

Title: Upholding the Integrity and Vitality of the State and County Medical Societies

Introduced by: Narasimha Gundamraj, MD, for the Ingham County Delegation, Christopher J. Allen, MD, for the Saginaw County Delegation, and Evelyn Eccles, MD, for the Washtenaw County Delegation

Original Author: Evelyn Eccles, MD

Referred To: Reference Committee C

House Action: **APPROVED; THIS BYLAWS CHANGE WILL COME BACK OT THE 2022 HOUSE OF DELEGATES FOR SECOND AND FINAL READING**

Whereas, MSMS and county medical societies are and always have been interdependent, but supported by separate dues structures, and

Whereas, the health of MSMS depends in large part on the health of the county medical societies, which provide grassroots input, mentorship, coordination, education, leadership, and

Whereas, physician and medical student members are best served when linked to leaders within their respective local, component society communities, and

Whereas, physicians that live in areas where there is no active, staffed county medical society have been allowed to become members of MSMS, and

Whereas, this practice could create an incentive for physicians and/or medical students and/or physician groups regardless of where they live or work to join unstaffed counties or counties without membership dues to reduce their cost, and

Whereas, this option is potentially disruptive and harmful to the integrity and vitality of the county medical societies and MSMS, and

Whereas, the 2019 MSMS House of Delegates overwhelmingly approved continued membership unification between MSMS and the county medical societies via the amended Final MSMS Organizational Remodeling Recommendations, as well as disapproval of Resolution 63-19, and

Whereas, the MSMS Board of Directors considered and approved a motion at the October 2020, Board meeting interpreting the bylaws stating, "that the MSMS Board of Directors acknowledge MSMS Legal Counsel's interpretation that the MSMS Bylaws do not expressly require a physician to live or work in a county in order to hold membership in that county medical society," and

48 Whereas, the county medical societies have become aware of physician(s) and/or physician
49 group(s) that belong to counties in which they potentially do not live and/or work prior to the
50 October 2020, MSMS Board or Directors motion and approval and subsequently since, and
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52 Whereas, the county medical societies have requested and received membership roster(s)
53 within their districts and/or regions previously, but have been informed by MSMS that this is not in
54 accordance with MSMS Bylaws and policies since October 2020; therefore be it
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56 RESOLVED: That the county medical societies and MSMS work as committed partners to
57 uphold the county medical societies and MSMS shared integrity and vitality, as previously approved
58 by the House of Delegates; and be it further
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60 RESOLVED: That the current MSMS state-wide membership roster shall be audited and the
61 results shall be distributed to the county medical societies and the 2022 MSMS House of Delegates
62 to evaluate the extent of the October 2020 bylaws interpretation; and be it further
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64 RESOLVED: That any recruitment and/or retention practice by MSMS, vendors and/or
65 support subsidiaries, and/or county medical societies supported by the October 2020 bylaws
66 interpretation that serves to undermine the integrity and vitality of the medical societies end; and
67 be it further
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69 RESOLVED: That moving forward, all physician and medical student members join the
70 county where they live or work, unless there is written agreement due to mutually agreed upon
71 exception between the medical student, physician and/or physician group, MSMS, and the
72 respective county(ies).
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75 WAYS AND MEANS COMMITTEE FISCAL NOTE: Resolutions only requesting new or revised MSMS
76 or AMA policy - \$500

This Resolution would necessitate a change to the MSMS Bylaws, Section 4.20. Deletion is indicated by ~~strikethrough~~.

~~4.20 — ADJOINING COUNTY — A doctor of medicine whose principal location of practice is near a county may, with the permission of the Board of Directors of this Society, and upon being duly elected thereto, hold membership in the component society most convenient for the member to attend.~~

STATEMENT OF URGENCY: The membership practice was considered and approved within the last year and the consequences are currently unknown. The HOD should review and remedy this practice before the 2022 membership dues cycle begins.

Relevant MSMS Policy:

Over the past year, MSMS has deployed several strategies to address issues raised by county medical societies regarding state society operations and procedures relative to membership, advocacy, communications and the House of Delegates. Those strategies include weekly (spring 2020) and then bi-weekly (summer 2020) virtual meetings between the MSMS CEO and county society staff, monthly meetings between MSMS departmental heads and county society staff (which have been ongoing since 2010), and a facilitator-led series of meetings to research state and county perspectives and host a series of meetings to

work through how various issues will be handled going forward. The consultant work is ongoing, and the topic raised in this resolution has been part of that process. In addition, county concerns have been discussed broadly at MSMS Board meetings, the Chair and Vice Chair hosted a virtual meeting with Regional Directors representing five counties raising concerns, and the MSMS Executive Committee has also met to support strategies to establish best practices between state and county going forward.

Advise Physicians Regarding the Importance of Organized Medicine

MSMS advocates educating Michigan physicians regarding the value of membership in their respective county medical societies, MSMS and the AMA. (Res17-96A)

Relevant AMA Policy:

None

Sources:

1. <https://www.msms.org/About-MSMS/News-Media/overview-of-the-2019-msms-house-of-delegates>
2. <https://www.msms.org/hodresolutions/2019/63.pdf>
3. Source: January 14, 2021 MSMS Board of Directors Meeting Packet