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Helping Doctors Help Us

*A symposium on better utilizing
retired physicians*

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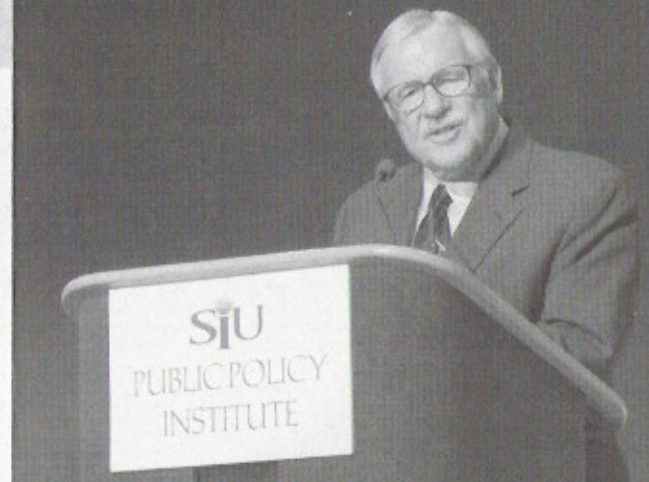
According to the National Association of Retired Physicians, more than 250,000 doctors are age 55 and over, thousands of whom will soon retire. The symposium brought together medical and legal professionals and others to develop policies that will encourage and empower retired physicians to volunteer their time and expertise to better the healthcare in their communities.

~ Recommendations ~

- Develop and conduct a comprehensive survey of all physicians on issues related to volunteering and their interest in doing so. The American Medical Association should be asked to undertake this project as part of its ongoing efforts.
- Enhance communication between physicians, nurses, volunteer organizations and others by utilizing modern technology such as Internet sites, web-based databases and other information that will foster collaborative approaches to increasing the use of retired physicians as volunteers with all types of health care associations. Such outreach efforts should be included in medical publications and other such periodicals.
- Develop and implement free public service announcements through volunteer public relations firms and professionals.
- Explore changes to federal laws and regulations that would encourage doctors to make home visits by providing increased home call reimbursement rates or by allowing physicians to deduct travel expenses for such visits.
- Require streamlining, simplification and standardization of reimbursement forms from insurance companies, Medicare and Medicaid.
- Press the Federation of State Licensing Boards to offer a limited license and waive or reduce annual fees for retired/volunteer physicians.
- Consideration should be given to the practicality and legality of allowing retired volunteer physicians to be classified as physician assistants if it would provide substantial benefits to the physician, including

making it easier to volunteer, reducing risk and insurance costs, and increasing the number of patients that can be seen.

- Work with the providers and underwriters of Continuing Medical Education courses to establish discounts, waivers or other subsidies for retired, volunteer physicians to earn CME credits.
- Amend Illinois' Good Samaritan Act to explicitly include home visits under the free medical clinic provision.
- Changes should be considered to laws covering Federally Qualified Health Centers to allow volunteer physicians to be protected. Currently, the Federal Tort Claims Act covers only employees and the Federal Volunteer Protection Act does not apply because the clinics receive remuneration.
- All states should consider joining such states as Connecticut, Kentucky, Nevada and Washington in subsidizing insurance coverage for retired/volunteer physicians. Such a program enables states to purchase and maintain liability malpractice insurance for retired physicians.
- Press for full funding of the Federal Health Insurance Portability and Accountability Act which would extend federal protection to free clinic health professionals.
- Work toward convening a broadly based group of physicians, attorneys, insurance representatives and others involved with medical malpractice to see if a consensus can be reached to comprehensively reform the system.



“A successful synergy between science and humanity is the responsibility of doctors and patients committed to medicine as a service to our fellow humans.... We take care of people who are sick and pretty much home bound. Some are approaching the end of their lives. The project’s medical personnel and volunteers provide care at the patient’s home when needed.”

Dr. William Close opens the symposium by providing the keynote address.