

HOD Resolutions Survey Results

In October and November, the AMA asked members to respond to a Member Connect® Survey on 2007 Interim Meeting Resolutions to ensure that their input is heard.

A total of 4,806 members responded to this survey.

We encourage you to consider the opinions voiced by our members as you deliberate these important issues.

Electronic medical records: Resolution 808

- 79 percent of members agree that the AMA should seek a full refundable federal tax credit or equivalent financial mechanism to indemnify physician practices for the cost of purchasing and implementing electronic medical record systems.
- Some members comment that it is premature to be concerned about the financial mechanism to indemnify physician practices for cost of purchasing and implementing electronic medical record systems because the infrastructure for communication between hospitals, pharmacies and physicians offices is not set up, standards are not yet in place for an electronic medical record and privacy concerns have not been addressed.

Healthcare Integrity and Protection Data Bank: Resolution 910

- 81 percent of members believe that the AMA should work to amend the Healthcare Integrity and Protection Data Bank enabling legislation, regulations, and interpretive guidelines as needed to ensure that due process is followed prior to any reporting to the Healthcare Integrity and Protection Data Bank.
- Members comment that the AMA should also work to see that the information “does not fall into the wrong hands.” They are concerned about who has access to the information in the data bank, under what circumstances, and how the individual physician’s privacy is being protected.

Prohibition of the use of FDA-approved drugs and medical devices off-label: Resolution 918

- 87 percent of members favor that the AMA advance and foster regulatory and legislative initiatives to permit and protect the off-label use and reimbursement of U.S. Food and Drug Administration-approved drugs, and medical devices off-label whose use should be considered to have demonstrated to be reasonable and necessary medical care.
- Members comment that clarification is needed of what is meant by the term “demonstrated to be reasonable and necessary medical care.” They question “who demonstrates it? To what level?”

Tiering system for third-party payers: Resolution 816

- 78 percent of members think that the AMA should develop a mechanism, for use by state medical associations, to tier third party payers on value and performance and that the information then be made available to individual and group purchasers of health care coverage as a way to promote transparency and informed decision-making in the purchase of health insurance.
- Members comment that this is “a brilliant idea,” but they do not think the AMA is the appropriate organization to be developing the mechanism.

Comments on other reports/resolutions

Members were also given the opportunity to comment on other reports/resolutions in a write-in question. None of the other reports/resolutions received a significant number of comments.

Visit www.ama-assn.org/go/survey to read other AMA Member Connect Survey results, and sign up to receive and respond to our next survey electronically.