

MEDICAL SOCIETY OF THE STATE OF NEW YORK 2018 HOUSE OF DELEGATES

Report of the Reference Committee on Reports of Officers and Administrative Matters
Presented by: Kevin Hastings, DO, Chair

Madame Speaker and Members of the House of Delegates:

Your Reference Committee recommends the following consent calendar for acceptance:

RECOMMENDED FOR FILING FOR INFORMATION

1. Board of Trustees Report 1-HOD-2018 – Financial Statements for the Year Ended December 31, 2017
 - a. The Report of the Certified Public Accountants for the year ended December 31, 2017
 - b. Medical Society of the State of New York Political Action Committee
 - c. The Empire State Medical, Scientific and Educational Foundation, Inc.
 - d. The Medical, Educational and Scientific Foundation of New York, Inc.
2. President's Report – HOD-2018
3. Treasurer's Report – HOD-2018
4. Secretary's Report – HOD-2018
5. Executive Vice President's Report – HOD-2018

RECOMMENDED FOR ADOPTION

6. 2018 Reports of Officers and Administrative Matters Sunset Report
7. Resolution 200 – Health Care as Economic and Social Benefit

RECOMMENDED FOR ADOPTION AS AMENDED OR SUBSTITUTED

8. Resolution 202 – MSSNY Approval of any Amicus Brief
9. Resolution 203 – MSSNY Committees as a Member Benefit
10. Resolution 208 – Pilot Program Memberships
and Resolution 211 – MSSNY Membership Privileges
and Resolution 213 – Creation of Strategic Plan
11. Resolution 209 – Creation of Standardized Group Membership Structure
12. Resolution 210 – Equity in Dues
and Resolution 212 – Dues Equity

REFERRED TO COUNCIL

13. Resolution 201 – Physician Health and Burnout Reduction
14. Resolution 207 – Introductory Memberships

RECOMMENDED NOT FOR ADOPTION

15. Resolution 204 – Free Membership to Medical Students and Residents
16. Resolution 205 – Life Member Administration Fee
17. Resolution 206 – County Medical Society Provisional Membership

- 1 1. Board of Trustees Report 1-HOD-2018 – Financial Statements for the Year Ended
2 December 31, 2017
3 a. The Report of the Certified Public Accountants for the year ended December 31,
4 2017
5 b. Medical Society of the State of New York Political Action Committee
6 c. The Empire State Medical, Scientific and Educational Foundation, Inc.
7 d. The Medical, Educational and Scientific Foundation of New York, Inc.
8 2. President’s Report – HOD-2018
9 3. Treasurer’s Report – HOD-2018
10 4. Secretary’s Report – HOD-2018
11 5. Executive Vice President’s Report – HOD-2018
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13 **THE REFERENCE COMMITTEE RECOMMENDS THAT ITEMS 1-5 BE ACCEPTED AND**
14 **FILED FOR INFORMATION.**
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17 6. 2018 REPORTS OF OFFICERS AND ADMINISTRATIVE MATTERS SUNSET REPORT
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19 **THE REFERENCE COMMITTEE RECOMMENDS THAT THE 2018 REPORTS OF OFFICERS**
20 **AND ADMINISTRATIVE MATTERS SUNSET REPORT BE ADOPTED.**
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23 7. RESOLUTION 200 – HEALTH CARE AS ECONOMIC AND SOCIAL BENEFIT
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25 **THE REFERENCE COMMITTEE RECOMMENDS THAT RESOLUTION 200 BE ADOPTED**
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27 Resolution 200 asks that MSSNY

- 28 1. oppose health care funding cuts that impose undue burden on both physicians and
29 patients;
30 2. promote increased healthcare investment both for its social and economic benefits
31 3. strive to educate the public and policy makers on how decisions on health care spending
32 will affect the overall economy.
33

34 The reference committee heard testimony about the continuing appropriateness of policy on this
35 matter as health care funding cuts threaten the public and the economy.
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38 8. RESOLUTION 202 -- MSSNY APPROVAL OF ANY AMICUS BRIEF
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40 Recommendation A

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42 **THE REFERENCE COMMITTEE RECOMMENDS THAT RESOLUTION 202 BE AMENDED**
43 **BY ADDITION, AS FOLLOWS:**
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45 **RESOLVED, that any proposed MSSNY amicus, or proposed participation in any amicus**
46 **brief by MSSNY, will require the approval of (1) the MSSNY Board of Trustees and (2) the**
47 **MSSNY Council or Executive Committee.**
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Recommendation B

THE REFERENCE COMMITTEE RECOMMENDS THAT RESOLUTION 202 BE ADOPTED AS AMENDED.

Resolution 202 asks that any proposed MSSNY amicus, or proposed participation in any amicus brief by MSSNY, will require the approval of the MSSNY Board of Trustees and the MSSNY Council..

Your Reference Committee heard testimony regarding the need for quick decisions in some cases, but also that mechanisms exist to convene the necessary leadership groups. The resolution does not seem to propose an unreasonable or unworkable policy.

9. RESOLUTION 203 – MSSNY COMMITTEES AS A MEMBER BENEFIT

Recommendation A

THE REFERENCE COMMITTEE RECOMMENDS THAT THE FIRST RESOLVED OF RESOLUTION 203 BE DELETED.

~~RESOLVED, that the Long Range Planning Committee of the Medical Society of the State of New York annually review the mission statement and activities of each committee to determine if it continues to be relevant to the organization; and be it further~~

Recommendation B

THE REFERENCE COMMITTEE RECOMMENDS THAT THE SECOND RESOLVED OF RESOLUTION 203 BE AMENDED BY ADDITION AS FOLLOWS:

RESOLVED, the MSSNY **more** prominently place on its website all relevant committee information allowing for use as a marketing tool to enhance the value of participation and membership throughout the State.

Recommendation C

THE REFERENCE COMMITTEE RECOMMENDS THAT RESOLUTION 203 BE ADOPTED AS AMENDED.

Resolution 203 asks that MSSNY’s Long Range Planning Committee annually review the mission statement and activities of each committee to determine if it continues to be relevant to the organization; and that MSSNY prominently place on its website all relevant committee information allowing for use as a marketing tool to enhance the value of participation and membership throughout the State. It was noted in testimony that this is a process that is conducted each year by the incoming president of MSSNY, and that lists of committees, committee descriptions and membership rosters currently appear on the MSSNY website.

1 The reference committee heard testimony that each year the president-elect reviews
2 committees and considers their continuing relevance, makes changes such as combining
3 committees or changing them to task forces or vice versa; reviews committee leadership and
4 members and makes changes deemed appropriate and helpful.

5
6 It was also noted that committees are all listed on the website; along with descriptions and
7 membership rosters.

8
9 It was agreed that informing physicians of the work done on their behalf by so many volunteer
10 colleagues can be an effective way of encouraging them to join and participate. The existing
11 materials on the website can be more prominently displayed and utilized as a recruitment and
12 engagement device.

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15 10. RESOLUTION 208 – PILOT PROGRAM MEMBERSHIPS, RESOLUTION 211, MSSNY
16 MEMERSHIP PRIVILEGES AND RESOLUTION 213, CREATION OF A STRATEGIC PLAN

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18 **THE REFERENCE COMMITTEE RECOMMENDS THAT SUBSTITUTE RESOLUTION 213**
19 **BE ADOPTED IN LIEU OF RESOLUTIONS 208, 211 AND 213.**

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21 **RESOLVED, That the Medical Society of the State of New York continue to work with**
22 **representatives of County Medical Societies in developing short, medium, and long-**
23 **range plans which should include**

- 24 • **Membership growth initiatives**
25 • **Unified communications and member relations strategy**
26 • **County Medical Society collaboration strategies**
27 • **Fiscal sustainability strategies**
28 • **Recommendations for an equitable system of MSSNY membership dues and**
29 **privileges**

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31 Resolution 208 asked that our MSSNY House of Delegates

- 32 1. set the dues for all MSSNY pilot memberships that confer full membership privileges at
33 the same amount as the regular dues for active membership effective January 1, 2019;
34 2. review all existing pilot programs and immediately increase the MSSNY dues to the full
35 dues amount for any programs that confer full membership benefits and/or have been in
36 existence for three or more years; and
37 3. Resolve that any new MSSNY pilot program memberships with discounted dues shall
38 not confer full MSSNY membership benefits, and pilot members shall not be entitled to
39 sit on committees, to hold office, or to vote.

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41 Resolution 211 asked that

- 42 1. a review be performed of the classes of MSSNY membership; of the privileges
43 afforded to the classes; and of the dues levied on the classes; and
44 2. that a report of the review be disseminated to the members of the House of
45 Delegates of MSSNY as soon as possible, with recommendations for an
46 equitable system of MSSNY membership dues and privileges.

47
48 Resolution 213 asked that

- 49 1. MSSNY collaborate with County Medical Societies to develop a 3-5 year
50 strategic plan;
51 2. that such a Strategic Plan be developed with the input and approval of more than
52 50% of the County Medical Societies; and

1 3. that such a Strategic Plan contains the following:

- 2 • Membership growth initiatives
- 3 • Unified communications and member relations strategy
- 4 • County Medical Society collaboration strategies
- 5 • Fiscal sustainability strategies

6
7 The reference committee felt that all three resolutions contained related concepts and valuable
8 ideas for strategic planning. Coordinated planning can identify approaches to building and
9 maintaining membership growth in different communities and target groups, and
10 communications to current members can convey the goals of the organization to reverse
11 membership declines that not only threaten the financial viability of the county-state federation
12 but render it incapable of pursuing members' goals with any effectiveness

13
14 Collaboration among county medical societies can help reduce duplication of efforts and
15 maximize effectiveness of existing staff to better serve members without requiring dues
16 increases to support continuing efforts in the face of declining numbers.

17
18 All of these steps will help lead the organization toward the ultimate goal of engaging the
19 majority of physicians in membership to make it possible to lower dues for individuals and lead
20 to an equitable system of dues and privileges.

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23 11. RESOLUTION 209 -- CREATION OF STANDARDIZED GROUP MEMBERSHIP
24 STRUCTURE

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27 Recommendation A

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30 **THE REFERENCE COMMITTEE RECOMMENDS THE FOLLOWING SUBSTITUTE**
31 **AMENDMENT FOR RESOLUTION 209:**

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34 **RESOLVED, That the MSSNY Membership Committee, Council and BOT continue their**
35 **ongoing review and analysis of group membership policies and revise them as**
36 **appropriate.**

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- 39 1. create a formal structured group membership discount policy that will be followed
40 universally; and be it further
- 41 2. obtain approval of such policy by more than 50% of the County Medical Society Board of
42 Directors or the 2019 House of Delegates.

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45 Recommendation B

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48 **THE REFERENCE COMMITTEE RECOMMENDS ADOPTION OF AMENDED RESOLUTION**
49 **209.**

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52 Your reference committee heard testimony regarding the long standing efforts of the
53 Membership Committee, the Council and the Board of Trustees to develop approved methods
54 of recognizing the value of enrolling groups of physicians rather than having to convince busy
55 doctors one by one of the value and need for medical society representation. It was pointed out
56 that there are two standardized approaches to dues offers for group practices and for medical
57 staffs.

1 These have been outlined in the Membership Strategy Report available at this annual meeting.
2 A formula is used for quoting dues to group practices based on their total number. For medical
3 staffs, where a vote of the membership to add to the cost of medical staff dues is generally
4 required, a different approach has been necessary to convince many individuals rather than
5 practice leaders who more easily see the business value of supporting membership to achieve
6 business goals.

7
8 It is also noted that different philosophies regarding group memberships exist in different
9 counties and regions of the state, and that these can change as the practice environment
10 changes. Standardization is desirable but multiple approaches have proven helpful in providing
11 options that work in different times and places.

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14 12. RESOLUTION 210 – EQUITY IN DUES, AND RESOLUTION 212 – DUES EQUITY

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16 **THE REFERENCE COMMITTEE RECOMMENDS THAT THE FOLLOWING SUBSTITUTE**
17 **RESOLUTION 210 BE ADOPTED IN LIEU OF RESOLUTIONS 210 AND 212.**

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19 **RESOLVED, That the long-term goal of the MSSNY is equity in dues for all members, and**
20 **be it further**

21
22 **RESOLVED, That MSSY review all pilot programs and ensure that they are conducted in**
23 **accordance with the Bylaws; and be it further**

24 **RESOLVED, That the MSSNY Council report to the House annually on the status of all**
25 **pilot programs.**

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27 Resolution 210 says that all active members of MSSNY, regardless of their affiliations, should
28 pay the same dues to MSSNY

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30 Resolution 212 asks that the MSSNY CEO and MSSNY Chair of the BOT undertake an
31 immediate study of the financial needs of our MSSNY to determine the MSSNY dues necessary
32 to sustain the society with all individuals in the same class of membership paying the same
33 MSSNY dues.

34
35 The reference committee believes that it is not possible or advisable to undo pilot programs that
36 have been approved by the Council and continued because of their proven effectiveness.
37 However, it underscores that the goal of these programs is to unify the profession and add to its
38 ability to work on behalf of all physicians. Therefore it is important to make all efforts to ensure
39 that membership growth leads a more effective organization that lowers dues for individuals
40 through non dues revenue opportunities larger numbers may provide. It is also the
41 recommendation of the reference committee that the Council report to the House each year on
42 the status of pilot programs.

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45 13. RESOLUTION 207 – INTRODUCTORY MEMBERSHIPS

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47 **THE REFERENCE COMMITTEE RECOMMENDS THAT RESOLUTION 207 BE REFERRED.**

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49 Resolution 207 asks that

- 50 1. our MSSNY offer introductory MSSNY memberships to new prospective members
51 effective January, 1, 2019; and that a new introductory-member be defined as:
52 -someone who has not been a member of MSSNY in the previous five years;

- 1 - being entitled to a membership of one-year duration, terminating at the end of the
2 year;
3 - a member who shall have access to all MSSNY publications and invitations as
4 extended to all active members;
5 -and a member who shall have voice but no vote;
6 2. that the MSSNY dues for the introductory MSSNY membership shall be established in
7 an amount the MSSNY BOT has determined to be fiscally responsible;
8 3. that no negotiations or promises shall be made by MSSNY on behalf of any county for
9 introductory county dues;
10 4. that at the conclusion of the introductory membership, the individual shall be invited to
11 become a full-dues paying member.
12

13 The reference committee heard comments about disappointing past experiences with
14 introductory dues offers requiring full dues payment after the first year, and notes that the
15 Council recently approved a pilot offering an introductory rate that increases gradually over the
16 course of four years to the full dues rate. It recommends allowing the Council to consider future
17 introductory rates based on experience with the new pilot and other dues offers.
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20 14. RESOLUTION 201 – PHYSICIAN HEALTH AND BURNOUT REDUCTION

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22 **THE REFERENCE COMMITTEE RECOMMENDS THAT RESOLUTION 201 BE REFERRED**
23 **TO COUNCIL**
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25 Resolution 201 asks that MSSNY

- 26 1. support the formation, expansion and continuation of programs that promote, maintain
27 and/or foster physician health and help reduce physician abuse and burnout
28 2. undertake the necessary actions (e.g., grants, advocacy, legislation, study, funding) to
29 ensure that programs supporting physician health and reduction of physician abuse and
30 burnout become a permanent component of organized medicine;
31 3. foster alliances with interested parties (e.g., lawyers, patients, insurers) to support the
32 goal of ensuring that the practice of medicine functions optimally by maintaining
33 physician health and reducing physician burnout and abuse.
34

35 Your reference committee heard testimony from members of the MSSNY Task Force on
36 Physician Stress and Burnout suggesting referral, inasmuch as the Task Force is currently
37 developing a name and mission statement for a new Committee addressing the topic. A
38 number of task force members have expressed disagreement with the use of the term abuse,
39 and the possible implication that it equates to child abuse or domestic abuse.
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41 With referral, the proposal and testimony of delegates can be considered as the mission and
42 goals of the new committee are developed and approved by the Council.
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45 15. RESOLUTION 204 – FREE MEMBERSHIP TO MEDICAL STUDENTS AND RESIDENTS

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47 **THE REFERENCE COMMITTEE RECOMMENDS THAT RESOLUTION 204 BE NOT**
48 **ADOPTED**
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50 Resolution 204 calls on MSSNY to collaborate with County Medical Societies to ensure medical
51 students and residents do not pay for memberships.
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1 The reference committee heard testimony about the low cost of student dues and the fact that
2 even lower rates are offered to incoming students as part of a four-year package, along with
3 additional incentives. The first year of membership in the resident category is free to the
4 member. The committee was persuaded by the comments of participants about the importance
5 of having to pay at least a token amount as a commitment.
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8 **16 RESOLUTION 205 – LIFE MEMBER ADMINISTRATION FEE**

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10 **THE REFERENCE COMMITTEE RECOMMENDS THAT RESOLUTION 205 BE NOT**
11 **ADOPTED**

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13 Resolution 205 calls for a pilot project to be instituted such that Life Members of the Medical
14 Society of the State of New York be charged a nominal administrative fee split between county
15 medical societies and the Medical Society of the State of New York.
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17 The reference committee sympathizes with the intent of the resolution and understands that
18 reasons why it would be especially helpful to county medical societies. However, the MSSNY
19 Bylaws are explicit in stating that Life Members shall not be charged dues or assessments and
20 that they are entitled to all the rights and privileges of active membership. For such a policy to
21 be initiated would require a Bylaws amendment.
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24 **17. RESOLUTION 206 -- COUNTY MEDICAL SOCIETY PROVISIONAL MEMBERSHIP**

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26 **THE REFERENCE COMMITTEE RECOMMENDS THAT RESOLUTION 206 BE NOT**
27 **ADOPTED**

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29 Resolution 206 asks that the County Societies be allowed to offer a two year provisional
30 membership without the requirement of membership in MSSNY; and that the provisional
31 membership would be available only to new members paying the customary county society
32 dues; and that the provisional membership would entitle the prospective member only to the
33 benefits that flow from membership in the county society.
34

35 The reference committee heard many comments opposing this resolution as a step toward de-
36 unification of the county and state medical societies. It was also noted that the MSSNY Bylaws
37 make it clear that county and state membership must be unified.
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40 **18. RESOLUTION 214 – COUNTY DUES**

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42 **THE REFERENCE COMMITTEE RECOMMENDS THAT RESOLUTION 214 BE NOT**
43 **ADOPTED**

44
45 Resolution 214 asks that the MSSNY/County Northwell pilot membership program be cancelled,
46 effective immediately.
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48 The reference committee understands and sympathizes with the concerns expressed by many
49 delegates and members about what seems to be inequitable pricing of membership for this very
50 large group. The committee members share the concern that other members may be lost if they
51 do not see the value to themselves in bringing such growth to their professional organization.
52 Strategic planning in concert with county societies can help convey the underlying philosophy in
53 adding value to all members by strengthening the organization through the addition of

1 supporters and revenue that would not otherwise occur, with the ultimate goal of reducing costs
2 for individual members. Moreover, MSSNY Bylaws provide that the Council's resolutions and
3 actions shall be "decisive and final".
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Your chair is grateful to the Reference Committee members, namely, Ernesto Diaz-Ordaz, MD, Marc Mendelsohn, MD, Michael Pisacano, MD, and David Podwall, MD.

Your Reference Committee wishes to express its appreciation to Philip Schuh, CPA, Barry Cepelewicz, MD, Esq., Donald Moy, Esq., and Eunice Skelly for their help in the preparation of this report.

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