



# **Michigan Osteopathic Association POLICIES**



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**4/16**



# **MICHIGAN OSTEOPATHIC ASSOCIATION**

## **ADMINISTRATION POLICIES**

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## MICHIGAN OSTEOPATHIC ASSOCIATION POLICY

<b>Title of Policy:</b> Computer, Network and Internet Use	
<b>Policy Area:</b> Administration	
<b>Effective Date:</b> 2/00	<b>Approved by:</b> MOA Board of Trustees
<b>Approved Date:</b> 12/03, 12/06, 12/09, 2/13, 2/16	
<b>Revision Date:</b> 2/16	

### **POLICY:**

The MOA provides technology, networks and Internet services for the specific and limited purpose of achieving its goals and objectives. All other activities are prohibited. MOA technology, networks and Internet services remain its property at all times.

- 1) Use of MOA technology, networks, and Internet services does not create any expectation of privacy. The MOA reserves the right to search and/or monitor any information created, accessed, sent, received, and/or stored in any format by any end user on its equipment or any equipment connected to its network. At the direction of the Executive Director non-work related materials shall be eliminated from computer or server memory.

Passwords, which allow access to networks, data, and hardware, must be protected at all times. End users are not to disclose confidential information to unauthorized individuals.

Users may encounter material they interpret as controversial, inappropriate, or offensive. It is impossible to completely define such the content. It is the user's responsibility not to access such material using MOA technology of any kind.

The following are examples of inappropriate prohibited uses:

- Anything prohibited by law.
- Activities that would subject the MOA or the individual to criminal, civil or administrative liability
- Using another person's password or distributing another person's password
- Accessing another person's computer, folders, work, or files without their consent
- Harassing, insulting or attacking others.
- Using the MOA equipment or network for commercial purposes not related to the MOA
- Violating copyright laws
- Sending or displaying intimidating, hostile, offensive, or hate related material
- Using obscene language or intentionally accessing or possessing obscene or pornographic material.
- Possession or use of any tools designed for probing, monitoring, or breaching the security

- of the network or infecting the network with a virus, malware, or similar computer code
- Using the network for non-MOA related bandwidth intensive activities such as network games and the downloading of music or video files or serving as a host for such activities
  - Using MOA equipment for non-MOA related purposes
  - Advertising or promoting non-MOA commercial endeavors
  - Participating in non-MOA approved forums, chat rooms, or exchanges

End users in violation of this Policy will be subject to disciplinary action up to and including dismissal (employees, contract workers or volunteers) or expulsion (members).



## MICHIGAN OSTEOPATHIC ASSOCIATION POLICY

<b>Title of Policy:</b> Document Retention and Destruction Policy	
<b>Policy Area:</b> Administration	
<b>Effective Date:</b> 8/06	<b>Approved by:</b> MOA Board of Trustees
<b>Approved Date:</b> 2/10, 1/14, 2/16	
<b>Revision Date:</b> 2/16	

### **POLICY:**

This Document Retention and Description Policy of the Michigan Osteopathic Association (MOA) identifies the record retention responsibilities of the Board of Trustees, staff, volunteers and outsiders for maintaining and documenting the storage and destruction of the Association's documents and records.

#### I. Rules

The Society's Board of Trustees, staff, volunteers and outsiders (i.e., independent contractors via agreements with them) are required to honor these rules:

- Paper or electronic documents indicated under the terms for retention below will be transferred and maintained by staff;
- All other paper documents will be destroyed after three years of creation/receipt; and
- No paper or electronic documents will be destroyed or deleted if pertinent to any ongoing or anticipated government investigation or proceeding or private litigation.

#### II. Terms for Retention

##### A. General Overview:

##### 1. Retain PERMANENTLY

- Governance records – charter and amendments, bylaws, other organizational documents, governing board and board committee minutes.
- Tax records – filed state and federal tax returns/reports and supporting records, tax exemption determination letter and related correspondence, files related to tax audits.
- Intellectual property records – copyright and trademark registrations and samples of protected works.
- Financial records – audited financial statements, attorney contingent liability letters.

##### 2. Retain for TEN YEARS

- Pension and benefits records – pension (ERISA) plan participant/beneficiary records, actuarial reports, correspondence with government agencies and supporting records.
  - Government relations records – state and federal lobbying and political contribution reports and supporting records.
3. Retain for THREE YEARS
- Employee/employment records – employee names, address, social security numbers, dates of birth, INS Form I-9, resume/application materials, job descriptions, dates of hire and termination/separation, evaluations, compensation information, promotions, transfers, disciplinary matters, time/payroll records, leave/comp time/FMLA, engagement and discharge correspondence, documentation of basis for independent contractor status (retain for all current employees and independent contractors, as well as for separated/terminated independent contractors).
  - Lease/insurance/and contract/license records – software license agreements, vendor, hotel, and service agreements, independent contractor agreement, employment agreements, consultant agreements and all other agreements (retain during the term of the agreement and for three years after the termination/expiration/non-renewal of each agreement.)
4. Retain for ONE YEAR
- All other electronic records, documents and files – correspondence files, past budgets, bank statements, publications, employee manuals/policies and procedures and survey information.

B. Detailed Document Retention	Retention Period
• Accident reports and claims (settled cases)	7 years
• Accounts payable ledgers and schedules	7 years
• Accounts receivable ledgers and schedules	7 years
• Audit reports of accountants	Permanently
• Bank reconciliations	2 years
• Budgets	2 years
• Capital stock and bond records; ledgers; transfer registers; stubs showing issues; record of interest coupons, etc.	Permanently
• Cash books	Permanently
• Chart of Accounts	Permanently
• Checks (canceled, but see exception below)	7 years
• Checks (canceled for important payments, i.e., taxes; purchases of property; special contracts)	Permanently
• CME sign-in sheets	6 years
• Convention payments by credit card	1 year
• Correspondence (routine) with members, customers or Vendors	1 year
• Correspondence (general)	3 years
• Correspondence (legal and important matters)	Permanently
• Deeds, mortgages and bills of sale	Permanently

- Depreciation schedules Permanently
- Dues payments by credit card 1 year
- Duplicate deposit slips 2 years
- Expense analyses and expense distribution schedules 7 years
- Financial statements (end-of-year, other months optional) Permanently
- General and private ledgers and end-of-year trial balances Permanently
- Insurance records, current accident reports, claims, etc. Permanently
- Internal audit reports (in some situations, longer retention  
Periods may be desirable) 3 years
- Invoices to members and customers 7 years
- Invoices from vendors 7 years
- Membership applications 3 years
- Minutes of committees Permanently
- Notes receivable ledgers and schedules 7 years
- Option records (expired) 7 years
- Payroll records and summaries, payments to pensioners 7 years
- Petty cash vouchers 3 years
- Property records Permanently
- Stock and bond certificates (canceled) 7 years
- Subsidiary ledgers 7 years
- Tax returns and worksheets; revenue agents' reports and  
Other documents relating to determination of income tax  
Liability Permanently
- Time books 7 years
- Vouchers for payments to vendors, employees, etc.  
(includes reimbursement of employees, officers, etc., for  
travel and entertainment expenses.) 7 years

- C. Exceptions  
 Authority to grant exceptions to these rules and terms of retention resides solely  
 with the Executive Director or MOA President.





## MICHIGAN OSTEOPATHIC ASSOCIATION POLICY

<b>Title of Policy:</b> Operations Annual Review	
<b>Policy Area:</b> Administration	
<b>Effective Date:</b> 8/05	<b>Approved by:</b> MOA Board of Trustees
<b>Approved Date:</b> 12/08, 2/12, 2/16	
<b>Revision Date:</b> 2/16	

### **PURPOSE:**

To ensure safeguarding of the association's assets, operational efficiently and operational compliance consistent with established policy.

### **POLICY:**

The Director of Administration shall complete an annual operations review of the Association within thirty days prior to the close of the fiscal year. The review shall include assessment of internal information and systems to ensure that resources are used, protected and reported in accordance with local, state and federal laws, in compliance with the organization's governance documents and conform to best-practices in the profession.

The objective of operational review shall be to provide for ongoing continuous improvement; therefore, it is the policy that the reviews be conducted so as to ensure the achievement of these purposes.

### **PROCEDURE:**

1. The Director of Administration shall develop, in conjunction with the Executive Director, a standardized internal checklist for audit purposes.
2. The Executive Director shall approve the checklist annually prior to the performance of the annual review.
3. The Director of Administration shall perform the annual review within thirty days of the completion of the fiscal year using an internal checklist approved by the Executive Director.
4. The Director of Administration will report any deficiencies to the Executive Director and will develop an action plan to resolve any issues.
5. The Executive Director shall approve the action plan, monitor progress, and report to the Board any issue that cannot be resolved.



## MICHIGAN OSTEOPATHIC ASSOCIATION POLICY

<b>Title of Policy: Trademark, Copyright and Name Terms of Use</b>	
<b>Policy Area: Administration</b>	
<b>Effective Date: 12/00, 9/15</b>	<b>Approved by: MOA Board of Trustees</b>
<b>Approved Date: 12/03, 12/06, 12/09, 2/13, 2/16</b>	
<b>Revision Date: 2/16</b>	

### POLICY:

1. The MOA name and logo act as a visual representation of MOA's identity and image. The MOA name and logo should be used any time MOA or its products or programs are being identified
2. The domain names "domoa.org" (primary) "mi-osteopathic.org" (used as a re-direct or alias) and the logo of the Michigan Osteopathic Association are the trademarks and sole property of the MOA and may not be used in any manner without the advance written consent of the MOA.
3. The MOA web site contains copyrighted material and other proprietary information, which may include, but is not limited to, text, software, photos, video, graphics, and sound. It is not permitted to modify, publish, transmit, participate in the transfer or sale, create derivative works, or in any way exploit any of the content, in whole or in part.
4. MOA limits permission for downloading of copyrighted material for personal use only. Except as otherwise expressly authorized under copyright law, MOA prohibits copying, redistribution, retransmission, publication or commercial exploitation of downloaded material without the advance written consent of MOA.
5. When MOA grants permission to copy, redistribute or republish the content of its web site, it prohibits changes in or delete of any attributions of authorship, trademark or copyright notice contained therein. MOA does not relinquish ownership rights to anyone who acquired any MOA web site content by downloading of the material.
6. A MOA member (dues or non-dues paying) cannot, by virtue of membership status as such, use the MOA name, logo or trademarks without written authorization, except for such "fair use"<sup>1</sup> as stating that the individual is a member of MOA in such issuances as

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<sup>1</sup> "Fair use" is a legal doctrine that promotes freedom of expression by permitting the unlicensed use of copyright-protected works in certain circumstances. [Section 107 of the Copyright Act](#) provides the statutory framework for

resumes or similar announcements or communications.

7. Use of the name and logo by others - The MOA name and logo may not be used by any other organization without prior knowledge and approval in writing from an authorized MOA agent. The MOA name and logo shall remain the exclusive property of MOA.
8. Use of the logo in conjunction with other logos - When the MOA logo appears in conjunction with other logos, it must be of equal size and proportion to all other logos in relation to level of support.

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determining whether something is a fair use and identifies certain types of uses—such as criticism, comment, news



## MICHIGAN OSTEOPATHIC ASSOCIATION POLICY

<b>Title of Policy: Weapons</b>	
<b>Policy Area: Administration</b>	
<b>Effective Date: 2/02</b>	<b>Approved by: MOA Board of Trustees</b>
<b>Approved Date: 12/05, 12/08, 2/12, 2/16</b>	
<b>Revision Date: 2/16</b>	

### **PURPOSE:**

To ensure that MOA maintains a workplace safe and free of violence for all employees, members and visitors, it prohibits the possession or use of dangerous weapons on company property.

### **DEFINITIONS**

MOA property is defined as all Association-owned or leased buildings and surrounding areas such as sidewalks, walkways, driveways and parking lots under the Association's ownership or control. This policy applies to all Association-owned or leased vehicles and all vehicles that come onto Association property.

Dangerous weapons include firearms, explosives, knives, Tasers and other weapons that might be considered dangerous or that could cause harm. Dangerous weapons include any form of weapon or explosive restricted under local, state or federal regulation. (Legal, chemical-dispensing devices such as pepper sprays that are sold commercially for personal protection are not covered by this policy). Employees are responsible for making sure that any item possessed by the employee is not prohibited by this policy.

### **POLICY:**

Other than on-duty law enforcement officials, the MOA prohibits all persons who enter MOA property from carrying a dangerous weapon of any kind onto MOA property regardless of whether or not the person is licensed to carry the weapon.

This policy applies to all MOA associates, contract and temporary associates, members, visitors or contractors on MOA property, regardless of whether or not they are licensed to carry a dangerous weapon. The only civilian exceptions to this policy will be security guards or other persons who have been given written consent by the MOA to carry a weapon on the property.

All MOA associates are also prohibited from carrying a dangerous weapon while in the course and scope of performing their MOA job duties, whether or not they are on MOA property at the time and whether or not they are licensed to possess a dangerous weapon. Associates may not carry a weapon covered by this policy while performing any task on the MOA's behalf. The only exceptions to this policy will be persons who have been given written consent by MOA to carry a weapon while performing specific tasks on MOA's behalf. This policy also prohibits weapons at any MOA sponsored function such as parties or picnics.

Individuals with a question about whether an item is covered by this policy shall be directed to the MOA Director of Administration. Staff, volunteers and members will be held responsible for making sure beforehand that any potentially covered item possessed is not prohibited by this policy.

Failure to abide by all terms and conditions of the policies described above may result in discipline up to and including termination of employment or expulsion from membership.

THIS POLICY SHALL NOT BE CONSTRUED TO CREATE ANY DUTY OR OBLIGATION ON THE PART OF THE MOA TO TAKE ANY ACTIONS BEYOND THOSE REQUIRED BY EXISTING LAW.

Staff or members aware of anyone violating this policy should report it to an available manager.

### ***Searches***

MOA reserves the right and is authorized to conduct searches of personal belongings that are brought onto MOA property and to search any and all MOA property including but not limited to employee desks, computers, laptops, lockers, work areas, purses, briefcases, baggage, toolboxes, lunch sacks, clothing, vehicles parked on MOA property, and any other item in which weapons may be hidden. In addition, the following (or other) screening tests may be requested or required on the basis of reasonable cause: drug or alcohol testing, fingerprint analysis, or other tests. MOA management or local authorities may conduct searches. Employees who fail or refuse to promptly permit a search under this policy will be subject to discipline up to and including termination.



## **MICHIGAN OSTEOPATHIC ASSOCIATION**

### **BUSINESS AFFAIRS POLICIES**

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## **MICHIGAN OSTEOPATHIC ASSOCIATION POLICY**

<b>Title of Policy: Accommodation Expenses for MOA Spring or Autumn Conventions</b>	
<b>Policy Area: Business Affairs</b>	
<b>Effective Date: 12/98</b>	<b>Approved by: MOA Board of Trustees</b>
<b>Approved Date: 12/01, 12/04, 12/07, 2/11, 1/15, 2/16</b>	
<b>Revision Date: 2/16</b>	

### **POLICY:**

1. MOA will pay for overnight accommodations for all Board member, and other members whose duties require on site presence at the spring and autumn conventions.
2. Individual member remain responsible for personal incidental expenses.
3. This policy shall not apply to the incoming President or to pre-authorized expenses.



## MICHIGAN OSTEOPATHIC ASSOCIATION POLICY

<b>Title of Policy: AOA Health Policy Fellow Financial Support Grants</b>	
<b>Policy Area: Business Affairs</b>	
<b>Effective Date: 2/14</b>	<b>Approved by: MOA Board of Trustees</b>
<b>Approved Date: 2/16</b>	
<b>Revision Date: 2/16</b>	

### BACKGROUND

The New York Institute of Technology/New York College of Osteopathic Medicine and the Ohio University College of Osteopathic Medicine in collaboration with colleges in the American Association of Colleges of Osteopathic Medicine (AACOM), and the American Osteopathic Association (AOA) offers the Health Policy Fellowship program.

The program is designed for practicing or teaching osteopathic physicians who are preparing for leadership roles in the profession and positions of influence in health policy. Applicants also considered include individuals with an established professional connection with the osteopathic profession (for example: directors of medical education, hospital administrators, or executive directors of state osteopathic associations).

Fellows attend an intensive five-day academic orientation at New York Institute of Technology before entering the regimen of nine three-day weekend seminars, usually beginning Friday at 8:00 a.m. and finishing Sunday at noon. Seminars are rotated among osteopathic colleges and the AOA's and AACOM's Washington, DC area offices. Between monthly seminars, Fellows devote a minimum of 20 hours to reading, research, and completing written assignments.

To enhance the Fellows' ability to evaluate, articulate, and formulate concise and objective assessments of health policy issues, Fellows complete two health policy issue analysis briefs. Program faculty and staff provide research, writing, and editing support. Graduation, held in conjunction with the fall AOA Health Policy Forum, provides the opportunity for the Fellows to present outstanding briefs to the conference attendees.

### POLICY:

The Michigan Osteopathic Association shall encourage and financially support members accepted to participate in the AOA Health Policy Fellowship Program.

The following guidelines will be used to determine those candidates who may be eligible to receive support funding from MOA:

1. Qualifications:

- Current member of the AOA, in good standing, for at least the past 5 continuous years



- Current member of the MOA, in good standing, for at least the past 5 continuous years
    - Educational, honorary, retired and non-dues paying members of either of the above groups will be excluded
  - Must have served as a delegate to the AOA House of Delegates (HOD) at least 1 time
  - Must have served as a delegate to the MOA House of Delegates (HOD) at least 5 times
  - Must have served as an officer in their Michigan component society
  - Special Exemptions for consideration
    - The MOA Executive Director may apply for fellowship financial support after serving in that capacity for at least 5 years
    - A non-physician may be considered after a review of their application and qualifications by a committee set forth by the MOA Board
2. Each candidate who receives financial support from the MOA shall sign a statement of commitment to remain in the State of Michigan for a period of at least five years following completion of the fellowship and during that period serve as an active liaison for the MOA in all matters as they pertain to the policy positions adopted by the MOA. The candidate shall agree to serve as an active participant on the MOA Council for Government Affairs, attend DO Day on the Hill and promote the MOA positions at legislative or regulatory meetings. They shall provide periodic written report of their activities to the MOA Board at mutually agreeable intervals. The statement of commitment will provide for full repayment of the support payment by the candidate for failure to comply.
3. The MOA shall include a \$5000-line item in the annual budget to support up to two (2) \$2500 stipends for candidates who have applied for the Health Policy Fellowship. The awarding of the stipends remains at all times at the discretion of the BOT. The Secretary – Treasurer, will review the specific amount annually and their report shall be presented to the MOA Board.



## **MICHIGAN OSTEOPATHIC ASSOCIATION POLICY**

<b>Title of Policy: Credit Card Information for Member Accommodations at MOA Events</b>	
<b>Policy Area: Business Affairs</b>	
<b>Effective Date: 12/08</b>	<b>Approved by: MOA Board of Trustees</b>
<b>Approved Date: 2/12, 2/16</b>	
<b>Revision Date: 2/16</b>	

### **POLICY:**

The MOA, at its discretion, may request from Board members, or other guests invited to MOA events who desire overnight accommodations, credit card information to ensure use of the accommodation. MOA will pay for the rooms of Board members or invited guests if the room is utilized. In the event the Board member or invited guest is a “no-show” and did not cancel the room accommodation timely, the MOA will charge the cost incurrent to that credit card.

The Executive Director must give prior approval for any exceptions.



## **MICHIGAN OSTEOPATHIC ASSOCIATION POLICY**

<b>Title of Policy: Department, Committee, or Council Meeting Food or Beverage Expense</b>	
<b>Policy Area: Business Affairs</b>	
<b>Effective Date: 4/00</b>	<b>Approved by: MOA Board of Trustees</b>
<b>Approved Date: 12/03, 12/06, 2/10, 1/14, 2/16</b>	
<b>Revision Date: 2/16</b>	

### **POLICY:**

Department, Committee, or Council meetings shall be held at the office of the Michigan Osteopathic Association if possible. Regardless of meeting location MOA shall not authorize, food and beverage expenses exceeding \$25 per attendee for the meeting unless prior authorization is obtained from the Executive Director.



## **MICHIGAN OSTEOPATHIC ASSOCIATION POLICY**

<b>Title of Policy: Donations in Memory of MOA Past Presidents</b>	
<b>Policy Area: Business Affairs</b>	
<b>Effective Date: 8/14</b>	<b>Approved by: MOA Board of Trustees</b>
<b>Approved Date: 2/16</b>	
<b>Revision Date: 2/16</b>	

### **POLICY:**

Following the death of any MOA past president, the MOA will make a \$1,000 donation in their memory to the MSUCOM Past Presidents Endowment Fund.



## MICHIGAN OSTEOPATHIC ASSOCIATION POLICY

<b>Title of Policy: Donations to Affiliated Organizations</b>	
<b>Policy Area: Business Affairs</b>	
<b>Effective Date: 12/08</b>	<b>Approved by: MOA Board of Trustees</b>
<b>Approved Date: 2/12, 2/16</b>	
<b>Revision Date: 2/16</b>	

**POLICY:**

The Finance Committee shall include consideration for the following donations to affiliated organizations as line items in the proposed annual budget. Approval shall remain at the discretion of the Board.

AAOA	AMOA Presidential Sponsorship	\$5,000 when MI President
AAOA Fore You	Golf Outing Sponsorship	\$500 \$1K when MI President
MSUCOM	MOCF Ball Ad	\$650
MSUCOM	Silverfest Tailgate Sponsor	\$2,000
MSUCOM SOMA	Monster Dash Sponsor	\$500
MAOFP	Summer Conf. Breakfast Sponsor	\$500
MAOFP	Winter Conf. Breakfast Sponsor	\$500
AOF	Annual Contribution	\$2,500



## MICHIGAN OSTEOPATHIC ASSOCIATION POLICY

<b>Title of Policy: Educational Conference Fees</b>	
<b>Policy Area: Business Affairs</b>	
<b>Effective Date: 5/15</b>	<b>Approved by: MOA Board of Trustees</b>
<b>Approved Date: 2/16</b>	
<b>Revision Date: 2/16</b>	

### **PURPOSE:**

To ensure adequate educational conference revenue through registration and sponsorship fees that will cover conference expenses while encouraging the maximum number of attendees.

### **POLICY:**

The Board of Trustees delegates to the Finance Committee and Secretary-Treasurer responsibility and authority to establish educational conference or convention fees and necessary associated operational processes or procedures. It may set variable registration fees for conferences for distinctly identified membership categories or for non-members.

#### **Establishing registration fees**

The Finance Committee or Secretary-Treasurer shall set registration and sponsorship fees when preparing a conference budget. A conference budget must include an estimate of the anticipated revenue and expenses before setting registration and sponsorship fees.

When setting registration fees, the Finance Committee or Secretary-Treasurer may consider:

- Past registration fees;
- Sponsorship and exhibitor revenue;
- Projected attendance based on historical number of attendees at prior conferences (unless new);
- Anticipated expenses.

#### **Setting different types of fees**

The Finance Committee or Secretary-Treasurer shall establish the registration and other fees for each membership or non-membership category of potential attendees for the conference and shall ensure that there are operational procedures to collect payments and track all categories of registration, including attendee types, exhibitors, speakers, and VIPs. As a general principle, registration fees for members should be less than for non-members. Special rates, including fee waivers, may be set for the various categories of attendees at the discretion of the Finance Committee or Secretary-Treasurer. If a non-member registrant qualifies for membership, the difference between a member fee and a non-member fee paid by this attendee can be applied toward a MOA membership in an appropriate category.

**Early-registration discounts**

The Finance Committee or Secretary-Treasurer may establish discounted fees for advance-registration to encourage early registration. This may assist in determining resources needed for a successful conference or for increased publicity. When considering early-registration discounts the Finance Committee or Secretary-Treasurer should consider:

- Creating a tiered list of fees for members and non-members;
- Making the early-registration date as early as possible;
- Not extending the early-registration period.

**Charges for activities and special events**

The Finance Committee or Secretary-Treasurer shall determine what is included in the standard conference registration fee and establish supplemental charges for special or optional programs, activities or events.

**Refund policy**

Consistent with the *CME Program Registration Cancellation and Refund Policy*, MOA must receive any request for refund of registration fees in writing no less than two weeks prior to the conference date. It will not process requests for refunds after that time. The MOA will refund the registration fee, minus a \$50 processing fee for all approved refund requests received within the allowable cancellation period.

The conference registration form, registration-confirmation, and any related conference website materials or other promotional materials shall include the refund policy.

Educational conference and convention fees will be reviewed and approved at least annually unless otherwise deemed necessary by special circumstance recognized by the Finance Committee or Secretary-Treasurer.



## **MICHIGAN OSTEOPATHIC ASSOCIATION POLICY**

<b>Title of Policy: Investment Asset Federal Deposit Insurance Requirements</b>	
<b>Policy Area: Business Affairs</b>	
<b>Effective Date: 12/08</b>	<b>Approved by: MOA Board of Trustees</b>
<b>Approved Date: 2/12, 2/16</b>	
<b>Revision Date: 2/16</b>	

### **PURPOSE:**

To maximally protect investment asset principle

### **POLICY:**

It shall be MOA policy that funds deposited in a federal or state chartered bank or credit union shall not exceed the insured reimbursement limits set by the Federal Deposit Insurance Corporation (FDIC), National Credit Union Administration (NCUA) or similar federal agency that provides for guaranteed return of funds.





## MICHIGAN OSTEOPATHIC ASSOCIATION POLICY

<b>Title of Policy: Medical Mission Fund</b>	
<b>Policy Area: Business Affairs</b>	
<b>Effective Date: 12/08</b>	<b>Approved by: MOA Board of Trustees</b>
<b>Approved Date: 2/12</b>	
<b>Revision Date:</b>	

### BACKGROUND:

The Medical Mission Fund was initially funded by member contributions to create a source of grant funding for osteopathic physicians who engage in medical missions to developing nations.

### POLICY:

The Medical Mission Fund shall remain under the control of the MOA Charitable Fund which shall endeavor to grow this fund so that the principle is self-sustaining and earnings provide funds for awarded grants. Until that time, the MOA Charitable Fund Board of Trustees may award distributions from Medical Mission Fund principle; however, grants must conform to the following guidelines:

- 1) The Medical Mission Fund CORPUS shall be \$5,000. The MOA Charitable Fund Board of Trustees shall have the authority to re-determine size of the CORPUS.
- 2) Until the fund generates \$2,000 per year in net investment income, disbursements shall not exceed 10% of the fund's principle and a disbursement shall never deplete the CORPUS.
- 3) Because the Medical Mission Fund's purpose shall be to support medical missions and not individual participants, Medical Mission Fund disbursements shall be made to organizations who organize medical missions and not to any individual.
- 4) Disbursements shall not exceed \$1,000 per organization annually.



## MICHIGAN OSTEOPATHIC ASSOCIATION POLICY

<b>Title of Policy: Reserve</b>	
<b>Policy Area: Business Affairs</b>	
<b>Effective Date: 12/08</b>	<b>Approved by: MOA Board of Trustees</b>
<b>Approved Date: 2/12, 11/15</b>	
<b>Revision Date: 11/15</b>	

### Policy:

- 1) The Reserve Requirement Policy should provide flexibility to allow the MOA to achieve its long-term strategic goals.
- 2) A well-constructed reserve policy will function in any economic environment. The economic environment at any particular time should not be a factor when developing a reserve policy. The perceived level of activities or expenses to be funded in the future should not be a factor when developing a reserve policy.
- 3) Ongoing recurring operating revenues must meet or exceed ongoing recurring operating expenses.
- 4) Budgeted operating revenues should be based on conservative assumptions whereby actual revenues exceed budgeted revenues to the extent achievable. Likewise, budgeted expenses should be based on conservative assumptions whereby actual expenses are less than budgeted expenses to the extent possible.
- 5) Funding recurring expenses from reserves is not sustainable.
- 6) Lowering the reserve target without changing the approach for the reserve policy will only delay dealing with these issues.
- 7) Assuming expenses increase on an annual basis, the reserve must increase every year to meet or exceed the ever-increasing reserve target.
- 8) A fixed reserve target does not take inflation into account.
- 9) The MOA financial condition will always be subject to fluctuations in the market place, sometimes strong and sometimes challenged.
- 10) Dues revenues will fluctuate based on future MOA policies and the external milieu facing physicians. Assuming an increasing dues revenue stream will continue is not assured.
- 11) The MOA will always have challenges, however, when financially strong, the MOA can use reserves to advance strategic time-limited initiatives.
- 12) The optimal situation is to build up surplus reserves, or a savings account, above and beyond the reserve requirement and then encumber those excess funds for a specific project.
- 13) Having excess reserves is a desirable situation and should not necessarily be viewed as a negative event to be corrected.
- 14) Historically, negative returns do occur from investments in equities and fixed income instruments. Reserve surpluses help minimize disruption to operations. It is less disruptive for organizations to set aside funds for reserves from surpluses in years when revenues exceed expenses than to find new sources of funding when the organization is in desperate need.

- 15) Fixed assets are not readily available resources but do comprise a portion of the MOA's Reserve Fund and overall net worth.
- 16) The Reserve Requirement Policy should provide flexibility so that the MOA can achieve its mission.

### **RESERVE REQUIREMENT POLICY**

I. Statement of Purpose:

The general purpose of the Reserve Fund is to

- a. help ensure long-term financial stability of the MOA and
- b. allow flexibility for the MOA to respond to varying economic, environmental and regulatory conditions and changes affecting the MOA's financial position and
- c. assure the ability of the organization to continuously carry out its mission.

The Reserve Fund shall serve to protect the MOA in emergency situations and unforeseen circumstances and also gives the MOA the ability to invest in opportunities that may arise.

II. Definition of Reserve Fund: The Reserve Fund is defined as the MOA's net assets (assets less liabilities). The Reserve Fund includes fixed assets, including the 2445 Woodlake Circle building.

III. If the Reserve Fund is and has been less than 50% of total annual operating expenses at December 31st for two consecutive years, in the absence of extraordinary circumstances, the Board of Trustees must adopt an operational budget that includes a projected surplus by increasing revenues and/or decreasing expenses sufficient to rebuild the Reserve Fund over the following two – four years back to its required reserve level and the Board of Trustees may consider a dues increase and/or a dues assessment to rebuild the Reserve Fund over the following two – four years back to its required reserve level.

IV. Sources: Funds in excess of the amount required for the maintenance of the Reserve Fund constitute "excess reserves." Appropriate use of reserves is explained in section V below.

V. Uses: Use of reserves may be authorized by the Board of Trustees for non-operational strategic activities (including the personnel required for such activities). Expenditures from reserves that have been approved by the Board of Trustees will be encumbered for the specific activity that was authorized. The Board of Trustees has the authority to unencumber previously encumbered funds.

VI. Transition Period: Funding of discretionary activities and personnel from excess reserves shall have a three-year transition period for compliance with this Reserve Requirement Policy.



## MICHIGAN OSTEOPATHIC ASSOCIATION POLICY

<b>Title of Policy: Reimbursement to MOA Delegates Attending the AOA House of Delegates</b>	
<b>Policy Area: Business Affairs</b>	
<b>Effective Date: 8/02</b>	<b>Approved by: MOA Board of Trustees</b>
<b>Approved Date: 9/06, 1/15, 2/16</b>	
<b>Revision Date: 5/10, 2/11, 2/16</b>	

### **Definitions:**

**INTERN:** A DO engaged in the first postdoctoral year of AOA approved training.

**RESIDENT:** An individual engaged in postdoctoral training in an AOA approved specialty beyond the internship-training year.

### **POLICY:**

Unless compensated for cost of attending the AOA House of Delegates (HOD) by another organization, the MOA shall provide Michigan Delegates to the AOA House of Delegates a per diem of \$1,100 for attendance. The MOA may at its discretion reimburse delegates compensated for their attendance by another organization incidental costs not to exceed \$100,

No more than five Michigan Intern/Resident Alternates (with a goal of one alternate per region) to the AOA receive a per diem of \$1,100 total.

No more than a total of seventeen Intern/Residents shall be eligible for compensation for travel, which shall be the lesser of coach airfare or MOA mileage allowance.

MSUCOM Student Delegate and MSUCOM Student/MOA Student Trustee Alternate will be compensated by MSUCOM according to MSUCOM policies.

Delegates and Intern/Resident Alternates will be compensated in a single payment following the AOA H of D meeting. Unless excused by the MOA Caucus Chair, Delegates or Intern/Resident Alternates must be present on the floor during all sessions of the AOA HOD to receive full reimbursement from the MOA.



## MICHIGAN OSTEOPATHIC ASSOCIATION POLICY

<b>Title of Policy: Reimbursement for MOA Meetings</b>	
<b>Policy Area: Financial</b>	
<b>Effective Date: 12/03</b>	<b>Approved by: MOA Board of Trustees</b>
<b>Approved Date: 12/05, 12/08</b>	
<b>Revision Date: 2/12, 2/16</b>	

### **POLICY:**

Attendees will be reimbursed for mileage, which will be calculated with the prevailing MOA mileage allowance.

MOA will pay for attendee's overnight accommodations for the evening prior to the meeting if the attendee is more than 60 miles from the meeting site and cannot drive to the meeting by departing at 8 a.m. the morning of the meeting.

Attendees and staff will be reimbursed for the following:

- 1) Sleeping room for Saturday night only for attendees who live 60 miles or more from where the meeting is taking place.

Necessary incidents will be reimbursed when an expense report is submitted with receipts.



## **MICHIGAN OSTEOPATHIC ASSOCIATION POLICY**

<b>Title of Policy: Reimbursement to the MOCF, the AMOA and the College from Dues</b>	
<b>Policy Area: Financial</b>	
<b>Effective Date: 12/97</b>	<b>Approved by: MOA Board of Trustees</b>
<b>Approved Date: 12/00, 12/03, 12/06, 12/09, 12/13</b>	
<b>Revision Date: 2/16</b>	

### **POLICY:**

1. The Michigan Osteopathic College Foundation (MOCF) and the Advocates for the Michigan Osteopathic Association (AMOA) will be sent a check on a quarterly basis (December 1, March 1, June 1 and September 1) for funds collected in conjunction with the annual MOA dues cycle.
2. All funds that are collected and designated to the osteopathic colleges in conjunction with the annual MOA dues cycle will be disbursed on September 1 for funds collected during the previous dues cycle.
3. Disbursements require approval of the Executive Director.



## **MICHIGAN OSTEOPATHIC ASSOCIATION POLICY**

<b>Title of Policy: President and President-Elect Remuneration</b>	
<b>Policy Area: Financial</b>	
<b>Effective Date: 12/98</b>	<b>Approved by: MOA Board of Trustees</b>
<b>Approved Date: 12/01, 12/04, 12/07, 2/11, 1/15</b>	
<b>Revision Date:</b>	

### **POLICY:**

1. The President shall receive \$300 per MOA Board meeting attended and a \$500 per month stipend.
2. The President-elect shall receive \$150 per MOA Board meeting attended.
3. Payments shall be made quarterly commencing September 1 (representing services provided from June through August).



## **MICHIGAN OSTEOPATHIC ASSOCIATION**

### **EDUCATION POLICIES**

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## MICHIGAN OSTEOPATHIC ASSOCIATION POLICY

<b>Title of Policy: CME Grievance</b>	
<b>Policy Area: Education</b>	
<b>Effective Date: 2/13</b>	<b>Approved by: MOA Board of Trustees</b>
<b>Approved Date: 2/16</b>	
<b>Revision Date:</b>	

### **POLICY:**

The MOA shall accept comment and criticism regarding its CME programs. It shall address and resolve grievances regarding its CME activities. A criticism or concern reported anonymously on CME evaluation forms shall not be deemed a grievance; however, such complaints will be reported to the CME speakers and will be presented to the MOA Education Committee for discussion, validation or resolution as appropriate and reported to the MOA Board of Trustees in the MOA Education Committee Board report. A CME complaint or concern provided in writing or presented verbally by an identified individual registrant of an MOA CME program to an MOA CME official shall be deemed a grievance and shall be forwarded to the MOA Education Committee for resolution; CME speakers involved shall be notified of the concern. The resolution shall be reported to the MOA Board in the MOA Education Committee Board report and followed by a letter to the aggrieved acknowledging the grievance and providing the actions taken to resolve the grievance. If the MOA Education Committee is unable to resolve the issue, it shall be forwarded to the Board of Trustees for final disposition. Where possible and necessary the appropriate changes will be made and recorded in accordance with the MOA policy.



## **MICHIGAN OSTEOPATHIC ASSOCIATION POLICY**

<b>Title of Policy: CME Program Registration Cancellation and Refund</b>	
<b>Policy Area: Education</b>	
<b>Effective Date: 2/13</b>	<b>Approved by: MOA Board of Trustees</b>
<b>Approved Date: 2/16</b>	
<b>Revision Date: 2/16</b>	

### **POLICY:**

Registrants for a Michigan Osteopathic Association continuing medical education program must submit requests for refunds in writing to the Association's office. Requests for refunds must be postmarked at least two weeks prior to the program and will entitle registrant to a full refund less a \$50 processing fee. Refund requests postmarked less than two weeks prior to the program will not qualify for a refund of the registration fees. Program brochures/registration forms and MOA web site shall include this information.



## MICHIGAN OSTEOPATHIC ASSOCIATION POLICY

<b>Title of Policy: Scientific Research Exhibit Submissions</b>	
<b>Policy Area: Education</b>	
<b>Effective Date: 12/13</b>	<b>Approved by: Education Department</b>
<b>Approved Date: 2/16</b>	
<b>Revision Date: 2/16</b>	

### **POLICY:**

The MOA Education Committee may host scientific research exhibit (SRE) or poster competitions during its educational conferences or symposia. The Committee, or a designated subcommittee, shall have responsibility and authority to promulgate rules for participation, including but not limited to, application procedures, competition categories, and designated recognition or reward methodology. It shall establish monetary or other prize awards as permitted within its assigned budget.

The Committee shall recruit SRE participants for the research exhibit competition. For submission of a scientific research exhibit at least one of the participants must be a MOA member in good standing and may include undergraduate osteopathic medical students attending an AOA-accredited college of osteopathic medicine in Michigan, interns, residents, fellows, physicians in practice or in academia in Michigan or physicians active US military service.

The Committee shall establish SRE Judging Panels for each competition. Each panel shall consist of a minimum of three Committee or subcommittee members, and may include other individuals as deemed beneficial by the Committee.

General guidelines:

1. Participants must submit applications and scientific exhibits or posters by deadlines established by the Committee.
2. Participants may submit posters previously presented at a MOA conference to a subsequent MOA conference; however, once a poster received a MOA monetary or ANDY award, no further SRE awards shall be granted (i.e., “showcasing” only).
3. SRE monetary or *Andrew Taylor Still Achievement* (“ANDY”) awards shall be restricted to osteopathic medical students or osteopathic physicians-in-training in Michigan.
4. ANDY awards shall be restricted to poster submissions at the MOA Annual (Spring) Scientific Convention.

**MOA Annual (Spring) Scientific Research Exhibition Prize Awards (subject to annual revision)**

First Place: \$1000

Second Place: \$750

Third Place: \$500

Outstanding Case Report: \$250

People's Choice Award: \$100

Honorable Mention: Non-monetary awards at the discretion of the Judging Panel

*SPECIAL AWARD: THE ANDY: \$1,500 plus a limited edition, commissioned carved crystal piece. At the discretion of the spring Scientific Research Judging Panel, the Andrew Taylor Still Achievement Award (ANDY) may be presented to one outstanding Scientific Research Exhibit poster submitted to the competition at the MOA Annual Scientific Convention reflecting the best of osteopathic medicine principles and practice. There shall be no requirement to award an ANDY each year.*

**MOA Autumn Scientific Research Exhibition Prize Awards (subject to annual revision)**

First place: \$500

Second place: \$300

Third place: \$250

Outstanding Case Report: \$150

People's Choice Award: \$100

Honorable Mention: Non-monetary awards at the discretion of the Judging Panel



## **MICHIGAN OSTEOPATHIC ASSOCIATION POLICY**

<b>Title of Policy: Unlicensed Physician Attendance at MOA Conventions or Conferences</b>	
<b>Policy Area: Education</b>	
<b>Effective Date: 8/12</b>	<b>Approved by: MOA Board of Trustees</b>
<b>Approved Date: 2/16</b>	
<b>Revision Date: 2/16</b>	

### **POLICY:**

As a service, the MOA will, at its sole discretion, permit an unlicensed physician to attend its educational scientific conventions or conferences. An unlicensed physician must register for and pay the non-member cost for a MOA-sponsored CME program. The MOA will provide the individual with an attestation form for actual attendance at each of the CME sessions.



## **MICHIGAN OSTEOPATHIC ASSOCIATION**

### **GOVERNANCE & BOARD OPERATIONS POLICIES**

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## MICHIGAN OSTEOPATHIC ASSOCIATION POLICY

<b>Title of Policy: Antitrust Compliance</b>	
<b>Policy Area: Governance &amp; Board Operations</b>	
<b>Effective Date: 5/09</b>	<b>Approved by: MOA Board of Trustees</b>
<b>Approved Date: 5/13, 2/16</b>	
<b>Revision Date: 2/16</b>	

### BACKGROUND

Antitrust laws are intended to benefit consumers by promoting competition. Competition benefits consumers by driving down the cost of goods and services and encouraging competitors to innovate and provide better quality of goods and services. Under federal and state antitrust laws, competitors are not permitted to “restrain competition” by means of formal or informal agreements and practices that affect the price, production, or distribution of products. The laws may be enforced by the Justice Department, Federal Trade Commission and/or private legal action. In order to deter conduct, the penalties for violation of antitrust laws are severe.

### POLICY:

The MOA shall model its antitrust policy based on the tenets contained in the American Osteopathic Association Antitrust policy with additional considerations for Michigan law.

The MOA shall comply strictly with all laws and regulations applicable with its activities. From time-to-time, the MOA’s activities involve meetings, discussions and cooperative efforts among individuals and organizations that are business competitors. Therefore, it is essential for the AOA to emphasize the ongoing responsibility of the Association, its affiliates and its members in achieving compliance with federal and state antitrust laws.

Through this Policy statement, the Board of Trustees emphasizes the ongoing commitment of the MOA to compliance with the antitrust laws. This Policy shall apply to all of the MOA’s trustees, officers, council or committee members, component societies, and affiliated organizations that participate in the MOA’s activities. To emphasize its commitment to compliance and remind individuals and organizations of its importance, the MOA shall distribute this Policy statement to all MOA Board members, officers, council and committee members, component societies, and affiliated organizations. This statement shall also be available at all MOA meetings.



## **Responsibility for Antitrust Compliance**

The MOA staff and, when appropriate, legal counsel review scheduled programs and activities to ensure their conformity and compliance with the antitrust laws and shall take appropriate steps to avoid discussion topics and activities that are improper or could have unintended implications. Moreover, no trustee, officer, nor MOA member, whether acting in an individual capacity or as an officer, trustee, committee or council member shall be authorized to propose or to implement on behalf of the MOA any program, agreement, or other activity that violates state or federal antitrust laws.

Certain activities of the Association and its members are deemed protected from antitrust laws under the First Amendment right to petition government. The antitrust exemption for these activities, referred to as the Noerr-Pennington Doctrine, protects ethical and proper actions or discussions by members designed to influence: 1) legislation at the national, state, or local level; 2) regulatory or policy-making activities (as opposed to commercial activities) of a governmental body; or 3) decisions of judicial bodies. However, the exemption does not protect actions constituting a "sham" to cover anticompetitive conduct.

Individuals and organizations that participate in MOA meetings and events share equally in the responsibility for ensuring antitrust compliance. They should be aware of the types of conduct that could be found to be anticompetitive and adhere to guidelines designed to avoid it. Accordingly, MOA component societies, affiliates and members should exercise appropriate discretion and judgment by avoiding all discussions and activities that involve or may involve improper subject matter and/or procedures.

The following procedures are intended to provide guidance regarding conduct at MOA meetings and events:

### **Meeting Procedures**

MOA meetings may involve discussions and activities of individuals and entities that are usually competitors, thereby creating an environment where improper discussions and agreements could arise. Consequently, at MOA meetings, the following issues will not be discussed without review and approval of legal counsel:

1. Pricing issues, such as the prices charged to consumers and/or third- party payors for medical services, including current or future prices; increases or decreases in prices; the standardization or stabilization of prices. For example, there should not be discussions concerning physicians' current or future fee schedules or costs and other financial matters that could affect fees. Nor should there be any discussion concerning fair income levels from a practice.
2. Issues regarding specific vendors or groups or classes of patients. For example, participants at an event or meeting should not discuss plans or other intentions to boycott or otherwise refuse to work with a particular HMO, PPO, third-party provider or with specific groups or classes of patients.

No recommendations or actions should be taken with regard to antitrust sensitive subjects, without the advice of the MOA's legal counsel.

As part of the effort to ensure compliance with antitrust laws and protect the MOA, MOA members and affiliated organizations from potential liability, MOA meetings shall be conducted consistent the following procedures:

1. A written agenda that identifies the purpose of the meeting and the anticipated topics of discussion will be prepared and distributed prior to the meeting.
2. Meetings should not take place unless properly called. Secret meetings and sessions should be avoided.
3. Following each meeting, accurate minutes shall be prepared and distributed to the participants. The minutes shall be approved at the next meeting of the committee.
4. Participants should consult with their own legal counsel or MOA staff before raising any matter or making any statement that may involve competitively sensitive information.
5. Speakers at committees, educational meetings, or other business meetings of the Association shall be informed that they must comply with the Association's antitrust policy in the preparation and the presentation of their remarks.
6. If a participant raises a topic of doubtful legality for discussion, that person should be advised that the subject is not proper for discussion. Where there are concerns by members, component societies, or affiliated organizations about a topic of discussion, such concerns should be brought to the attention of the presiding individual (e.g. committee chair) and appropriate staff persons from the MOA (i.e., the Executive Director) as soon as possible.
7. Persons with concerns about discussion during a meeting shall bring the concerns to the attention of the individual presiding over the meeting as soon as possible. If the discussion or activity is not terminated or otherwise resolved satisfactorily, the concerned person should leave the meeting and advise appropriate persons from the MOA of the concerns.

Compliance with these guidelines involves not only avoiding potential antitrust violations, but also avoiding any actions that could be construed as a violation of the antitrust laws. These guidelines only provide an overview of prohibited actions. Specific questions should be directed to your own legal counsel or the MOA's legal counsel.



## MICHIGAN OSTEOPATHIC ASSOCIATION POLICY

<b>Title of Policy:</b> AOA Mentor of the Year	
<b>Policy Area:</b> Governance & Board Operations	
<b>Effective Date:</b> 12/09	<b>Approved by:</b> MOA Board of Trustees
<b>Approved Date:</b> 2/13, 2/16	
<b>Revision Date:</b> 2/16	

### INTRODUCTION:

The AOA Mentor Recognition Program was developed to honor DOs who help shape the future of the osteopathic medical profession through their involvement with osteopathic medical students and new physicians in practice. Through their service, mentors bring a sense of pride to the profession and promote the art and science of osteopathic medicine.

The AOA Mentor of the Year Selection Committee selects the finalist. The AOA Mentor Recognition Program enables members of the osteopathic family to nominate the mentor who has had a profound impact on their career. Nominations are accepted year-round from students, interns, residents, DOs, AOA Affiliates, or any other member of the osteopathic professional family. The nominee must be a member in good standing of the AOA.

Each calendar year the nomination submission deadline is the last day of the AOA's annual House of Delegate meeting. During the last week of July AOA staff gathers, collates each of the nominations, and distributes them to the divisional and specialty groups and student groups. The deadline to receive "society-backed" nominees from affiliates and student's groups is in August. Additionally, nominations are sent to the Mentor of the Year Selection Committee.

In the initial phase of the nomination process, affiliates are asked to nominate one or several qualified DOs who are members of their organization following the criteria provided. In the second phase of the nomination process, all the nominees from affiliates, as well as individual nominations, are separated into each of the following categories: state of residency, specialty (if applicable), and college of osteopathic medicine from which the mentor graduated (if applicable). Executive Directors will receive all nominees pertaining to their respective organization to evaluate and chose one "society-backed" nomination to be named AOA Mentor of the Year. This recommendation will be submitted along with all the other submissions to the Mentor of the Year Selection Committee for consideration.

### POLICY:

The MOA shall respond to requests from the American Osteopathic Association (AOA) for

nominations for AOA Mentor of the Year Award. The Board of Trustees shall select, by a simple majority vote, a single state-backed nominee for submission to the AOA.

**PROCEDURE:**

- 1) Promptly following receipt by the Executive Director of the AOA request to vote for candidates for the Mentor of the Year Award, the Executive Director shall forward the request to all Board members.
- 2) The communication shall include a ballot to vote, sign and return by deadline to the MOA office.
- 3) Each Board member shall have the right to vote for one AOA Michigan Mentor of the Year candidate.
- 4) Staff shall tally the votes, confirm the nomination with the MOA President and forward the final result to the AOA as the Michigan endorsed candidate for the Award.



## MICHIGAN OSTEOPATHIC ASSOCIATION POLICY

<b>Title of Policy: AOA House of Delegates – Procedures and Responsibilities of Delegates</b>	
<b>Policy Area: Governance &amp; Board Operations</b>	
<b>Effective Date: 12/98</b>	<b>Approved by: House of Delegates</b>
<b>Approved Date: 12/01, 12/04, 12/07, 2/11, 1/15, 2/16</b>	
<b>Revision Date: 2/16</b>	

### **POLICY:**

#### **AOA House of Delegates - Procedures and Responsibilities of Delegates:**

1. The MOA President shall serve as the chief presiding officer for the MOA Delegation to the American Osteopathic Association (AOA) House of Delegates (HOD). If or when the President is unable to preside, the President-elect shall serve in that role.
2. The MOA shall require attendance by all MOA delegates (elected or appointed) certified by AOA HOD Credentials Committee to serve as AOA delegates at each MOA Delegation Caucus meeting convened including the day prior to the beginning of the AOA HOD as well as subsequent Caucus meeting convened during the HOD.
3. The MOA President shall assign specific AOA HOD resolutions to each delegate. The delegate shall review, analyze and provide a written recommendation for each of the assigned resolutions to: 1) adopt as written, 2) adopt with proposed revisions, or 3) disapprove. For resolutions with a recommendation to adopt with revisions or to disapprove, the assigned delegate shall present the recommendation to the caucus for deliberation and decision. [Delegates must research assigned resolutions to the extent the delegate can speak knowledgeably on the resolution at the delegation meeting, appropriate AOA HOD reference committees and, if necessary, the AOA HOD floor.]
4. Delegates must attend the sessions of the HOD on all convened days.
5. When assigned by the President, delegates must attend relevant reference committee meetings and present the delegation’s recommendations concerning specific resolutions
6. Unless specifically released by a delegation vote for individual expression, on the House floor all delegates shall support official positions taken by the Michigan delegation.
7. The delegation leader (President) will assign specific delegates to provide comment or speak to resolutions on the House floor. Other delegates must seek approval from the President prior to addressing the House.
8. The President must approve deviations from any of the above procedures.



## MICHIGAN OSTEOPATHIC ASSOCIATION POLICY

<b>Title of Policy: AOA House of Delegates – Replacement of Delegates</b>	
<b>Policy Area: Governance &amp; Board Operations</b>	
<b>Effective Date: 10/99</b>	<b>Approved by: House of Delegates</b>
<b>Approved Date: 12/02, 12/05, 12/08, 2/12, 2/16</b>	
<b>Revision Date: 2/16</b>	

### **POLICY:**

Article V Section 11 of the bylaws states for the American Osteopathic Association [AOA] House of Delegates [HOD]: “Election: The Board of Trustees shall elect the number of delegates to the American Osteopathic Association House of Delegates equal to 50% of the total number of delegates from the Association plus one. The remainder shall be elected by the majority vote of the House of Delegates of the Association at the annual meeting”.

The MOA Board delegates responsibility and authority to the MOA President, or the President’s designee, to appoint a replacement delegate for any MOA HOD-elected or Board- elected delegate to the AOA HOD unable to fulfill the responsibilities of that position.

In appointing a replacement, the President, in consultation with the MOA Speaker, shall review the list of AOA delegate nominees: If a MOA HOD-elected AOA delegate is unable to serve, the President should give priority for appointment of a MOA HOD-nominated alternate taking into account geographic region; if a Board of Trustees-elected delegate is unable to serve, the President shall exercise discretion considering the qualifications of the delegate being replaced.



## MICHIGAN OSTEOPATHIC ASSOCIATION POLICY

<b>Title of Policy: Blue Cross Blue Shield of Michigan Board Nominee and Appointee</b>	
<b>Responsibility</b>	
<b>Policy Area: Governance &amp; Board Operations</b>	
<b>Effective Date: 12/98</b>	<b>Approved by: MOA Board of Trustees</b>
<b>Approved Date: 12/01, 12/04, 12/09, 2/13, 2/16</b>	
<b>Revision Date: 2/06, 12/14, 2/16</b>	

### POLICY:

1. *Qualifications for nomination:*
  - a. The member nominated to represent the Michigan Osteopathic Association on the Blue Cross Blue Shield of Michigan (BCBSM) Board must serve or have served as a member of the Michigan Osteopathic Association Board of Trustees.
  - b. It is preferred that the nominee has served as chairperson of the Michigan Osteopathic Association Department of Insurance.
2. *Term of service:* If the MOA nominee has been appointed to the BCBSM Board, that person shall serve a term that has been established by the BCBSM Board.
3. *Reporting responsibility:* A MOA nominee appointed to serve the BCBSM shall provide written reports, within parameters permitted by the Blue Cross Blue Shield Board, to update the Michigan Osteopathic Association Board on relevant issues to the MOA membership. The nominee shall agree, prior to submission of the nomination, if appointed by the BCBSM Board, to attend any scheduled MOA Board of Trustees meeting at the request of the MOA Board.



## MICHIGAN OSTEOPATHIC ASSOCIATION POLICY

<b>Title of Policy: Board Department Directors</b>	
<b>Policy Area: Governance &amp; Board Operations</b>	
<b>Effective Date: 03/00</b>	<b>Approved by: MOA Board of Trustees</b>
<b>Approved Date: 12/03, 12/06, 2/10, 1/14</b>	
<b>Revision Date: 2/16</b>	

### **PURPOSE:**

To provide guidelines for effective department leadership

### **POLICY:**

The MOA bylaws provide at Article VI Section 3 that the Board may create one or more departments and that the President designates a Board member to serve as department chair. By policy the board assigns the department scope of services.

At the first Board meeting following the MOA Annual House of Delegates, the newly elected president shall appoint department directors<sup>2</sup> (chairs)

Department Directors shall:

1. Be a member of the MOA Board of Trustees and attend committee meetings in their department whenever feasible.
2. Supervise and be responsible and accountable for activities, goals and objectives assigned to the department or its committees. This includes gathering pertinent business, financial, service, and operations information; identifying and evaluating trends and options; choosing a course of action; and defining objectives, and evaluating outcomes.
3. Establish an annual department work plan aligned with Board or House of Delegates approved strategic aims. It shall include objectives with performance metrics, timelines or deadlines for tasks; assignment of responsibilities to committees or appointment of ad hoc committees with specific goals and timelines, setting expectations for committee member participation; and other aspects of standard operational management.
4. Ensure that assigned committee chairs<sup>3</sup> know committee responsibilities and expected accomplishments and hold them accountable for achieving those established goals and objectives. A department director may serve as chair of departmental committees.

<sup>2</sup> For clarity, the term Department “Director” is used rather than “Chair” to delineate between department and committee leadership.

<sup>3</sup> Committee chairs shall be the committee presiding officer and make decisions within guidelines set by the Board,



5. Enhance volunteer staffing by recruiting, selecting, orienting, and training MOA member volunteers to actively participate in departmental committees and developing personal growth opportunities for those members.
6. Manage the departmental budget. Achieves financial objectives by forecasting requirements; preparing an annual budget; scheduling expenditures; analyzing variances; initiating corrective actions. If funds will be needed, prepares a written, detailed budget request for consideration; submits budget requests to the secretary/treasurer for board action on the proposed expense.
7. Ensure maintenance of all relevant minutes, materials or correspondence related to the work of the department or its committees including retention and distribution as required and appropriate for the effective and efficient execution of the department responsibilities and the success of the Association.
8. Submit written reports of department activities, including requests for Board or House of Delegates action items, to the Board prior to each Board meeting and an annual summary to the membership at the MOA Annual House of Delegates Meeting. The reports shall contain in addition to the committee reports, specific answers and explanations of work done in response to the directives and policies laid down the previous year by action of the Board of Trustees and the House of Delegates.

To support Department Directors in their activities and responsibilities for oversight of departmental objectives and committee(s) functions:

1. MOA staff will provide a copy of the meeting agenda/notices for each committee meeting in the Director's department.
2. MOA staff will provide a copy of the draft (unapproved) minutes of each committee meeting within one week following the meeting as well as final approved minutes within one week of the meeting at which the committee approves the minutes.
3. MOA staff will assist the department director, as needed, in submitting departmental reports to board prior to each board meeting as well as an annual report for the Board and MOA House of Delegates.

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Department Directors, or committee.



## MICHIGAN OSTEOPATHIC ASSOCIATION POLICY

<b>Title of Policy: Board Nomination and Responsibility of Individuals Appointed to Represent MOA at External Organizations</b>	
<b>Policy Area: Governance &amp; Board Operations</b>	
<b>Effective Date: 12/98</b>	<b>Approved by: MOA Board of Trustees</b>
<b>Approved Date: 12/01, 12/04, 12/07, 2/14, 2/16</b>	
<b>Revision Date: 2/16</b>	

### **PURPOSE:**

*Nomination of MOA Member as appointee to External Boards, Committees, Councils, Task Forces, or Agencies*

### **POLICY:**

The MOA Board shall establish standards, qualifications, and a due diligence process to identify, select, and recommend MOA members as nominees to serve on external organization governance boards, committees, councils, task forces or agencies requesting service by a MOA member representative. A recommended nominee must be a MOA member in good standing. Assessments of nominees shall include evaluation of their qualifications for service, including, but not limited to, education, training, and experience related to the scope of services provided by the requesting organization. The availability and duration of service based on positions held within the MOA may be a consideration in the selection process as well as the duration of service on the requesting governing board, committee, council task force, or agency. All nominees must comply with the requirements of the MOA *Conflict of Interest Policy* and must disclose all potential conflicts of interest prior to the MOA forwarding their nomination to the requesting organization. The MOA Board may use general vetting procedures or may, at its discretion, develop specific criteria for selected organizations as part of this policy.

#### *Nomination: General Considerations*

1. Current knowledge about MOA including relevant policy positions
2. Service experience on other boards, relevant committees, task forces or agencies for requesting or similar organizations
3. Desire to serve in the requested position of the requesting organization
4. Specific skills or knowledge the nominee can provide to the requesting organization
5. Understanding of MOA's expectations related to that board or other service
6. Commitment of time, effort and active participation
7. Relevant experience/expertise related to management, leadership, performance, strategic goal setting, or accountability

8. Relevant experience/expertise related to innovation, initiative, participation, persuasion and building relationships, planning, presentation, communication, teamwork, and valuing diversity.

*Responsibility:* The nominee shall agree to attend and participate in the meetings or other activities of the requesting organization, submit timely written reports describing the appointment and related activities to the designated MOA department, committee, council, or, as appropriate to the Board, and for inclusion, in their annual reports to the House of Delegates.



## MICHIGAN OSTEOPATHIC ASSOCIATION POLICY

<b>Title of Policy: Board of Trustees Annual Self-Assessment</b>	
<b>Policy Area: Governance &amp; Board Operations</b>	
<b>Effective Date: 12/02</b>	<b>Approved by: MOA Board of Trustees</b>
<b>Approved Date: 12/05, 12/08, 2/10, 1/14, 2/16</b>	
<b>Revision Date: 2/16</b>	

### **PURPOSE:**

To provide the Board with an annual opportunity to examine how it is operating and to make suggestions for improvement

### **POLICY:**

The Board will annual evaluate the effectiveness and efficiency of the Board as a whole, board leadership, and organizational subdivision such as committees or task force. The intent is to provide constructive input for the improvement of the Board as a unit rather than an assessment of any individual Trustee. Key elements evaluated include governance charter, expectations of officers, trustees, and roles of department, committee or council chairs, achievement of board-specific improvement objectives from prior reviews, and suggestion for improvements to the content and format of information provided to the Board. The Board will consider the consolidated assessment results and identify board-specific improvement objectives for the following year's evaluation.

The Board shall develop and implement a board effectiveness assessment process under the leadership of the President. The President may request research support from the Executive Director in gathering sample tools and determining best practices. Each trustee shall participate actively in the Board's assessment process.



## MICHIGAN OSTEOPATHIC ASSOCIATION POLICY

<b>Title of Policy: Committee Chair Responsibilities</b>	
<b>Policy Area: Governance &amp; Board Operations</b>	
<b>Effective Date: 2/16</b>	<b>Approved by:</b>
<b>Approved Date: 2/16</b>	
<b>Revision Date:</b>	

### PURPOSE:

To provide guidelines for effective MOA committee leadership

### POLICY:

Each committee chair (or co-chairs jointly) shall establish an annual committee work plan consistent with strategic aims promulgated by the board and the sponsoring department. It shall include objectives with performance metrics, timelines or deadlines for tasks, assignment of responsibilities to committee members or appointment of subcommittees, task forces or work groups, with specific goals and timelines, setting expectations for committee member participation, and other aspects of standard operational management.

Duties and responsibilities include, but are not limited to:

1. Manage meetings
  - Schedule dates, times and locations for meetings. If feasible, schedule tentative meeting dates for the operational year
  - Ensure meeting are convened in accordance with the MOA bylaws, strategic plan or similar mandates, and are consistent with the committee/workgroup terms of reference<sup>4</sup>
  - Establish and confirm an action agenda for each meeting. In formulating the agenda, ensure that members presenting reports, particularly those with action items, commit to attend the meeting.
  - Ensure agenda and relevant documents are distributed to committee (workgroup) members at least 3 (preferably 7) days prior to the meeting.
  - Officiate and conduct meetings
  - Provide sufficient meeting time to adequately discuss agenda items
  - Ensure agenda discussion remains on topic, productive and professional
  - Promptly edit the minutes to ensure they are complete, accurate, retained, distributed to members, and reviewed with approval at the next committee meeting
  - Maintain attendance records for all meetings
2. Lead and manage the committee charge

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<sup>4</sup> Each committee should have a Terms of Reference (ToR) document that, at a minimum, describes the purpose, scope and authority of the committee (see *Committee Objectives and Effectiveness Policy*).

- Provide leadership to ensure that committee members acknowledge their obligation and that the committee complies with responsibilities within its scope
  - Communicate assignments to each committee member and confirm understanding
  - Coordinate and cooperate with other committees, workgroups, or departments
  - For department chartered committees: Submit to the department director, at least annually unless the committee charter requires them more frequently, written reports or minutes, including a comprehensive summary of committee discussions, with documented recommendations and decisions at least two weeks before scheduled Board meetings. [Department Board notifications or action item requests will be based on committee reports.]
  - For board chartered committees: Submit to the Board or, if so designated, the Executive Committee, at least annually unless the committee charter requires them more frequently, written reports, including a comprehensive summary of committee discussions, with documented recommendations and decisions at least two weeks before scheduled Board meetings. [Board action will be determined and discussion items placed on the agenda as necessary based committee reports.]
  - A committee chair shall complete and submit to department directors an annual review of the committee's goals, objectives, and outcome metrics to determine committee and committee member effectiveness.
3. Manage committee budget
- For department chartered committees: Prepare and submit to the department director a written, detailed budget request for funds needed to achieve objectives, request for consideration
  - For board chartered committees: Prepare and submit to the secretary/treasurer budget requests for funds in excess of those allocated by the Board.
  - Manage or authorize all proposed expenditures; financial commitments must have prior Board budget approval.



## MICHIGAN OSTEOPATHIC ASSOCIATION POLICY

<b>Title of Policy: Committee Objectives and Effectiveness</b>	
<b>Policy Area: Governance &amp; Board Operations</b>	
<b>Effective Date: 2/16</b>	<b>Approved by:</b>
<b>Approved Date: 2/16</b>	
<b>Revision Date:</b>	

### PURPOSE:

To create effective and efficient MOA committees with clearly defined authority, responsibility and objectives.

### DEFINITIONS:

Standing Committee: A committee authorized by the MOA by-laws or other governance policy and chartered by the Board. These committees exist and function more or less on a permanent basis (for example, finance, education, or executive committee).

Ad hoc Committee: A committee appointed or chartered by the Board for a particular purpose or on a short-term basis. The committee disbands when assignment complete.

Advisory Committee: A committee, either standing or ad hoc, set up at the request of the Board.

### POLICY:

Each committee should have a Board or Department approved Terms of Reference (ToR) document that, at a minimum, describes the committee purpose, scope and authority. This document shall provide a written roadmap for the committee and contain clear and specific information on the organizational structure of the committee, aims and objectives, reporting responsibility, membership, and meeting logistics. The typical sections of a ToR document are designated below. Each section needs to be customized to the unique needs of the specific committee. The more formal a committee, the greater the need for prescribed information and instructions.

*At the discretion of the committee chair, each committee type may form sub-committees or workgroups if workloads are extremely heavy or complex.*

Terms of Reference should include:

#### **Committee Name**

Official name of the committee or workgroup

**Type**

Delineate: standing, ad hoc (special project) or advisory (related to the Board or another committee or project)

**Purpose**

Describe the reason the committee was created and what the committee is expected to do

**Scope**

Describe succinctly the committee's range of activities or boundaries

**Authority**

Describe the committee's decision-making authority (decides, approves, recommends, etc.)

**Membership**

Includes membership categories, number of members including ex-officio, method of appointment, and how chair and/or co-chair appointed.

**Meeting arrangements**

Meeting frequency, location, procedures (if applicable), quorum, details about agendas and minutes, and communication between meetings.

**Reporting**

Describe the committee's internal and external reporting hierarchy including format and frequency

**Resources and budget**

Describe resources, including funding, available to the committee

**Deliverables**

Describe the requested/required committee output

**Review**

State the ToR review frequency and review interval





## MICHIGAN OSTEOPATHIC ASSOCIATION POLICY

<b>Title of Policy: Confidentiality</b>	
<b>Policy Area: Governance &amp; Board Operations</b>	
<b>Effective Date: 2/16</b>	<b>Approved by:</b>
<b>Approved Date: 2/16</b>	
<b>Revision Date:</b>	

### **PURPOSE:**

To prevent confidential information disclosure without Board authorization

### **SCOPE:**

This policy applies to all members of the Officers and Board Trustees, Board committees or task forces, and MOA management and staff.

### **POLICY:**

Board of Trustees

1. Officers and Board trustees owe the MOA a duty of confidence not to disclose or discuss with another person or entity, or to use for their own purpose, confidential information concerning the MOA business affairs received in their officer or trustee capacity unless authorized by the Board.
2. An officer or board trustee shall make no statement regarding any aspect of MOA to the press or public, unless authorized by the Board. Notwithstanding that information disclosed or matters dealt with in an open session are not confidential, no officer or trustee shall make any statement to the media or the public in their capacity as an officer or trustee unless such statement has been authorized by the Board.
3. Subject discussed during open sessions of the Board are not confidential.
4. All matters that are the subject of closed or executive sessions of the Board are confidential until disclosed in an open session of the Board.
5. The Secretary-treasurer or designee shall record the minutes of closed or executive sessions of the Board or, if the secretary or designee is not present, by a trustee designated by the President or designated presiding officer.
6. All minutes of closed or executive sessions of the Board shall be marked confidential and shall be handled in a secure manner.

7. All matters before a Board committee or task force shall remain confidential unless they have been determined not to be confidential by the chair of the committee or task force.
8. All minutes of committee and task force meetings of the Board shall be marked confidential and shall be handled in a secure manner.



## MICHIGAN OSTEOPATHIC ASSOCIATION POLICY

<b>Title of Policy: Conflict of Interest</b>	
<b>Policy Area: Governance &amp; Board Operations</b>	
<b>Effective Date: 4/02</b>	<b>Approved by: MOA Board of Trustees</b>
<b>Approved Date: 12/05, 12/08, 2/12, 2/16</b>	
<b>Revision Date: 2/16</b>	

### PURPOSE:

1. To protect the Michigan Osteopathic Association (MOA) interests when considering a transaction or arrangement that might benefit the private interests of an Interested Person as defined in this policy (i.e., Officer, Trustee, or member of a department, committee, or council with Board delegated power)
2. To supplement, but not replace, any applicable state and federal laws governing conflicts of interest applicable to nonprofit and charitable organizations

### DEFINITIONS

1. **Interested Person** -- Any trustee, officer, or member of a department, committee or council with governing board delegated powers, that has a direct or indirect financial interest, as defined below, is an interested person.
2. **Immediate Family** – spouse, children, grandchildren, great grandchildren, spouses of children, grandchildren and great grandchildren.
3. **Board** – The Association’s Board of Trustees
4. **Department** – A department established by the Board
5. **Committee** – A committee of the Board or established within a Department
6. **Council** – A council established in the bylaws or by the Board
7. **Compensation** – Direct or indirect remuneration as well as gifts or favors that are not insubstantial
8. **Entity** – any corporation, partnership, Limited Liability Company, trust, association or other legal entity.
9. **Financial Interest** – An Interested Person or Immediate Family member has a financial

interest if the person has, directly or indirectly, through business, investment, or family:

- a. An ownership or investment interest in any entity with which MOA has a transaction or arrangement,
- b. A compensation arrangement with MOA or with any entity or individual with which MOA has a transaction or arrangement, or
- c. A potential ownership or investment interest in, or compensation arrangement with, any entity or individual with which MOA is negotiating a transaction or arrangement. Compensation includes direct and indirect remuneration as well as gifts or favors that are not insubstantial.

A financial interest is not necessarily a conflict of interest. A person who has a financial interest may have a conflict of interest only if the Board or Executive Committee decides that a conflict of interest exists, in accordance with this policy.

**POLICY:**

The Michigan Osteopathic Association (MOA) strives to maintain the highest ethical standards in all policies, procedures and programs and to avoid any conflict of interest.

Conflict of interest may be of varying forms or degrees and may be real or apparent. To address actual and potential conflicts of interest, the following procedures will be allowed:

**1. Disclosure**

When an Interested Person is affiliated with an organization seeking to provide services, equipment or facilities to the corporation or when an Interested Person has any duality of interest or possible conflict of interest, real or apparent, such affiliation or conflict of interest should be disclosed to the Board of Trustees or, if appropriate, to the presiding leader of a department, committee or council, and made a matter of record, either when the interest becomes a matter of Board action or as part of a periodic procedure considered to exist when an Interested Person has any other substantial interest or dealings with the organization.

Interested Persons shall disclose board, officer and other affiliations with organizations that are competitive with the MOA. Examples of competitive organizations include those seeking osteopathic physicians as members and/or that are in the business of providing continuing medical education or other goods or services that are the same or are competitive with those offered by MOA or one of its subsidiaries.

**2. Voting**

Any Interested Person having a duality of interest or possible conflict of interest on any matter should not vote or use his or her personal influence on the matter, and should not be counted in determining a quorum for the meeting at which the matter is voted upon even though permitted by law. They may recuse themselves at any time from involvement in any decision or discussion in which the individual believes he or she has or may have a conflict of interest, without going through the process for determining whether a conflict of interest exists. The minutes of the meeting should reflect that the disclosure was made; that the

interested member abstained from voting, and that his or her presence was not counted in determining a quorum.

### **3. Statement of Position**

The foregoing requirements should not be construed to prevent an Interested Person from stating his or her position on the matter under consideration, nor from answering questions of other Board members relating to the matter.

### **4. Records of Proceedings**

The minutes of the Board, departments, committees and councils with board delegated powers shall contain:

- a. The names of the persons who disclosed or otherwise were found to have a financial interest in connection with an actual or possible conflict of interest, the nature of the financial interest, any action taken to determine whether a conflict of interest was present, and the decision as to whether a conflict of interest in fact existed.
- b. The names of the persons who were present for discussions and votes relating to the transaction or arrangement, the content of the discussion, including any alternatives to the proposed transaction or arrangement, and a record of any votes taken in connection with the proceedings.

### **5. Board Duty of Good Faith**

Board members and officers shall exercise the utmost good faith in all transactions touching upon their duties to the corporation and its property. In their dealing with and on behalf of the corporation, they shall be held to a strict rule of honest and fair dealing between themselves and the corporation. They shall keep confidential information divulged or discussed in executive session or otherwise received as confidential information and shall not reveal such information to third parties without the express written consent of the Board. They shall not use their positions, or knowledge gained from their positions, in a way that a conflict may arise between their own personal interest and that of the corporation. Where a Board member or officer is affiliated with an organization seeking to provide services, equipment or facilities to the corporation, the Board shall use reasonable efforts to ascertain that a more beneficial arrangement could not have been obtained. The duty of good faith may prevent a Board member from serving as an officer or employee of an organization that is competitive with MOA. When this is the case shall be determined by the Board following disclosure or discovery on a case-by-case basis.

### **6. Annual Statements**

- a. Each Interest Person serving on the Board or Department, Committee, or Council with Board delegated powers shall annually sign a statement that affirms such person:
  1. Has received a copy of the conflict of interest policy,
  2. Has read and understands the policy,
  3. Has agreed to comply with the policy, and
  4. Understands MOA is a non-profit entity and in order to maintain its federal tax exemption it must engage primarily in activities that accomplish one or more of

its tax-exempt purposes.

- b. If at any time during the year, the information in the annual statement changes materially, the Interested Party shall disclose such changes and revise the annual disclosure form.
- c. The Executive Committee shall regularly and consistently monitor and enforce compliance with this policy by reviewing annual statements and taking such other actions as are necessary for effective oversight.

## Michigan Osteopathic Association

### Annual Conflict of Interest Statement

Name: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(Please print)

Position:

Trustee?  Yes  No Officer?  Yes  No

Department, Committee or Committee member?  Yes  No

*Please disclose any employment, directorship or professional interest or other affiliation which you or a member of your immediate family may have in any organization that provides or is seeking to provide goods and services to MOA or that has any other relationship with MOA that may give rise to a possible conflict of interest between you and MOA. (If none, enter "none" on the first line.)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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Reminder: If at any time there is a matter under consideration that may give rise to a direct or indirect conflict or duality of interest, it is your obligation to disclose the facts to the Board of Trustees, to abstain from voting and to refrain from using your personal influence on the matter.

I have received a copy of the MOA *Conflict of Interest Policy*. I have read and understand the policy.) I agree to comply with the policy. I understand that MOA is a non-profit organization and in order to maintain its federal tax exemption it must engage primarily in activities that accomplish one or more of tax-exempt purposes.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_



## MICHIGAN OSTEOPATHIC ASSOCIATION POLICY

<b>Title of Policy: Endorsement of Company, Product or Service</b>	
<b>Policy Area: Governance &amp; Board Operations</b>	
<b>Effective Date: 2/16</b>	<b>Approved by:</b>
<b>Approved Date: 2/16</b>	
<b>Revision Date:</b>	

### **PURPOSE:**

To provide guidance for appropriate deliberation prior to MOA endorsement of any company, vendor, product, or service

### **POLICY:**

After approval by the Board of Trustees, the MOA may grant official MOA endorsement, to a specific, outside company, agency, product, or service. All endorsement agreements/contracts must contain an indemnification or limitation of liability clause that relieves the Association of any liability.

1. *Purpose of Endorsements:* The purpose of endorsing goods, products, or services through the MOA shall be to provide a tangible membership benefit. This benefit should be available to members solely through their membership in MOA and not to the general public.
2. *Value of Endorsements:* Because access to osteopathic physicians in Michigan through MOA has a demonstrated value to all MOA advertisers and vendors, MOA will provide endorsed businesses preferred advertising space in its publications, and preferred exhibit space at its conferences or conventions. At its discretion MOA may deem materials provided by endorsed businesses appropriate for distribution to members and permit distribution of information by MOA through use of its membership database.
3. *Endorsement Proposals:* Businesses or individuals seeking to receive endorsement through MOA must be or become MOA Business Associate members. All proposals must be submitted in written form and clearly delineate the responsibilities of the business, or individual, and the Association. All proposals for endorsement must include:
  - a. An explanation of how the business, products or services will benefit MOA members
  - b. An agreement to participate or advertise in MOA publications, conferences and conventions
  - c. Details any conditions impacting the cooperative venture between the business, or individual, and MOA
4. *Endorsement Approval Authority:* MOA will designate staff to receive, negotiate terms and conditions of written proposals for business or individual endorsements or requests to



become MOA Business Associates and forward recommendations to the Membership Department for action. At no time will it consider verbal agreements. Following receipt of the written proposal, the Membership Department will review and, if recommended for endorsement, forward to the Executive Committee for review and recommendation. If endorsed, the Executive Committee will forward to the Board for final review and decision. Alternatively, the Michigan Osteopathic Association Service Corporation (MOASC) may review a proposal and recommend consideration by the MOASC Board. Approval for endorsement will require a majority vote by the respective full board. Both the MOA or MOASC President and the Executive Director must sign all approved agreements. The Membership Committee or MOASC will review all of their endorsement agreements annually, unless a multiyear agreement, in which case the review shall occur at least ninety days prior to expiry, with recommendations to the respective full board for renewal or cancellation.



## MICHIGAN OSTEOPATHIC ASSOCIATION POLICY

<b>Title of Policy:</b> Executive Director/Chief Operating Officer	
<b>Policy Area:</b> Governance & Board Operations	
<b>Effective Date:</b> 2/16	<b>Approved by:</b>
<b>Approved Date:</b> 2/16	
<b>Revision Date:</b>	

### **POLICY:**

The association shall employ an Executive Director/Chief Executive Officer whose term of employment, salary, and benefits shall be determined by the Personnel Committee. The individual shall have the responsibility for the management and direction of all operations, programs, activities, and affairs of the association, including employment and the determination of compensation of members of the staff and supporting personnel, functioning within the framework of the overall budget approved by the Board. He/she shall have such other duties as may be prescribed by the Personnel Committee. He/she shall not be entitled to vote, unless appointed by the President to serve in a particular board or committee role. The Executive Director/Chief Executive Officer shall be bonded in an amount satisfactory to the Personnel Committee at the expense of the association.



## MICHIGAN OSTEOPATHIC ASSOCIATION POLICY

<b>Title of Policy: Frank J. McDevitt, D.O., Lifetime Achievement Award</b>	
<b>Policy Area: Governance &amp; Board Operations</b>	
<b>Effective Date: 4/5/05</b>	<b>Approved by: MOA Board of Trustees</b>
<b>Approved Date: 12/08, 2/12, 2/16</b>	
<b>Revision Date: 2/16</b>	

### **POLICY:**

At its sole discretion the MOA Board of Trustees may present the Frank J. McDevitt, DO Lifetime Achievement Award to an individual on such occasions as may be warranted in recognition of on-going efforts to the improvement of the human condition that deserve recognition by the Osteopathic Profession. The award shall not be granted in recognition of the attainment of an elected office, but the attainment of any office may be considered.

Nominee evaluation criteria may include, but not be limited to:

- Active or Life Professional MOA Member in good standing
- At least 25 years of membership in the MOA
- Significant impact on osteopathic medicine as a discipline
- Impact on osteopathic medicine in the community
- Impact on the MOA
- Lifetime involvement in local, state and/or national osteopathic associations or Foundation activities
- Provides compassionate and comprehensive health care service on a continuing basis
- Demonstrates community involvement through activities that enhance quality of life
- Exemplifies a credible role model as a professional in the science and art of medicine
- Fosters the development and/or recruitment of new physicians in osteopathic medicine
- Demonstrates a balance between career and family



## MICHIGAN OSTEOPATHIC ASSOCIATION POLICY

<b>Title of Policy: Invitations to MOA Board Functions</b>	
<b>Policy Area: Governance &amp; Board Operations</b>	
<b>Effective Date: 12/97</b>	<b>Approved by: MOA Board of Trustees</b>
<b>Approved Date: 12/00, 12/03, 12/06, 12/09, 2/13, 2/16</b>	
<b>Revision Date:</b>	

### **POLICY:**

The MOA president shall have discretionary authority to invite individuals to attend MOA functions such as Board meetings, executive sessions of the Board within parameters established by the bylaws or other legal requirements, board retreats or the holiday party.

Prior invitations and attendance shall not be considered as precedent setting.



## MICHIGAN OSTEOPATHIC ASSOCIATION POLICY

<b>Title of Policy: Nominations for AOA Board of Trustees</b>	
<b>Policy Area: Governance &amp; Board Operations</b>	
<b>Effective Date: 12/14</b>	<b>Approved by: MOA Board of Trustees</b>
<b>Approved Date: 2/16</b>	
<b>Revision Date: 2/16</b>	

### **POLICY:**

*Qualifications for nomination.* For consideration a candidate for nomination by the Michigan Osteopathic Association (MOA) to the American Osteopathic Association (AOA) Board of Trustees must be a current member in good standing of:

- The AOA,
- The MOA and
- A MOA component society

The MOA shall prefer candidates who have demonstrated recent, active involvement in the Association having served as a:

1. Delegate in the MOA House of Delegates,
2. MOA delegate in the AOA House of Delegates,
3. Member of a MOA department, committee, or council,
4. Member of an AOA committee.

### *Candidate screening.*

The MOA shall establish a candidate screening committee that includes, but is not limited to, AOA past presidents from Michigan, past AOA trustees from Michigan, and the MOA President, if that individual is not seeking nomination.

If the MOA President is a candidate, then the MOA President-Elect shall substitute, if both are candidates, then the MOA Secretary/ Treasurer shall substitute, if all three are candidates, then the MOA Immediate Past President shall substitute, if all four are candidates, then the MOA Past President shall substitute, if all five are candidates, then the MOA Board of Trustees member with the most seniority shall substitute. If two or more MOA board of Trustees members have equivalent seniority a random selection process shall deem the committee appointee.

### **PROCEDURE:**

1. On or before January 15th in a year when the American Osteopathic Association (AOA) Board of Trustees has board position vacancies that may potentially be filled by a

Michigan Osteopathic Association (MOA) member, at the direction of the MOA Executive Committee, MOA staff will notify and seek names of qualified and willing candidates from MOA component society presidents, MOA trustees, MOA committee or council chairs, and MOA past presidents.

2. If a candidate elects to seek the nomination, the individual shall be notified that they must submit a letter of interest and curriculum vitae to the MOA Executive Director/CEO postmarked or electronically transmitted no later than February 15th of the election year.
3. The candidate screening committee shall review potential nominee application material and report their findings and recommendations to the MOA Executive Director/CEO by March 15th.
4. The MOA Board of Trustees will conduct a special board meeting to review applications and select candidates for further evaluation. Following selection, the Board shall arrange to interview those candidates either in person or via conference call. MOA Board of Trustees members who are potential nominees shall not participate in the interview of other candidates.
5. Subsequent to the final interview, the Board will vote to determine which candidate(s) to submit as nominees for the open AOA Board of Trustee positions. MOA Board of Trustees members who are potential nominees shall not participate in the deliberations or the vote.



## MICHIGAN OSTEOPATHIC ASSOCIATION POLICY

<b>Title of Policy: Policy Development, Review and Revision</b>	
<b>Policy Area: Governance &amp; Board Operations</b>	
<b>Effective Date: 12/99</b>	<b>Approved by: MOA Board of Trustees</b>
<b>Approved Date: 12/02, 12/05, 12/08, 2/12, 2/13, 2/16</b>	
<b>Revision Date: 2/16</b>	

### PURPOSE:

To provide a framework in which decisions can be made and implemented

### DEFINITIONS:

**Policy:** Policy regulates, directs and controls actions and conduct and can range from broad philosophy to specific rules. It provides the operational framework within which the MOA and it may include terms of reference describing the stakeholders' roles and responsibilities, objectives and timelines. functions and the formal guidance needed to coordinate and execute activity.

**Policy Area:** A Policy Area is the functional unit with overarching responsibility for a policy and/or procedure responsible for ensuring that:

- appropriate consultation occurs during development or review of a policy;
- new or reviewed policy and procedures are implemented, compliance is monitored and issues are recorded or resolved;
- the policy and procedure are reviewed at a minimum of every three years, from last date of approval of the policy and procedure.

**Procedure:** Procedure tells users how to, and who will, implement the policy. Procedure is specific, factual, succinct and to the point.

### POLICY:

Policy developers shall employ a template approved by the Board for Board-approved policy or by the Executive Director for administrative or operational departments

Policies will be categorized into policy areas reflecting the area deemed most relevant such as governance, a board department or council, administration or one of its operational departments that shall have responsibility and accountability for timely completion and submission of policy reviews, with revisions deemed necessary, to the relevant approval authority.

Policies and procedures will have a default review date of three years from last approval, with revision as necessary. Policies and procedures may have a shorter review date if an approving body

believes a more regular review is required. Other than editorial corrections approved by the MOA President, Board approved policy revisions must be submitted to the Board prior to any changes. Board Department Directors (chairs) or Council Chairs shall have authority to approve policies and revisions within their department or council not requiring Board approval<sup>5</sup>. The Executive Director Review shall have authority to approve non-board approved administrative or operational department policy reviews and revisions.

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<sup>5</sup> Generally, these are operational issues within a council or a department or its committees.





## MICHIGAN OSTEOPATHIC ASSOCIATION POLICY

<b>Title of Policy: Statement of Expectations for Members of the Board of Trustees</b>	
<b>Policy Area: Governance &amp; Board Operations</b>	
<b>Effective Date: 4/02</b>	<b>Approved by: MOA Board of Trustees</b>
<b>Approved Date: 12/05, 12/08, 2/12, 2/16</b>	
<b>Revision Date: 2/16</b>	

### **POLICY:**

The Michigan Osteopathic Association Board of Trustees shall provide to each board member a statement describing its expectations of each board member. This pledge is intended to acknowledge the shared responsibilities, commitment and conduct expected of all Board members. This document is not meant to be a formal contract but rather a set of expectations set forth for all existing and future board members.

This statement shall be as follows and it shall be reviewed and revised, if necessary, at least every three years.

As a Board Member of the Michigan Osteopathic Association, I am fully committed to its mission and am dedicated to carrying out that mission. I understand that I lead the way. I am a model for others to follow. If I ask others to give, I must demonstrate my commitment through my own contributions. I will be an enthusiastic booster – a positive advocate for the Association. I understand that my duties and responsibilities include the following:

1. ***The role of the board***

As a board member I have both the opportunity and the obligation to appoint and evaluate the Executive Director/CEO, help establish strategic direction, set broad policy, and steward the assets, all in support of the MOA's mission. I will take responsibility to learn and know as much as I can about the Association, its work and outreach and its vision for the future. I commit to fulfilling these obligations with my time, talent, efforts and relationships. I will accept committee assignments and carry out the tasks assigned to me in a timely fashion. With other Board Members, I am responsible for the friend-raising and fund-raising.

2. ***The role of management***

I understand that the Executive Director/CEO is responsible, under the board's direction, for developing the long-range plan for board approval, devising acceptable short- and medium-term objectives in pursuit of that plan, and then managing the organization's resources to meet those objectives.

3. ***Preparation***

I will work diligently to understand the mission, purpose, goals and programs of the

organization, and I will prepare for all board and committee meetings by reviewing all related documents and materials in advance.

**4. *Fiscal and program oversight***

Together with my fellow board members, I am responsible for the fiscal oversight of Sample Nonprofit. Whether I am a member of the organization's finance or audit committees, I will know what our budget is and take an active part in reviewing and approving the budget and monitoring our performance against that budget. If I do not understand an element of MOA's fiscal health, I will reach out to the appropriate board members, committees, or staff for clarification.

**5. *Active participation in board meetings***

I will attend regularly scheduled board meetings, be available for consultation by phone and e-mail, and serve on at least one department, council, or committee of the board where I can apply my special skills, perspective and experience. I will come prepared to discuss the issues and business at hand, and I will help prepare for and participate in any annual scheduled board retreat.

If I miss three consecutive board meetings without proper notice or am otherwise unable to fulfill my obligations as a board member, I will offer my resignation or request a leave of absence.

**6. *Support the staff***

I recognize the significant obligations of the staff in carrying out MOA's work, and I will do my best not to interfere with the staff's operating responsibilities. While I have the right to speak with staff members about matters of mutual interest, I understand that I do not have the right to direct the actions of staff members unless appropriately authorized to do so by the board or the Executive Director/CEO. I will do all I can to support the staff and encourage them to grow professionally and personally. I will be prepared to assist them whenever it is appropriate. It is not my responsibility to manage, but I will encourage them and expect the best results possible, the highest quality work possible and ever-increasing productivity.

**7. *Uphold confidentiality and By-laws***

I understand that the board must speak with one voice, and therefore I agree not to divulge board-level discussions to outsiders unless the board has adopted a different policy for a specific instance or issue. I will maintain the confidentiality of information I receive as a Board Member and will not use this information for personal advantage. As a Board Member, I also understand and support the Association's "Conflict of Interest" policy. I have read and understand the organization's Bylaws, and I agree to operate in conformity with them.

I understand that there are no rigid standards of measurement of achievement established for Board Members. Every Board Member is making a statement of faith about every other Board Member. We trust each other to carry out the above agreements to the best of our ability.



## MICHIGAN OSTEOPATHIC ASSOCIATION POLICY

<b>Title of Policy: Whistleblower</b>	
<b>Policy Area: Governance &amp; Board Operations</b>	
<b>Effective Date: 2/08</b>	<b>Approved by: MOA Board of Trustees</b>
<b>Approved Date: 2/12, 2/16</b>	
<b>Revision Date: 2/16</b>	

### **PURPOSE:**

To ensure compliance with provisions of federal and state whistleblower protection requirements

### **POLICY:**

#### **General**

The Michigan Whistleblower's Protection Act (WPA), which can be found at MCLA 15.361, et seq. and case law provide that employers cannot discharge or cause the constructive discharge or discriminate against an employee because the employee or a person acting on behalf of the employee reports or is about to report a violation of local, state or federal law to a public body or is requested by a public body to take part in an investigation, hearing, inquiry or court action. Protections do not apply if the employee knows the report to be false. If any trustee, officer, or employee<sup>6</sup> reasonably believes that a policy, practice, or activity of the Michigan Osteopathic Association is in violation of law, regulation, or constitutes fraudulent accounting or other practices, a written complaint may be filed by that individual with the Executive Director/Chief Executive Officer The Michigan Osteopathic Association's Code of Ethics (Code) requires trustees, officers and employees to observe high standards of business and personal ethics in the conduct of their MOA duties and responsibilities. All employees and representatives of the Michigan Osteopathic Association must practice honesty and integrity in fulfilling MOA responsibilities and comply with all applicable laws and regulations. This policy applies to any matter that is related to MOA's business and does not relate to private acts of an individual not connected to the business of MOA.

#### **Reporting Responsibility**

All trustees, officers and employees to comply with the Code and to report violations or suspected violations in accordance with this Whistleblower Policy.

#### **No Retaliation**

A trustee, officer or employee who in good faith reports a violation shall not be subject to harassment, retaliation or adverse employment consequence. A trustee, officer or employee who

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<sup>6</sup> "Employee" includes regular employee, contract employees, or volunteers

retaliates against someone who has reported a violation in good faith is subject to discipline up to and including termination of employment or expulsion from the Association. A trustee, officer or employee is protected from retaliation only if the individual brings the alleged unlawful activity, policy, or practice to the attention of the Executive Director and provides the Executive Director with a reasonable opportunity to investigate and correct the alleged unlawful activity. If the employee does not feel comfortable reporting the information to the Executive Director, he or she is expected to report the information to the MOA President. This policy serves to encourage and enable protected individuals to raise concerns within the organization prior to seeking resolution outside the organization.

### **Reporting Violations**

This organization has an open door policy. Trustees, officers or employees are urged to share their questions, concerns, suggestions or complaints with someone who can address them properly. In most cases, an employee's supervisor is in the best position to address an area of concern. However, if the individual is not comfortable speaking with a supervisor or is not satisfied with a supervisor's response, the individual should speak with someone in management whom they are comfortable in approaching. Supervisors and managers are required to report suspected violations to the Executive Director (or, MOA President), who has specific and exclusive responsibility to investigate all reported violations. For suspected fraud, or when if an individual is not satisfied or uncomfortable with the Association's open door policy, individuals should contact the Executive Director or President directly. If the allegations involve the Executive Director, contact should be made to the MOA President.

### **Compliance Officer**

This Association's Compliance Officer is the Executive Director, who is responsible for investigating and resolving all reported complaints and allegations concerning violations and that individual's discretion, shall advise the President and/or Finance Committee.

### **Handling of Reported Violations**

The Executive Director (or President) will notify the sender and acknowledge receipt of the reported violation or suspected violation within five business days. All reports will be promptly investigated and appropriate corrective action will be taken if warranted by the investigation.

### **Accounting and Auditing Matters**

The Executive Director (or President) shall immediately notify the Finance Committee of any such complaint and work with the committee or treasurer until the matter is resolved.

The Finance Committee of the board of trustees shall address all reported concerns or complaints regarding corporate accounting practices, internal controls or auditing.

### **Acting in Good Faith**

Anyone filing a complaint concerning a violation or suspected violation of any applicable law or regulation, including those concerning accounting or auditing, or constitutes a fraudulent practice must be acting in good faith and have reasonable grounds for believing the information disclosed indicates a violation. Any allegations that prove not to be substantiated and which prove to have been made maliciously or knowingly to be false will be viewed as a serious disciplinary offense.

### **Confidentiality**

Violations or suspected violations may be submitted on a confidential basis by the complainant or may be submitted anonymously. Reports of violations or suspected violations will be kept confidential to the extent possible, consistent with the need to conduct an adequate investigation.

### **Dissemination and Implementation of Policy**

This Policy shall be disseminated in writing to all affected Association individuals. The Association shall adopt procedures for implementation of this Policy, which include, but are not restricted to:

- (1) Documenting reported violations;
- (2) Working with legal counsel to decide whether the reported violation requires review by the Compliance Officer or should be directed elsewhere;
- (3) Keeping the board of trustees [and applicable committees] informed of the progress of the investigation;
- (4) Interviewing employees;
- (5) Requesting and reviewing relevant documents, and/or requesting that an auditor or counsel investigate the complaint; and
- (6) Preparing a written record of the reported violation and its disposition, to be retained for a specified period of time.

The procedures for implementation of this Policy shall include a process for communicating with a complainant about the status of the complaint, to the extent that the complainant's identity is disclosed, and to the extent consistent with any privacy or confidentiality limitations.

All affected individuals shall receive a copy of this policy, sign and date an acknowledgement of receipt that shall be maintained in Human Resource files or other files as may be appropriate.



**MICHIGAN OSTEOPATHIC ASSOCIATION**  
**GOVERNMENT AFFAIRS POLICIES**

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## MICHIGAN OSTEOPATHIC ASSOCIATION POLICY

<b>Title of Policy: Guidelines for Assistance to Candidates for Publicly-Elected Office</b>	
<b>Policy Area: Government Affairs</b>	
<b>Effective Date: 7/13/07</b>	<b>Approved by: MOA Board of Trustees</b>
<b>Approved Date: 2/11, 1/15, 2/16</b>	
<b>Revision Date:</b>	

### **POLICY:**

1. Candidate Endorsements/Recommendations
  - The MOA shall not provide candidate endorsements.
  - The MOA shall maintain a list of recommended candidates for each legislative district or other publicly elected office for use by the organization. The list available shall not be made available to the public.
  
2. Financial Assistance
  - The Michigan Osteopathic Political Action Committee (MOPAC) shall evaluate candidates and may designate certain candidates as “investment”.
  - MOPAC may consider “investment” candidates for a larger campaign contribution.
  - MOPAC may assist in the underwriting of fundraising events hosted by MOA members for legislators in office or those designated as “investment”.
  - MOPAC may cover reasonable costs for MOA members to attend fundraising events in a legislator’s home district.
  
3. Candidate Interaction/Communication
  - The MOA will offer opportunities for candidates to address MOA committee members.
  - The MOA will assist candidates in member interaction through collaborative efforts with component societies.
  - The MOA will arrange meetings between legislators and MOA members upon request.
  - The MOA will assist legislators or other publicly elected officials, as appropriate, with mailing or other communication efforts, but will not release or otherwise provide its membership list.



## MICHIGAN OSTEOPATHIC ASSOCIATION POLICY

<b>Title of Policy: Political Endorsements</b>	
<b>Policy Area: Government Affairs</b>	
<b>Effective Date: 9/99</b>	<b>Approved by: MOA Board of Trustees</b>
<b>Approved Date: 12/02, 12/05, 12/08, 2/12, 2/16</b>	
<b>Revision Date:</b>	

### **POLICY:**

The Michigan Osteopathic Association does not endorse political candidates. MOA may provide technical assistance to members who wish to organize fund-raising events for political candidates independently from MOA. A member shall not issue an invitation to a political fund-raiser or other solicitation using the name of the Michigan Osteopathic Association or imply that a candidate has the endorsement of MOA. Members are encouraged to be politically active as individuals. If a member issues an invitation to a political fund-raiser or other solicitation in which the member's MOA office is identified, the member shall also include on the invitation or solicitation the following disclaimer: *The Michigan Osteopathic Association does not endorse candidates for political office.*

The Michigan Osteopathic Political Action Committee (MOPAC) contributes funds to the campaigns for candidates in state government who support the ideals and aims of the osteopathic profession. Such contribution does not indicate MOA endorsement of a candidate.





**MICHIGAN OSTEOPATHIC ASSOCIATION**  
**HEALTH TECHNOLOGY & INFORMATICS**

No Policies



**MICHIGAN OSTEOPATHIC ASSOCIATION**  
**HUMAN RESOURCE POLICIES**

No Policies



## **MICHIGAN OSTEOPATHIC ASSOCIATION**

### **INTERNAL AFFAIRS POLICIES**

No Policies



**MICHIGAN OSTEOPATHIC ASSOCIATION**  
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## MICHIGAN OSTEOPATHIC ASSOCIATION POLICY

<b>Title of Policy: Disciplinary Action Procedural Rules</b>	
<b>Policy Area: Judiciary &amp; Ethics</b>	
<b>Effective Date: 12/99</b>	<b>Approved by: MOA Board of Trustees</b>
<b>Approved Date: 12/02, 12/05, 12/08, 2/12, 2/16</b>	
<b>Revision Date: 2/16</b>	

### POLICY:

#### PREAMBLE

The Board of Trustees (Board) promulgates these procedural rules) in accordance with Article IV Section 10 of the Bylaws. These rules will govern investigation, hearings, decisions, and appeals of any conduct by a member of MOA that could lead to disciplinary action.

#### INVESTIGATION

**Section 1. Investigative Authority.** The Department of Judiciary and Ethics (DJE) shall investigate alleged conduct by a member that is illegal, immoral or unprofessional (refer to Illegal Immoral or Unprofessional Conduct Determination Policy) or otherwise in violation of the MOA Constitution, Bylaws, or Code of Ethics. The DJE shall include a Board-appointed “Grievance Committee”.

**Section 2. Investigation Procedure.** The DJE may investigate charges brought to its attention by a third party or may initiate its own investigation. In its investigation, the DJE shall advise the member of the nature of the complaint and accord the member the opportunity to provide a written response. The DJE may provide the member an opportunity for a consultation to discuss, explain or refute the complaint. The consultation shall not constitute a hearing under these rules, shall be informal in nature, and none of the procedural rules as to a hearing shall apply. The investigation may include interviews with such other parties the DJE deems appropriate.

**Section 3. Action.** The DJE may at any time terminate the investigation without further action, endeavor to resolve the matter amicably without formal complaint or issue a formal written complaint and recommendation for adverse action, which may include reprimand, suspension, or expulsion.

#### HEARING PROCEDURE

**Section 1. Adverse Action.** Any formal written complaint by the DJE recommending reprimand, suspension, or expulsion of a member shall constitute a recommendation of adverse action and shall entitle the member involved to a hearing, the procedure for which shall be governed by these rules.

**Section 2. Notice of Adverse Action.** The DJE director (chairperson), or designee, shall provide written notice to a member against whom the department has issued a formal written complaint recommending adverse action. The DJE shall send such notice by first class mail return receipt requested; it shall contain a copy of the written complaint and adverse action recommended. Such notice shall further advise the member of their right to a hearing under the provisions of these rules and that failure to request same within the specified time period shall constitute a waiver of rights to a hearing and to an appellate review of the matter. The notice shall also contain a summary of the member's right in the hearing and copy of these rules.

**Section 3. Request for Hearing.** A member shall have 30 calendar days following the date such notice was mailed by first class mail, to file a written request for hearing. Such request shall be sent by first class mail to the MOA Executive Director at the MOA headquarters address. The Executive Director shall provide the Chairperson of the DJE with a copy of such request.

**Section 4. Waiver by Failure to Request a Hearing.** A member who fails to request a hearing within the time and in the manner specified in Section 3 waives any right to such hearing and to any appellate review to which the member might otherwise have been entitled. Such waiver shall constitute a member's acceptance of the DJE's recommendation, which shall then become final action.

**Section 5. Notice of Time and Place for Hearing.** Within 30 calendar days after receipt of a timely request for a hearing, the Executive Director shall schedule and arrange for such a hearing, shall notify the member of the time, place, and date scheduled, providing at least 30 days' written notice prior to the date of the hearing sent to the member by first class mail return receipt requested. The hearing shall be based on the DJE written complaint and the notice of hearing shall contain a list of witnesses, if any, expected to testify at the hearing.

**Section 6. Composition of the Hearing Committee.** The President shall appoint a Hearing Committee composed of at least three MOA members who neither actively participated in the DJE investigation nor directly economically compete with the subject member. The President may appoint a Hearing Committee Presiding Officer and may also engage legal counsel to act as a Hearing Committee advisor relating to procedural and evidentiary matters.

**Section 7. Conduct of Hearing**

- **Personal Presence.** The member who requested the hearing must personally appear at the hearing to preserve their rights to a hearing. A member who fails without good cause acceptable to the Hearing Committee to appear and proceed at such hearing shall be deemed to have waived their rights with respect to the hearing.

- **Member’s Rights.** The member shall have the right to be represented at the hearing by an attorney of their choice. The member shall have the right to call and cross-examine witnesses, to present evidence determined to be relevant by the Hearing Committee, and to submit a written statement at the close of the hearing.
- **Evidence.** The hearing need not be conducted strictly according to rules of law relating to the examination of witnesses or presentation of evidence. Any relevant matter upon which responsible persons customarily rely in the conduct of serious affairs shall be admitted, regardless of the admissibility of such evidence in a court of law. Each party shall, prior to or during the hearing, be entitled to submit memoranda concerning any issue of law or fact, and such memoranda shall become part of the hearing record. The presiding officer may, but shall not be required to, order that oral evidence taken only on oath or affirmation administered by any person designated by the officer and entitled to require notarized documents.
- **Record of Hearing.** A sufficient, accurate record of hearing shall be kept to permit an informed and valid judgment to be made by any group that may later be called upon to review the record and render a recommendation or decision in the matter. The Hearing Committee may select the method to be used for making the record, such as court reporter, electronic recording, detailed transcription, or minutes of the proceedings. The member shall have the right to a copy of the record of the proceedings upon payment of a reasonable charge.
- **Postponement.** The Hearing Committee only upon a showing of good cause shall grant requests for postponement of a hearing, and only if the committee receives the request within a timeframe deemed reasonable by it.
- **Presence of Hearing Committee Members and Vote.** A majority of the Hearing Committee members must be present throughout the hearing and deliberations. A committee member absent from any part of the proceedings shall not participate in the decision deliberations. A simple majority of eligible members of the Hearing Committee shall constitute a quorum for purposes of deliberation and decision-making; and all decisions shall be made by a simple majority of such quorum.

**Section 8. Recesses and Adjournment.** The Hearing Committee may recess the hearing and reconvene the same without additional notice for the convenience of the participants or for the purpose of obtaining new or additional evidence or consultation. Following conclusion of the presentation of oral and written evidence, the hearing shall be closed. The Hearing Committee shall, at such time it deems convenient, conduct its private, confidential deliberation. At the conclusion of its deliberations, the hearing shall be declared adjourned.

**Section 9. Hearing Committee Decision.** Within 30 days after final adjournment of the hearing, the Hearing Committee shall make a written report of its findings, which shall contain a statement of the basis of its decision and recommendations. The Hearing Committee shall send this report by first class mail both to the member and to the

Chairperson of the DJE. The report may affirm, modify, or reverse the decision and recommendation of the DJE.

#### *APPELLATE REVIEW PROCEDURE*

**Section 1. Right to Appeal.** The member shall have the right to appeal any decision of the Hearing Committee that contains a recommendation for adverse action against the member. The DJE shall have the right to appeal any report of the Hearing Committee that reverses any recommendation of adverse action of the DJE.

**Section 2. Request for Appellate Review.** The member or the DJE shall have thirty calendar days following the mailing of a notice of the Hearing Committee's report to file a written request for an appellate review. Such request shall be sent to the Executive Director by first class mail.

**Section 3. Waiver by Failure to Request Appellate Review.** In the event both the member and the DJE fail to request an appellate review within the time and in the manner specified in Section 2, any right to such review will be waived. Such waiver shall constitute an acceptance by the member and the DJE of the Hearing Committee report; and in such case the report of the Hearing Committee and any adverse action recommended shall become final.

**Section 4. Notice of Time and Place for Appellate Review.** Within thirty calendar days after receipt of a timely request for appellate review, the Executive Director shall schedule such a hearing and shall notify the member and the DJE of the time, place, and date so scheduled, at least fifteen (15) days prior to the date of the hearing, in writing, by first class mail return receipt requested. The hearing date shall not be less than twenty (20) or more than fifty calendar days from the date of receipt of the request for hearing.

**Section 5. Appellate Review Body.** The Board of Trustees shall determine whether the appellate review shall be conducted by the whole Board or by an appellate review committee composed of Board members appointed by the President who shall designate one member as the committee chairman. If a committee is appointed, it shall consist of 3 or more Trustees. In the event a Trustee has previously participated in the investigation or hearing as a member of the DJE or Hearing Committee, that Trustee shall be disqualified from participating on the Appellate Review Body. The President may also engage legal counsel to act as a hearing advisor to the Appellate Review Body relatives to procedural and evidentiary matters.

**Section 6. Nature of Proceedings.** The Appellate Review Body proceedings shall base its activity on assessment of the record of the proceedings before the Hearing Committee, the Hearing Committee's report, and the subsequent results and actions.

**Section 7. Written Statements.** Each party to the appeal may submit a written statement setting forth that party's position as to why the decision of the Hearing Committee should be affirmed or reversed. The statement shall be submitted to the



Appellate Review Body through the Executive Director by first class mail at least seven (7) calendar days prior to the scheduled date of the appellate review, with a copy to the other party by first class mail.

**Section 8. Consideration of New or Additional Matters.** The Appellate Review Body shall not consider new or additional matters or evidence not raised or presented during the original hearing or in the hearing report, and not otherwise reflected in the record.

**Section 9. Presence of Appellate Review Members and Vote.** A majority of the appellate review body members must be present throughout the hearing and deliberations. A member absent from any part of the proceedings shall not be permitted to participate in the deliberation or the decision. A simple majority of the eligible members of the Appellate Review Body shall constitute a quorum for purposes of deliberation and decision-making; and all decisions shall be made by a simple majority of such quorum.

**Section 10. Recesses and Additional Evidence.** The Appellate Review Body may recess the review proceedings and reconvene the same without additional notice for the convenience of the participants or for the purposes of obtaining additional consultation.

**Section 11. Decisions.** Upon the conclusion of its proceedings the Appellate Review Body shall conduct its confidential deliberations outside of the presence of other individuals. The Appellate Review Body may affirm, modify, or reverse the decision of the Hearing Committee. The decision of the Appellate Review Body shall be sent by first class mail to the member and the DJE. The decision of the Appellate Review Body shall be final.

**Section 12. Miscellaneous.** Notwithstanding any other provision of the MOA Bylaws or these Rules, no member shall be entitled as a right to more than one evidentiary hearing and one appellate review with respect to an adverse recommendation or action.



## MICHIGAN OSTEOPATHIC ASSOCIATION POLICY

<b>Title of Policy: Grievance Committee – Advisory Opinion</b>	
<b>Policy Area: Judiciary &amp; Ethics</b>	
<b>Effective Date: 12/99</b>	<b>Approved by: MOA Board of Trustees</b>
<b>Approved Date: 12/02, 12/05, 12/08, 2/12, 2/16</b>	
<b>Revision Date: 2/16</b>	

### **POLICY:**

The Department of Judiciary and Ethics shall charter a “Grievance Committee” to serve as the officially peer review body of the Michigan Osteopathic Association (MOA).

The Grievance Committee is composed of osteopathic physicians, representing general medicine and specialties, appointed by the Board of Trustees of MOA. These physicians are volunteers who meet periodically to review and mediate or adjudicate specific patient complaints and other matters involving the conduct and ethics of osteopathic physicians.

The Grievance Committee is also available to issue advisory opinions in cases pending before the Board of Osteopathic Medicine and Surgery, based upon the voluntary submission and hold harmless agreements of the parties involved and the Grievance Committee’s determination that the case is appropriate for its review.



# **MICHIGAN OSTEOPATHIC ASSOCIATION**

## **MEMBERSHIP POLICIES**

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## **MICHIGAN OSTEOPATHIC ASSOCIATION POLICY**

<b>Title of Policy: Amicus Briefs</b>	
<b>Policy Area: Membership</b>	
<b>Effective Date: 4/00</b>	<b>Approved by: MOA Board of Trustees</b>
<b>Approved Date: 12/03, 12/06, 2/10, 1/14, 2/16</b>	
<b>Revision Date:</b>	

### **POLICY:**

MOA periodically receives requests from members to file an amicus brief in support of a member's position in a lawsuit. Amicus briefs are normally filed when a case is on appeal. MOA is limited in its ability to file amicus briefs and to otherwise assist members in private legal disputes, both by its financial resources and by tax rulings prohibiting a tax-exempt organization such as MOA from providing private, individual benefits.

In furtherance of the above, MOA will consider intervening as an amicus only where MOA determines that the issue involved goes beyond the facts of the case in question and has overriding and compelling importance to the profession as a whole.

Requests for MOA amicus intervention should set forth in writing the facts of the case and the reasons why the member involved believes the case presents an issue that meets the standards set forth in this policy.

Determinations of whether MOA will intervene as an amicus will be made by the MOA Board of Trustees, in its sole discretion, on a case by case basis.

The MOA Board of Trustees, as a whole or through its Executive Committee, may promulgate further rules and guidelines to implement this policy.



## MICHIGAN OSTEOPATHIC ASSOCIATION POLICY

<b>Title of Policy: Attendance Requirements for Members at Meetings</b>	
<b>Policy Area: Membership</b>	
<b>Effective Date: 4/00</b>	<b>Approved by: MOA Board of Trustees</b>
<b>Approved Date: 12/03, 12/06, 2/10, 1/14, 2/16</b>	
<b>Revision Date: 2/16</b>	

### **POLICY:**

*Board of Trustees:* If a member of the MOA Board has unexcused absences from 50% of the Board meetings, the MOA president shall notify the president of the component society who nominated that individual and the Speaker of the House of Delegates. These individuals will meet with the Trustee member to establish a corrective action plan up to and including request for resignation from the Board.

*Councils<sup>7</sup>, Board-chartered committees or task forces:* If a member of the Council of Government Affairs, a Board-chartered committee or Board-chartered task force has unexcused absences from 50% of its meetings, the MOA president may remove that member and appoint a replacement to complete the term of service.

*Department-chartered committees or task forces:* The Department chair appoints committee or task force members; members serve at the discretion of the department director (chair). At the recommendation of the committee or task force chair, the department director (chair) may remove a member from the committee or task force for failure to adequately attend or participate in the required activities.

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<sup>7</sup> The membership of the Council of Past Presidents and the Council of Component Society Presidents is specified by MOA bylaws are exempt from this policy.



**MICHIGAN OSTEOPATHIC ASSOCIATION**  
**PROFESSIONAL AFFAIRS POLICIES**

No Policies



**MICHIGAN OSTEOPATHIC ASSOCIATION**

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## MICHIGAN OSTEOPATHIC ASSOCIATION POLICY

<b>Title of Policy: Core Grants</b>	
<b>Policy Area: Public Affairs</b>	
<b>Effective Date: 2/16</b>	<b>Approved by:</b>
<b>Approved Date: 2/16</b>	
<b>Revision Date:</b>	

### **BACKGROUND:**

MOA's Michigan Council for Osteopathic Promotion (MCOP) established CORE Grants in 2007. Grant recipients are selected based on their project's level of need, feasibility, impact, and how well it embodies the osteopathic values of preventive health.

### **POLICY:**

Annually, the MOA Department of Public Affairs' Michigan Council for Osteopathic Promotion may award up to three \$1,000 Core Grants to MOA members or osteopathic students hosting health clinics, fairs, programs or other special projects the embody the osteopathic values of preventive medicine. The grants shall serve to support outstanding primary care and prevention initiatives. These programs include educational event series, research project or patient-centric campaign that illustrate outstanding commitment to the principal tenets of osteopathic medicine. The MCOP will establish procedures for submitting applications, including an annual deadline for submission, criteria for judging, and notification of winners. A panel comprised of MCOP members will determine the award winners.

The MOA will feature award winners in MOA print and Web publications. Therefore, the MOA MCOP Committee will request that winners provide updates of project outcomes.

#### *Eligibility*

MOA members and osteopathic students

Health clinics/fairs or other projects must occur after the grant application deadline.

#### *Selection criteria shall include:*

1. Need
2. Project feasibility (project planning and organization); and
3. How well the project embodies the osteopathic values of preventive health care.

### **PROCEDURE:**

1. MCOP develops an online application form to be placed on the MOA website for individuals to submit for grant consideration. Application includes:
  - a. Project abstract (maximum 100 words/700 characters)
  - b. Detailed project description (maximum 1000 words/7000 characters) including:
    - i. How the project embodies the osteopathic values of preventive health care;



- ii. Project goals including purpose, audience, methods and objectives;
  - iii. An explanation of why funding assistance from the MOA is needed, how it would help in the implementation of the program, and how funds will be used.
2. MCOP develops with MOA announcement of annual grant applications availability and submission deadlines. Staff implements.
  3. Staff collects submissions until deadline reached.
  4. MCOP convenes to select winners.
  5. Winners notified.
  6. Awards granted.
  7. MOA staff arranges public announcements
  8. MOA staff establishes follow-up date(s) for project outcomes and obtains follow-up at those intervals.
  9. MOA staff provide updates to MCOP
  10. MCOP reviews updates and takes actions deemed appropriate.



## MICHIGAN OSTEOPATHIC ASSOCIATION POLICY

<b>Title of Policy:</b> Social Media	
<b>Policy Area:</b> Public Affairs	
<b>Effective Date:</b> 2/16	<b>Approved by:</b>
<b>Approved Date:</b> 2/16	
<b>Revision Date:</b>	

### PURPOSE:

### DEFINITION

*Social media* means any platform for online publication and commentary, including without limitation blogs, wiki's, and social networking sites such as Facebook, LinkedIn, Twitter, Flickr, or YouTube.

### POLICY

This policy governs the publication of and commentary on social media by a MOA employee, member, or volunteer. This policy is in addition to and complements any existing or future policies regarding the use of technology, computers, e-mail and the Internet.

A MOA employee, member, or volunteer may freely publish or comment via social media in accordance with this policy. They are subject to this policy to the extent they identify themselves as a MOA employee, member, or volunteer (other than as an incidental mention of place of employment in a personal blog on topics unrelated to MOA).

Notwithstanding the previous section, this policy applies to all uses of social media, including personal, by these individuals included above who in public are commonly associated with MOA, particularly in leadership positions as their position with MOA would be well known within the community.

Publication and commentary on social media carries similar obligations to any other kind of publication or commentary. All uses of social media must follow the same ethical standards that MOA imposes on these individuals.

#### *Setting up Social Media*

Authority to establish MOA social media shall reside with the Executive Director who may direct communications staff to assist in registering and setting up MOA-approved social media accounts.

#### *Confidentiality*

While acceptable to communicate about MOA work and have a dialog with the community, MOA prohibits publishing of confidential information. Confidential information includes things such as **unpublished** details about MOA software, details of current projects, future product or services, financial information, research, and trade secrets. Individuals covered by the policy must respect the requirements of MOA strategic corporate partners regarding the confidentiality of those current projects and must be mindful of the industry competitiveness.

### *Protect personal privacy*

Privacy settings on social media platforms should be set to allow anyone to see profile information similar to what would be on the MOA website. Other privacy settings that might allow others to post information or see information that is personal should be set to limit access.

### *Integrity*

Do not blog anonymously, using pseudonyms or false screen names. MOA stands for transparency and honesty. Individuals must use their real name and identify position represented at MOA. Do not post anything that is dishonest, untrue, or misleading. Individuals having a vested interest in something discussed must disclose that interest.

### *Compliance with copyright laws, trademarks and brands*

Individuals covered in the policy must comply with the laws governing copyright and fair use or fair dealing of copyrighted material owned by others, including MOA owned copyrights, trademarks and brands. Quoted material should not be more than short excerpts of someone else's work and must always attribute such work to the original author/source

### *Respect the audience, the MOA, and individuals representing MOA*

The public in general, and MOA's employees, members and volunteers, reflect a diverse set of customs, values and points of view. Do not publish content contradictory or in conflict with the MOA website or policy. Posted materials must demonstrate proper respect and decorum: This includes not only the obvious (no ethnic slurs, offensive comments, defamatory comments, personal insults, obscenity, etc.) but also proper consideration of privacy and of topics that may be considered objectionable or inflammatory. If a personal opinion is posted, the individual must make it clear that the views and opinions expressed are the individual's alone and do not represent the official views of the MOA.

### *MOA business partners and supplier's protections*

MOA business partners or suppliers should not be cited or obviously referenced without their approval. Never identify a business partner or supplier by name without permission and never discuss confidential details of a business engagement. It is acceptable to discuss general details about kinds of projects and to use non-identifying pseudonyms for a business partner or supplier so long as the information provided does not violate any non-disclosure agreements that may be in place with the business or make it easy for someone to identify them. Social media should not be used to "conduct business".

### *Controversial Issues*

If an individual covered by this policy identifies misrepresentations made about MOA in the media, that individual should alert either the MOA communications staff or the Executive

Director. They are the authorized agents to provide response.

*Promptly respond to self-mistakes*

If an individual discovers they have made an error, they should promptly correct it. If modifying an earlier post, make it clear that that is what has been done. If someone alleges the posting something improper (such as their copyrighted material or a defamatory comment about them), remove it immediately to lessen the possibility of a legal action.

**Enforcement**

Policy violations will be subject to disciplinary action, up to and including termination for cause or member expulsion.



## **MICHIGAN OSTEOPATHIC ASSOCIATION**

### **SOCIO-ECONOMICS POLICIES**

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## MICHIGAN OSTEOPATHIC ASSOCIATION POLICY

<b>Title of Policy: BCBSM Professional Provider Relations Advisory Committee</b>	
<b>Representatives</b>	
<b>Policy Area: Socio-Economics</b>	
<b>Effective Date: 10/99</b>	<b>Approved by: MOA Board of Trustees</b>
<b>Approved Date: 12/02, 12/05, 12/08, 2/12, 2/16</b>	
<b>Revision Date: 2/16</b>	

### **BACKGROUND:**

The Professional Provider Relations Advisory Committee (PPRAC) is the formal interface between the physician and BCBSM. It meets four to five times a year and is composed of 10 members of which 5 are members of the BCBSM Board, 3 are designated by MSMS and 2 are designated by MOA. The PPRAC meetings are preceded by Tri-Staff meetings when staff representatives from BCBSM, MSMS and MOA shall meet to develop an agenda for the PPRAC.

### **POLICY:**

The MOA Board shall nominate two candidates for BSBSM approval to serve as representatives, on the PPRAC.

Nominees.

- 1 of the 2 members will be from Region 1 (Wayne, Oakland and Macomb Counties) \*
- 1 of the 2 members will be a primary care physician\*
- Preference shall be given to currently serving MOA board members
- This composition is not required for alternate physicians

[\*The geographic and specialty balance of nominees may be adjusted at the Board’s discretion. At least one primary care physician must be nominated.]

Prior to nomination and subsequent to appointment, the representative must accept responsibility and accountability for the position by agreeing to represent the MOA by attending and actively participating in each PPRAC meeting, either in person or via conference call, and to serve as a member of the relevant committee(s) in the MOA Insurance Department, attend those committee meetings, and promptly report results PPRAC activities meetings to the MOA Insurance Department leadership for their consideration for informing the Board of Trustees at each of their meetings.



## MICHIGAN OSTEOPATHIC ASSOCIATION POLICY

<b>Title of Policy:</b> Behavioral Health Parity Access and Reimbursement	
<b>Policy Area:</b> Socio-Economics	
<b>Effective Date:</b> 12/14	<b>Approved by:</b>
<b>Approved Date:</b> 12/14, 2/16	
<b>Revision Date:</b> 2/16	

### PURPOSE:

To provide a policy position to support appropriate, effective and efficient patient access to behavioral health services while ensuring adequate economic support for physicians and other healthcare professionals supplying necessary care for improved patient care and outcomes.

### POLICY

As a guiding principle, funding streams must not be diverted from the provision of behavioral health care, but should be pooled and applied with flexibility to eliminate fragmented care. Payments should not separate primary care behavioral health payment from primary care medical payments. Models for such payment may be a per-member per-month primary care capitation that includes funding for integrated behavioral health.

- 1) *Payment should be based on:*
  - a) The value of behavioral work done face-to-face during clinical encounters as well as work done outside the face-to-face visit, such as telephone work, asynchronous electronic communication, or remote monitoring
  - b) Services provided after hours
  - c) Mental health and substance abuse screening and early intervention
  - d) Services associated with coordination of care among behavioral caregivers
  - e) Enhanced communication between patients, their families, and all members of the PCMH team, including school personnel if indicated
  - f) Services rendered by separate team members, even if rendered in the same site and on the same day
  - g) Adjustments for complexity, just as hospital payments are adjusted for case severity
  - h) Behavioral health clinicians sharing in the cost savings associated with coordinated care
  - i) Additional payment for improved quality behavioral health care
  - j) Patients who change their health behaviors will be healthier and have lower health care costs. They should be rewarded with lower premium payments, cash rebates, or other tangible incentives for health behavior change
  
- 2) *Equivalence of services.* MOA will encourage implementing parity by assisting in determining equivalence of services between mental health/substance use benefits and medical/surgical benefits. Some of the treatments for mental health and substance use disorders do not have an equivalent

medical/surgical treatment, particularly with respect to treatment settings. For example, intensive outpatient programs often used to treat substance abuse do not have an equivalent in internal medicine. Similarly, it is difficult to determine the medical/surgical equivalent for a rehab stay for an acute schizophrenic episode. Full parity demands that standards of evidence be applied consistently across mental health/substance use and medical/surgical treatments. The MOA serve as an advocate for coverage benefits for care levels and treatment venues that are unique to behavioral health, and align with medical and surgical benefits, as a continuing discussion with health plans and between plans and regulators.

- 3) *All-inclusive parity.* MOA will work with state or federal regulators, as appropriate, along with other patient advocacy group, to ensure availability of behavioral health benefits on par with physical health benefits. While the Accountable Care Act expanded the Mental Health Parity and Addiction Equity Act of 2008 (MHPAEA) both by direct application to the individual market and to issuers in the individual and small-employer market, some plans and benefits are still excluded. Some fee-for-service Medicaid options, employers with fewer than fifty employees who self-insure, and self-funded non-federal governmental health plans that opt out are not required to provide equivalent coverage. In addition, while Medicare coinsurance for mental health/substance use treatment is the same as for medical/surgical treatment beginning in 2014, Medicare still has a 190-day lifetime limit on inpatient psychiatric care that does not exist for inpatient medical care, although this affects a small number of people.
- 4) *Reduce fragmentation of the health care delivery system.* MOA will work with appropriate governmental and private agencies to eliminate fragmented services, including the use of carve-outs for providing mental health/substance use benefits. (One challenge for group health plans is to integrate and coordinate mental health and substance use care with medical care despite using separate administrators. In addition to different benefits administrators, mental health and substance use services are usually provided by different health professionals than medical services, and care coordination does not always occur among various providers.)
- 5) *Ensure access to high quality behavioral health services.* MOA will work to develop or promote interdisciplinary training for practicing clinicians & other team members, faculty, fellows, residents, and students, for the roles that behavioral health clinicians as well as primary care physicians will assume in the PCMH. As part of this program development, work to define the different roles and skill sets required for physicians, behavioral health clinicians, and other members of the health care team to provide whole-person care.

#### References:

1. Kessler et al., NEJM. 2005;352:515-23.
2. Fisher & Ransom, Arch Intern Med. 1997;6:324-333.
3. Hoge et al., JAMA. 2006;95:1023-1032.
4. Cunningham, Health Affairs. 2009; 3:w490-w501.
5. Mitchell et al. Lancet, 2009; 374:609-619.
6. Barnett et al, Lancet 2012
7. Archer et al, Cochrane Syst Data Rev, 2012: 10.
8. Woltman et al, AJP, 2012: 169:790-784
9. AHRQ Academy for Integrating Behavioral Health and Primary Care:  
<http://integrationacademy.ahrq.gov/>
10. AIMS CENTER: <http://www.uwaims.org>
11. Center for Integrated Primary Care: <http://www.umassmed.edu/cipc>





## MICHIGAN OSTEOPATHIC ASSOCIATION POLICY

<b>Title of Policy: Pay-for-Performance</b>	
<b>Policy Area: Socio-Economics</b>	
<b>Effective Date: 7/07,</b>	<b>Approved by: MOA Board of Trustees</b>
<b>Approved Date: 2/11, 2/14 – policy updated by MOA Insurance Committee; 2/16</b>	
<b>Revision Date: 2/16</b>	

### DEFINITION:

*Pay-for-performance (“P4P”)*: a term that describes complementary health care payment models that offer financial rewards to providers who achieve or exceed specified quality benchmarks. Most models adjust aggregate payments on the basis of performance on a number of different quality or efficiency measures. Payments may be made at the individual, group, or organization level. Performance may be measured using benchmarks or relative comparisons. In general, three types of performance measures may be used: structure, process, or outcome

### POLICY:

The Michigan Osteopathic Association (MOA) supports the establishment of pay-for-performance systems whose primary objectives are to provide incentives to physicians to accelerate adoption of activities that improve patient care and health care outcomes. The MOA opposes the use of incentives to induce physicians to adopt practices that are not clinically proven to result in improved patient outcomes.

P4P programs should be patient-centered, linking evidence-based performance measures to new, additional funding for achieving those incentives.

The MOA adopts the following principles for evaluation of P4P programs. Programs:

1. **Focus on quality of care.** Programs demonstrate commitment to improved patient care using evidence-based quality of care measures created by physicians across appropriate specialties and involve practicing physicians with expertise in the area of question in program design. All performance measures must be developed and maintained by appropriate professional organizations that periodically review and update these measures with evidence based information in a process open to physicians. Quality standards should not be established or unduly influenced by public agencies or private special interest groups who could gain by the adoption of such standards. Variations in an individual patient care regimen are permitted based on a physician’s sound clinical judgment, requiring minimal but appropriate documentation, and should not adversely affect P4P program rewards.

2. **Foster the patient-physician relationship.** Programs support the patient-physician relationship and overcome obstacles to physicians treating patients, regardless of patients' health conditions, ethnicity, economic circumstances, demographics, or treatment compliance patterns.
3. **Offer voluntary physician participation.** Programs do not undermine the economic viability of non-participating physician practices.
4. **Use reliable, accurate and scientifically valid data for reporting.** Programs should not rely on the exclusive use of claims-based data in quality evaluation: they should to extent feasible rely on the direct aggregation of clinical data by physicians. The measures must be subject to the best available risk-adjustment for patient demographics, severity of illness, and co-morbidities. Physicians are allowed to review, comment and appeal results prior to the use of the results for programming reasons and any type of reporting.
5. **Provide positive financial incentives.** Programs provide new funds as positive incentives to physicians for their participation, progressive quality improvement, or attainment of goals within the program. The eligibility criteria for the incentives are fully explained to participating physicians.

#### REFERENCES:

1. American Osteopathic Association Policy Compendium H-295=A/06  
Physician Quality Reporting and Pay for Performance
2. American Medical Association Policy H-450.947 Pay-for-Performance Principles  
and Guidelines
3. American Academy of Family Physicians COD 2010 Pay for Performance