AMA leaders on policy making during the coronavirus pandemic

Watch the AMA's daily COVID-19 update, with insights from AMA leaders and experts about the pandemic.

Featured topic and speakers

In today's COVID-19 update, AMA leadership discusses policy making during the COVID-19 pandemic as we kick off the AMA's 2020 Special Meeting of the AMA House of Delegates and the meetings of the AMA sections.

Learn more at the AMA COVID-19 resource center.

Speakers

- Lisa Egbert, MD, Vice Speaker, House of Delegates, AMA
- Bruce Scott, MD, Speaker, House of Delegates, AMA
- Russ Kridel, MD, Chair, Board of Trustees, AMA

Transcript

Unger: Hello. This is the American Medical Association's COVID-19 Update. Today, we’re talking about policy making during the pandemic as we kick off the AMA's 2020 Special Meeting of the AMA House of Delegates and the meetings of the AMA sections. I'm joined today by Dr. Russell W.H. Kridel of the AMA Board of Trustees in Houston, Texas, Dr. Bruce A. Scott, speaker of the AMA House of Delegates in Louisville, Kentucky, and Dr. Lisa Bowman Egbert, vice speaker of the AMA House of Delegates in Dayton, Ohio. I'm Todd Unger, AMA’s chief experience officer in Chicago.
Dr. Scott, for those who may not be familiar with policy making at the AMA, let's get a couple of background questions. First, sometimes we hear the House of Delegates called the House of Medicine. Why don't you start by telling us who's in that?

Dr. Scott: The House of Delegates is the legislative and policy-making body of the AMA. The state medical associations and all the specialist societies around the nation send delegates twice a year to gather together to create policy for our medical association, in interest of our patients and our profession. Now, in addition to them, we also have representatives from our sections and from the federal services, including the Public Health Service. From different public interest medical associations as well. Overall, there were over 170 different medical societies represented within our House of Delegates, which is why it's called the House of Medicine.

Unger: About how many people is that altogether?

Dr. Scott: Well, there's about 640 delegates, and each delegate has an alternate delegate as well. So, a little over 1,200 in the House of Delegates, and then we usually have a couple thousand additional observers and guests.

Unger: So let's talk about the policy making process. First of all, where does it start?

Dr. Scott: Well, one of the things I've always thought is so neat, Todd, is that any delegate can come up with a resolution, an issue if you will, that they want to be discussed. Now, a lot of times groups with similar interests will come together and they will present an issue together. And from there, it becomes a debate and discussion of our House.

Unger: And so, let's take it you've got a resolution. How does that turn into policy?

Dr. Scott: Well, after many hours of debate, and sometimes pretty rigorous debate on some of the issues, a committee, the reference committee, if you will, takes this back and tries to come up with what they believe is a consensus statement. Then they present it back to the House, and then further debate ensues. Ultimately there is a vote, and whatever the majority rules becomes the policy of the American Medical Association. Now, to step back a bit, on some complex issues, we decide further study is necessary. And we have a number of councils with expertise ranging from ethics to science, and they will sometimes consider an issue further and report back to the House at a subsequent meeting before we develop policy.

Unger: Well, Dr. Egbert, why don't we talk about now once there is a policy in place that has passed the House of Delegates, what happens from there?

Dr. Egbert: So actually, Todd, we have thousands of policies, and what we do is we organize all of those policies, and we put them in our policy compendium. And nowadays, you can find all of those
policies right on our website. We have the association’s Policy Finder program, which helps us search all of these policies by topic, by interest, and it’s available to the public on the AMA website. So that is basically the basis of what we stand for, and it’s an ever-evolving thing, as Dr. Scott said, as every year, every meeting, we add to and craft more policy and/or change old policies. So, once that’s all done, we then give it to our amazing staff who advocate on our behalf lots of different ways. They’re in the legislative bodies at both the state and national level. They are talking to the regulatory bodies, mostly at the national level, but also assisting our states. All of that policy is the backbone for our advocacy team and what we stand for, and the voice of our physicians.

Unger: Well, Dr. Scott mentioned the AMA sections before. Dr. Kridel, can you give a little background on what the AMA sections are and the role that they play in this process?

Dr. Kridel: Certainly, Todd. Well, in addition to our House of Delegates representing all physicians and specialties, we do have special interest and affinity subgroups, sections, and they encompass physicians of every age, ethnicity, sex and gender orientation, and from every practice setting and every specialty. Physicians from the U.S. medical schools, from around the world, and that diversity is what makes the organization stronger.

Now, the sections normally meet in advance of the House to discuss policy proposals, to increase their knowledge and skills at educational sessions and networking with peers with similar interests or backgrounds. This year, the AMA section meetings are being held virtually, and actually kickoff today, November 6. And we’ll meet over the next few days. There will also be a special plenary session tomorrow morning, Saturday, November 7. And we’re very excited to be stating and starting that session with a recorded conversation between Dr. Anthony Fauci, the director of the National Institutes of Allergy and Infectious Disease, and Dr. James Madara, the CEO of the American Medical Association, talking about COVID-19 and what lies ahead for physicians and medical students.

Now, following the interview, a panel of experts will discuss the AMA’s ongoing work in the areas of health equity, physician wellness and practice sustainability, medical education, advocacy and more. Now, details for that session and the other AMA section meetings can be found on the AMA website,

Unger: Dr. Kridel, if somebody is interested in getting involved in a section, what should they do?

Dr. Kridel: Well, if you’re motivated and passionate about medicine and want to make an impact in a particular area of interest, the sections, I believe, are a great way to do that. And you’ll meet with peers of similar interests and build upon your network. And so, once you’ve identified a particular section of interest, you can sign up for the section’s monthly newsletter by creating an AMA account and selecting the newsletter preferences that you want within that AMA account. And there’s an AMA account management center at amc.ama-assn.org/newsletters. That’ll help everyone out there, and that’ll help you keep up to date on activities of that section, when they meet, and what events that they are sponsoring. Then you can decide what level of involvement is right for you. Now, that could include simply attending the meetings, or joining, or enjoining, I hope, or becoming more involved and
perhaps ultimately serving in a leadership capacity on a governing council.

**Unger:** Well, speaking of meetings, Dr. Scott, how has the pandemic impacted this year’s House of Delegates meeting?

**Dr. Scott:** You know, Todd, I said earlier that our delegates gather together twice a year. Well, this year we’re going to be gathering virtually. The Board of Trustees, looking at the situation that exists within our communities right now, and the challenges that physicians are under, suspended our normal meeting. We instead are going to have a virtual meeting to be held November 13 to 17. Our delegates are going to be meeting for over 20 hours of time during those five days in order to help develop a policy for our association. We felt like it was just too important to not have another meeting this year. The House is the cornerstone of setting the policy for our Association.

**Unger:** Dr. Egbert, anyone who has seen a meeting of the House of Delegates knows that the debate can be intense and painstaking. How is that going to be managed this year in a virtual environment?

**Dr. Egbert:** Well, Todd, I think we’re about to find out, but fortunately we have a wonderful platform with a great team behind us that is hopefully going to help us manage this. We will have much more challenges obviously than we do with our in-person meetings, and because of this, the board really thought about it and tried to narrow down what is usually 150 to 300 items of business that we have to deal with in. And in trying to narrow it down, they specifically said, "Let’s talk about urgent and priority items of business for this organization." Recognizing that this is a very unprecedented time in our nation. And with health care in general, it’s important that we have our voices heard, but we also need to narrow it down to something that we can manage in an online platform. And so we’ve decided to do a prioritization process, where we’ve asked all of those delegations and delegates to take a hard look at what they want to bring to the House and say, “Is this urgent? Is this a priority?” And they have done so very, very well. We very much appreciate that. And as we go forward, we’re going to attempt to do our regular meeting in a virtual sense.

**Dr. Scott:** Well—

**Unger:** Oh, go ahead, Dr. Scott.
Dr. Scott: Todd, we're going to try to keep things as parallel as possible as an in-person meeting, recognizing all the challenges that exist. This is going to be a meeting with several thousand people, and there have been zoom meetings and virtual meetings that large, but what the unique challenge is for us, because of our democratic process of the House, there's over 1200 people who have the right to speak on any issue. And when we talked to our consultants, who have been doing this for a long time, they've never heard of anything like this. So we're out in a brave new world, and we're hoping everybody's going to be patient with us, but we're going to do everything we can to make this as efficient as possible, but more importantly, keep it as fair as possible and protect the rights of all of the delegates within our House.

Dr. Egbert: And to Dr. Scott's point, we do have online forums that are open right now for our members, so that they can comment on those resolutions that are out there and that we will be discussing at this upcoming meeting. And we encourage all members to get on those online forums at amaassociation.org, and give us your point of view on these important topics.

Unger: That's exactly right. Well, looking ahead to the meeting, I'd like to hear from you about some of the important reports or resolutions that the delegates will consider. Dr. Kridel, will you give us a little bit of a preview?

Dr. Kridel: Well, certainly. I think this is going to be a far reaching, robust House of Delegates meeting, as we will set policy on a number of critical and urgent issues. For example, resolution 406. It calls for requiring that hospitals require that there be face mask wearing for all medical professionals, all hospital staff, and visitors throughout not only the pandemic, but also the flu season so we can limit new cases. While we're so concerned about COVID-19, we can't forget the regular flu that kills 40,000 to 60,000 people alone in the U.S. every year. So, this is another step of protection for our patients.

Now, there are another two resolutions, a 203 and 205, that deal with telemedicine, which has maintained and improved care for countless patients during the pandemic. It's been a godsend and it's opened up opportunities for further use going forward. The AMA has been extremely active in supporting adoption and payment for telehealth services by the government and also by private insurers. So there must be equity in payment and patients should be able to choose their doctors for telehealth on that platform and not allow insurers to tell patients which doctors they can use telehealth with.

There's a report from CEJA, Council on Ethical and Judicial Affairs, that talks about the need for physicians to get immunizations during this time. And that sets good policy and good role modeling for our patients because we want them to get immunizations also.
Unger: Dr. Scott, can you talk a little bit more about any issues related to COVID that you think will be coming?

Dr. Scott: By all accounts, the AMA has had a robust response to COVID-19 over these many months, and all of our delegates and any members who choose to listen will hear from our leaders to recap exactly everything we've done, but in addition to that, we have a number of resolutions, some of which Dr. Kridel mentioned, that have to do with personal protective gear of our physicians and different things that they're able to do with resolutions regarding testing. So these are going to help us determine what should be our continuing response in the future, and what lessons can we learn from this pandemic in case, heaven forbid, we ever face another one?

Unger: Well, we know this environment is very, very challenging for physicians for a number of reasons. So for our final question, I want to ask each of you, what do you personally hope to accomplish at this meeting? And what message do you have for your student and physician colleagues as you embark on this important work over the coming days? Dr. Egbert, will you start?

Dr. Egbert: Absolutely, Todd. Thank you. I guess my most important message is, hang in there. The AMA has, as Dr. Scott said, had a robust and very, very face forward, I guess, response to this pandemic. We have been out supporting our physicians. You will see our President speaking on our behalf on several platforms, saying that physicians are out there following the science, doing our best and taking care of our patients. And anything to the contrary, anything said to the contrary, is ridiculous. We are here for our patients, and the AMA is here for us. I just encourage you to remember that we have your back, and we are supporting you and join us and help us continuing to support the practice of medicine.

Unger: Dr. Scott.

Dr. Scott: Over these last several months, all of us have been working to take care of our patients, to keep our practices afloat, to make sure our families and ourselves remain safe, and we need to do this together. Sometimes it frustrates me when I hear people say, "The AMA doesn't represent me," but you heard us talk earlier about how the House of Delegates has representatives from virtually every specialty in every state, in the diversity of medicine. You are represented within our House of Delegates. Sometimes I ask people, "If we're not going to unify within the AMA, who is going to be the voice for the patients and our profession?"

Does anybody think that the health plans are going to be the voice, or maybe big pharma? Or someone will leave it to the federal government? No, I think we need an organization like the AMA, and we need to come together and be part of that voice. Together, we can make it through this pandemic and we can do it together.
Unger: Dr. Kridel, any final thoughts?

Dr. Kridel: Yes. And I'd like to re-emphasize what Doctors Egbert and Scott have just said, but while we're totally concerned about limiting the spread of the coronavirus and helping patients navigate the best ways to do so, we cannot lose sight and must support physician practices which have been hit hard by the virus and need help to survive the financial disaster that the virus has caused, resulting in some physician practices actually closing down.

Now, similarly, we must encourage patients to return to their physician's offices to get necessary cancer and health screening, routine follow-up and evaluation so that there are no increases in preventable diseases or increased severity of illnesses because of delay. The public needs to know that physicians' offices are safe. So I look forward to the meeting and I look forward to new policy being put forth for the betterment of health of the public and for helping physicians.

Unger: Thanks so much, Dr. Kridel, Dr. Scott, Dr. Egbert for being here today and for all the important work that you do on behalf of our nation's physicians. Good luck with the meeting.

That concludes today's COVID-19 Update. We'll be back soon with another segment. For resources on COVID-19, go to ama-assn.org/COVID-19. Thanks for joining us, and please take care.

Disclaimer: The viewpoints expressed in this video are those of the participants and/or do not necessarily reflect the views and policies of the AMA.