV serology of that given patient.

HIV Infection Testing

Resolved, it is the policy of NYACP that HIV infection testing should be performed without explicit consent when a health care worker has been placed at risk by exposure to body fluids, provided that the privacy of the patient is maintained.
**Legislation and Regulation**

**Defeat of Wrongful Death Legislation**

*Resolved*, it is the policy of NYACP to oppose legislation that would make wrongful death a cause of action in a malpractice case in New York.

**Driving While Impaired by All Substances**

*Resolved*, that the New York Chapter of the American College of Physicians (NYACP) work to clarify the legal definition of driving while intoxicated or impaired, and be it further

*Resolved*, that the New York Chapter of the American College of Physicians (NYACP) support programs that educate the public on the dangers of driving while intoxicated, impaired or distracted.

**Medical Marijuana: Medical Use and Research**

*Resolved*, that it is NYACP policy to support the implementation of scientifically rigorous research into the potential therapeutic role of marijuana.

**Support of HR 1173 – The Personalize Your Care Act of 2013 – Advance Care Planning and HIT**

*Resolved*, that the Board of Regents supports HR 1173, The Personalize Your Care Act of 2013, and takes a leadership role to frame the discussion for its passage.

**Licensure and Regulation**

**Mandatory CME**

*Resolved*, it is the policy of NYACP that continuing medical education requirements should be kept within the professional community and to oppose legislation and/or regulation requiring any specific mandated form or amount of continuing medical education as a prerequisite for medical license re-registration.

**Use of Professional Credentials**

*Resolved*, it is the policy of NYACP to support regulation and/or legislation to ensure that the public be made aware of the specific academic credentials of individuals using the title "doctor" when they are reporting or commenting on any health-related matter or when presenting themselves as caregivers.
Managed Care/Health Maintenance Organizations

Education About HMOs as For Profit Corporations

Resolved, it is the policy of NYACP that the lay public and executive and legislative branches of the government be educated about how the for-profit status of most health maintenance organizations in the United States limits the amount of premiums available for health care.

Managed Care

Resolved, it is the policy of NYACP that any evaluation of physician performance, whether for credentialing or reimbursement be based on clinical quality criteria and not financial criteria such as low utilization

Opposition to Gatekeeper Referral Restrictions

Resolved, that NYACP oppose third party payer policies that require ‘gatekeeper’ physicians to make referrals for tests, imaging procedures and services requested by consulting physicians or primary treating physicians of other specialties, particularly when such services are outside the expertise of the designated ‘gatekeeper’ physician.

Medicaid

Medicaid Utilization Threshold

Resolved, that it is the policy of NYACP that the number of visits by patients for necessary clinical services not be limited a priori by any health insurer, including Medicaid.

Medical Education: Graduate

Proportional Representation on State Council for Graduate Medical Education

Resolved, that seats on the New York Council on Graduate Medical Education (COGME) should be apportioned in accordance with the number of trainees within each specialty training program within New York State.

Medical Necessity

Orders for Procedures

Resolved, that it is the policy of NYACP to support legislation and/or regulation that requires insurers to respect the attending physician’s determination of the appropriate choice of and sequence for tests and procedures when these meet generally accepted medical standards.

Payment for Medically Necessary Tests

Resolved, that it is the policy of NYACP to support legislation and/or regulation that ensures that payers cover all studies ordered by a physician based on an appropriate pre-test clinical indication, and that a negative outcome of the study not be used as a criterion for denying coverage.
Medical Records

Payment for Medical Records

Resolved, that it is the policy of NYACP that the fee of 75 cents per page for copying medical records is not adequate, and that physicians receive proper compensation for inspecting, retrieving, copying and delivering a patient’s medical records, written or electronic.

Medical School Faculty

NYACP to Develop a Preceptor Relationship Between Its Members and Local Medical Schools

Resolved, that NYACP endorses preceptor relationships between its members and its medical schools.

Medicare

Medicare Telephone Appeals

Resolved, that it is the policy of NYACP to support regulation and/or legislation that would prohibit insurers, including Medicare and Medicaid, from down-coding based on statistical analyses of claims.

Waiving the Medicare Deductible

Resolved, it is the policy of NYACP to support legislation that would require patients dually covered by Medicare and Medicaid to be considered to have Medicare as their primary coverage, and that deductibles and coinsurance be fully covered by Medicaid.

Medicare: Carrier Review

Medicare Carriers to Provide Data Which Justify the Statistical Validity of Findings

Resolved, it is the policy of NYACP to support legislation and/or regulation that would require Medicare carriers to provide data which justify the statistical validity of their findings prior to any fair hearing and request for return of monies paid to physicians on the basis of the findings of chart audits.
 Peer Review

Confidentiality of Documents Submitted to a Peer Review Committee

Resolved, that it is the policy of NYACP to support legislation that will require that, in order to maintain the integrity of the QA Committees and Peer Review Committees, all materials submitted to such committees, including verbal testimony of physicians, will be confidential and immune from discovery in a malpractice action.

Positive Peer Review

Resolved, that it is the policy of NYACP to encourage its members to participate in hospital peer review committees, and to strive to make entries in physician profiles when there is evidence of excellent care as well as substandard care.

Physician Payment

Medical Practice Audits

Resolved, that it is the policy of NYACP to urge the appropriate state and federal regulatory agencies to regulate third party payers’ medical practice audits so that such audits are conducted for the purpose of improving quality and providing education to the physician, and not serve as a punitive process.

Resolved, that physicians subject to medical practice audits will be afforded due process.

Equitable Compensation for Workers Compensation Fees

Resolved, that it is the policy of NYACP to advocate to the Workers Compensation Board to mandate that both physicians and attorneys who are asked to provide professional services for injured workers will be paid equitable compensation for those services commensurate with usual, customary and reasonable rates for such services.

Fees for Social Security Disability Reports

Resolved, that it is the policy of NYACP that fees paid to physicians for Social Security disability reports should be commensurate with the work performed.

Opposition to a Tax on Providers

Resolved, it is the policy of NYACP to oppose the imposition of gross receipts taxes on physicians.

Physician Payment: Medicaid

Medical Aid Fees for Internists’ Services

Resolved, it is the policy of NYACP to advocate that Medicaid reimbursement for physician services be increased to Medicare levels.
Physician Payment: Medicare

Carrier Screen and Denial of payment for Hospital Patients

Resolved, that it is the policy of NYACP to advocate for regulation and/or legislation that prohibits Medicare carriers from denying payment for disputed claims until a full review of medical records is performed, with an opportunity for the physician to provide clarifying information, and with the right of appeal and outside arbitration should payment be denied on the basis of medical necessity or quality of care.

Physicians

Definition of Internal Medicine Specialists

Resolved, that the Board of Regents adopts a new policy, applicable to all publications, communications and documents, to refer to subspecialists as (subspecialist)-internists, i.e. cardiology-internists, nephrology-internists, etc.; and be it further

Resolved, that the Board of Regents works with the Internal Medicine subspecialty societies with the goal of universally adopting this terminology.

Primary Care Internists to Volunteer Time as preceptors

Resolved, that it is the policy of NYACP to encourage its primary care internist members to volunteer their services as preceptors for medical students and residents in ambulatory care settings and be it further

Resolved, that it is the policy of NYACP to urge deans of medical schools to award academic recognition for serving as preceptors in ambulatory settings.

Practice Parameters

Methodology for Efficiency/Quality Indicator Data Collection and Analysis

Resolved, that the American College of Physicians and the New York Chapter of the American College of Physicians, seek legislation and/or regulation that permits patient data to be excluded from calculations utilized to develop physician profiles where medical advice and patient non-compliance are clearly documented, and such noncompliance has an adverse effect on a physician's "quality," "efficiency" and/or other similar rating; and be it further

Resolved, that the American College of Physicians and the New York Chapter of the American College of Physicians, seek legislation and/or regulation that limits physician profiling data to the time period that the doctor-patient relationship existed.

Practice Guidelines

Resolved, that it is the policy of NYACP to support the practice of "evidence-based medicine" by its members, through the development, endorsement and/or distribution of clinical practice guidelines.
Practice Parameters (continued)

Shared Decision Making

Resolved, that the Board of Regents demonstrates leadership in embracing the concepts of shared decision making and patient directed goals of care; and be it further

Resolved, that the Board of Regents advocates for curricular development of shared decision making in medical school and residency training; and be it further

Resolved, that the Board of Regents further explores methodologies to mitigate discrepancies in performance measures and patient directed goals.

Professional Liability

Alternate Pathway for Malpractice Disputes

Resolved, that the NYACP will support proposals for reform of the current professional liability system that include alternative dispute resolution systems, including those that include no-fault provisions.

Certificate of Merit in Medical Malpractice Action Be Attested to by a Physician Board Certified in the Relevant Area

Resolved, that it is the policy of NYACP to support legislation that would require that a Certificate of Merit in a medical malpractice action be attested to by a physician trained and practicing in the relevant specialty, and that such attestation be a part of the legal record.

Countersuits for Damages

Resolved, NYACP advocate for reform of the medical liability system that would include a realistic ability for physicians to seek damages for frivolous lawsuits, or contain other provisions that would dissuade the filing of frivolous suits.

Defense Fees and Costs Sustained in Malpractice Suit

Resolved, that it is the policy of NYACP to support the inclusion of a provision in any tort reform plan that all defense fees and costs sustained in a malpractice suit resulting in a finding of “no malpractice” may be recovered.

Guidelines for Expert Witnesses

Resolved, that NYACP will advocate for the establishment of guidelines for expert witnesses.

Need for Reform in Professional Liability Laws

Resolved, that it is the policy of NYACP to continue to advocate for meaningful tort reform that will encourage improved quality of medical care and achieve significant reductions in medical liability insurance premiums in New York State.
Public Health

Directing a Comprehensive Effort to Address Climate Change

Resolved, that the Board of Regents directs a comprehensive effort to address research, education and response to the medical consequences of climate change.

Improvement in Immunization Administration

Resolved, that it is the policy of NYACP to support efforts to increase public awareness of the benefits of immunization for the prevention of influenza and pneumococcal pneumonia.

Public Health and Hydraulic Fracturing for Natural Gas

Resolved, that the American College of Physicians advocate for the reinstatement of EPA regulation of natural gas drilling throughout the United States

Reducing Sodium Intake

Resolved, that the American College of Physicians adopt policy to support efforts to reduce sodium intake by American consumers; and be it further

Resolved, that the College support the efforts of the CDC in its advocacy and public education activities to reduce sodium intake.

Resolutions

Sunset of Resolutions

Resolved, that every two years, the Health and Public Policy Committee will review the policy manual, and will make recommendations to the Council for revision or deletion, including a recommendation for further review by an appropriate standing or ad hoc committee if necessary. The Council shall make a final determination on each recommendation.

Scope of Practice

Alternative Health Care

Resolved, that NYACP support policy that maintains that all practitioners including those who practice alternative medicine, are held to the same standards of practice.

Pharmacists “Unsolicited” Suggestion of Drug Substitutions to Patients

Resolved, that it is the policy of NYACP to support regulation and/or legislation that requires that unsolicited alternative drug suggestions by the pharmacist or a pharmacy benefit program be addressed to the physician, not the patient.

Prescriber Qualifications

Resolved, that the Board of Regents advocates for a single national educational standard for all disciplines that are or will be granted prescription writing privileges.
Scope of Practice (continued)

Prevent Enactment of Regulations that Grant a License to Practice Medicine to Those Who Have Not been Trained

Resolved, that NYACP will only support the expansion of scope of practice where there is appropriate education, training, and continuing education and demonstrated need.

Sports and Physical Fitness

Physically Active Healthier Lifestyles

Resolved, that it is the policy of NYACP to support programs that encourage individuals, schools and communities to achieve more physically active, healthier lifestyles.

Tobacco

AMA to Assign Diagnostic Code for Tobacco Dependence & Counseling

Resolved, that a diagnostic code for tobacco dependence be mandated for use by all third party payers to pay appropriately for smoking cessation, counseling and monitoring as they would for any other physician office visit.

Effects of Second Hand Smoke

Resolved, that it is the policy of NYACP to advocate for measures that reduce tobacco use and exposure to second-hand and third-hand smoke, and provide tools and resources for members to educate patients on this issue.

Ending Subsidies for the Tobacco Industry

Resolved, that it is the policy of NYACP to support legislation ending subsidies for the tobacco industry.

FDA Regulation of E-Cigarettes As Tobacco Products

Resolved, that the Board of Regents reviews and updates its previous policy calling for FDA regulation of e-cigarettes and submits a letter in support for the National Association of Attorneys General statement calling for immediate regulatory oversight of e-cigarettes.

Raising the purchase age for all tobacco products in NYS to 21

Resolved, that the NYACP seek legislation to raise the purchase age in New York State to 21 years for all tobacco products, including e-cigarettes and other nicotine delivery devices.

Tobacco: Marketing and Promotion

Advertising by Tobacco Manufacturers and Marketers

Resolved, that it is the policy of NYACP to advocate for the elimination of all advertising for tobacco products.
What NYACP/ACP Should Do - (MISCELLANEOUS)

Communications and the Use of Social Media

Resolved, that the Board of Regents develops an overall strategy to become the leader in the use and development of technical innovations in communication, education and membership outreach; and be it further

Resolved, that the Board of Regents expedites the development of communication tools such as “apps” and webinars; and be it further

Resolved, that the Board of Regents continues to assess its communication strategies.

Governance Based Upon Membership

Resolved, that it is NYACP policy that the Governors of the Chapter advocate at the National level for proportional representation through governorships and committee appointments based on total chapter membership.