The following is a (non-exhaustive) summary of key agenda items of the latest BOT meeting for informational purposes only. Official actions are recorded in the minutes, which will be approved at the next meeting.

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The Board of Trustees (BOT) held its first meeting of 2021 on Friday, January 29 via Zoom Conference.

CEO REPORT

The Board received information from the CEO regarding the activities of departments as well as an update on the activities of CMA's subsidiaries. The Board also received a memo outlining the association's strategic priorities for 2021, which included the caveat that COVID response remains a chief priority. The level of organizational engagement needed for COVID response is dependent on the pandemic's trajectory and may disrupt other initiatives.

In addition to the activities related to the ongoing pandemic (as highlighted in the section that follows this one), CMA's near-term priorities include the following goals and objectives:

+ Advocating for Practice Financial Viability

- Financial support, including reimbursement for PPE, infection control and testing supply expenses
- Protecting the corporate bar on the practice of medicine
- Reducing administrative burdens
- Protect and optimize COVID telehealth reforms

+ Preparing for a MICRA Ballot Initiative

Organizing Medical Staffs, education, fundraising and coalition-building

+ AB 890 Implementation (Nurse Practitioner legislation)

- Engage in implementation efforts, including regulatory development
- Monitor and respond to any new legislation on the topic

+ Medical Board of California (MBC) Sunset Review

- Engage in discussions surrounding the legislative sunset review of the MBC, when the legislature generally implements new reforms or other changes
 - MBC is proposing a licensing fee increase of 47% and other administrative changes to reduce cost to address a budgetary shortfall
- + Justice, Equity, Diversity and Inclusion Committee (JEDI)

 The Committee will work to identify priorities for 2021, including a comprehensive policy review, gap identification, and other recommendations to incorporate the values of justice and equity into CMA's work

+ Governance Reform

 Convening a TAC to develop recommendations to help identify areas in CMA's governance that should be examined and to develop recommendations for reform

COVID-19 UPDATE

CMA continues to distribute PPE to practices across California. PPE Relief has distributed 100 million pieces of personal protective equipment and has reached over 15,000 practices across the state.

CMA's education efforts have continued, including regular updates to the webpage with COVID information. Recent additions include creation of a page dedicated to vaccine information.

CMA has also actively engaged in providing counsel to the state on how the vaccine rollout could be improved and revised. This included having representation on the Community Vaccine Advisory Committee, which provides input into the equitable distribution and allocation of the COVID-19 vaccine.

Other areas of CMA's engagement include:

- Offering guidance on framing messaging around the tiered prioritization structure to provide clarity about where physician practices fit into the structure.
- + Providing information on community practices' struggles getting themselves and their staff vaccinated.
- Counseling on the suppressing impact of strict adherence to the tier structure on vaccine administration. The MBC and other licensing boards threatened potential disciplinary action against licensees for failure to adhere to the prioritization structure. This was creating wariness to participate in vaccination efforts and confusion about what to do with thawed vaccine that was intended for prioritized health care workers but that had gone unused during a vaccination clinic. CMA successfully advocated to have the guidance clarified to focus on situations that involve financial gain.
- + Participating on a workgroup to help the state identify ways to increase the rates of vaccination. With the state seeking to both improve the rate of vaccination with its

current supply and planning for supply increases, feedback offered in this capacity has included the need to streamline barriers to physicians and other health care licensees authorized to administer vaccines to volunteer for vaccination clinics and the need to streamline the process for enrolling in the vaccination program, CalVax, for community physician practices. It has also included advocacy that community physician practices be incorporated into planning purposes because of their large numbers, wide geographic distribution, and their connection to the communities.

- + Requesting waivers to allow podiatrists, residents and medical assistants with appropriate training and under a standing order to administer vaccines.
- + Seeking for a more uniform approach across the state to the vaccine program rollout. Each individual county has wide latitude to make decisions about implementation. The variance has created confusion and frustration for both physicians and the general public about the process. A more uniform approach would smooth out some of the confusion.

CMA has also been engaged at the federal level, having advocated during the lame duck Congressional session to include additional funds for vaccine distribution and other public health efforts to address COVID, additional funds for physicians through the CARES Act HHS provider relief fund, the Paycheck Protection Program (PPP), EIDL Advance Grants, and other programs that support physician practices through COVID-19.

REVISED MAJOR ISSUE REPORTS

The Chairs of the Council on Medical Services and the Council on Science & Public Health presented their revised Major Issue reports, Future of Medical Practice Post-COVID-19 and Pandemic Response & Preparedness, respectively. These reports were revised by the Councils following the polling conducted during the virtual 2020 House of Delegates and the subsequent survey. Both reports were approved and adopted by the Board.

One amendment to the Report on Future of Medical Practice Post COVID was approved:

ADOPTED AMENDED RECOMMENDATION 4: That CMA support efforts to achieve health equity by removing barriers to access to care for minoritized and marginalized individuals. CMA does not support any coverage expansion that excludes Medi-Cal, because excluding or exempting Medi-Cal beneficiaries from coverage expansion reduces access to health care services and can exacerbate health inequities.

HEALTHY FOR ALL TECHNICAL ADVISORY COMMITTEE

The Board received an initial report from the Healthy California for All Technical Advisory Committee (TAC). This report did not contain actions; instead, it outlined draft guiding

principles for the TAC and asked for Trustees to discuss with their delegations. There was a lively discussion, and it was made clear that the TAC's work will continue in a collaborative and open fashion, in order to ensure that CMA has current and defensible policy positions in order to prepare for future state and federal deliberations.

YEAR-ROUND RESOLUTIONS PROCESS

The Council on Health Professions & Quality of Care; the Council on Membership, Governance & Bylaws; and the Council on Ethical, Legal & Judicial Affairs presented reports on the resolutions they considered in the first quarter of the 2020-2021 Year-Round Resolutions Process.

SEC. OF THE GOV OPERATIONS AGENCY, YOLANDA RICHARDSON

Secretary Yolanda Richardson, the "unofficial vaccine czar" and head of the Government Operations Agency addressed the Board about the vaccine roll out in California. Sec. Richardson emphasize a need to balance safety, speed and equity while rapidly scaling up the level of vaccine administration needed statewide.

She discussed Myturn.ca.gov which is under development to help streamline patient's ability to learn about when it's their turn to get a vaccine as well as get an appointment.

She also provided information on the third-party administration (TPA) to allocate vaccines directly to providers to maximize distribution efficiency, as well as give greater visibility to the state about what is happening 'on the ground'.

Trustees emphasized CMA's priorities regarding vaccine distribution, specifically the inclusion of physician offices and supply chain transparency, for vaccine scheduling via MyTurn to be easy to access for patients and accurate, for physicians to have flexibility to use professional medical judgment when considering eligibility guidelines for patients, and prioritization of efforts to address equity concerns, which differ from community to community.

STATE LEGISLATIVE POSITIONS UPDATE

Due to COVID-19 and the urgency of budget actions related to it, the legislature is pursuing some legislation under an expedited timetable. The Board adopted positions on bills related to eviction protections, Alcohol Beverage Control enforcement during COVID, and school reopenings. Notably, the Board adopted support for AB 10 (Ting), which would require

schools, grade levels between kindergarten and 1 to 12, to reopen within a two-week period of a public health order allowing in-person instruction to resume.

JEDI

The Board approved the JEDI Committee "Purpose and Members Responsibilities," and received an update regarding the queue of outstanding business and when to expect more output from the Committee.

GOVERNANCE REFORM TAC UPDATE

The Board discussed plans for the Governance Reform Technical Advisory Committee (TAC) and the best timing for the TAC's work. The current plan is to begin work in the Spring, after pressure and demands on the attention of leadership has lessened due to the current pressing needs of the pandemic.

LEGAL RESPONSIBILITIES AND BOARD NORMS

The Board was provided a refresher on trustee responsibilities including fiduciary responsibilities and conflict of interest, reviewed the recent board survey and current strategic priorities.