Dr. Williamson welcomed council members and guests to Regina.


Invited guests: Drs. Goldstein, MacKenzie, N Smith, and Mr. Day.

Motion: That the minutes of the Fall 1994 Executive Council Meeting be accepted. Motion made by Elisabeth Bennett, MD and seconded by Steve Zimmerman, MD. The motion passed unanimously.

President's report: Elliot Williamson, MB, Ch.B

Dr. Williamson reported that the Executive Officers had met on Saturday, May 13 in preparation for today's Executive Council Meeting. As a result of that meeting, it is recommended that the Council deal with the following issues: Implementation of Plan 2000, the function of the Executive Officers, Constitution and By-Law revision, the need for Executive Administrative Assistants, the editorship of The Journal of Insurance Medicine, the core body of knowledge, and the membership survey.

Secretary's report: Paul R Bell, MD

The secretary's office during the first half of 1995 completed the annual membership re-enrollment process and is currently reviewing the second draft of the 1995 roster. We anticipate delivering the roster to the membership in June. We worked with the president to develop the accountabilities of the proposed executive administrator. With input from the officers, committee chairpersons, and members of the academy, the proposed revision for the constitution and bylaws is complete for consideration by the council today. The secretary also worked closely with the membership and credentials committee during their solicitation of new candidates for active membership. The status of the academy's membership and trend since 1993, are shown in the table at right.

Finally, the 1995 membership survey was completed. We sent 394 surveys and had 365 returned for a response of 92.6 percent. Summary of findings:

- The membership is involved in a large number of other professional organizations.
- A majority of the members are certified in a clinical specialty, but only about half of the respondents are certified in insurance medicine.

Academy members work in a wide variety of insurance products, but the majority are in life, disability, health, and long-term care. Sixty percent of the members are required to have continuing medical education credits to maintain state licensure. A little more than one-third of members receive at least 50 percent of their CME's from the academy.

Greater than 50 percent of the membership is planning on attending the annual meeting in 1995. Five percent of members know of other physicians within their company's who might be interested in academy membership. Twelve percent of members know of other individuals within their company's who might be interested in membership.

Treasurer's Report: Paul R Bell, MD for Neal Pickett, MD

Dr. Pickett submitted a written report as he was unable to attend today's meeting. His report states that the financial underpinning of the organization remain in good repair with the organization continuing to meet its financial obligations. The annual audit of the financial records is underway and will be completed and reported to the executive council at the fall meeting.

The accounts of the September 1994 annual meeting are not yet closed, so a final determination of a profit or loss of that meeting is not yet available. Dr. Pickett recommended that the executive
council consider an increase in the annual dues in the amount of $50.00 per year. The reason for this is to assist the organization with the salary of the executive administrator, and the increased cost of the joint meeting with ICLAM this fall. Dr. Pickett reminded us that an action on dues will have to be presented to the membership for their approval this fall.

Advanced Planning Committee: Elliot Williamson, MB, Ch.B

Elliot Williamson had previously distributed the minutes of the January 13-15, 1995 advanced planning committee meeting in Toronto. In summary, the goals previously set out by the committee for the academy are on track to be met by September of 1995. He also reported that discussions are in process regarding the potential merger of the AIDS and genetic committees of the ACLI Medical Section Risk Classification Committee. If this occurs, the ACLI would appreciate having an academy representative involved.

In addition, the advanced planning committee recommended that the delegates to the American Medical Association and the representatives of the Health Insurance Association of America become members of the professional and public relations committee, but that specifically we preserve the relationship of the AMA delegate with the executive council.

Further discussion was held regarding the need for the academy to have an education vice president who has the accountability to coordinate the educational strategies and be responsible for ensuring their implementation.

Dr. Williamson intends to deliver a presentation to the academy’s membership at the annual meeting regarding the status of Plan 2000.

He reported that members of the executive committee had met with Mr. Russell Barker and recommend that the academy retain him as its executive administrator.

Motion: That the academy retain Mr. Russell Barker as executive administrator for the academy through September 1996. Motion made by John Carey, MD, seconded by A Robert Davies, MD.

Amendment: That as part of the contract, specific measurable performance goals be set. The motion made by Warren Kleinsasser, MD, seconded by William Baker, MD. The vote on the amendment was unanimous. The motion as amended was passed unanimously.

Motion: That the executive council accept the recommendations contained in the advanced planning committee’s report. The motion made by A Robert Davies, MD, seconded by Claude Lauriault, MD. The motion passed unanimously.

EDUCATION COMMITTEES

Medical Management and Procedures: Jackie Goldstein, MD

Dr. Goldstein reported that administrative support is needed for the committee specifically to record minutes of the committee meetings so they may be distributed to the membership. The committee is exploring the possibility of granting continuing medical education credits for attendance. Furthermore, the committee hopes to broaden the scope of its presentations to include health and disability issues.

Continuing Medical Education Committee: Jay Smith, MD

Dr. Smith reiterated that the committee is responsible for creating a “paper trail” to satisfy the American Council on Continuing Medical Education requirements. He feels that the current administrative support he receives from his company is sufficient.

The evaluations received at the annual meeting and other educational efforts are provided to the standing committee chairs. The American Council of Life Insurance Medical Section has approached the academy to provide CME credits for their scientific sessions.

Finally, the academy’s standing committee meetings are eligible for continuing medical education credits, if the appropriate criteria are met.

Publications Committee

Tom Bugg, MD for Henry Howe, MD

The Journal of Insurance Medicine will be undergoing a change in its editors. Specifically, W John Elder, MD will be retiring from that position at the academy’s 1995 annual meeting. One of the scientific editors, Robert Goldstone, MD, will also be resigning. Mike Freedman has agreed to continue on as the managing editor of the Journal.

The publication committee had the following recommendations. That the Journal publish four issues per year to include the transactions of the annual meeting; that the scientific editors be increased to five and that the program chairperson of the annual meeting serve as the additional scientific editor. That Mike Freedman continue as the managing editor through the annual meeting of 1996 and that Russell Barker provide editorship for the Journal of Insurance Medicine as part of his new role as executive administrator.

Finally, Dr. Bugg complimented Dr. Henry Howe for his leadership of this committee over the last two years.

Motion: That the executive council accept the publication committee’s report. Motion made by Claude Lauriault, MD, seconded by Elisabeth Bennett, MD, and passed unanimously.
PROMOTION AND MEMBERSHIP

Membership and Credentials Committee: Nina Smith, MD

In executive session the council acted on a candidate recommended by the membership committee for honorary membership.

At the annual meeting the committee is planning on having a booth to welcome and solicit new members. New members will be identified by distinctive name badges, and there will be tables set aside for new members and the membership committee during lunch on Monday. Finally, there will be a new member reception on Monday evening.

The committee has embarked on a program this year to solicit new members. They have contacted all medical directors who are not academy members but listed in the rosters of the American Council of Life Insurance Medical Section, The Fraternal Medical Association and attendees of the recent triennial. To date they have identified 310 from those lists and have sent out 258 letters. As a result, Dr. Smith believes that perhaps only 10-15 new members have been solicited for the academy.

Following the annual re-enrollment period the members of the committee specifically called individuals who have not re-enrolled in the academy. As a result, the committee identified several factors which they believe are positive for the academy: Physicians who are discouraged with clinical medicine want to increase their ties to insurance medicine and the educational programs offered by the academy. Reasons cited for individuals not continuing their participation in the academy include: that they had passed away, that they were only transiently involved in insurance medicine, and perhaps most important is the lack of support from their company.

Dr. Smith reported that there are 31 new applicants for membership into the academy since September of 1994.

Overall, Dr. Smith summed up the committee’s work this year:

- There are not a significant number of physicians who are involved in insurance medicine but are not members.
- There are numerous other health professionals such as nurses, dentists, psychologists who function as medical directors within various insurance companies.
- The committee recommends the development of an affiliate membership as part of the new constitution and by-laws to facilitate contact with the academy.

Nominating Committee: William Baker, MD

Dr. Baker reported that Polly Galbraith, MD has resigned as the academy’s alternate delegate to the American Medical Association to serve until the 1995 annual meeting. Motion made by William Baker, MD, seconded by Claude Lauriault, MD, and passed unanimously.

Ethics Committee: William Baker, MD

Dr. Baker reported that the conflict of interest statements had been received from everyone to whom they were sent and that there were no conflicts to report.

OTHER REPORTS


Mr. Day reported that there will be a change in the Medical Information Bureau rules regarding post notice reporting. This issue has come up at various times over the last 25 years. In 1974 the bureau had instituted a post-notice program.

In November 1994 the Federal Trade Commission raised the issue regarding notice. The MIB Board has requested that the FTC give it a written position statement regarding its’ actions on this issue and expect to hear from the FTC shortly.

As a result, the MIB anticipates publishing this information to underwriters and medical directors in June or late July and Mr. Day would like to give that feedback to the executive council in its’ September 95 meeting.

The AMA Federation Study: A Robert Davies, MD

Dr. Davies reported that he feels that the AMA is taking this initiative seriously in an attempt to reinvent itself and bring along its membership in the process. Specifically they have broadened the scope of the study to include looking at all of organized medicine and how it will function in the year 2000.

Constitution and By-Laws Revision: Paul R Bell, MD

Dr. Bell reported that he had previously distributed the current draft of the constitution and by-laws to the executive council. The council discussed the issues to be addressed in that revision and made several suggestions. As a result, a task force of William Baker, MD, John Iaconvino, MD and Steven Zimmerman, MD will work with Dr. Bell to prepare the final draft to be distributed to the academy membership no later than one month prior to the annual meeting.

There being no further business Dr. Williamson adjourned the meeting.

Respectfully submitted,

Paul R Bell, MD
Secretary