

OREGON ACADEMY OF FAMILY PHYSICIANS
CONGRESS OF THE MEMBERS
74th ANNUAL MEETING
April 24, 2021

REPORT OF THE PRESIDENT

OAFP presidency in the year of COVID

It has been an honor and challenge to serve as your President during this unique year in our history. Like many of our practices, the OAFP has flexed and adapted to the challenges faced by COVID. Last spring, we held the first virtual congress of delegates which was probably the first national chapter to successfully accomplish this. Many of our activities this year were impacted by the COVID-19 epidemic; in addition to responding to and advocating for our members' needs related to the ongoing crisis, we continued to implement expanded programming and advance our agenda around making the practice of family medicine more rewarding and less cumbersome.

The financial impact the first wave of COVID hit our member's practices significantly. Just over a year ago many of us were sitting in our practices seeing a few patients a day and wondering how we would make ends meet. This highlighted how our fee-for-service payment system is broken. The silver lining is it has accelerated movement toward value-based payment. Because of legislation passed in 2019, the past year saw the formation of the Implementation Committee for the health care cost growth benchmark. A key finding of the implementation group is that increasing the adoption of VBP would be essential to meeting the goal of slowing the growth of Oregon's spending. That group has been chaired by OAFP Member and OMA President Kevin Ewanchyna. The crisis created by COVID and its financial impact on primary care has spawned a workgroup on value-based payment that will be convened by the Oregon Health Leadership Council. OAFP Past President Liz Powers will ably represent family physicians in that group.

After a long labor of trying to get coverage of Telemedicine, COVID caused the precipitous delivery of Reimbursement for Telemedicine. OAFP helped to shape legislation on telemedicine, to extend some of the relief from regulations that had been enacted to allow so many of us to continue caring for patients from a distance.

We continue to work in the current legislative session on key legislation related to new patient data collection efforts, supervision requirements for physician assistants, and other key issues (see the report of the Commission on External Affairs). I want to recognize our lobbyist Sam Barber who has been invaluable in monitoring legislation and advocating for us.

I thank many of you for responding to the ongoing surveys from the Larry Green Center, we've been lucky to have a subset of that data with respondents from Oregon.ⁱ This data has been very useful in pushing for legislation for things like permanent Telemedicine expansion. Data from March shows that 50% of Oregon respondents have patients calling our practices seeking access to vaccines; we're still working with OHA to try to accelerate the timeline for vaccines getting to smaller clinic settings, and we've been grateful to know that OAFP member Kristen Dillon is working at OHA steering those efforts. Our office in Grants Pass has delivered 1,000 vaccinations for COVID so far.

We remain committed to advancing our long-standing goal of transforming how primary care is paid for and delivered, so that family physicians can provide the comprehensive care our patients need. Our strategy to build relationships with the business community and a broader coalition of health care stakeholders this year was focused on coordinating pandemic responses.

One of the obstacles to an effective response to the pandemic that immediately stood out to me was the opportunity and need for public health officials to coordinate with primary care practices to respond collectively. The attempts to coordinate this has proved very difficult and has brought to light a system that was not prepared to deal with a pandemic. It clearly showed the need for thoughtful policymakers to come together when the crisis has receded further and try to create solutions to bridge that gap. The grant we received this year to support this work from the Morris-Singer Foundation, and the connections we've built with other projects they've funded that address other aspects of this question, leave us hopeful that energy is building to support those conversations.

Operations of the OAFP pivoted smoothly to the virtual world. We were concerned that membership in the OAFP would drop due to financial constraints caused by COVID, but membership has remained constant which I believe points to the importance of the OAFP to our practices. The staff have been working remotely since last March, and the Board and all Commissions have held all meetings this year via Zoom. Considering that our first Zoom Board meeting was in July of 2019, we've come a long way. I especially want to recognize the tireless work of Betsy Boyd-Flynn our CEO and Louise Merrigan OAFP program manager, who have kept our organization ahead of the tidal wave we have experienced. We do look forward to in person meetings later this year as most of us have been vaccinated. We are planning to have our next spring meeting in Bend, the RiverHouse, and are working with the venue to ensure a safe experience for everyone.

Our efforts to support ORCA-FM (**Oregon Residency Collaborative Alliance**) have continued. Programs have been able to commit to the affiliation agreement, and several have already paid their program fee for the coming year. While the ban on gatherings meant that we had to shift many of our 2020 plans for the program, we were able to carry out our first Policy Scholars program and worked to support the use of the AAFP Implicit Bias programming in the residencies. One of the programs on the schedule yesterday was advanced through that program.

Our Family Physicians of Oregon PAC was able to give donations to several House and Senate candidates in the Oregon legislature, and we look forward to growing participation in the PAC this year. See the PAC report for additional details.

Our AAFP Delegates carried two resolutions forward to the AAFP Congress of Delegates (this number was limited because the AAFP Rules Committee required each chapter to bring no more than two resolutions forward). We had success as follows:

- Our resolution calling for the removal of the "X Waiver" for prescribers of medication assisted treatment for opioid addiction was amended and adopted.
- Our resolution directing AAFP to support a Marshall Plan for primary care was reaffirmed as current policy.
- We signed on as a co-sponsor of Colorado's resolution related to climate change.
- A resolution related to the provision of gender-affirming care was referred to the Board.

Thank you for entrusting me with the office of this Presidency. The torch will be passed further into Southern Oregon as Stewart Decker of Klamath Falls will take the handoff as president.

David Abdun-Nur, MD
OAFP President 2020-2021

ⁱ With funding from the AAFP Foundation Philanthropic Consortium, OAFP supported a Student Externship for William Moore, MS3 at OHSU, to have him work with the data from the survey. The poster he created for our poster session on 4/21, is available online with the conference materials. It's titled **Analysis of Primary Care Clinician Reported Impact of COVID-19 Strain on Clinics and Provider Exhaustion in Relation to Cases Reported in Oregon.**