

1
2
3 **Title: Group Medical Appointments**
4
5 **Introduced by: Raymond Rudoni, MD, for the Genesee County Delegation**
6
7 **Original Author: Paul Dake, MD**
8
9 **Referred to: Reference Committee A**
10
11 **House Action: Adopted as Amended**
12

13
14 **Whereas, physicians are required to perform more and more tasks due to**
15 **regulations and third-party payer criteria for payment, and**

16
17 **Whereas, physicians will increasingly be required to provide evidence of**
18 **improved outcomes, and**

19
20 **Whereas, patient satisfaction data will become increasingly important, and**

21
22 **Whereas, performing counseling and advice again and again to patients**
23 **who are not necessarily open to the concept of behavior change, and**

24
25 **Whereas, research shows that providing group setting opportunities for**
26 **patients to attend for the purpose of learning how to deal with chronic disease**
27 **are productive, and**

28
29 **Whereas, third-party payers, physician organizations (POs), managed care**
30 **entities, and purchasers are often willing to reward physicians for pursuit of**
31 **improved outcomes, as well as improved patient and physician satisfaction, by**
32 **performing group medical appointments for people with similar diagnoses;**
33 **therefore be it**

34
35 **RESOLVED: That MSMS educate its members and work with the federation**
36 **of medicine at the AMA, state, and county levels to promote education about the**
37 **potential value of group medical appointments for diagnoses that might benefit**
38 **from such appointments including chronic diseases, pain, and pregnancy.**
39

40
41 **WAYS AND MEANS COMMITTEE FISCAL NOTE: NONE**