

Top 10 stories from the November 2020 AMA Special Meeting

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Nearly 700 physicians, residents and medical students gathered for the November 2020 AMA Special Meeting of the AMA House of Delegates (HOD) to consider a wide array of proposals to help fulfill the AMA's core mission of promoting medicine and improving public health. As they did in June, the delegates met virtually to keep themselves and their patients as safe as possible at a time when the U.S. is seeing all-time high daily loads of COVID-19 cases.

Pandemic's new challenges

Fighting a once-in-a-lifetime pandemic is formidable enough. AMA President Susan R. Bailey, MD, told delegates that doing so in concert with battling against misinformation about science and medicine has been a fight physicians shouldn't have to wage. (Watch or read Dr. Bailey's speech.)

"Never again can we allow the politics of division to undermine our ability to deliver the very best care to our patients," she said during the meeting's opening session. "Never again can we allow anti-science bias and rhetoric to undermine our public health institutions and discredit the work of physicians, scientists and researchers." Read more about Dr. Bailey's speech, in which she described how physicians face a two-front battle on COVID-19.

James L. Madara, MD, the AMA's executive vice president and CEO, told delegates that COVID-19 has tested physicians and the health care system, and its full impact on society may not be known for some time. But it has also provided validation, even if painful, that the AMA's strategic plan has put the organization on the right path. (Watch or read Dr. Madara's speech.)

"The work of the AMA is long-term and policy-driven," he said. But then an unanticipated crisis arrives and, rather than steady progress, an immediate, nimble and flexible response is required, which the AMA has provided during the COVID-19 pandemic. Read more from Dr. Madara about the AMA's pandemic response.

A stirring video shown during the Special Meeting pays tribute to the physicians who have risked so much to save lives during the pandemic while outlining the many ways the AMA sprang into action to stand up for patients and the doctors who care for them.

For an AMA sections plenary session that preceded the HOD meeting, Dr. Madara conducted an exclusive interview with Anthony S. Fauci, MD, director of the National Institute of Allergy and Infectious Diseases and a member of the White House coronavirus task force. Read more about Dr. Fauci's 2021 forecast on SARS-CoV-2 vaccines and COVID-19 treatments.

Consequential policy actions

Delegates took several important actions to reinforce the AMA's fervent advocacy for patients and physicians during the pandemic. Among other steps, the HOD moved to support widespread telehealth adoption post-SARS-CoV-2, help for state Medicaid programs, efforts to combat misinformation about COVID-19 vaccines, and a bipartisan congressional investigation into U.S. pandemic response.

Meanwhile, during the Special Meeting, Dr. Bailey published an AMA Leadership Viewpoints column detailing why the federal transition in pandemic response must start now.

The House of Delegates, however, also turned its attention to many other significant issues. Here are the top 10 news stories from our coverage of the meeting's policy actions—in no particular order.

1

Physicians back new approaches to cover more of the uninsured

There is true potential to make significant strides in covering the uninsured by pursuing auto-enrollment as a strategy to cover many of the remaining uninsured who have coverage options available to them at no cost after any applicable subsidies. In addition, a public option has the potential to provide patients with more health plan choice.

Before either of these approaches to cover the uninsured and improve coverage affordability are implemented, however, safeguards need to be developed to protect

patients, physicians and their practices.

“A public option should not be seen as a panacea to cover the uninsured,” Dr. Bailey said. “It should not be used to replace private insurance; rather, it can be used to maximize competition. With appropriate guardrails, the AMA will examine proposals that would provide additional coverage options to our patients.”

2

AMA: Racism is a threat to public health

Building on its June pledge to confront systemic racism and police brutality, the AMA took action to explicitly recognize racism as a public health threat and detailed a plan to mitigate its effects.

“As physicians and leaders in medicine, we are committed to optimal health for all, and are working to ensure all people and communities reach their full health potential,” said AMA Trustee Willarda V. Edwards, MD, MBA. “Declaring racism as an urgent public health threat is a step in the right direction toward advancing equity in medicine and public health, while creating pathways for truth, healing, and reconciliation.”

In separate actions, the HOD adopted two new policies recognizing race as a social construct, rather than a biological construct. The policies aim to advance data-driven, anti-racist concepts challenging the clinical application of race and its effects on vulnerable patient populations.

3

Spelling out physicians’ duties on COVID-19 vaccination

When there’s a safe, effective vaccine to help prevent spread of a pandemic disease, physicians without a medical contraindication have an ethical duty to become immunized. That is among the recommendations in an AMA Council on Ethical and Judicial Affairs report the HOD adopted.

“Physicians and other health care workers who decline to be immunized with a safe and effective vaccine, without a compelling medical reason, can pose an unnecessary medical risk to vulnerable patients or colleagues, said AMA Trustee Michael Suk, MD, JD, MPH, MBA. “Physicians must strike an ethical balance between their personal commitments as moral individuals and their obligations as medical professionals.”

4

AMA to help shape clear criteria for compassionate release of inmates

Delegates adopted policies aimed at allowing compassionate release for seriously ill inmates and preventing the spread of disease in correctional facilities.

“Throughout the COVID-19 pandemic, we’ve seen the virus spread quickly in high-density populations, particularly in correctional facilities. Because of the high risk of SARS-CoV-2 infection among people who are incarcerated, and correctional and detention center workers, the AMA is advocating for increased infection control measures, additional PPE and priority access to vaccines to prevent the spread of COVID-19,” said AMA Trustee Ilse R. Levin, DO, MPH & TM.

“Being incarcerated or detained should not be synonymous with being left totally vulnerable to COVID-19. These steps are vital to protect people and stop the spread of the virus,” Dr. Levin said.

5

Workplace bullying must have absolutely no place in medicine

Data suggests that bullying among physicians is prevalent throughout the continuum of training and into practice, says an AMA Board of Trustees Report the HOD adopted.

“Bullying in the workplace is a complex type of unprofessional conduct. Bullying in medicine happens as a result of a combination of individual, organizational and systemic issues,” the report says. “The first line of defense against this destructive behavior are physicians, residents and medical students. There is no justification for bullying, disrespect, harassment, intimidation, threats or violence of any kind to occur among professionals whose primary purpose is to heal. Physicians choose medicine as their life’s work for many reasons, one of the most important being their desire to help and care for people.”

6

After Hahnemann, AMA steps up efforts to protect residents

The 2019 closure of Hahnemann University Hospital in Philadelphia left more than 550 residents and fellows without a program accredited by the Accreditation Council for Graduate Medical Education (ACGME) in which they could continue their graduate medical education. An AMA Council on Medical Education report that “the closure of a

large, long-standing teaching institution due to the financial decisions of its for-profit owner may have been sudden, and certainly historic, but such closures may become more frequent given the current health care financial environment.”

“By creating a policy playbook to plan ahead and prepare for potential shutdown circumstances, we can better assist these physicians-in-training in moving forward as seamlessly as possible, allowing them to focus on completing their training and caring for patients,” AMA Trustee Grayson Armstrong, MD, MPH, said of the actions taken at the Special Meeting.

7

Law enforcement’s excessive use of force is a public health issue

Amid the nation’s racial reckoning in the wake of the deaths of George Floyd and others, the AMA advocated for an end to police brutality. With passionate testimony on the topic at the Special Meeting, the AMA reinforced its commitment to changing the way the public is policed.

“The data make clear that police brutality—one manifestation of systemic racism—has significant public health consequences for impacted communities, particularly among the Black community,” AMA Trustee Willie Underwood III, MD, MSc, MPH, said in a statement.

“The AMA is dedicated to actively working on dismantling racist policies and practices across all of health care, and we call on stakeholders to make systemic changes to protect public health and combat the detrimental effects that racism and communal violence have on the health of the nation,” Dr. Underwood said.

8

As challenges mount, AMA forms section for private practice doctors

At a time when physicians of all stripes face unprecedented financial strains due to the COVID-19 pandemic, those working in private practice are facing additional challenges. A new AMA survey found physicians averaged a 32% drop in revenue since February, and those such as Milwaukee family doctor Barbara Hummel, MD, have taken an even bigger hit.

Dr. Hummel, an AMA delegate for the Wisconsin Medical Society, recently told *USA Today* that her patient volume has fallen about 50%. “My practice is technically bankrupt, so I’m

paying all my expenses out of my personal funds ... using retirement savings,” said Dr. Hummel, also secretary of the AMA Private Practice Physicians Congress.

The HOD voted to make the group a formal section—the AMA Private Practice Physicians Section. AMA sections “allow a voice in the house of medicine for large groups of physicians who are connected through a unique perspective, but may be underrepresented,” says AMA policy on member component groups.

9

When patients are prejudiced, here’s what physicians should do

About 70% of Black physicians have reported hearing offensive comments based on their personal characteristics, says survey research cited in an AMA Council on Ethical and Judicial Affairs report adopted at the Special Meeting. The council’s report details the problem and offers ethics guidance for physicians.

“Disrespectful, derogatory, or prejudiced, language or conduct or prejudiced requests for accommodation of personal preferences on the part of either patients or physicians can undermine trust and compromise the integrity of the patient-physician relationship,” the council’s report says. “It can make individuals who themselves experience (or are members of populations that have experienced) prejudice reluctant to seek care as patients or to provide care as health care professionals, and create an environment that strains relationships among patients, physicians, and the health care team.”

10

Dietary supplements: Tighter rules, better counseling a must

While millions of patients use dietary supplements, the current regulatory structure does not properly protect the public. Since the Dietary Supplement Health and Education Act was passed 26 years ago, the dietary supplement industry has been reshaped by a complex global supply chain, the internet and newly discovered ingredients with unknown safety, says an AMA Council on Science and Public Health report adopted at the Special Meeting.

“Patients and physicians expect the dietary supplements they purchase and recommend to be safe, quality products that are accurately labeled with their contents. As the dietary supplement industry continues to grow with little oversight, many more people will use supplements without having a clear understanding of what’s contained in these products—potentially putting their health at risk,” said AMA Immediate-past Board Chair

Jesse M. Ehrenfeld, MD, MPH.

“We need the federal government to step up its regulation and enforcement of the dietary supplement industry to remove unsafe products from the market and protect public health,” Dr. Ehrenfeld said.

To catch up with the rest of the news and key moments from the House of Delegates gathering, read our complete highlights from the November 2020 AMA Special Meeting.