



Summary of Actions of the 2022 National Congress of Family Medicine Residents

2022 Resolutions

Res. No.	Title and Resolved	Action of NCFMR	Referrals	Actions
R1-101	<p>Institute a Minimum Salary for Residency Compensation that Reflects Annual Inflation <i>RESOLVED, That the American Academy of Family Physicians supports instituting a national minimum compensation level for all institutions that receive funding to employ resident physicians, and be it further</i></p> <p><i>RESOLVED, That the American Academy of Family Physicians advocates for resident salaries to increase with the rate of inflation each fiscal year.</i></p>	Not Adopted	N/A	N/A
R1-102	<p>Creation of National AAFP IMG Delegation/Chapter <i>RESOLVED, That the American Academy of Family Physicians (AAFP) allow for the creation of a unified national chapter that is similar type and functioning, with all the allowances and powers that mirror that of a chapter of the AAFP for a new IMG national chapter.</i></p>	Adopted	Executive Vice President	<p>Accept for information</p> <p>Uncertainty surrounds the ultimate goal of the proposed action of the resolution and what resources – financial or otherwise – would be required and how they would be secured. The role of the International Medical Graduates member constituency, which has representation at the National Conference of Constituency Leaders (NCCL), currently provides leadership and representation for IMGs within the AAFP. While NCCL is not actively promoted to medical student and resident members, they are eligible to attend the meeting. Because of the lack of clarity around the goal of the resolution and concern</p>

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				with feasibility and allocation of resources, the recommendation is to accept the resolution for information.
R1-103	<p>Reducing Barriers to Menstrual Hygiene Products Substitute: <i>RESOLVED, That the American Academy of Family Physicians advocate for removing all sales tax on menstrual hygiene products.</i></p>	Substitute Adopted	Commission on Federal and State Policy	<p>Accept as current policy</p> <p>Current AAFP policy recognizes menstrual products as being medically necessary and supports affordability of and access to these products.</p> <p>Currently, 24 states have exempted menstrual products from state sales tax, and an additional five states have no sales tax at all. Other states have introduced but not passed legislation to exempt menstrual products from sales tax. The federal government has limited legal ability to remove state-based sales tax on menstrual products.</p> <p>In the 117th Congress, the Menstrual Equity For All Act (H.R. 3614) was co-sponsored by 105 representatives and would require free menstrual products on college campuses, in federal and state correctional facilities, and requires Medicaid to cover menstrual products.</p>
R1-104	<p>Street Medicine Interventions Addressing Homelessness as a Public Health Crisis Substitute: <i>RESOLVED, That the American Academy of Family Physicians recognize the importance of street medicine as a unique aspect of family medicine addressing the needs, mind, body, and spirit of those critically at-risk due to housing insecurity and limited community outreach, and work to promote the role of family physicians in securing non-hospital care.</i></p>	Substitute Adopted	Commission on Quality and Practice	<p>Accept as current policy</p> <p>The AAFP policy, "Homelessness" addressed support for policies to end homelessness and the importance of housing to ensure health. The AAFP is currently developing an on-demand CME course on Street Medicine to equip members with an understanding of street medicine and the skills they need to provide this care. This course will launched in</p>

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				spring 2023.
R2-201	<p>Increasing Efforts to Slow Advance Practice Providers Scope Creep <i>RESOLVED, That the American Academy of Family Physicians advocate for strengthening of efforts for national collection of patient safety data as pertaining to Advanced Practice Providers malpractice, and be it further</i></p> <p><i>RESOLVED, That the American Academy of Family Physicians allocate funds for research through grants and other avenues regarding the quality, accessibility, and cost effectiveness of care provided by Advanced Practice Providers, and be it further</i></p> <p><i>RESOLVED, That the American Academy of Family Physicians expand existing efforts to educate the public about inadequacies in training and the effect on practice of Advanced Practice Providers</i></p>	Not Adopted	N/A	N/A
R2-202	<p>Strengthening the AAFP Global Health Strategy <i>RESOLVED, That the American Academy of Family Physicians reinstate the annual Global Health Summit beginning in 2023, and be it further</i></p> <p><i>RESOLVED, That the American Academy of Family Physicians ensure the Global Health Summit be a dedicated hybrid in-person and virtual summit lasting at least two and half days that is developed independently from Family Medicine Experience, under the guidance of the Center for Global Health Initiatives member advisory board and staff, and be it further</i></p> <p><i>RESOLVED, That the resolution titled "Strengthening of the AAFP Global Health Strategy" be referred to the Congress of Delegates</i></p>	Not Adopted	N/A	N/A
R2-203	<p>Medicated Assisted Treatment Training Implementation into Graduate Medical Education <i>RESOLVED, That the American Academy of Family Physicians</i></p>	Not Adopted	N/A	N/A

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	<p><i>continue to strongly encourage the Accreditation Council for Graduate Medical Education to require substance use disorder curriculum that specifically includes medication assisted treatment training in family medicine residency programs, and be it further</i></p> <p><i>RESOLVED, That the American Academy of Family Physicians ensure family medicine residencies are not only aware but are implementing substance use disorder/medication assisted treatment training into their curriculum by asking Accreditation Council for Graduate Medical Education for generated reports of the key measures of implementation into family medicine residencies nationwide</i></p>			
R2-204	<p>Expand Home and Community Based Senior Services and Provide Living Wages for Caregivers Substitute: <i>RESOLVED, That the American Academy of Family Physicians advocate for interdisciplinary collaborations of experts and organizations to build supply chain resiliency and workforce stabilization in long-term care home and community-based services, including greater investment in wages for essential workers in home and community-based services, and be it further</i></p> <p><i>RESOLVED, That the American Academy of Family Physicians advocate to place financial security, quality of life and access to support services for family caregivers as policy priorities, and be it further</i></p> <p><i>RESOLVED, That the American Academy of Family Physicians advocate to expand Medicare coverage to all sensory impairments - vision, dental, and hearing with reduced out of pocket spending by seniors while ensuring this does not result in payment reduction for primary care or divert resources from</i></p>	Substitute Adopted	<p>1st and 2nd Resolved Clauses: Commission on Quality and Practice</p> <p>3rd Resolved Clause: Commission on Federal and State Policy</p>	<p>Accept for information</p> <p>AAFP Government relations staff have been closely monitoring legislative efforts and policy proposals for Medicare to cover hearing, vision, and dental services. Due to concerns that Medicare budget neutrality rules could force a significant negative payment adjustment for all Medicare Part B clinicians if those services were added to the fee schedule, the AAFP has not endorsed any existing legislation. Staff believe that this subject merits further study and development of internal policy recommendations, in consultation with relevant external stakeholders, prior to taking specific advocacy action.</p> <p>The AAFP has limited policy on home and community-based services (HCBS); however, we have advocated for increased Medicaid funding for HCBS</p>

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	<i>primary care.</i>			to preserve and expand access through our efforts within the Partnership for Medicaid. In recent years the AAFP has sent several letters to Congress expressing the importance of investing in HCBS infrastructure.
R3-301	<p>Integration of Trauma-Informed Care into Family Medicine Training <i>RESOLVED, That the American Academy of Family Physicians issue recommended curriculum guidelines for family medicine residents for training in trauma-informed care, and be it further</i></p> <p><i>RESOLVED, That the American Academy of Family Physicians submit recommended curriculum guidelines for family medicine residents for training in trauma-informed care to the Accreditation Council for Graduate Medical Education for consideration and guidance for programs on implementation for the existing program requirement for education in trauma-informed care.</i></p>	Adopted	Commission on Education	<p>Accept for implementation</p> <p>AAFP currently has a policy for Trauma-Informed Care (TIC) that includes a statement that medical schools and residencies should include instruction in TIC practices. The current AAFP Residency Curriculum Guidelines (CGs) do not include a separate curriculum guideline for TIC, although there are references to TIC in multiple CGs. The COE's Subcommittee on Graduate Curriculum (SGC) is responsible for oversight, development and periodic updating of the CGs through a peer-review process. The COE supports implementation of this resolution through SGC's development of a new CG on TIC, utilizing its existing process that includes call for authors, author selection and peer review of the resultant CG draft prior to publication on the AAFP website. Additionally, once developed, the COE can share the CG with the ACGME Review Committee for Family Medicine through its AAFP ex-officio representative.</p>
R3-302	<p>Ensuring Protection of Constituents to Travel to AAFP Events in Abortion-Friendly Environments Adopted as Amended: <i>RESOLVED, That the sense of the Resident Congress of the American Academy of Family Physicians is</i></p>	Adopted as amended on the Floor	Executive Vice President	<p>Accept for information</p> <p>With state legislation related to reproductive rights and abortion constantly changing, it would be difficult to identify specific states where</p>

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	<p><i>that all future conferences, meetings, events, and national business should only be in states where there are protections for life-saving and physical health exceptions to abortion access, including abortion access up to a minimum of twelve weeks by Last Menstrual Period, beginning effective immediately, with the exception of already-planned events.</i></p>			<p>meetings would be held since contracts for event space are typically secured several years in advance. Backing out of a contract when a state's legislation changes, would likely result in significant financial penalties for the AAFP. Implementing this resolution may also result in meetings being held in more expensive or less accessible locations which would be detrimental to member attendees. The recommendation is to accept the resolution for information.</p>
R3-303	<p>Advancing Family Medicine's Role Within the 988 Mental Health Hotline Expansion <i>RESOLVED, That the American Academy of Family Physicians advocate that family physicians be eligible to receive referrals for mental health services from 988 calls, and be it further</i></p> <p><i>RESOLVED, That the American Academy of Family Physicians advocate to the Department of Health and Human Services that family physicians be appropriately compensated for helping meet the increased demands anticipated with the 988 hotline expansion.</i></p>	Adopted	Commission on Federal and State Policy	<p>Accept as current policy</p> <p>The AAFP endorsed the 9-8-8 Implementation Act, the majority of which was passed as part of the Bipartisan Safer Community Act and signed into law. The AAFP's endorsement letter specifically called for inclusion of primary care physicians in these plans to ensure care continuity for patients. The AAFP also continues to reiterate support for 9-8-8 funding and inclusion of family physicians when providing technical assistance on legislation and in formal testimony to congressional committees when applicable. The AAFP also works with the administration on mental health and substance use disorder related payment issues, including 9-8-8.</p>
R3-304	<p>Surveying AAFP Members: Achieving Health Care Coverage for All <i>RESOLVED, That the American Academy of Family Physicians survey its members across several demographics, including age, level of training, and geography, for their</i></p>	Adopted	Executive Vice President	<p>Accept for information</p> <p>Without a clear purpose or use for the results of the survey requested in the resolution, the AAFP, as a good steward of the organization's financial and</p>

Summary of Actions of the 2022 NCFMR, continued

	<i>preference to achieve health care coverage for all as included in the American Academy of Family Physicians framework for healthcare for all.</i>			workforce resources, should not dedicate resources to creating and implementing a survey. The recommendation is to accept the resolution for information.
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