MAINE MEDICAL ASSOCIATION - PUBLIC HEALTH COMMITTEE
MEETING MINUTES
December 9th, 2015

MEMBERS PRESENT: Co-Chair, Lani Graham, MD, Co-Chair, Daniel Oppenheim, MD, Jim Meier, MD, Ted Walworth, MD, Phil Caper, MD (by phone), Robert Struba, MD (by phone), Paul Potvin, MD (by phone)

OTHERS PRESENT: Mr. Peter Michaud, Mr. Andrew MacLean (by phone), Ms. Sarah Lepoff

TOPIC	DISCUSSION	ACTION/FOLLOWUP/RESULTS
Welcome & Introductions - **Dr. Lani Graham**	Introductions were made around the room and on the phone.	
	Before beginning the meeting, Dr. Graham asked to make some additions to the agenda. She would like to include: 1. A discussion of the upcoming session of the legislature 2. A discussion of climate change 3. A discussion of gun control	**Additions to the Agenda**
Review of October 2015 Meeting Minutes	Members reviewed the minutes. Minutes were accepted.	**Minutes were accepted.**
Announcements	There were no announcements.	

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Priority Topics & Guest Speakers 1. **Upcoming Session of the Legislature** 2. **Climate Change** 3. **Gun Control** 4. **Opioid Task Forces** 5. **Physician Burnout** 6. **DHHS Initiative to Ban Food Stamp Payments for Sugary Drinks and Candy**	**Upcoming Session of the Legislature:** There are several bills that are of interest to the Public Health Committee, particularly LD 633: Mainecare Expansion. This is a carry-over bill, meaning it was introduced in the last session, but did not have a hearing. It was sponsored by a republican, and has republican and democratic co-sponsors. Senator Saviello is currently trying to build up support. Other bills of interest include: LD 213: Increase Health and Dental Care to Children Entering State Care LD 690: Ensure the Safety of Homebirths (MMA has been working closely with the midwives on this bill) LD 973: Taxing Nicotine Products Equally (equal to the current cigarette tax) There are also several LRs that may be of interest to the Public Health Committee. These include: LR 2502: Education in Schools to Reduce Harmful Drug Use LR 2407: Increase Access to Opioid Treatment in Maine LR 2385: Establish Law Enforcement Assisted Diversion Programs in Maine	**Bills of Interest to the PCH** **LDs of Interest to the PHC**

	LR 2363: Reduce Trafficking of Illegal Drugs in Maine LR 2284: Increase Sentences for Interstate Drug Trafficking LR 2223: Eliminate the Disclosure Requirement to People with Concealed Weapons. LR 2539: Non-Discrimination Against Tenants Who Have Firearms. LR 2354: Require the State to Adequately Fund Emergency Services LR 2435: Supply Energy Efficient Heat Pumps to Homes on Assistance. The second session of the legislature tends to move very quickly. Peter, Andy, or Gordon will be in touch if expert testimony is required. **Climate Change:** Dr. Potvin is here today to discuss his group's plan for carbon reduction. There are many good things being done, but it just isn't enough. Dr. Potvin and his group feel that the only carbon reduction solution that will be effective, in the long run, will be to put a price on carbon. This "Fee and Dividend" plan will be revenue neutral, and will not increase government. Estimates are that in 10 years there would be around a 40% reduction in carbon emissions.	**"Fee and Dividend" Plan for Reducing Carbon Emissions**

	This is currently a proposal, not a bill. It has been in the works for years. Dr. Potvin feels that having the backing of associations like MMA will help to get this type of legislation passed. Dr. Graham asked if there are any other medical associations that have endorsed this idea. If there are, it would be helpful if Dr. Potvin could provide their position statements for the Public Health Committee to review. Dr. Oppenheim feels it is important to note that if the Public Health Committee is going speak for this plan, we need to know exactly how it will affect Maine. Particularly in terms of the poor and rural populations (those who rely on fossil fuel based heating, farming, etc.) who may be adversely affected by this type of plan. **Gun Control:** Dr. Walworth informed the committee of a potential upcoming referendum (November 2016) led by Maine Moms Demand Action and the Maine Gun Safety Coalition. A petition is currently being circulated re: expanding background checks to close the, "Gun show" loophole. There are currently close to 60,000 signatures (the goal is 90,000). Dr. Caper pointed out this issue has the potential to be the, "Bear baiting" issue of 2016 – with lots of people, with lots of opinions, coming out of the woodwork. He wants to be sure the group is prepared for that. Per Dr. Walworth, the group is aware of the possibility, and are hopeful they will be prepared.	**Petition to Close the "Gun Show" Loophole in Background Checks**

	Opioid Task Forces: Dr. Graham is on the Prevention/Harm Reduction Team (Sarah will send out the complete member list to the PHC). Currently, the prevention/harm reduction team has identified four top priority goals for the next legislative session. 1. Enhancing access to healthcare. 2. Improving Narcan/naloxone distribution. 3. Expanding the public health infrastructure 4. Increasing funding for public health initiatives through a tobacco or alcohol tax. These topics will be discussed with the other teams to avoid overlap. Dr. Oppenheim would like to know what the mandate of the task forces is. According to Dr. Graham, it is an attempt to come to a general consensus about what appropriate treatment, prevention, and law enforcement would look like. Attorney General Mills wants a report that makes active suggestions, not something that will just sit on a desk. Gordon Smith and others have worked to raise funds to support a "listening tour" across the state. • As a side note, there was a press conference this afternoon – the Legislature has agreed to let the governor have his 10 additional DEA agents in exchange for 3 million for Opioid Treatment programs. Just before the conference, the governor announced he would immediately be shifting money from the gambling board to pay for the new DEA agents.	**Priority Goals for the Prevention/Harm Reduction Opioid Task Force**

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	Physician Burnout: MHMC (Maine Health Management Coalition) will be holding a seminar on Physician Satisfaction December 16th. People can sign up online (Dr. Graham will be attending). According to a recent Medscape article, since 2011 physicians are even less satisfied than they were before, and the majority are now dissatisfied. This is a topic of particular concern to the Public Health Committee.	**MHMC Seminar on Physician Satisfaction 12/16/15**
	DHHS Initiative: There is a DHHS initiative (sponsored by the governor) to ban food stamp payments for sugary drinks and candy. The Public Health Committee feels this is an appropriate move. Ultimately, we may be able to tax these items for increased revenue.	**Initiative to Ban Food Stamp Payments for Sugary Drinks and Candy**
Old Business and Brief Updates 1. **Update on white paper on Health Care Reform** 2. **Nuclear Arms Resolution – AMA Actions and Funding**	**Update on white paper:** Dr. Caper has reviewed the existing white paper. It was fine for its time, but is now out of date. Almost everything that was recommended in the paper has been implemented. The Public Health Committee has already recommended to the MMA board that the paper needs to be updated (about a year ago), but not much has happened since. Where are we in the process? Andy notes that, unfortunately, the update is competing with every other item that is before the board. There are limited resources. It would be helpful if the Public Health Committee could make a recommendation about the process and give a timeline to the board. The last time the paper was written, an Ad Hoc group of physicians was gathered. Is this what we want to do again, or is there a way to get broader physician input? Both Drs. Graham and	**Update on the white paper on health care reform.**

	Oppenheim feel having some form of rough draft before forming any type of working group is important. Within a group setting, working to adapt an existing document is much easier than trying to create something from scratch. Ideally, we would have someone with experience write up this first version of the paper. Drs. Graham and Oppenheim would like to know if Dr. Caper would be willing to write up this first draft? Dr. Caper is willing to do this. After discussion, the timeline for the creation of the white paper will be this: Dr. Caper will write up his first draft. When the draft is complete it will be sent to Andy, Peter, and Gordon for revision/comment. When this revision is done, the paper will be sent to Dr. Graham and Dr. Oppenheim for revision/comment. After this second revision, the paper will be sent to the whole Public Health Committee for review. Ideally, the Public Health Committee will be able to review the revised paper at its next meeting (February 10th). The Public Health Committee would like to recognize Dr. Caper for agreeing to create a first draft of the white paper. **Nuclear Arms Resolution:** Peter Michaud updated the committee on the potential money available for the Nuclear Arms Resolution. It turns out there is no money available. The dollar amounts mentioned were just figures that estimated what the cost would be to enact the plan.	**Recognition of Dr. Caper** **Nuclear Arms Resolution Update**

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New Business **1. New Public Health Issues on the Horizon**	No new business reported.	
2. Upcoming Events	No upcoming events reported.	
Next Meeting: Wednesday, February 10th, 2016 **MMA Offices or by phone**	The next meeting will be Wednesday, February 10th, 2016. Following that will be 04/13/16, and 06/08/16.	**Meeting Adjourned**