

Top 10 stories from the June 2021 AMA Special Meeting

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Nearly 700 physicians, residents and medical students gathered for the June 2021 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 have done since the global pandemic was declared last year, the delegates met virtually.

Pandemic heroism sets path for work ahead

“This is a consequential time in American history, and in the history of medicine,” new AMA President Gerald E. Harmon, MD, said in his inaugural address. The nation is “at war against seemingly formidable adversaries: the COVID-19 pandemic, which has led to the deaths of millions worldwide, and hundreds of thousands here at home, prolonged isolation and its effects on emotional and behavioral health, political and racial tension, and the immense battle to rid our health system—and society—of health disparities and racism.” Watch or read Dr. Harmon’s speech.

Susan R. Bailey, MD, now the AMA’s immediate past president, told delegates that “no one has shouldered more in this pandemic than our courageous colleagues on the front lines—brave men and women from every state who have gone above and beyond in service to their patients and communities. You will remain in our hearts and in our thoughts long after this pandemic is over.” Watch or read Dr. Bailey’s speech.

Executive Vice President and CEO James L. Madara, MD, detailed the role “a more nimble, focused” AMA played in supporting physicians during a once-in-a-generation public health crisis and how that response can be channeled to advance health equity. “Physicians stood tall. And the AMA stood with them,” he said. Watch or read Dr. Madara’s speech.

During the AMA Special Meeting’s opening session, AMA delegates watched this touching video that pays tribute to the physician heroes we’ve lost to COVID-19.

Consequential policy actions

Delegates took many important actions to reinforce the AMA’s fervent advocacy for patients and physicians during the pandemic, with an eye pointed hopefully toward America’s post-pandemic future.

Here are the top 10 news stories from our coverage of the meeting’s policy actions—in no particular order.

AMA details way forward on COVID-19 vaccine mandates, credentials

There has been a lot of discussion around vaccine credentialing and mandatory vaccination as ways to return to “normal” while states work to reach President Joe Biden’s goal of vaccinating 70% of American adults by Independence Day. Delegates adopted new policies aimed at ensuring the country approaches these issues in a well thought out, equitable way.

“Given the high rate of asymptomatic transmission in COVID-19, vaccinating the greatest number of individuals possible is critical. While vaccines are highly effective public health tools, vaccine mandates are a blunt instrument and may carry the risk of eroding trust and undermining public health goals,” said Dr. Harmon.

“We can reach herd immunity with a robust public campaign which would have the benefit of respecting patients’ autonomy and minimize disproportional burdens on marginalized communities,” he added. “Failure to achieve herd immunity is more likely to result in mandates.”

U.S. physicians seek aid for other countries battling COVID-19

With fewer than 3 billion SARS-CoV-2 vaccine doses administered worldwide and COVID-

19 ravaging countries such as India and Brazil, the HOD took action to promote equitable distribution of resources in response to the pandemic.

“COVID-19 is a public health and humanitarian crisis,” said AMA Board Chair-elect Bobby Mukkamala, MD. “Even as we in the United States have easy access to vaccines, physicians and numerous organizations across the globe—particularly in low- and middle-income countries—are still risking their lives fighting COVID-19 in conditions where hospital capacity is strained, medical supplies are diminished and community spread is rampant.

Among other measures, delegates called for a temporary waiver of the Trade Related Aspects of Intellectual Property agreement and other relevant intellectual property protections to boost COVID-19 vaccination worldwide.

Call for action to help telehealth flourish post-pandemic

The use of telehealth exploded during the COVID-19 pandemic, but critical issues related to health inequity, state medical licensure requirements, regulation and payment must be addressed for this mode of care to continue to flourish beyond the public health emergency. Delegates took several actions with the aim of doing just that.

“It is essential for physicians to serve as leading partners in efforts to improve access to telehealth services in historically marginalized and minoritized communities,” said David H. Aizuss, MD, a member of the AMA Board of Trustees. “More of our patients used telehealth during the COVID-19 pandemic, and we should take advantage of this opportunity to ensure all our patients are able to benefit from being able to access and use telehealth services—regardless of their background or geographic location.”

AMA guidelines offer path to prevent discrimination in medicine

In response to the urgent and abiding need for strategies to stamp out discrimination in medical settings, the HOD adopted guidelines to help health care organizations establish the policy and organizational culture needed to prevent and address systemic racism, explicit and implicit bias, and microaggressions.

“Systemic racism in medicine is the most serious barrier to the advancement of health equity and appropriate medical care,” said AMA Trustee Willarda V. Edwards, MD, MBA. The House of Delegates’ actions “will inform the AMA’s active work to proactively identify, prevent and eliminate racism and will help the AMA guide health care organizations in

efforts to adopt workplace policies that promote positive cultural transformation and address the root cause of racial health inequities.”

Make peer-to-peer prior authorization talks more effective

Health plans employ prior authorization (PA) and other forms of utilization management (UM) to control access to certain treatments in a bid to cut health care spending. Peer-to-peer (P2P) discussions between physicians and insurance company doctors are too often just another barrier to care, according to an AMA Council on Medical Service report adopted at the AMA Special Meeting. The report details how to reduce the impediments to care associated with the P2P prior authorization process.

“The rationale behind P2P is to provide a more transparent PA process that is collaborative and appropriately follows relevant clinical guidelines,” says the report. “However, for many treating physicians, P2P review simply represents another time-consuming and potentially detrimental use of UM by insurance companies.”

Pragmatic measures address rural health care’s complex challenges

Long-term solutions are needed to effectively address the health needs of rural Americans and the sustainability of the rural health care system. This includes ensuring adequate payment for services and adjusting value-based payment methodologies that make it more likely that rural hospitals will receive penalties rather than bonuses, according to an AMA Council on Medical Service report adopted at the Special Meeting.

“On average, rural residents are older, sicker and less likely to have health insurance—a particularly dangerous combination at a time when more than 40% of rural hospitals are at risk of closing,” Dr. Bailey said. “Most of the hospitals at risk of closing are small rural hospitals, serving isolated communities. Without long-term solutions, the health needs of rural populations will not be met. The AMA has long advocated for telehealth as a critical part of effective, efficient and equitable health care delivery, and ensuring telehealth and telephone access in rural communities is particularly important.”

Resident physicians should get help to shoulder financial burdens

One in four medical students graduates with training-related debt that exceeds \$200,000, and half report burdens greater than \$150,000.

“Between financial restraints and 80-hour workweeks, trainees often struggle with having the time and budget for necessities. When residency and fellowship programs provide benefits to assist with these needs, it can significantly improve trainee well-being,” said AMA Trustee Jesse M. Ehrenfeld, MD, MPH.

The AMA will work with stakeholders to advocate for additional ways to defray costs related to residency and fellowship training, including essential amenities or high-cost, specialty-specific equipment required to perform clinical duties.

More resources needed to help millions living with “long COVID”

Up to 10 million Americans are likely to experience post-acute sequelae of SARS-CoV-2 infection, often called long COVID. And of those who had COVID-19, 10–30% experienced at least one persistent symptom up to six months after their infection was cleared. The AMA will push for more research, funding and education to help Americans with long COVID.

“There is much we still don’t know about COVID-19 and while many people with COVID-19 recover in the weeks following illness, we’re seeing patients experiencing symptoms that either last, or appear, many weeks or months after becoming infected,” said AMA Trustee Sandra Adamson Fryhofer, MD. “Yet, our country currently lacks the necessary resources to adequately support and provide expert care to patients with long-haul COVID. That’s why we must continue following the science and conducting research so we can better understand the short and long-term health impacts of this novel illness.”

Require access to Rx for opioid-use disorder in prisons, jails

More than 90,000 people died from a drug overdose during a 12-month period ending in September—the highest number ever recorded in the U.S. Nearly 5% of those deaths were among people who had been released from prison or jail in the past month.

“Access to medication treatment in correctional facilities is not only protected by the law, but it is essential for providing evidence-based care for our patients with a substance use disorder,” said AMA Trustee Willie Underwood III, MD, MS, MPH. “We call on all jails, prisons, drug diversion and community re-entry programs to save lives by ensuring access to mental health and substance-use disorder treatment.”

Social media networks must crack down on medical misinformation

The COVID-19 pandemic is the first public health emergency in which social media has been used widely. While more than two-thirds of Americans get their news from at least one social media outlet, that information does not go through the same vetting process that is done by professional news organizations. This allows medical misinformation to be conveyed as real news.

“With more and more patients relying on social media for information—including medical information—dangerous misinformation about vaccines and public health issues poses a serious risk to patient health,” said Dr. Fryhofer. “We strongly urge social media companies to further bolster their content moderation of medical and public health information, including enhanced content monitoring, augmentation of recommendation engines focused on false information, and stronger integration of verified health information.”

To catch up with the rest of the news and key moments from the House of Delegates gathering, read our complete highlights from the June 2021 AMA Special Meeting.