

SUNSETTING POLICIES

2024 KMA ANNUAL MEETING

CONTRACTS – MANAGED CARE

- 1) **“Opt Out” Contracts:** KMA objects to any insurance company’s initiative to offer "opt out" contracts, and requests that they end their practice of "opt out" contracting.

KMA pursues legislation to end insurance company "opt out" contracting in Kentucky. (*Res 2013-11, 2013 HOD, p 384*)

DRUG ABUSE

- 12) **Treatment and Education of Patients:** Kentucky health care practitioners are encouraged to inform patients that in starting opioids for many chronic, non-malignant forms of pain that a physician will work with the patient toward an endpoint, where feasible, based on the treating physician’s clinical opinion. (*Res 2013-05, 2013 HOD, p 382*)

KMA will work with the appropriate state agencies to expand coverage and secure Medicaid funding for the treatment of substance abuse and addiction in the Commonwealth. (*Res 2013-02, 2013 HOD, p 381*)

HEALTH INSURANCE

- 3) **Data Collection:** KMA encourages all health insurers offering insurance in the state of Kentucky to submit de-identified quality data to aggregators such as the Kentuckiana Health Collaborative.

KMA encourages all self-funded employers in Kentucky to require their third-party administrators to submit quality data to aggregators such as the Kentuckiana Health Collaborative. (*Res 2013-04, 2013 HOD, p 381*)

HOSPITALS

- 1) **Adoption of Universal Transfer Form:** KMA actively encourages the adoption and use of the universal transfer form developed by the Greater Louisville Medical Society and Bluegrass Health Collaborative in Lexington by all long-term care facilities and hospitals throughout Kentucky. (*Res 2013-03, 2013 HOD, p 381*)

LIABILITY REFORM POLICY

- 2) **Expert Witness:** KMA supports requirements for physician expert witnesses, such as:

- Training and experience in the same discipline as the defendant, or specialty expertise in the disease process or procedure of subject in the case; and
- Recognition by the American Board of Medical Specialties or an equivalent board in the same discipline as the defendant or in the specialty generally considered to include the subject of liability; and
- A majority of professional time in the active practice of clinical medicine or substantial time teaching at an accredited medical school about the medical care at issue within two years of the alleged negligence. (*Res 2013-10, 2013 HOD, p 384; Reaffirmed 2014*)

MEDICAL NECESSITY

- 1) **Durable Medical Equipment:** KMA supports the AMA’s efforts to pursue legislation or regulations requiring direct-to-consumer advertising from Durable Medical Equipment (DME) advertisers to include a disclaimer stating that eligibility for and coverage of DME is subject to specific criteria and when feasible list the actual criteria. (*Res 2013-16, 2013 HOD, p 382*)

2023-24 KMA Sunsetting Policies

MILITARY MEDICAL CARE

- 1) **Location of Louisville Regional VA Medical Center:** KMA opposes the selected Midlands location for construction of a new Louisville Region VA Medical Center.

KMA supports a location in close proximity to the University of Louisville Medical Center for the proposed VA Hospital. (*Res 2013-08, 2013 HOD, p 382*)

PHYSICIAN ASSISTANTS

- 2) **Modification of Co-Signature Policy:** KMA supports working with the Kentucky Academy of Physician Assistants to provide for physician discretion on the need for co-signature. (*Res 2013-18, 2013 HOD, p 384*)

PUBLIC HEALTH

- 1) **Awareness of Public Health Issues:** In an effort to prevent disease and promote improved health for all citizens of the Commonwealth, the Kentucky Medical Association (KMA), in conjunction with other organizations when appropriate and feasible, will raise the awareness of a specific public health issue, as chosen by the KMA Board of Trustees, to be introduced each year as a part of the annual *KMA Physicians Day at the Capitol*.

KMA will work with other health care organizations and non-governmental organizations, including private business and local communities, that express an interest in the specific public health issues annually chosen by the KMA. (*Res 2013-22, 2013 HOD, p 385*)

TEAM-BASED MEDICAL CARE

- 1) **KAPA:** KMA supports the Kentucky Academy of Physician Assistants (KAPA) in their efforts to provide high quality, team-based, physician-led access to care for Kentuckians. (*Res 2013-18, 2013 HOD, p 384*)

TOBACCO

- 2) **Excise Tax:** KMA seeks introduction and passage of legislation to increase the Kentucky state tax on all forms of smokeless tobacco to at least the national average. (*Res 2013-09, 2013 HOD, p 384*)

VISION SCREENING

- 1) **Instrument-Based Vision Screening:** KMA advocates that Medicaid and all private insurers doing business in Kentucky compensate pediatricians and other primary care physicians appropriately for vision screening, CPT code 99174 (2013 edition of CPT), when performed on children 6 months to 5 years of age and for those patients who are unable to cooperate for visual acuity screening by standard vision charts.

KMA works with the AMA to petition the FDA to approve equipment required to conduct instrument-based screening on patients unable to participate in visual acuity screening by standard vision charts.

KMA promotes the use of instrument-based vision screening by pediatricians and primary care physicians for patients 6 months to 5 years of age. (*Res 2013-06, 2013 HOD, p 382*)