

Membership Committee Meeting (via Zoom)
May 12, 2021, 8:00 – 9:00 pm
David Podwall, MD, Chair
David Jakubowicz, MD, Commissioner

M I N U T E S

Participants:

Niraj Acharya, MD
Ashley Barlev
Maria Basile, MD
Deborah Blenner, MD
Joshua Cohen, MD
Arthur Fougner, MD
David Jakubowicz, MD
Mandes Kates, MD
Bonnie Litvack, MD
Parag Mehta, MD
Geoffrey Moore, MD
David Podwall, MD

Sumir Sahgal, MD
Suresh K. Sharma, MD
Allen Small, MD
Mark Stamm, MD
Edward Tanner, MD
Dan Young, MD

Aimana ElBahtity
Aaron Kumar, MD
Cheryl Malone
Troy Oechsner
Sandra Bennett

ITEM I: Resolution 2020-201, Membership Expansion and Representation of Diverse Physician

Organizations

Dr. Podwall introduced the first item for discussion, how to increase representation of ethnic medical societies in the House of Delegates. This is the gist of Resolution 2020-201, originally deliberated at the previous committee meeting. While all agree on the importance and value of increasing participation in the HOD, the question is how best to accomplish it. After conferring with the Speaker, and convening a subcommittee to look into different suggestions, two options were determined. Both options require a bylaws change and present fiscal notes to MSSNY and the counties, and possible logistical issues.

The first option is to grant section status to the IMG and Ethnic Medical Associations Committee, as has been done at the AMA. There is also precedent at MSSNY, the Young Physicians Section, that can be used for delegate criteria. This would give an IMG Ethnic Medical Associations Section three seats in the HOD and a councilor position. A section would then be able to write bylaws changes they wish to bring forward.

Mention was made of possible future “special interest” sections, e.g. Women Physicians, and the value they could bring to MSSNY.

The second option is to allow a certain number of ethnic societies into the HOD. Criteria would need to be decided, as well as which societies.

After some discussion, consensus was reached that option one could be more easily achieved and should be pursued as a way to “right a wrong” and attain a more welcoming organization for the many physicians in ethnic associations who currently do not feel an allegiance to MSSNY and the county societies. The Membership Committee will draft a bylaws resolution for submission to the 2021 HOD. It will first be circulated to all Membership Committee members.

ITEM II

2021 Sunset Report

Dr. Podwall presented the report as a consent calendar and asked for any extractions that should not be sunset. Dr. Basile extracted 270.976, Protection of the Title, "Physician". Although the point of the 2011 policy has been accomplished, the committee feels it is worthwhile to have policy on this topic, and in light of activities in other states (e.g. Maryland just passed a law allowing podiatrists to use the term "Podiatric Physician"), we should keep an eye on this issue. There was also a request to include "MBBS" in the language. The policy will be modified for reaffirmation.

Dr. Moore suggested that the explanation for the recommendation given to sunset 207.993, Examining Efficiency and Value to the Member, does not speak to the resolution. He was assured that the goal of all MSSNY leadership and MSSNY's strategic plan is to optimize value, and that even if this specific policy is sunset, its intent will be very well preserved.

ITEM III

A matter for input and discussion for Kings County Medical Society

Dr. Mehta presented a proposal from Kings County. They are pursuing institutional memberships at Maimonides and Methodist Hospitals and are dealing with the discrepancy between the low dues rates applied to institutional physicians and the much higher rates applied to private physicians. Kings is seeking a uniform reduced dues rate for everyone in the county in the amount of \$200. The split between state and county will remain as is. In order to break even, Kings would need to add twice the number of current members.

Citing this as a great idea which his county suggested three or four years ago, Dr. Stamm warned of a downside: if you do not get institutional members on board, you will end up with a deficit. Can the Society as a whole work on that deficit?

There was discussion on whether the cost of dues is really a deterrent to joining. MSSNY ran an experimental program last summer offering half price membership to unpaid members. There were very few responses. It was remarked that residents receive dues-free membership for their first year of residency, but there is not much response. In addition, when PAC dues were dropped a few years ago in an attempt to attract more donors, the only result was a permanent drop in revenue. Dr. Cohen concludes from this that price is not the reason people are not joining MSSNY; rather, they need to see value in membership. Erie County Exec Aimana ElBahtity, a lawyer, explained that Erie has been seeing a momentum of growth through the benefits they provide, including her legal expertise. She concluded that we have to demonstrate that membership pays, it does not cost.

Mr. Oechsner acknowledged declining dues and declining membership and the need to simplify the dues structure and increase non-dues revenue. MSSNY is looking at hiring a grants writer as well as at ways to better monetize the HOD. He stressed the importance of a comprehensive clear plan and that we must make sure we are not just cutting dues.

Dr. Mehta emphasized that many physicians receive a fixed amount of money for memberships, and that if the price were lowered, they would join MSSNY and the county. He agreed there needs to be a focus on membership benefits. Dr. Acharya suggested that an ad hoc experiment in the middle of a pandemic is not a valid test of how lower dues would attract new members. He asked that Kings be

considered an experiment, continuing that private doctors know from their colleagues that institutions pay low dues, and this becomes a problem.

Dr. Jakubowicz pointed out that the MSSNY Bylaws state that dues are set by the Board of Trustees as fiduciary for MSSNY. He offered some thoughts on how this proposal could work for Kings County: 1) if every physician in Brooklyn were in an IPA; 2) if Brooklyn paid the difference between reduced and regular dues to MSSNY; 3) if Brooklyn petitioned the Board of Trustees to lower dues across the board. But he also cautioned that lowering dues would leave no incentive for institutions to join, because there would be no discount. He stressed that we are trying to look at dues parity, but we must remain respectful of our bylaws, our structure, and allowing county execs to determine the effects of a drop in dues. Not all counties have enough volume of potential members to make up a dues shortfall.

Reiterating that this is only for Kings County, as a pilot, Dr. Mehta said that if needed, Kings will send a proposal to the Board of Trustees with their plan.

FOR COUNCIL INFORMATION ONLY

MEDICAL SOCIETY OF THE STATE OF NEW YORK

Resolution 2021-

Introduced by: Membership Committee
Subject: Create MSSNY IMG/Ethnic Medical Associations Section
Referred to: Reference Committee on Bylaws

Whereas, Resolution 2020-201, *Membership Expansion and Representation of Diverse Physician Organizations*, was referred to the Membership Committee by the Council; and

Whereas, Resolution 2020-201 asks that ethnic medical associations be eligible for representation in the MSSNY HOD if they meet certain criteria which are analogous to those established many years ago for specialty societies; and

Whereas, These criteria are no longer realistic (especially the criterion that at least 25% of dues-paying physician members of the petitioning organization also be members of MSSNY) and present barriers to reaching a viable solution; and

Whereas, MSSNY should reflect the diversity of the House of Medicine and must find new ways to bring diversity, equality and inclusion into the House of Delegates; and

Whereas, One solution is to change the IMG/Ethnic Medical Associations Committee to section status, entitled to a number of delegates based on the number of IMG MSSNY members (as in YPS¹) as well as a Councilor; therefore be it

RESOLVED, that the following additions (underlined) and deletions (struck through) be made to the MSSNY Bylaws:

Article IV, House of Delegates
Section A, Composition

(p) delegate representing the IMG/Ethnic Medical Associations Section; and

Section A, last paragraph:

The IMG/Ethnic Medical Associations Committee is authorized to be represented in the House of Delegates by a minimum of one delegate and, according to the rolls of the Medical Society of the State of New York sixty days prior to the annual meeting, one additional delegate for each additional 400 members over 100, up to a maximum of three delegates.

¹ * The Young Physicians Section is authorized to be represented in the House of Delegates by a minimum of one delegate and, according to the rolls of the Medical Society of the State of New York sixty days prior to the annual meeting, one additional delegate for each additional 400 members over 100, up to a maximum of three delegates.

Article V, Council

Section A, Composition, Third Paragraph

Four councilors shall be elected annually by the House of Delegates, each for a term of three years. ~~Two~~ Three councilors, one representing the young physicians section, ~~and one representing the organized medical staff section, and one representing the~~ IMG/Ethnic Medical Associations Section shall be elected every third year by the House of Delegates for a term of three years.

Section A, Sixth Paragraph

Except for the councilor representing the medical student section, the councilor representing the resident and fellow section, the councilor representing the young physicians section, ~~and the councilor representing the Organized Medical Staff Section, and the councilor representing the IMG/Ethnic Medical Associations Section,~~ Councilors shall be assigned to specific county societies as liaison for the Council in accordance with the provisions of Article VI, Section B, paragraph 8.

Article VIII, Special Sections

Section E IMG/Ethnic Medical Associations Section

Membership in the MSSNY IMG/Ethnic Medical Associations Section shall be open to those paid members of the Medical Society of the State of New York who have obtained their medical school education outside the United States, or who are members in good standing of an ethnic medical association. Conduct, rights and privileges of IMG/ Ethnic Medical Associations membership shall be governed by the Bylaws of the MSSNY. The IMG/ Ethnic Medical Associations Section may establish its own bylaws so long as they are not in conflict with the Bylaws of the Medical Society of the State of New York and are approved by the MSSNY Council.

The IMG/Ethnic Medical Associations Section shall hold meetings in order to conduct such business as may be necessary. They shall establish a Governing Council to be elected by the constituents of the IMG/ Ethnic Medical Associations Section. Any paid member of the Section may participate in meetings of the Section.

The IMG/Ethnic Medical Associations Section is authorized to be represented in the House of Delegates by a minimum of one delegate and, according to the rolls of the Medical Society of the State of New York sixty days prior to the annual meeting, one additional delegate for each additional 400 members over 100, up to a maximum of three delegates. The method of electing the delegates representing the IMG/Ethnic Medical Associations Section shall be determined by the Council.

The IMG/Ethnic Medical Associations Section is authorized to be represented on the MSSNY Council by one Councilor with voice and vote. The IMG/Ethnic Medical Associations Section Councilor shall be elected by the constituents of the IMG/Ethnic Medical Associations Section. The duties of the IMG/Ethnic Medical Associations Section Councilor shall be as outlined in the MSSNY Bylaws, Article IV, Sections A and B.

Fiscal Note: \$5,000 - \$10,000 per annum, based on budget line set for other MSSNY sections.