Whereas, A shortage of physicians is present in the U.S.; and

Whereas, Physicians have the longest standard duration of education, representing both significant societal and personal investment; and

Whereas, Physicians have, at different points in their careers, different factors they must consider to maintain a work-life balance; and

Whereas, Currently, about 80 percent of Indiana physicians are employed by non-physician owned hospitals/businesses; and

Whereas, This resolution should also be considered by the Organized Medical Staff Section, which has an interest in the relationship between medical staff and hospital administration; therefore be it

RESOLVED, That our American Medical Association support best practice for physician employment that will promote improved work-life balance and maximal employment adaptability and professional treatment to maintain physicians in productive medical practice and minimize physician burnout. To achieve these goals, best practice efforts in physician employment contracts would include, among other options:

1. Establishing the degree of physician medical staff support as well as specifying how different medical staff costs will be covered.

2. Establishing a specific degree of clerical and administrative support. This would include access to an EMR (electronic medical record) scribe, as well as specifying how different clerical or administrative support costs will be shared/covered.

3. Providing information regarding current EMR systems and their national ranking, including user ratings and plans to improve these systems.

4. Providing work flexibility with pay and benefit implications for reduced work hours, reduced call coverage, job sharing, child care support, use of locum tenens coverage, leave of absence for personal reasons or extended duty in the military, medical service organizations or other “greater societal good” organizations.

5. Establishing an expected workload that does not exceed the mean RVU production of the specialty in that state/county/region. (New HOD Policy)

Fiscal Note: Minimal - less than $1,000.

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