

## Follow-Up on Implementation of Resolutions and Report Recommendations AMA House of Delegates Interim Meeting - November 8-11, 2014

Report/Resolution	Title	House Action	Status
BOT Report 01-I-14	Pap Testing Guidelines: HEDIS versus USPSTF (Resolution 118-A-13)	Recommendations in BOT Report 1-I-14 Adopted, Remainder of Report Filed.	AMA Policy Database Updated.
BOT Report 03-I-14	Facilitating State Licensure for Telemedicine Services	Recommendations in BOT Report 3-I-14 Adopted, Remainder of Report Filed.	Recommendations 1 & 2 – Our AMA has supported the FSMB Interstate Compact for Medical Licensure through direct support and counsel to interested state medical associations and, at the request of state medical associations, submitted testimony in support of the Compact to legislatures in six states. <b>No further action required.</b>
BOT Report 05-I-14	FDA Regulation of Off-Label Drug Promotion (Resolution 218-I-13)	Recommendations in BOT Report 5-I-14 Adopted as Amended, Remainder of Report Filed.	AMA Policy Database Updated.
BOT Report 09-I-14	Specialty Society Representation in the House of Delegates - Five-Year Review	Recommendations in BOT Report 9-I-14 Adopted, Remainder of Report Filed.	AMA Policy Database Updated.
CEJA Report 01-I-14	Physician Exercise of Conscience	Adopted.	Council on Ethical and Judicial Affairs Opinion 1 appears in the Delegates Handbook for the 2015 Annual Meeting. (Informational) <b>HOD Action: Filed.</b>
CEJA Report 02-I-14	Prescribing and Dispensing Sample Medications	Referred.	Council on Ethical and Judicial Affairs Report 2 on this subject appears in the Delegates Handbook for the 2015 Annual Meeting. (Reference Committee on Amendments to Constitution and Bylaws) <b>HOD Action: Referred.</b>
CEJA Report 03-I-14	Modernized Code of Medical Ethics	Referred.	Council on Ethical and Judicial Affairs Report 3 on this subject appears in the Delegates Handbook for the 2015 Annual Meeting. (Reference Committee on Amendments to Constitution and Bylaws) <b>HOD Action: Referred.</b>
CLRPD Report 01-I-14	Section on Medical Schools Five-Year Review	Recommendations in CLRPD Report 1-I-14 Adopted, Remainder of Report Filed.	AMA Policy Database Updated.

<b>Report/Resolution</b>	<b>Title</b>	<b>House Action</b>	<b>Status</b>
CMS Report 01-I-14	Hospital Admissions and Patient Management Contractors	Recommendations in CMS Report 1-I-14 Adopted as Amended, Remainder of Report Filed.	Recommendation 1 – Our AMA notified the Federation that AMA is interested in (1) continuing its work with state medical associations to monitor utilization management policy to ensure that hospital admissions are reviewed by appropriately qualified physicians; and (2) promoting related AMA model state legislation. <b>No further action required.</b>
CMS Report 02-I-14	Privacy Issues Regarding Insurance Company Explanation of Benefits (Resolution 801-I-13)	Recommendations in CMS Report 2-I-14 Adopted as Amended, Remainder of Report Filed.	AMA Policy Database Updated.
CMS Report 03-I-14	Reference Pricing (Resolution 808-I-13)	Recommendations in CMS Report 3-I-14 Adopted as Amended, Remainder of Report Filed.	AMA Policy Database Updated.
CMS Report 04-I-14	Network Adequacy (Resolutions 113, 125 and 130-A-14)	Recommendations in CMS Report 4-I-14 Adopted as Amended, Remainder of Report Filed.	Recommendations 9 & 12 – Our AMA notified the Federation that the AMA is committed to supporting fair and equitable compensation to out-of-network providers in the event that a provider network is deemed inadequate by the health plan or appropriate regulatory authorities. Our AMA also notified the Federation that it is interested in advocating for legislation that prohibits health insurers from falsely advertising that enrollees in their plans have access to physicians of their choosing if the health insurer’s network is limited. <b>No further action required.</b>
CMS Report 05-I-14	Medicaid Expansion Options and Alternatives	Recommendations in CMS Report 5-I-14 Adopted as Amended, Remainder of Report Filed.	AMA Policy Database Updated.
CMS Report 06-I-14	The Future of Employer-Sponsored Insurance	Recommendations in CMS Report 6-I-14 Adopted, Remainder of Report Filed.	AMA Policy Database Updated.
CMS Report 07-I-14	Medicaid Primary Care Payment Increases (Resolutions 116-A-13 and 103-A-14)	Recommendations in CMS Report 7-I-14 Adopted as Amended, Remainder of Report Filed.	Our AMA wrote to Rep. Kathy Castor (D-FL) in support of H.R. 5723, the “Ensuring Access to Primary Care for Women and Children Act,” on November 21, 2014, and is in communication with the Senate and House sponsors of this year’s legislation. Our AMA also notified the Federation that our AMA is committed to advocating for the Affordable Care Act’s Medicaid primary care payment increases to continue past 2014 in a manner that does not negatively impact payment for any other physicians. Our AMA informed the Federation that our AMA has model state legislation entitled the, “Medicaid Primary Care Payment Parity Act” that raises Medicaid reimbursement rates for certain primary care services to 100 percent of Medicare rates. <b>No further action required.</b>

Report/Resolution	Title	House Action	Status
CMS Report 08-I-14	Modernizing TRICARE Payment Policies (Resolution 108-A-14)	Recommendations in CMS Report 8-I-14 Adopted as Amended, Remainder of Report Filed.	Our AMA is continuing to advocate for reforms in TRICARE payment policies that remove barriers to physician participation, support new delivery models, and fully reimburse vaccines, transitional care management, mental health services, and services by non-physicians in physician-led health care teams. <b>No further action required.</b>
CMS Report 09-I-14	Regulation of Provider-Performed Microscopy Procedures (Resolution 715-A-14)	Recommendations in CMS Report 9-I-14 Adopted as Amended, Remainder of Report Filed.	Our AMA sent a letter to CMS concerning the oversight of laboratories where provider-performed microscopy procedures are performed. The letter identifies opportunities for modernization and streamlining. <b>Our AMA continues to emphasize to Congress and CMS that oversight should be risk-based. As a result, our AMA has made clear to Senate HELP, House Energy and Commerce, and federal regulators that increased regulation of waived and moderate risk tests is not appropriate and enhancements to oversight should be to high complexity tests.</b>
CSAPH Report 01-I-14	Genomics in Hypertension: Risk Prediction and Treatment	Recommendations in CSAPH Report 1-I-14 Adopted as Amended, Remainder of Report Filed.	AMA Policy Database Updated.
CSAPH Report 02-I-14	Electronic Cigarettes, Vaping, and Health: 2014 Update	Recommendations in CSAPH Report 2-I-14 Adopted as Amended in Lieu of Resolutions 919, 927 and 930, Remainder of Report Filed.	AMA Policy Database Updated.
CSAPH Report 03-I-14	Tornado Safety and Manufactured Homes (Resolution 401-A-13)	Recommendations in CSAPH Report 3-I-14 Adopted, Remainder of Report Filed.	AMA Policy Database Updated.
CSAPH Report 04-I-14	Role of Pharmacists in Improving Immunization Rates (Resolution 212-I-12)	Recommendations in CSAPH Report 4-I-14 Adopted, Remainder of Report Filed.	AMA Policy Database Updated.
Report of the Speakers 2	Rules for Campaign Parties	Adopted.	AMA Policy Database Updated.
RES 001-I-14	Advance Directives During Pregnancy	Referred.	A Board of Trustees Report will be prepared for consideration by the House of Delegates at the 2015 Interim Meeting. <b>Board of Trustees Report 9 on this subject appears in the Delegates Handbook for the 2015 Interim Meeting. (Reference Committee on Amendments to Constitution and Bylaws)</b>

Report/Resolution	Title	House Action	Status
RES 002-I-14	Protecting Medical Students' Rights as Patients	Adopted.	AMA Policy Database Updated.
RES 003-I-14	Solitary Confinement of Juveniles in Legal Custody	Adopted as Amended with Change in Title.	AMA Policy Database Updated.
RES 004-I-14	Legal Protection and Social Services for Commercially Sexually Exploited Youth	Adopted as Amended.	Our AMA notified the Federation that our AMA is committed to working with states and specialties to (1) where appropriate, advocate for legal protection and alternatives to incarceration for commercially sexually exploited youth as an alternative to prosecution for crimes related to their sexual or criminal exploitation; and (2) encourage the development of appropriate, and comprehensive, trauma-informed services as an alternative to criminal detention in order to overcome barriers to necessary services and care for commercially sexually exploited youth. <b>No further action required.</b>
RES 005-I-14	Opt-Out Organ Donation	Policies H-370.966 and D-370.985 Reaffirmed in Lieu of Resolution 5-I-14.	AMA Policy Database Updated.
RES 006-I-14	Physician Civil Discourse	Substitute Resolution 6 Adopted.	AMA Policy Database Updated.
RES 007-I-14	Delegate Counts for RFS Assembly Meetings	Adopted.	Council on Constitution and Bylaws Report 1 on this subject appears in the Delegates Handbook for the 2015 Annual Meeting. (Reference Committee on Amendments to Constitution and Bylaws) <b>HOD Action: Recommendations in CCB Report 1-A-15 Adopted, Remainder of Report Filed.</b>
RES 008-I-14	Ensuring Access to Health Care, Mental Health Care, Legal and Social Services for Unaccompanied Minors and Other Recently Immigrated Children and Youth	Adopted as Amended with Change in Title.	Our AMA notified the Federation that AMA is committed to collaborating with medical societies and all clinicians to (1) work together with other child-serving sectors to ensure that new immigrant children receive timely and age-appropriate services that support their health and well-being and (2) secure federal, state, and other funding sources to support those services. <b>No further action required.</b>
RES 201-I-14	Short-Term Urgent Refills	Referred.	A Council on Medical Service Report on this subject will be prepared for consideration by the House of Delegates at the 2015 Interim Meeting. <b>Council on Medical Service Report 3 on this subject appears in the Delegates Handbook for the 2015 Interim Meeting. (Reference Committee J)</b>

Report/Resolution	Title	House Action	Status
RES 202-I-14	Sobriety Checkpoints	Adopted as Amended.	<p>Our AMA notified the Federation that AMA supports the use of legal and constitutional sobriety checkpoints to deter driving following alcohol consumption. Our AMA also notified the Federation of the AMA's commitment to work with interested state medical societies to pursue legislation to overturn bans on the use of sobriety checkpoints.</p> <p><b>No further action required.</b></p>
RES 204-I-14	ICD-10 and Cost of Coding Changes	Adopted.	<p>Our AMA sent a letter on May 4, 2015 to the Centers for Medicare &amp; Medicaid Services (CMS) regarding our concerns with the agency's implementation plans for moving to ICD-10, with 100 Federation members signing onto the letter. The letter strongly urged CMS to consider the following:</p> <p>CMS to release more detailed end-to-end testing results broken out by the type and size of providers who tested, number of claims tested by each submitter, percentage of claims successfully processed, and specific details about problems encountered.</p> <p>CMS to: 1) provide details on how it plans to ensure that the measure calculations for these programs are not adversely impacted by the transition to ICD-10; and 2) ensure cross-walks do not attribute increased costs to a physician's value-based payment modifier score when switching to ICD-10. Any changes in measure specifications from ICD-9 to ICD-10 should demonstrate stability and be budget neutral during the transition.</p> <p>Our AMA also recently sent a letter of support to The Honorable Ted Poe, U.S. House of Representatives for his "Cutting Costly Codes Act of 2015, H.R. 2126 bill" that would stop the implementation of ICD-10.</p> <p>At the present time, there is no legislation pending before Congress that would fund physician efforts to implement ICD-10. Under pressure from a wide variety of interests, Congress has grown increasingly committed to implementation of ICD-10 without further delay. Our AMA continues to advocate on ICD-10 implementation issues to secure relief for physician practices.</p> <p><b>No further action required.</b></p>
RES 205-I-14	Juvenile Justice System Reform	Referred.	<p>A Council on Science and Public Health Report on this subject will be prepared for consideration by the House of Delegates at the 2015 Interim Meeting.</p> <p><b>A Council on Science and Public Health Report on this subject will be prepared for consideration by the House of Delegates at the 2016 Annual Meeting.</b></p>

Report/Resolution	Title	House Action	Status
RES 206-I-14	Help Control Pharmaceutical Costs	Adopted.	<p>Our AMA policy on this matter is well established. However, at this time, there is no foreseeable pathway for the successful enactment of legislation to establish negotiated pricing for pharmaceutical products under Part D. Res. 206 calls on our AMA to work toward eliminating the Medicare prohibition on drug price negotiation. This prohibition was included in the Medicare Modernization Act of 2003, which established the Medicare Part D program. In February 2015, the proposed budget that President Obama submitted to Congress for fiscal year 2016 included a proposal to allow the Secretary of Health and Human Services to negotiate prices for biotechnology treatments and other high-cost drugs in Medicare Part D in order to ensure access to and affordability of these treatments. As the prohibition was included in the 2003 law, however, it will require congressional action to modify it. HHS Secretary Burwell has indicated she would work with members of Congress to develop a detailed plan. Our AMA will work with the Administration and Congress as the details of their plan are developed.</p> <p><b>Our AMA Council on Medical Service has prepared a comprehensive report, “Pharmaceutical Costs,” which is under review by the HOD at the 2015 Interim Meeting.</b></p> <p><b>Numerous Congressional proposals on drug pricing issues, including negotiations, have been introduced in the 114th Congress. The Council on Legislation will be reviewing a number of these during its November 2015 meeting.</b></p>
RES 207-I-14	Generic Pharmaceutical Pricing	Referred. (With Resolution 228-I-14)	<p>A Council on Medical Service Report on this subject will be prepared for consideration by the House of Delegates at the 2015 Interim Meeting. (With Resolution 228-I-14)</p> <p><b>Council on Medical Service Report 2 on this subject appears in the Delegates Handbook for the 2015 Interim Meeting. (Reference Committee J)</b></p>
RES 208-I-14	Stark Law and Physician Compensation	Referred.	<p>A Board of Trustees Report will be prepared for consideration by the House of Delegates at the 2015 Interim Meeting.</p> <p><b>Board of Trustees Report 6 on this subject appears in the Delegates Handbook for the 2015 Interim Meeting. (Reference Committee B)</b></p>
RES 209-I-14	Expansion of Safe Drug Disposal Sites	Adopted as Amended.	<p>Our AMA has advocated via letters and testimony to the National Conference of Insurance Legislators and the National Governors Association for safe Take Back and disposal programs.</p> <p><b>No further action required.</b></p>

Report/Resolution	Title	House Action	Status
RES 210-I-14	AMA Promotion of Improved Electronic Health Records	Adopted as Amended.	<p>Our AMA has weighed in at every opportunity to aggressively urge the administration to reduce the burden of the Meaningful Use (MU) program on physicians and modify the penalties. Our AMA has continuously met with the administration, members of Congress and other stakeholders to address these issues. Extensive comments have been submitted on multiple regulations. Our AMA is encouraged by the proposed changes to Stage 2 of the MU program, and are working to ensure that the administration finalizes the policy. While our AMA is also encouraged by some of the changes in the proposed certification rule, the Certification program retains its overall complexity and limits product innovation. Consequently, our AMA is pressing for additional modifications to the rule. Lastly, our AMA remains concerned about the proposed policies in the MU Stage 3, and we are seeking significant changes to the rule.</p> <p><b>Our AMA continues to make improving EHRs significantly a priority. Our AMA aggressively engaged the Administration on the major improvements needed regarding the Meaningful Use (MU) modification regulation, the MU Stage 3 regulation, as well as the Certification regulation. Our AMA elevated efforts to get the attention of policymakers by launching the Break the Red Tape site and campaign. Our AMA held two town halls that received a great deal of attention.</b></p>
RES 211-I-14	CPR Training	Adopted as Amended in Lieu of Resolution 212.	<p>Our AMA notified the Federation that our AMA supports and is interested in collaborating on legislation that would encourage high school students to be trained in cardiopulmonary resuscitation.</p> <p><b>No further action required.</b></p>
RES 212-I-14	CPR Training as a High School Graduation Requirement	Resolution 211 Adopted as Amended in Lieu of Resolution 212.	See Res 211-I-14.
RES 213-I-14	Cannabis - Expanded AMA Advocacy	Adopted as Amended.	<p>Our AMA notified the Federation that our AMA is committed to working with interested states and specialties on the following: (1) educating legislators as to the health effects of cannabis use as elucidated in CSAPH Reports I-13 and A-09 and as additional scientific evidence becomes available; (2) urging legislatures to delay initiating full legalization of any cannabis product until further research is completed on the public health, medical, economic and social consequences of use of cannabis and instead, support the expansion of such research; (3) educating legislators regarding AMA's policy position that stresses "public health" as contrasted with a "criminal" approach to cannabis; and (4) encouraging model legislation that would require placing the following warning on all cannabis products not approved by the US Food and Drug Administration: "Marijuana has a high potential for abuse. It has no scientifically proven, currently accepted medical use for preventing or treating any disease in the United States."</p> <p><b>No further action required.</b></p>

<b>Report/Resolution</b>	<b>Title</b>	<b>House Action</b>	<b>Status</b>
RES 214-I-14	Pain Medicine	Referred.	A Board of Trustees Report will be prepared for consideration by the House of Delegates at the 2015 Interim Meeting. <b>Board of Trustees Report 5 on this subject appears in the Delegates Handbook for the 2015 Interim Meeting. (Reference Committee)</b>
RES 215-I-14	Preauthorization	Substitute Resolution 215 Adopted as Amended w/ Report Back at A-15, in lieu of Resolutions 219, 221, and 222.	Board of Trustees Report 11 on this subject appears in the Delegates Handbook for the 2015 Annual Meeting. (Informational)  <b>HOD Action: Filed.</b>
RES 216-I-14	Site of Service Payment Discrepancies	Policies H-400.957 and H-400.969 Reaffirmed in Lieu of Resolution 216.	AMA Policy Database Updated.
RES 217-I-14	Powdered Caffeine and Easy Unintentional Overdose	Adopted.	Our AMA has met with several Senate offices that have expressed banning the retail sale of powdered caffeine. These members are skeptical, however, that a legislative solution is possible and have encouraged engagement with the FDA on this issue. Our AMA is communicating with the FDA on the dangers associated with powdered caffeine and the need for regulation in this area. <b>No further action required.</b>
RES 218-I-14	Parity of Payment for Administration of Medications Within the Same Category of Drug	Referred.	A Council on Medical Service Report on this subject will be prepared for consideration by the House of Delegates at the 2015 Interim Meeting.  <b>Council on Medical Service Report 4 on this subject appears in the Delegates Handbook for the 2015 Interim Meeting. (Reference Committee J)</b>
RES 219-I-14	Opposition to Insurance Company Policies that Interfere with Appropriate Outpatient Laboratory Services	Substitute Resolution 215 Adopted as Amended w/ Report Back at A-15, in lieu of Resolutions 219, 221, and 222.	See Substitute Resolution 215-I-14.
RES 221-I-14	Removing Barriers to Payments for Vaccine and Medication Administration	Substitute Resolution 215 Adopted as Amended w/ Report Back at A-15, in lieu of Resolutions 219, 221, and 222.	See Substitute Resolution 215-I-14.



Report/Resolution	Title	House Action	Status
RES 222-I-14	Quantifying the Burden of Prior Authorization	Substitute Resolution 215 Adopted as Amended w/ Report Back at A-15, in lieu of Resolutions 219, 221, and 222.	See Substitute Resolution 215-I-14.
RES 223-I-14	Preservation of Small Medical Practices	Policies D-405.988, H-478.991 and E-9.02 Reaffirmed in Lieu of Resolution 223.	AMA Policy Database Updated.
RES 224-I-14	Transparency and Labeling of Generic Medications	Policy H-125.984 Reaffirmed in Lieu of Resolution 224.	AMA Policy Database Updated.
RES 225-I-14	Physician Credit Card Payments by Health Insurance Companies	Adopted.	Our AMA notified the Federation that our AMA has model legislation available addressing virtual credit card transaction fees and is interested in working with states and specialties in advancing legislation on behalf of physicians to ensure that any credit card transaction/bank fees are not the responsibility of the health care provider. <b>No further action required.</b>
RES 226-I-14	Extension of Deadline to File Claim for FICA Tax Refund	Referred for Decision.	Resolution 226, sponsored by the Virginia, South Carolina, and West Virginia delegations, asked our AMA to: 1) investigate the number of unclaimed FICA tax refunds by medical residents; and 2) if the number of unclaimed FICA tax refunds is significant, seek federal legislation to extend the deadline to apply for FICA tax refunds prior to 2005. The Board VOTED that, in lieu of Resolution 226-I-14, our AMA post a notice on our AMA Web site that includes a hyperlink to the Internal Revenue Service's (IRS) webpage, which contains comprehensive information specifically intended for former medical residents who were subject to pre-April 1, 2005, Federal Insurance Contributions Act (FICA) tax withholding. <b>No further action required.</b>
RES 228-I-14	High Cost of Drugs	Referred. (with Resolution 207)	A Council on Medical Service Report on this subject will be prepared for consideration by the House of Delegates at the 2015 Interim Meeting. <b>Council on Medical Service Report 2 on this subject appears in the Delegates Handbook for the 2015 Interim Meeting. (Reference Committee J)</b>
RES 229-I-14	Preventing Drug Manufacturers from Restricting their Distribution Networks	Policies D-110.993, H-110.992 and H-110.998 Reaffirmed in Lieu of Resolution 229.	AMA Policy Database Updated.
RES 230-I-14	AMA Support of the Preventive Health Savings Act	Policy D-155.994 Reaffirmed in Lieu of Resolution 230.	AMA Policy Database Updated.

Report/Resolution	Title	House Action	Status
RES 601-I-14	Employee Associations and Collective Bargaining for Physicians	Adopted.	A Board of Trustees Report on this subject will be prepared for consideration by the House of Delegates at the 2015 Interim Meeting. <b>Board of Trustees Report 7 on this subject appears in the Delegates Handbook for the 2015 Interim Meeting. (Informational)</b>
RES 604-I-14	AMA-Provided Innovation Grants to Support New Physician Models to Improve Quality, Efficiency and Reduce Cost	Referred.	Board of Trustees Report 21 on this subject appears in the Delegates Handbook for the 2015 Annual Meeting. (Reference Committee F)  <b>HOD Action: Recommendations in BOT Report 21-A-15 Adopted, Remainder of Report Filed.</b>
RES 605-I-14	Helping to Better Inform Legislators on Medical Matters	Adopted.	Sent faxes to the attention of health staff at the offices of members of Congress to encourage them to receive AMA Morning Rounds. <b>No further action required.</b>
RES 606-I-14	Creation of the AMA Super PAC	Referred.	Board of Trustees Report 18 on this subject appears in the Delegates Handbook for the 2015 Annual Meeting. (Reference Committee F) <b>HOD Action: Referred.</b>
RES 607-I-14	Study the Longer-Term Effects of Physician Employment	Adopted.	A Council on Medical Service Report on this subject will be prepared for consideration by the House of Delegates at the 2015 Interim Meeting. <b>Council on Medical Service Report 5 on this subject appears in the Delegates Handbook for the 2015 Interim Meeting. (Reference Committee J)</b>
RES 801-I-14	Patient Access to Penile Prosthesis as Legitimate Treatment for Erectile Dysfunction	Adopted as Amended.	Our AMA notified the Federation that our AMA is interested in working with states and specialties to advocate for patient access to the full continuum of care of evidence-based erectile dysfunction treatment modalities including oral pharmacotherapy, penile vasoactive injection therapy, vacuum erection device therapy and penile prosthetics. <b>No further action required.</b>
RES 803-I-14	Emergency Department Insurance Linking	Adopted as Amended.	AMA Policy Database Updated.
RES 805-I-14	Incorporating Community Health Workers Into the US Health Care System	Referred.	A Council on Medical Service Report on this subject will be prepared for consideration by the House of Delegates at the 2015 Interim Meeting.  <b>Council on Medical Service Report 7 on this subject appears in the Delegates Handbook for the 2015 Interim Meeting. (Reference Committee J)</b>
RES 808-I-14	Access to Psychiatric Services	Policies H-345.981, H-345.978, H-385.921 and D-345.997 Reaffirmed in Lieu of Resolution 808.	AMA Policy Database Updated.

Report/Resolution	Title	House Action	Status
RES 809-I-14	Insurance Coverage for Fertility Preservation in Patients Receiving Cytotoxic or Immunomodulatory Agents	Adopted as Amended.	AMA Policy Database Updated.
RES 810-I-14	Patient Education Regarding the Medicare Chronic Care Management Fee	Adopted.	A model letter is available at <a href="http://www.ama-assn.org/go/carecoordination">www.ama-assn.org/go/carecoordination</a> . A link to this letter is included in a CPT Assistant Bulletin, distributed in early June.  <b>No further action required.</b>
RES 811-I-14	Health Plan Coverage for Outpatient Obesity Primary Care Visits	Substitute Resolution 811 Adopted.	AMA Policy Database Updated.
RES 812-I-14	Health Plan Coverage for Hearing Aid Devices	Referred. (With Resolution 817-I-14)	A Council on Medical Service Report on this subject will be prepared for consideration by the House of Delegates at the 2015 Interim Meeting. <b>Council on Medical Service Report 6 on this subject appears in the Delegates Handbook for the 2015 Interim Meeting. (Reference Committee J)</b>
RES 814-I-14	SCIP and HCAHPS Measures Used by CMS in Hospital Reimbursement	Policies H-450.946, H-450.966, and D-385.958 Reaffirmed in Lieu of Resolution 814.	AMA Policy Database Updated.
RES 815-I-14	Board Recertification to Maintain Hospital Staff Privileges	Adopted as Amended.	The AMA Physician's Guide to Medical Staff Organization Bylaws ( <a href="http://www.ama-assn.org/go/bylaws">www.ama-assn.org/go/bylaws</a> ) has been updated to comprehensively address requirements for board certification and recertification as a condition for medical staff membership and/or clinical privileges. The updated resource reinforces the AMA's position that medical staffs should have flexibility in determining which, if any, specialty board certification will be used as a criterion to delineate clinical privileges, and provides sample bylaws language that would permit physicians who are not board certified to establish their equivalent qualification through documented experience and competence. <b>No further action required.</b>
RES 817-I-14	Medicare Coverage of Hearing Aids	Referred. (With Resolution 812-I-14)	A Council on Medical Service Report on this subject will be prepared for consideration by the House of Delegates at the 2015 Interim Meeting. <b>Council on Medical Service Report 6 on this subject appears in the Delegates Handbook for the 2015 Interim Meeting. (Reference Committee J)</b>

Report/Resolution	Title	House Action	Status
RES 818-I-14	Access and Equity in Telemedicine Payments	Adopted as Amended.	<p>Our AMA, through multiple meetings and comment letters to the appropriate Congressional committees, continues to advocate for a lifting of geographic site restrictions for the coverage of telemedicine services under Medicare.</p> <p><b>While several legislative proposals have been introduced to lift licensure restrictions, none to date have included a broad lifting of geographic restrictions. However, our AMA continues to work with a group of US Senate offices on a proposal that would lift those restrictions.</b></p>
RES 819-I-14	Price Transparency	Referred.	<p>Council on Medical Service Report 4 on this subject appears in the Delegates Handbook for the 2015 Annual Meeting. (Reference Committee G)</p> <p><b>HOD Action: Recommendations in CMS Report 4-A-15 Adopted as Amended, Remainder of Report Filed.</b></p>
RES 820-I-14	Antitrust Activity	Referred for Decision.	<p>Resolution 820, sponsored by the Florida Delegation, asked our AMA to: 1) study the effects of monopolistic activity by healthcare entities that may have a majority of market share in a region on the patient-doctor relationship; and 2) develop an action plan for legislative and regulatory advocacy to achieve more vigorous application of antitrust laws to protect physicians and physician practices who are confronted with monopolistic activity by health care entities. The Board VOTED to approve that the Board of Trustees report back to the House of Delegates at the 2015 Interim Meeting regarding Resolution 820.</p> <p><b>Board of Trustees Report 8 on this subject appears in the Delegates Handbook for the 2015 Interim Meeting. (Reference Committee J)</b></p>
RES 821-I-14	Review of Straddle Drug Pricing Rules for Medicare Part D Participants	Substitute Resolution 821 Adopted.	<p>Board of Trustees Report 20 on this subject appears in the Delegates Handbook for the 2015 Annual Meeting. (Informational)</p> <p><b>HOD Action: Filed.</b></p>
RES 824-I-14	Vaccines to Medicare Patients	Adopted as Amended with Change in Title.	<p>Our AMA included a request for CMS to cover tetanus and Tdap vaccines at both the Welcome to Medicare and Annual Wellness Visits, and other clinically appropriate encounters, in the March 23, 2015, AMA letter to the U.S. Department of Health and Human Services.</p> <p><b>No further action required.</b></p>
RES 825-I-14	Principles for Hospital Sponsored Electronic Health Records	Referred.	<p>A Board of Trustees Report on this subject will be prepared for consideration by the House of Delegates at the 2015 Interim Meeting.</p> <p><b>Board of Trustees Report 1 on this subject appears in the Delegates Handbook for the 2015 Interim Meeting. (Reference Committee J)</b></p>

Report/Resolution	Title	House Action	Status
RES 826-I-14	Non-Formulary Medications and the Medicare Part B Coverage Gap	Adopted.	<p>Our AMA advocates for patient’s out-of-pocket costs for non-formulary medications to be included in calculations for the patient’s contributions toward the Medicare Part D coverage gap, and advocate for financial assistant for patients. Under current Medicare regulations, non-formulary medications only count toward patients’ “true out-of-pocket” (TrOOP) costs if the patient has appealed or requested a formulary exception so that the drug is covered by the Part D plan even though it is not on the plan’s formulary. Medicare excludes any costs incurred for covered Part D drugs which are not included in the plan’s formulary. Our AMA has been discussing Part D issues with CMS and will work to broaden Medicare’s policy to include non-formulary drugs in TrOOP. By law, Part D includes substantial financial assistance for beneficiaries with incomes below 150% of the poverty level.</p> <p><b>Our AMA continues to advocate for this change in true out-of pocket policy.</b></p>
RES 827-I-14	Care Coordination	Adopted as Amended.	<p>Our AMA continues to conduct research and have discussions with CMS and other stakeholders to better understand the issues around funding for care coordination efforts to assure Triple Aim outcomes of better health and quality care at a lower cost.</p> <p>Our AMA is communicating with federal authorities to support continued funding of CMMI projects that can guide the decisions of third-party payers to reimburse care coordination services.</p> <p><b>Our AMA has advocated for CMMI alternative payment models – and for care coordination – in AMA comments on the 2016 Physician Fee Schedule, Comprehensive Care for Joint Replacement Payment Model, and ACOs under the Medicare Shared Savings Program. Our AMA is also in discussions with CMS on the MACRA APMs.</b></p>
RES 901-I-14	Addressing Emerging Trends in Recreational Drug Abuse	Substitute Resolution 901 Adopted	AMA Policy Database Updated.
RES 903-I-14	Accommodating Lactating Mothers Taking Medical Examinations	Substitute Resolution 903 Adopted.	AMA Policy Database Updated.
RES 904-I-14	Equal Paternal and Maternal Leave for Medical Residents	Policy H-405.960 Adopted as Amended in Lieu of Resolution 904.	AMA Policy Database Updated.
RES 906-I-14	Medication Adherence in Patients with Low Health Literacy	Adopted as Amended with a Change in Title.	AMA Policy Database Updated.

Report/Resolution	Title	House Action	Status
RES 907-I-14	Promoting Education of Electronic Health Records in Undergraduate Medical Education	Referred.	Council on Medical Education Report 8 on this subject appears in the Delegates Handbook for the 2015 Annual Meeting. (Reference Committee C)  <b>HOD Action: Recommendations in CME Report 8-A-15 Adopted as Amended, Remainder of Report Filed.</b>
RES 908-I-14	Providing Greater Emphasis on the Social Determinants of Health in Medical School Curriculum	Policy H-295.874 Adopted as Amended in Lieu of Resolution 908.	AMA Policy Database Updated.
RES 911-I-14	USMLE Step 1 Timing	Adopted as Amended.	The Association of American Medical Colleges (AAMC), National Board of Medical Examiners (NBME) and Federation of State Medical Boards (FSMB) were notified of the House action. The House action also was transmitted to each medical school, residency program director, directors of medical education at U.S. teaching hospitals and other interested groups via the MedEd Update.  <b>Our AMA received a letter from the NBME earlier in the year stating that the USMLE team will be developing a measure of the relationship of clinical experience and Step 1 performance utilizing year in medical school at the time of the exam as an indicator of the amount of clinical exposure prior to taking Step 1. To aggregate adequate information to be fully responsive to Resolution 911, it may take several years.</b>
RES 914-I-14	Excessive Computer Time for Medical Students, Residents and Fellows	Referred.	Council on Medical Education Report 8 on this subject appears in the Delegates Handbook for the 2015 Annual Meeting. (Reference Committee C)  <b>HOD Action: Recommendations in CME Report 8-A-15 Adopted as Amended, Remainder of Report Filed.</b>
RES 917-I-14	Improve Safety of Mail-Ordered Medication	Adopted as Amended.	The issue has been discussed with leadership of the National Association of Boards of Pharmacy in order to inform potential approaches.  <b>No further action required.</b>

Report/Resolution	Title	House Action	Status
RES 918-I-14	Management and Leadership for Physicians	Substitute Resolution 918 Adopted.	<p>Our AMA has been actively studying the issue of physician leadership, including the advantages and disadvantages of various educational options. Our AMA intends to use this information to create a resource for physicians interested in management and leadership positions throughout their careers. New educational leadership opportunities are also being developed for physicians for release at the end of 2015, both at the individual and practice levels, to help them succeed regardless of the environment they are in.</p> <p>Resolve #2: The Association of American Medical Colleges (AAMC), American Osteopathic Association (AOA) and American Association of Colleges of Osteopathic Medicine (AACOM) were notified of the House action. The House action also was transmitted to each medical school, residency program director, directors of medical education at U.S. teaching hospitals and other interested groups via the MedEd Update. Our AMA Section on Medical Schools (SMS) was encouraged to advocate on behalf of the issue.</p> <p><b>Our AMA has researched several educational options available to physician. An informational report will be submitted to the Board in 2016.</b></p> <p><b>Our AMA has partnered with the American Association for Physician Leadership (AAPL) to help physicians rethink and transform their traditional roles and prepare for the numerous leadership opportunities they will encounter throughout their careers. Our AMA and AAPL have identified the leadership and management skills needed to help physicians create change in their environment and in themselves. The leadership skills series will feature both live events and online courses designed to help physicians no matter where they are in their career and regardless of practice setting. Both organizations will present information on the series in an educational session (Developing Physician Leaders) at the 2015 AMA House of Delegates Interim Meeting – Monday, November 16 at 10am.</b></p>
RES 919-I-14	Prohibit e-Cigarettes in Hospitals and Other Health Care Institutions	Recommendations in CSAPH Report 2-I-14 Adopted as Amended in Lieu of Resolutions 919, 927 and 930, Remainder of Report Filed.	See CSAPH Report 02-I-14.
RES 920-I-14	Combating the Medical Certification and its Attempt to Capture Into Unproven Certification Programs with its Regulations	Substitute Resolution 920 Adopted as Amended in Lieu of Resolutions 920, 926, 928 and 929. 8th Bullet of Resolve 1 Referred.	<p>Council on Medical Education Report 2 on this subject appears in the Delegates Handbook for the 2015 Annual Meeting. (Reference Committee C)</p> <p><b>HOD Action: Recommendations in CME Report 2-A-15 Adopted as Amended, Remainder of Report Filed.</b></p>

Report/Resolution	Title	House Action	Status
RES 922-I-14	Child Safety Seats - Public Education and Awareness	Adopted as Amended.	AMA Policy Database Updated.
RES 925-I-14	AMA Role in Addressing Epidemics and Pandemics	Substitute Resolution 925 Adopted as Amended in Lieu of Resolutions 925, 933, 935 and 936.	<p>An Ebola Resource Center was developed. A staff position has been created to expand existing expertise in public health.</p> <p>An online Ebola Resource Center was created on the AMA website, which received more than 30,000 unique page views. AMA Wire posts about Ebola news and resources generated nearly 13,000 unique page views and the Ebola education video received more than 3,400 views.</p> <p><b>No further action required.</b></p>
RES 926-I-14	Maintenance of Certification	Substitute Resolution 920 Adopted as Amended in Lieu of Resolutions 920, 926, 928 and 929. 8th Bullet of Resolve 1 Referred.	See Resolution 920-I-14.
RES 927-I-14	E-Cigarette Advertising and Paid Product Placement	Recommendations in CSAPH Report 2-I-14 Adopted as Amended in Lieu of Resolutions 919, 927 and 930, Remainder of Report Filed.	See CSAPH Report 2-I-14.
RES 928-I-14	Cancellation of Maintenance of Certification	Substitute Resolution 920 Adopted as Amended in Lieu of Resolutions 920, 926, 928 and 929. 8th Bullet of Resolve 1 Referred.	See Resolution 920-I-14.
RES 929-I-14	Opposition of Maintenance of Certification as Condition for Licensure, Credentialing or Reimbursement	Substitute Resolution 920 Adopted as Amended in Lieu of Resolutions 920, 926, 928 and 929. 8th Bullet of Resolve 1 Referred.	See CSAPH Report 2-I-14.
RES 930-I-14	Regulation of Electronic Nicotine Delivery Devices	Recommendations in CSAPH Report 2-I-14 Adopted as Amended in Lieu of Resolutions 919, 927 and 930, Remainder of Report Filed.	See CSAPH Report 2-I-14.



<b>Report/Resolution</b>	<b>Title</b>	<b>House Action</b>	<b>Status</b>
RES 931-I-14	Private Payer Funding of Graduate Medical Education	Referred.	A Council on Medical Education Report on this subject will be prepared for consideration by the House of Delegates at the 2015 Interim Meeting. <b>Council on Medical Education Report 1 on this subject appears in the Delegates Handbook for the 2015 Interim Meeting. (Reference Committee K)</b>
RES 932-I-14	Navajo Birth Cohort Study	Adopted as Amended with Change in Title.	Our AMA sent a letter to key officials at the Centers for Disease Control and Prevention (CDC). Given the potential to improve reproductive health outcomes, our AMA urged the CDC Administrator to fully fund the study without going through a redundant peer review process. <b>No further action required.</b>
RES 933-I-14	Evidence-Based Policy for Health Care Workers Returning from West Africa	Substitute Resolution 925 Adopted as Amended in Lieu of Resolutions 925, 933, 935 and 936.	See Substitute Resolution 225-I-14.
RES 934-I-14	Creation of AMA Principles for Physician Demonstration of Current Professional Expertise	Referred.	Council on Medical Education Report 3 on this subject appears in the Delegates Handbook for the 2015 Annual Meeting. (Reference Committee C)  <b>HOD Action: Recommendations in CME Report 3-A-15 Adopted as Amended, Remainder of Report Filed.</b>
RES 935-I-14	AMA Response to Epidemics and Pandemics	Substitute Resolution 925 Adopted as Amended in Lieu of Resolutions 925, 933, 935 and 936.	See Substitute Resolution 225-I-14.
RES 936-I-14	Evidence-Based Policy for Health Care Workers Returning From South Africa	Substitute Resolution 925 Adopted as Amended in Lieu of Resolutions 925, 933, 935 and 936.	See Substitute Resolution 925-I-14

## Status Implementation of Resolutions and Report Recommendations AMA House of Delegates Annual Meeting - June 6-10, 2015

Report/Resolution	Title	House Action	Status
BOT Report 01-A-15	Funding of AMA Region and Section Delegates/Alternates (Resolution 612-A-14)	Recommendations in BOT Report 01-A-15 Adopted, Remainder of Report Filed.	Filed.
BOT Report 02-A-15	New Specialty Organizations Representation in the House of Delegates	Recommendations in BOT Report 02-A-15 Adopted, Remainder of Report Filed.	The American Association for Geriatric Psychiatry and the American Society of Breast Surgeons have been added to the roster of societies in the HOD and have been sent all meeting-related information for I-15.
BOT Report 03-A-15	Auditor's Report	Filed.	For Information.
BOT Report 04-A-15	AMA 2016 Dues	Recommendations in BOT Report 04-A-15 Adopted, Remainder of Report Filed.	For Information.
BOT Report 06-A-15	Medical Information and It's Uses (Resolution 213-A-14)	Recommendations in BOT Report 06-A-15 Adopted Amended, Remainder of Report Filed.	AMA Policy Database Updated.
BOT Report 07-A-15	Reducing Gun Violence (Resolution 215-A-14)	Referred.	A Board of Trustees Report on this subject will be prepared for consideration by the House of Delegates at the 2016 Annual Meeting.
BOT Report 08-A-15	Opposition to Laboratory Reporting Provisions of H.R. 4302 (Resolution 227-A-14)	Recommendations in BOT Report 08-A-15 Adopted, Remainder of Report Filed.	Our AMA has been and will continue to work extensively with the Federation to address the critical laboratory issues in PAMA. Our AMA has had numerous meetings and will be submitting extensive comments to the Administration on the proposed PAMA rule.
BOT Report 10-A-15	Council on Legislation Sunset Review of 2005 House Policies	Recommendations in BOT Report 10-A-15 Adopted as Amended, Remainder of Report Filed.	AMA Policy Database Updated.
BOT Report 12-A-15	Development and Promotion of Single National Prescription Drug Monitoring Program (Resolution 230-A-14)	Recommendations in BOT Report 12-A-15 Adopted as Amended, Remainder of Report Filed.	Our AMA offered to work collaboratively with state medical associations to do the following: (1) implement modernized PDMPs that are seamlessly integrated into the physician's normal workflow, and provide clinically relevant, reliable information at the point of care; (2) foster increased PDMP use through a seamless registration process; (3) determine how to use a PDMP to enhance treatment for substance use disorder and pain management; (4) share access to PDMP data across state lines, within the safeguards applicable to protected health information; and (5) encourage state PDMPs to adopt uniform data standards to facilitate the sharing of information across state lines.

<b>Report/Resolution</b>	<b>Title</b>	<b>House Action</b>	<b>Status</b>
BOT Report 13-A-15	Methods to Increase the US Organ Donor Pool (Resolution 001-A-14)	Recommendations in BOT Report 13-A-15 Adopted, Remainder of Report Filed.	AMA Policy Database Updated.
BOT Report 14-A-15	Risk Evaluation and Mitigation Strategies for Methadone (Resolution 512-A-14)	Recommendations in BOT Report 14-A-15 Adopted, Remainder of Report Filed.	AMA Policy Database Updated.
BOT Report 15-A-15	Over the Counter (OTC) Insulin (Resolution 507-A-14)	Recommendations in BOT Report 15-A-15 Adopted, Remainder of Report Filed.	Filed.
BOT Report 17-A-15	Increasing Physician Efficiency (Resolution 717-A-14)	Recommendations in BOT Report 17-A-15 Adopted, Remainder of Report Filed.	AMA Policy Database Updated.
BOT Report 18-A-15	Creation of the AMA Super PAC (Resolution 606-I-14)	Referred.	A Board of Trustees Report on this subject will be prepared for consideration by the House of Delegates at the 2016 Annual Meeting.
BOT Report 19-A-15	Liability Related to Referrals from Free Clinics (Resolution 217-A-14)	Recommendations in BOT Report 19-A-15 Adopted as Amended, Remainder of Report Filed.	Our AMA has offered to work with interested medical associations to enact state legislation that provides medical liability immunity, similar to the protections granted under the Federal Tort Claims Act, to physicians who provide charity care in hospitals, offices, clinics or other health care settings to patients referred from free clinics.
BOT Report 21-A-15	AMA-Provided Innovation Grants to Support New Physician Models to Improve Quality, Efficiency and Reduce Cost (Resolution 604-I-14)	Recommendations in BOT Report 21-A-15 Adopted, Remainder of Report Filed.	AMA Policy Database Updated.
BOT Report 23-A-15	A Virtual Medical Association (Resolution 601-I-14)	Recommendations in BOT Report 23-A-15 Adopted, Remainder of Report Filed.	Filed.
BOT Report 25-A-15	Abolish Discrimination in Licensure of IMGs (Resolution 317-A-14)	Recommendations in BOT Report 25-A-15 Adopted as Amended, with Change in Title, Remainder of Report Filed.	Our AMA has notified the Federation of the policy adopted at A-15 and of AMA resources on point, and has offered to work together with state medical associations in states with discriminatory licensure requirements between IMGs and graduates of US and Canadian medical schools to advocate for parity in licensure requirements, using the AMA International Medical Graduate Section licensure parity model resolution as a resource.  The House action was transmitted to the Educational Commission on Foreign Medical Graduates and the Federation of State Medical Boards and to each medical school, residency program director, directors of medical education at U.S. teaching hospitals and other interested groups via the MedEd Update.

<b>Report/Resolution</b>	<b>Title</b>	<b>House Action</b>	<b>Status</b>
BOT Report 26-A-15	Uncoupling of CPT from ICD-10	Recommendations in BOT Report 26-A-15 Adopted as Amended, Remainder of Report Filed.	Filed.
BOT Report 29-A-15	Specialty Society Representation in the House of Delegates - Five-Year Review	Recommendations in BOT Report 29-A-15 Adopted as Amended, Remainder of Report Filed.	No further action required.
CCB Report 01-A-15	Representatives to RFS Assembly Meetings: Amended Bylaws	Recommendations in CCB Report 01-A-15 Adopted, Remainder of Report Filed.	Bylaws Updated.
CCB Report 02-A-15	Outdated Bylaw Language	Recommendations in CCB Report 02-A-15 Adopted, Remainder of Report Filed.	Bylaws Updated.
CCB Report 03-A-15	Amended Bylaw Language to Accurately Describe the Functions of the Council on Constitution and Bylaws	Recommendations in CCB Report 03-A-15 Adopted as Amended, Remainder of Report Filed.	Bylaws Updated.
CCB Report 04-A-15	Clarity of AMA Bylaws - Council Service for Students and Residents and Assumption of Council Service for all Council Members	Recommendations in CCB Report 04-A-15 Adopted, Remainder of Report Filed.	Bylaws Updated.
CEJA Report 01-A-15	Ethical Practice in Telemedicine	Referred.	Council on Ethical and Judicial Affairs Report 1 on this subject appears in the Delegates Handbook for the 2015 Interim Meeting. (Reference Committee on Amendments to Constitution and Bylaws)
CEJA Report 02-A-15	Prescribing and Dispensing Prescription Medication Samples	Referred.	Council on Ethical and Judicial Affairs Report 2 on this subject appears in the Delegates Handbook for the 2015 Interim Meeting. (Reference Committee on Amendments to Constitution and Bylaws)
CEJA Report 03-A-15	Modernized Code of Medical Ethics	Referred.	Council on Ethical and Judicial Affairs Report 3 on this subject appears in the Delegates Handbook for the 2015 Interim Meeting. (Reference Committee on Code Modernization)
CEJA Report 05-A-15	CEJA's Sunset Review of 2005 House Policies	Recommendations in CEJA Report 05-A-15 Adopted, Remainder of Report Filed.	AMA Policy Database Updated.
CLRPD Report 01-A-15	International Medical Graduates Section and Organized Medical Staff Section, Five-Year Review	Recommendations in CLRPD Report 01-A-15 Adopted, Remainder of Report Filed.	Sections retained and continue to be represented in the HOD.

<b>Report/Resolution</b>	<b>Title</b>	<b>House Action</b>	<b>Status</b>
CLRPD Report 03-A-15	Best Practices and Successful Efforts to Increase Diversity, by Age, of AMA Delegates and Alternate Delegates	Referred.	Council on Long Range Planning and Development Report 1 on this subject appears in the Delegates Handbook for the 2015 Interim Meeting. (Reference Committee F)
CME Report 01-A-15	Council on Medical Education Sunset Review of 2005 House Policies	Recommendations in CME Report 01-A-15 Adopted as Amended, Remainder of Report Filed.	AMA Policy Database Updated.
CME Report 02-A-15	Update on Maintenance of Certification and Osteopathic Continuous Certification (Resolution 920-I-14)	Recommendations in CME Report 02-A-15 Adopted as Amended, Remainder of Report Filed.	The House action was transmitted to the American Board of Medical Specialties and to each medical school, residency program director, directors of medical education at U.S. teaching hospitals and other interested groups via the MedEd Update.
CME Report 03-A-15	An Update on Maintenance of Licensure (Resolution 934-I-14)	Recommendations in CME Report 03-A-15 Adopted as Amended, Remainder of Report Filed.	The House action was transmitted to the Federation of State Medical Boards and to each medical school, residency program director, directors of medical education at U.S. teaching hospitals and other interested groups via the MedEd Update.
CME Report 04-A-15	Guidelines for Students Shadowing Physicians (Resolutions 310-A-14 and 913-I-13)	Recommendations in CME Report 04-A-15 Adopted, Remainder of Report Filed.	The House action was transmitted to each medical school, residency program director, directors of medical education at U.S. teaching hospitals and other interested groups via the MedEd Update. An item was included in an AMA Medical Student Section listserv communication. The report was also distributed to health profession advisors nationwide via the listserv of the National Association of Advisors for the Health Professions.
CME Report 05-A-15	Assuring Safe and Effective Care for Patients by Senior/Late Career Physicians	Recommendations in CME Report 05-A-15 Adopted as Amended, with Change in Title, Remainder of Report Filed.	Our AMA has been working with other areas of the AMA and multiple outside stakeholders to implement the recommendations. The House action also was transmitted to each medical school, residency program director, directors of medical education at U.S. teaching hospitals and other interested groups via the MedEd Update.
CME Report 06-A-15	American Board of Medical Specialties Should Adhere to its Mission (Resolution 005-A-14)	Recommendations in CME Report 06-A-15 Adopted as Amended, Remainder of Report Filed.	The House action also was transmitted to the American Board of Medical Specialties and to each medical school, residency program director, directors of medical education at U.S. teaching hospitals and other interested groups via the MedEd Update.
CME Report 07-A-15	Enhancing the AMA's Role in Premedical Education	Recommendations in CME Report 07-A-15 Adopted, Remainder of Report Filed.	Our AMA has been working to implement the recommendations. The House action also was transmitted to each medical school, residency program director, directors of medical education at U.S. teaching hospitals and other interested groups via the MedEd Update.
CME Report 08-A-15	Meaningful Access to Electronic Health Records (EHR) for Undergraduate Medical Education Students (Resolution 907-I-14 and 914-I-14)	Recommendations in CME Report 08-A-15 Adopted as Amended, Remainder of Report Filed.	The House action also was transmitted to the Liaison Committee on Medical Education, American Osteopathic Association Commission on Osteopathic College Accreditation and Accreditation Council for Graduate Medical Education and to each medical school, residency program director, directors of medical education at U.S. teaching hospitals and other interested groups via the MedEd Update.

<b>Report/Resolution</b>	<b>Title</b>	<b>House Action</b>	<b>Status</b>
CME Report 09-A-15	The Value of Graduate Medical Education	Recommendations in CME Report 09-A-15 Adopted, Remainder of Report Filed.	<p>Our AMA's Council on Legislation established a Graduate Medical Education Workgroup that considered alternatives to funding GME and providing alternatives for residents who did not match. This Workgroup drafted a comprehensive GME Resource that we plan to make public and provide to policymakers to increase awareness of the value of GME and includes an overview of studies and recommendations on GME. This document was necessary, in part, because data on GME is lacking due to the lack of funding for the National Healthcare Workforce Commission and will continue to seek funding for this entity.</p> <p>Our AMA remains engaged on issues related to Graduate Medical Education funding, including monitoring ongoing budget talks that potentially threaten total funding levels, particularly for IME.</p> <p>FY 2016 Appropriations legislation for the Departments of Labor, Health and Human Services and Education, as reported by both the House and Senate Committees on Appropriations do not include funding for the National Healthcare Workforce Commission.</p>
CME Report 10-A-15	Aligning the Evaluation of Physicians Across the Medical Education Continuum	Recommendations in CME Report 10-A-15 Adopted, Remainder of Report Filed.	The House action also was transmitted to the American Board of Medical Specialties and the Accreditation Council for Graduate Medical Education and to each medical school, residency program director, directors of medical education at U.S. teaching hospitals and other interested groups via the MedEd Update.
CMS Report 01-A-15	CMS Sunset Review of 2005 AMA House Policies	Adopted as Amended.	AMA Policy Database Updated.
CMS Report 03-A-15	Economic Viability of Rural Sole Community Hospitals (Resolution 133-A-14)	Recommendations in CMS Report 03-A-15 Adopted, Remainder of Report Filed.	AMA Policy Database Updated.
CMS Report 04-A-15	Price Transparency (Resolution 819-I-14)	Recommendations in CMS Report 4-A-15 Adopted as Amended, Remainder of Report Filed..	<p>Our AMA will raise this issue with EHR vendors and other appropriate stakeholders during a meeting that is scheduled for December. Our AMA has submitted public comments that urge CMS to ensure data can be captured and reported across varying electronic tools before devoting more resources to transparency. Our AMA has offered to work with states to support and strengthen the development of all-payer claims databases.</p> <p>Our AMA is in ongoing discussions with health plans and other stakeholder groups on payment and delivery reform has encouraged price and quality transparency for patients and physicians and the accuracy of this information in any tools developed by these entities.</p>
CMS Report 06-A-15	Integrating Physical and Behavioral Health Care	Recommendations in CMS Report 06-A-15 Adopted as Amended, Remainder of Report Filed.	AMA Policy Database Updated.

<b>Report/Resolution</b>	<b>Title</b>	<b>House Action</b>	<b>Status</b>
CMS Report 08-A-15	Improving Home Health Care (Resolution 703-A-14)	Recommendations in CMS Report 08-A-15 Adopted, Remainder of Report Filed.	Our AMA has notified the Federation of its willingness to work with interested partners in supporting regulatory oversight of home health agencies that employ home health aides and of its interest in working with interested state medical associations to support state legislation that requires home health aides to obtain appropriate training before caring for patients.
CMS Report 09-A-15	Medication Administration in Assisted Living Facilities (Resolution 201-A-14)	Recommendations in CMS Report 09-A-15 Adopted, Remainder of Report Filed.	AMA Policy Database Updated.
CMS-CSAPH Joint Rep	Coverage for Chronic Pain Management (Resolution 112-A-14)	Recommendations in CMS-CSAPH Joint Report Adopted as Amended, Remainder of Report Filed.	AMA Policy Database Updated.
CSAPH Report 01-A-15	CSAPH Sunset Review of 2005 House Policies	Recommendations in CSAPH Report 01-A-15 Adopted, Remainder of Report Filed.	AMA Policy Database Updated.
CSAPH Report 02-A-15	Ban on Super Magnetic Toys as a Choking and Gastrointestinal Hazard to Children (Resolution 411-A-14)	Recommendations in CSAPH Report 02-A-15 Adopted, Remainder of Report Filed.	No further action required.
CSAPH Report 03-A-15	Concussion and Youth Sports (Resolutions 401, 410 and 412-A-14)	Recommendations in CSAPH Report 03-A-15 Adopted as Amended, Remainder of Report Filed.	AMA Policy Database Updated.
CSAPH-CEJA Joint Rep	Non-Medical Exemptions to Immunizations	Referred.	Council on Science and Public Health Report 1 on this subject appears in the Delegates Handbook for the 2015 Interim Meeting. (Reference Committee K)  A Council on Ethical and Judicial Affairs Report on this subject will be prepared for consideration by the House of Delegates at the 2016 Annual Meeting.
HOD Comp Cmte Repor	Report of the House of Delegates Committee on Compensation of the Officers	Filed.	For Information.
RES 001-A-15	Rules for AMA Elections	Adopted as Amended.	AMA Policy Database Updated.
RES 002-A-15	AMA Parliamentary Authority	Adopted.	Bylaws Updated.

<b>Report/Resolution</b>	<b>Title</b>	<b>House Action</b>	<b>Status</b>
RES 003-A-15	Proposed Revisions to the Bylaws of the AMA Section on Medical Schools	Adopted.	Council on Constitution and Bylaws Report 1 on this subject appears in the Delegates Handbook for the 2015 Interim Meeting. (Reference Committee on Amendments to Constitution and Bylaws)
RES 004-A-15	Confidentiality of Enrollment in Physicians (Professional) Health Programs	Adopted as Amended, with Change in Title.	<p>Our AMA has offered to work with other medical professional organizations, the Federation of State Medical Boards, the American Board of Medical Specialties, and the Federation of State Physician Health Programs to seek and/or support rules and regulations or legislation to provide for confidentiality of fully compliant participants in physician (and similar) health programs or their recovery programs in responding to questions on medical practice or licensure applications.</p> <p>Before engaging stakeholders, Our AMA is reviewing current law, regulation, and other requirements related to disclosure and confidentiality of enrollment in physician health programs.</p>
RES 005-A-15	Principles of Human Subjects Research Shall Apply to Online Medical Research Projects	Adopted as Amended, with Change in Title.	AMA Policy Database Updated.
RES 006-A-15	Physician and Health Institution Publicity and Responsibility	Adopted as Amended.	AMA Policy Database Updated.
RES 007-A-15	Vaccination Requirements to Protect All Children	Adopted as Amended.	Our AMA has notified the Federation of its support for the dissemination of materials on vaccine efficacy to states, and encouraged that such materials eliminate philosophical and religious exemptions from state immunization requirements.
RES 008-A-15	Protecting Patients and the Public by Immunizing Physicians	Adopted as Amended.	AMA Policy Database Updated.
RES 009-A-15	Parent to Parent Education on Child Vaccination	Adopted.	AMA Policy Database Updated.
RES 010-A-15	Ending Non-Medical Exemptions for Immunization	Adopted.	<p>Our AMA has notified the Federation of its willingness to work with interested partners in supporting legislation that eliminates non-medical exemptions from immunization for participation in federally funded educational programs for children including Head Start. Our AMA has also indicated that it is committed to supporting state medical association efforts to eliminate non-medical exemptions from immunization for childcare and school attendance in state statutes.</p> <p>AMA Policy Database Updated.</p>
RES 011-A-15	Military Medical Policies Affecting Transgender Individuals	Adopted.	AMA Policy Database Updated.



<b>Report/Resolution</b>	<b>Title</b>	<b>House Action</b>	<b>Status</b>
RES 012-A-15	Encourage Autism Society to Support Vaccinations	Adopted as Amended.	Letter drafted and currently seeking sign-on support from ACP, AAFP, and AAP.
RES 013-A-15	Encourage Autism Society to Support Vaccinations	Adopted.	AMA Policy Database Updated.
RES 014-A-15	Promoting Safe Exit from Prostitution	Adopted.	AMA Policy Database Updated.
RES 015-A-15	Programs on Managing Physician Stress and Burnout	Adopted as Amended.	<p>Our AMA released three modules that address the topic of physician wellness on STEPS Forward™ in June 2015. The modules launched were Preventing Physician Burnout, Improving Physician Resiliency, and Physician Wellness: Preventing Resident and Fellow Burnout.</p> <p>In 2016, our AMA will host the International Conference on Physician Health™ (ICPH), a joint conference sponsored by the AMA, the Canadian Medical Association (CMA) and the British Medical Association (BMA). The conference will take place September 18-20, 2016 at the Boston Renaissance Waterfront Hotel. The overarching goal of this joint scientific conference is to promote scientific research and discourse on the topic of physician health and well-being. Additional AMA resources and support for managing physician stress and burnout are in development.</p>
RES 016-A-15	Ethical Physician Conduct in the Media	Adopted.	A Council on Ethical and Judicial Affairs on this subject will be prepared for consideration by the House of Delegates at the 2016 Annual Meeting.
RES 101-A-15	Interest on Medicare Overpayments and Underpayments	Adopted.	At this time, no proposals have been introduced to accomplish this resolved. Our AMA is exploring legislative and regulatory options to address this inequity, and have engaged the Centers for Medicare & Medicaid Services directly.
RES 102-A-15	Actual Allowable by Medicare	Current Policy Reaffirmed.	
RES 103-A-15	Three Day Stay Rule	Substitute Resolution 103 Adopted as Amended in Lieu of Resolution 105-A-15.	Our AMA continues to support H.R. 1571, the “Improving Access to Medicare Coverage Act of 2015” by Rep. Joe Courtney (D-CT) to require the time spent in observation care count toward Medicare’s 3-day stay requirement for SNF coverage. Our AMA continues to seek opportunities to address this issue further in upcoming Medicare legislation.
RES 104-A-15	Medicaid, Children's Health Insurance Program, and Vaccines for Children Payment Reform	Current Policy Reaffirmed.	
RES 105-A-15	Expanding Medicare's Three-Day Hospital Stay Requirement to Include Observation Hours	Substitute Resolution 103 Adopted as Amended in Lieu of Resolution 105-A-15.	See RES 103-A-15.

Report/Resolution	Title	House Action	Status
RES 106-A-15	Controlling the Skyrocketing Costs of Generic Prescription Drugs	Substitute Resolution 106 Adopted in Lieu of Resolutions 117, 124, 125 and 127-A-15.	Our AMA continues to closely monitor price increases for generic pharmaceuticals. Our AMA has met with the Federal Trade Commission to discuss FTC's work in this area and areas of possible collaboration on this issue. Our AMA will continue to work with the FTC, Congress, and other appropriate agencies to address the issue of escalating generic drug costs. Our AMA also notified the Federation of its willingness to work collaboratively with relevant state agencies, policymakers and key stakeholders to identify and promote adoption of policies to address the already high and escalating costs of generic prescription drugs. Our AMA further indicated its desire to work with any interested partners in advocating to support state legislation that ensures fair and appropriate pricing of generic medications.
RES 107-A-15	Reimbursement for End-of-Life Counseling	Amended Policy H-390.916 Adopted in Lieu of Resolution 107-A-15.	AMA Policy Database Updated.
RES 108-A-15	Survivorship Care Plans	Adopted.	AMA Policy Database Updated.
RES 109-A-15	Medicare Coverage of Physician Administered Medications Procured by Patients	Current Policy Reaffirmed.	
RES 110-A-15	Removal of the Required Three Day Stay for Placement into Skilled or Long-Term Care Facilities	Resolved #1 Adopted.	Our AMA has strongly opposed Medicare's three-day inpatient stay rule and the related two Midnights policy, which keep patients in observation care for up to two Midnights before being admitted as inpatients. Our AMA policy supports classifying a hospital stay as "inpatient" if "the physician's intent and expectation is for a hospital stay of greater than 24 hours. Our AMA continues to support H.R. 1571, the "Improving Access to Medicare Coverage Act of 2015" by Rep. Joe Courtney (D-CT) to require the time spent in observation care count toward Medicare's 3-day stay requirement for SNF coverage. Our AMA continues to seek opportunities to address this issue further in upcoming Medicare legislation.
RES 111-A-15	Access to Health Care for Veterans	Substitute Resolution 111 Adopted in Lieu of Resolutions 112, 114 and 130-A-15.	Our AMA has done extensive education and outreach to physicians about how to participate in the Veterans' Choice Program. As part of this outreach, our AMA has sought and received assurances from VHA officials that the Veterans' Choice Program is required by law to pay private physicians a minimum of 100 percent of Medicare rates. Our AMA led the VHA to reassess how it calculates distance to the nearest VHA facility, thereby expanding access to care for veterans. These issues were covered on an AMA sponsored webinar in which VHA officials explained how to participate in the Choice Program and discussed new part-time and full-time employment opportunities. Our AMA plans to meet with VA officials in the coming weeks to discuss the findings of independent study and additional reforms that are necessary.

<b>Report/Resolution</b>	<b>Title</b>	<b>House Action</b>	<b>Status</b>
RES 112-A-15	Access to Health Care for Veterans	Substitute Resolution 111 Adopted in Lieu of Resolutions 112, 114 and 130-A-15.	See RES 111-A-15.
RES 113-A-15	Three Day Stay Rule	Current Policy Reaffirmed.	
RES 114-A-15	An HAS Card will Give Veterans Better, Faster Health Care	Substitute Resolution 111 Adopted in Lieu of Resolutions 112, 114 and 130-A-15.	See RES 111-A-15.
RES 115-A-15	Support for Inclusion of Vasectomy in the ACA Preventive Services and Contraceptive Mandate	Substitute Resolution 115 Adopted.	Our AMA notified the Federation of its commitment to work in concert in advocating for patient access to the full continuum of evidence-based contraceptive methods and sterilization procedures, including vasectomy and male contraceptive counseling, to promote gender equity in contraceptive services under the Affordable Care Act.
RES 116-A-15	Study the Impact of the ACA Medicaid Expansion	Adopted as Amended. Report Back at A-16.	A Council on Medical Service Report on this subject will be prepared for consideration by the House of Delegates at the 2016 Annual Meeting.
RES 117-A-15	Pricing of Generic Drugs	Substitute Resolution 106 Adopted in Lieu of Resolutions 117, 124, 125 and 127-A-15.	See RES 106-A-15.
RES 118-A-15	Economic Freedom of Choice for Physicians	Current Policy Reaffirmed.	
RES 119-A-15	Out of Network Coverage Denials for Physician Prescriptions and Ordered Services	Adopted.	The Federation was notified that our AMA is committed to working with them to pursue regulation or legislation to prohibit any insurer from writing individual or group policies which deny or unreasonably delay coverage of medically necessary prescription drugs or services based on network distinctions of the licensed health care provider ordering the drug or service.
RES 120-A-15	High Deductible, High Coinsurance Policies	Referred.	Council on Medical Service Report 8 on this subject appears in the House of Delegates Handbook for the 2015 Interim Meeting. (Reference Committee J)
RES 121-A-15	Flexible Spending Account Amounts	Adopted as Amended.	AMA Policy Database Updated.
RES 122-A-15	Chronic Diseases	Policies H-185.939 and H-155.960 Reaffirmed in Lieu of Resolution 122.	AMA Policy Database Updated.
RES 123-A-15	Site of Service Parity	Current Policy Reaffirmed.	

<b>Report/Resolution</b>	<b>Title</b>	<b>House Action</b>	<b>Status</b>
RES 124-A-15	Reducing Prescription Drug Prices	Substitute Resolution 106 Adopted in Lieu of Resolutions 117, 124, 125 and 127-A-15.	See RES 106-A-15.
RES 125-A-15	Rising Generic Drug Prices	Substitute Resolution 106 Adopted in Lieu of Resolutions 117, 124, 125 and 127-A-15.	See RES 106-A-15.
RES 126-A-15	Out-of-Network Restrictions of Physicians	Adopted.	AMA Policy Database Updated.
RES 127-A-15	Controlling Rapidly Escalating Generic Medication Prices	Substitute Resolution 106 Adopted in Lieu of Resolutions 117, 124, 125 and 127-A-15.	See RES 106-A-15.
RES 128-A-15	Include Physicians in CMS Rate Increases to Medicare Advantage Plans	Substitute Resolution 128 Adopted.	As the 2016 open enrollment period for Medicare Advantage gets underway, our AMA will be encouraging MA plans to share their rate increases and quality bonuses with their participating physicians.

Report/Resolution	Title	House Action	Status
RES 129-A-15	Moving to Alternative Payment Models	Adopted as Amended.	<p>Our AMA is engaged in aggressive advocacy on this issue. Our AMA convened three “listening sessions” with CMS officials on pay-for-value models and submitted comments on proposals for new models. Our AMA is having numerous discussions with CMS, HHS, the White House, and Members of Congress on implementation of pay-for-value provisions of the Medicare Access and CHIP Reauthorization Act and the need to protect physicians from financial risk that is beyond their control. A task force of specialty and state society CEOs has been established as well as two workgroups of technical staff to focus on this and related issues.</p> <p>Our AMA has worked with the RAND Corporation on two research projects over the last few years. The first one in 2013 identified key drivers of physician professional satisfaction. The second study in 2015 identified the impact of new commercial payment models on physician practices.</p> <p>These studies have led to the development of multiple tools to help physicians thrive in practice and adopt sustainable new models of care delivery and payment. These tools include: 1) STEPS Forward™, launched June 2015, to support physician internal practice improvement. Steps Forward will be enhanced with the recent award of a CMS TCPI grant to provide practice transformation resources for physicians. New modules are being identified and developed on new payment models, 2) A leadership training series for physicians is being developed in partnership with the American Association for Physician Leadership (AAPL). This series will be launched in 2016 and will focus on episodic leadership training for practicing physicians in three key areas: professional development, personal development, and the health system; 3) Commercial payer contracting resources focusing on new pay-for-performance and bundled payment models were released in September 2015; and 4) The development of an interactive online assessment tool for physicians to evaluate and identify opportunities to adopt new payment models in commercial, Medicaid, and Medicare (Merit-Based Incentive Payment Systems (MIPS) and Alternative Payment Models (APMs)) that will link physicians with tools and resources to assist them in practice transformation. Additional tools and resources will be developed based on physician feedback, as well as market and regulatory developments. Our AMA continues to engage commercial payers, hospitals, health systems, patients, employers, HIT vendors and other key stakeholders on the development of sustainable APMs through key coalitions and in direct engagement with organizations.</p>
RES 130-A-15	Ensuring Enhanced Delivery of Health Care to Our Nation's Veterans	Substitute Resolution 111 Adopted in Lieu of Resolutions 112, 114 and 130-A-15.	See RES 111-A-15.

<b>Report/Resolution</b>	<b>Title</b>	<b>House Action</b>	<b>Status</b>
RES 201-A-15	Best Practices for Mobile Medical Applications	Adopted as Amended.	Our AMA management has developed an overall strategy to impact the trajectory of digital health and digital medicine that includes the need to collaborate with industry to identify best practices. Several organizations have already published guidance. Our AMA is engaging with these organizations and with the physician community to develop the best practices that serve the interests of both physicians and patients. Our AMA is also pursuing the development of a research agenda to fill in the gaps in our knowledge that will allow us to continue to refine this guidance over time.
RES 202-A-15	Measuring the Effect of Paid Sick Leave on Health Care Outcomes	Referred. Report Back at A-16.	A Council on Medical Service Report on this subject will be prepared for consideration by the House of Delegates at the 2016 Annual Meeting.
RES 203-A-15	Model State Legislation Eliminating Restrictive Covenants in Physician Contracts	Referred. Report Back at I-15.	A Council on Medical Service Report on this subject will be prepared for consideration by the House of Delegates at the 2016 Annual Meeting.
RES 204-A-15	Nomination for and Improvement of the Position of the United States Surgeon General	Referred.	A Board of Trustees Report on this subject will be prepared for consideration by the House of Delegates at the 2016 Annual Meeting.
RES 205-A-15	Doctor Hospital Ownership	Current Policy Reaffirmed.	
RES 207-A-15	Appropriate Use of Compounded Medications in Medical Offices	Adopted as Amended.	AMA Policy Database Updated.
RES 208-A-15	Reduce Reporting Burden and Confusion	Policies D-476.995 and H-450.966 Reaffirmed in Lieu of Resolutions 208 and 223.	AMA Policy Database Updated.
RES 209-A-15	ICD-10 and ICD-11	Current Policy Reaffirmed.	
RES 210-A-15	Physician Participation as the 5th Cooperating Party in the International Classification of Diseases System in the United States	Adopted as Amended.	A letter was sent urging Secretary Burwell to appoint a representative from the American Academy of Professional Coders as the 5th Cooperating Party.

<b>Report/Resolution</b>	<b>Title</b>	<b>House Action</b>	<b>Status</b>
RES 211-A-15	ICD-10 Implementation	Substitute Resolution 211 Adopted.	Our AMA reached an agreement with CMS that Medicare claims will not be denied solely on the specificity of the ICD-10 diagnosis codes provided, as long as the physician submitted an ICD-10 code from an appropriate family of codes. In addition, Medicare claims will not be audited based on the specificity of the diagnosis codes as long as they are from an appropriate family of codes. Physicians will also not be penalized if Medicare has trouble due to ICD-10 with calculations of MU, PQRS, and VBM. CMS established an Ombudsman to address physician problems. CMS will authorize advanced payments if the Medicare contractors are unable to process claims within established time limits due to problems with ICD-10 implementation. Our AMA will continue to actively monitor the implementation issues, and we will aggressively raise our concerns to CMS.
RES 212-A-15	Support for Expanded Funding for National, State and Local Public Health	Current Policy Reaffirmed.	
RES 213-A-15	Tampering with the In-Office Ancillary Services Exception	Policy D-270.995 Reaffirmed in Lieu of Resolution 213.	AMA Policy Database Updated.
RES 214-A-15	Funding for Teaching Health Center Graduate Medical Education Program	Adopted as Amended.	Section 221 of the Medicare Access and CHIP Reauthorization Act of 2015 extended authorization for the Teaching Health Center GME program for 2016 and 2017 at a level of \$60 million per year.
RES 215-A-15	Health Care Reform Model Legislation	Policies H-165.833, H-165.835, H-165.838, and D-165.940 and H-450.966 Reaffirmed in Lieu of Resolution 215.	AMA Policy Database Updated.
RES 216-A-15	Preventing Firearm-Related Injury and Morbidity in Youth	Adopted as Amended.	Contacted key staff at the American Academy of Pediatrics to seek interest in identifying potential materials for the clinical setting.
RES 217-A-15	Study the Impact of the ACA Medicaid Expansion	Current Policy Reaffirmed.	
RES 218-A-15	Action to Ensure Access to Healthcare and Choice of Physician	Policies H-383.992 and H-380.987 Reaffirmed in Lieu of Resolution 218.	AMA Policy Database Updated.
RES 219-A-15	Need to Create a Special Inspector General for Monitoring the Affordable Care Act	Not Adopted.	
RES 220-A-15	Stop the Implementation of ICD-10	Current Policy Reaffirmed.	

<b>Report/Resolution</b>	<b>Title</b>	<b>House Action</b>	<b>Status</b>
RES 221-A-15	Quality Improvement in Clinical / Population Health Information Systems	Adopted.	Our AMA has actively engaged expert physician associations including the American Medical Informatics Association (AMIA) and the Electronic Health Records Association (EHRA) to collectively develop usability characteristics and interoperability goals. Our AMA has worked with these organizations, and others, to establish a set of priorities the Office of the National Coordinator for Health Information Technology (ONC), CMS, and other agencies in the federal government should follow to improve the quality of EHRs, EHR certification process, Meaningful Use program, and other aspects of health information technology (health IT).
RES 222-A-15	Medicare and Sequestration	Adopted as Amended.	<p>Our AMA opposes any legislative proposal that extends or deepens sequester cuts in Medicare payments. In part due to AMA advocacy, a proposed sequester extension was removed from the Trade Adjustment Assistance bill.</p> <p>Efforts to prevent extension of the Medicare sequester as part of Trade Adjustment Assistance legislation were successful, resulting in the sequester provisions being removed from the legislation prior to final enactment. Our AMA continues to actively oppose additional sequester extension proposals related to Congressional efforts on Medicare premium increases and other year-end budgetary challenges.</p>
RES 223-A-15	Automatic Tracking of Quality Indicators	Policies D-476.995 and H-450.966 Reaffirmed in Lieu of Resolutions 208 and 223.	AMA Policy Database Updated.
RES 224-A-15	Electronic Medical Records Vendor Accountability	Referred.	A Board of Trustees Report on this subject will be prepared for consideration by the House of Delegates at the 2016 Annual Meeting.
RES 225-A-15	Make Simplicity the Foremost Criteria for Any CMS Program	Adopted as Amended.	Our AMA continues to urge Medicare to simplify its program and processes to ensure that physicians can spend more time caring for patients. This message is embedded in most of our AMA correspondence with CMS, and it is raised in advocacy on quality, meaningful use, and MACRA implementation.
RES 226-A-15	Physician Involvement with Health Care Related Business	Current Policy Reaffirmed.	
RES 227-A-15	Partial Credit for Eligible Professionals for Accomplishing Meaningful Use Guidelines	Referred.	A Board of Trustees Report on this subject will be prepared for consideration by the House of Delegates at the 2016 Annual Meeting.
RES 228-A-15	Repeal Compulsory Electronic Health Records	Referred.	A Board of Trustees Report on this subject will be prepared for consideration by the House of Delegates at the 2016 Annual Meeting.



<b>Report/Resolution</b>	<b>Title</b>	<b>House Action</b>	<b>Status</b>
RES 229-A-15	Physician Self-Monitoring of Controlled Substance Prescriptions	Adopted as Amended.	Our AMA is working with the National Alliance for Model State Drug Laws (NAMSDL), as well as other appropriate national organizations and stakeholders, to update the NAMSDL's Model Prescription Monitoring Program Act to provide health care professionals the opportunity to review their schedule 2-5 controlled substance prescribing patterns as a means to help monitor appropriate prescribing and detect and identify fraudulent prescriptions dispensed under their respective Drug Enforcement Administration numbers.
RES 230-A-15	Opposing Linking ABMS Certification to Interstate Licensure and Telemedicine	Resolution 235 Adopted in Lieu of Resolutions 230 and 231.	See RES 235-A-15.
RES 231-A-15	Opposing the Federation of State Medical Boards Interstate Medical Licensure Compact	Resolution 235 Adopted in Lieu of Resolutions 230 and 231	See RES 235-A-15.
RES 232-A-15	Child Resistant Caps on Energy Drinks	Adopted.	A letter was sent to the FDA urging the agency to take regulatory action to require child-resistant packaging on all high energy drinks manufactured in the US.
RES 233-A-15	Immunity from Federal Prosecution for Physicians Recommending Canabis	Adopted as Amended, with Change in Title.	Section 558 of H.R 1940, making appropriations for the Departments of Commerce, Justice and State as well as Section 542 of the US Senate companion bill (S. 683), forbid the Department of Justice from using funds to prevent states from implementing their own laws that authorize the use, distribution, possession, or cultivation of medical marijuana. While spending bills for FY 2016 have not yet been completed, it is expected that this language will remain in any final spending bill.
RES 234-A-15	Preserving Free Speech and Confidentiality in the Physician-Patient Relationship	Adopted.	AMA Policy Database Updated.
RES 235-A-15	MOC Provisions of Interstate Medical Licensure Compact	Adopted in Lieu of Resolutions 230 and 231.	Our AMA has requested a clarifying statement from the Interstate Medical Licensure Compact Commission that the intent of the language in the model legislation requiring that a physician "holds" specialty certification refers only to initial specialty certification recognized by the American Board of Medical Specialties or the American Osteopathic Association's (AOA) Bureau of Osteopathic Specialists and that there is no requirement for participation in ABMS' Maintenance of Certification or AOA's Osteopathic Continuous Certification program in order to receive initial or continued licensure under the Interstate Medical Licensure Compact.
RES 236-A-15	Value Based Modifier and Flawed Drug Cost Attribution	Adopted as Amended.	Our AMA continues to advocate for changes with the Value Based Modifier to ensure cost attribution does not unfairly disadvantage certain providers. Our AMA continues to makes changes to the methodology to better account for reliability of the measures.

<b>Report/Resolution</b>	<b>Title</b>	<b>House Action</b>	<b>Status</b>
RES 237-A-15	96-Hour Rule for Clinical Access Hospitals	Adopted as Amended.	Our AMA has written in support of S. 258/H.R. 169: Critical Access Hospital Relief Act of 2015. This bill amends title XVIII (Medicare) of the Social Security Act to repeal the 96-hour physician certification requirement for inpatient critical access hospital services under which a physician must certify that a patient may reasonably be expected to be discharged or transferred to a hospital within 96 hours after admission to the critical access hospital.
RES 238-A-15	Protecting Physician Led Health Care	Adopted as Amended.	Our AMA continues to work with state and specialty medical associations and other organizations to collect, analyze and disseminate data on the expanded use of allied health professionals and of the impact of this practice on healthcare access (including in poor, underserved, and rural communities), quality, and cost in those states that permit independent practice of allied health professionals as compared to those that do not. Our AMA has noted that this analysis should include consideration of practitioner settings and patient risk-adjustment.
RES 301-A-15	Alerting Physicians to Deadlines for Maintenance of Certification	Adopted.	The House action was transmitted to the American Board of Medical Specialties and each medical school, residency program director, directors of medical education at U.S. teaching hospitals and other interested groups via the MedEd Update.
RES 302-A-15	Re-Evaluating Knowledge Assessment in Maintenance of Certification	Adopted.	The House action also was transmitted to the American Board of Medical Specialties and each medical school, residency program director, directors of medical education at U.S. teaching hospitals and other interested groups via the MedEd Update.
RES 303-A-15	Autonomy in Utilization of CME Funds by Employed Physicians	Adopted.	The House action also was transmitted to the Association of American Medical Colleges, American Hospital Association, Medical Group Management Association and the U.S. Department of Veterans Affairs the Association of American Medical Colleges, American Hospital Association, Medical Group Management Association and the U.S. Department of Veterans Affairs and each medical school, residency program director, directors of medical education at U.S. teaching hospitals and other interested groups via the MedEd Update.
RES 304-A-15	Addressing the Increasing Number of Unmatched Medical Students	Adopted as Amended.	A Council on Medical Education Report on this subject will be prepared for consideration by the House of Delegates at the 2016 Annual Meeting.
RES 305-A-15	Evaluation of DACA-Eligible Medical Students, Residents, and Physicians in Addressing Physician Shortages	Adopted.	A Council on Medical Education Report on this subject will be prepared for consideration by the House of Delegates at the 2017 Annual Meeting.
RES 306-A-15	Including Military History as Part of Standard History Taking	Policy H-295.874 Reaffirmed in Lieu of Resolution 306.	AMA Policy Database Updated.

<b>Report/Resolution</b>	<b>Title</b>	<b>House Action</b>	<b>Status</b>
RES 307-A-15	Policy and Advocacy Opportunities for Medical Students, Residents and Fellows	Adopted as Amended, with Change in Title.	Our AMA Resident and Fellow Section and the AMA Medical Student Section established internships with the US Food and Drug Administration for one resident and one student in the Center for Drug Research and Evaluation's Office of Professional Affairs and Stakeholder Engagement.
RES 308-A-15	Reducing the Financial and Educational Costs of Residency/Fellowship Interviews	Adopted as Amended, with Change in Title.	The House action also was transmitted to the Accreditation Council for Graduate Medical Education and Association of American Medical Colleges and each medical school, residency program director, directors of medical education at U.S. teaching hospitals and other interested groups via the MedEd Update.
RES 309-A-15	Maintenance of Certification	Referred.	A Council on Medical Education Report on this subject will be prepared for consideration by the House of Delegates at the 2016 Annual Meeting.
RES 310-A-15	Mitigation of Physician Performance Metrics on Trainee Education	Substitute Resolution 310 Adopted.	The House action also was transmitted to the Accreditation Council for Graduate Medical Education and Association of American Medical Colleges and each medical school, residency program director, directors of medical education at U.S. teaching hospitals and other interested groups via the MedEd Update.
RES 311-A-15	Selecting Residents to Better Reflect Patient Diversity	Policies H-350.960, H-350.969 and H-350.970 Reaffirmed in Lieu of Resolution 311.	AMA Policy Database Updated.
RES 312-A-15	Model Guidelines for Expansion of Residency Programs	Referred.	Council on Medical Education Report 1 on this subject appears in the Delegates Handbook for the 2015 Interim Meeting. (Reference Committee K)
RES 313-A-15	Human Trafficking Reporting and Education	Adopted as Amended.	No further action required.
RES 314-A-15	Maintenance of Certification and Continuing Education	Substitute Resolution 314 Adopted as Amended in Lieu of Resolution 314.	The House action was transmitted to the American Board of Medical Specialties and each medical school, residency program director, directors of medical education at U.S. teaching hospitals and other interested groups via the MedEd Update.
RES 315-A-15	Obesity Education	Substitute Resolution 315 Adopted in Lieu of Resolutions 315 and 326.	A Council on Medical Education Report on this subject will be prepared for consideration by the House of Delegates at the 2017 Annual Meeting.
RES 317-A-15	Protect Physician Certification and Licensure	Not Adopted.	
RES 318-A-15	Maintenance of Certification	Referred.	A Council on Medical Education Report on this subject will be prepared for consideration by the House of Delegates at the 2016 Annual Meeting.

<b>Report/Resolution</b>	<b>Title</b>	<b>House Action</b>	<b>Status</b>
RES 319-A-15	Promoting Transparency in Medical Education and Access to Training	Adopted, with Change in Title.	The House action was transmitted to the Liaison Committee on Medical Education, Accreditation Council for Graduate Medical Education and the Association of American Medical Colleges and each medical school, residency program director, directors of medical education at U.S. teaching hospitals and other interested groups via the MedEd Update.
RES 320-A-15	Post-Acute and Long-Term Care Education Requirement	Adopted as Amended.	AMA Policy Database Updated.
RES 321-A-15	Value of Residents and Fellows to the Health Care System	Adopted as Amended.	A Council on Medical Education Report on this subject will be prepared for consideration by the House of Delegates at the 2016 Annual Meeting.
RES 322-A-15	Board of Medicine Sanctions and Fines	Not Adopted.	
RES 323-A-15	Ensuring Equality in Loan Repayment Programs for Married Couples	Adopted.	AMA Policy Database Updated.
RES 324-A-15	Proposing Changes to Public Service Loan Forgiveness	Adopted as Amended.	<p>Our AMA has extensive policy that urges the Administration to address the cost of medical education. This issue continues to be raised at the highest levels and in letters to relevant Agencies, including an October 2015 letter to the Department of Education.</p> <p>Our AMA opposes limiting the value of the Public Service Loan Forgiveness Program and has communicated with Congress on potential threats to the program. Additionally, our AMA will continue to be engaged in Congressional actions related to reauthorization of the Higher Education Act this fall.</p> <p>The House action was transmitted to each medical school, residency program director, directors of medical education at U.S. teaching hospitals and other interested groups via the MedEd Update.</p>
RES 325-A-15	Broaden Conflict of Interest Disclosure	Not Adopted.	
RES 326-A-15	Obesity Education in Medical Schools and Residency Programs	Substitute Resolution 315 Adopted in Lieu of Resolutions 315 and 326.	See Substitute Resolution 315-A-15.
RES 327-A-15	Achieving Transparency Through Graduate Medical Education Funding Reform	Referred.	A Council on Medical Education Report on this subject will be prepared for consideration by the House of Delegates at the 2016 Annual Meeting.
RES 328-A-15	Evaluation of Resident and Fellow Compensation Levels	Referred.	A Council on Medical Education Report on this subject will be prepared for consideration by the House of Delegates at the 2016 Annual Meeting.

<b>Report/Resolution</b>	<b>Title</b>	<b>House Action</b>	<b>Status</b>
RES 329-A-15	Principles of GME Funding Reform	Referred.	A Council on Medical Education Report on this subject will be prepared for consideration by the House of Delegates at the 2016 Annual Meeting.
RES 330-A-15	Telemedicine in Graduate Medical Education	Referred.	A Council on Medical Education Report on this subject will be prepared for consideration by the House of Delegates at the 2016 Annual Meeting.
RES 401-A-15	Eradicating Homelessness	Adopted as Amended.	AMA Policy Database Updated.
RES 402-A-15	Labeling and Recommended Protection for Sunglasses	Adopted as Amended.	AMA Policy Database Updated.
RES 403-A-15	Promoting Food Recovery Efforts in Hospitals	Current Policy Reaffirmed.	
RES 404-A-15	Altering School Days to Alleviate Adolescent Sleep Deprivation	Referred.	A Council on Science and Public Health Report on this subject will be prepared for consideration by the House of Delegates at the 2016 Annual Meeting.
RES 405-A-15	Increasing the Consumption of Healthy Fresh Foods in Food Desert Communities Using Mobile Produce Food Vendor Programs	Current Policy Reaffirmed.	
RES 406-A-15	Increasing Toy Gun Safety	Substitute Resolution 406 Adopted.	A letter was written to Steve Pasierb (President and CEO of the Toy Industry Association). Elliot F. Kaye, the chairman of the U.S. Consumer Product Safety Commission, also was copied on the letter.
RES 407-A-15	Encouraging Protocols to Assist with the Management of Patients with Obesity During Positioning and Transportation	Adopted as Amended, with Change in Title.	AMA Policy Database Updated.
RES 408-A-15	Community-Based Falls Prevention Programs	Adopted as Amended, with Change in Title.	Our AMA reached out to the CDC, the National Council on Aging (NCA), and the American Physical Therapy Association. An item was developed for AMA Wire/AMA Morning Rounds to increase awareness among physicians of falls prevention resources and educational opportunities.
RES 409-A-15	Addressing Immigrant Health Disparities	Adopted as Amended.	AMA Policy Database Updated.
RES 410-A-15	Mental Health Crisis Interventions	Current Policy Reaffirmed.	
RES 411-A-15	Homeless Veterans	Current Policy Reaffirmed.	

<b>Report/Resolution</b>	<b>Title</b>	<b>House Action</b>	<b>Status</b>
RES 412-A-15	Regulation of Electronic Cigarettes	Policies H-495.987 and H-495.972 Adopted as Amended in Lieu of Resolutions 412 and 419-A-15. Policy H-495.973 Reaffirmed.	AMA Policy Database Updated.
RES 413-A-15	Aircraft Restraints on Small Children	Policy H-45.989 Adopted as Amended in Lieu of Resolution 413-A-15.	AMA Policy Database Updated.
RES 414-A-15	Headphone Public Awareness Campaign	Policy H-15.952 Adopted as Amended in Lieu of Resolution 414-A-15.	AMA Policy Database Updated.
RES 415-A-15	Increasing the Smoking Age	Current Policy Reaffirmed.	
RES 416-A-15	Preventing Allergic Reactions in Food Service Establishments	Adopted as Amended, with Change in Title.	See RES 412-A-15.
RES 417-A-15	Auto Heat Deaths	Adopted as Amended.	AMA Policy Database Updated.
RES 418-A-15	Country Road Intersections	Current Policy Reaffirmed.	
RES 419-A-15	Taxation of Tobacco Products	Policies H-495.987 and H-495.972 Adopted as Amended in Lieu of Resolutions 412 and 419-A-15. Policy H-495.973 Reaffirmed.	AMA Policy Database Updated.
RES 420-A-15	Banning the Use of Artificial Trans Fats in the United States	Policy H-150.941 Adopted as Amended in Lieu of Resolution 420.	AMA Policy Database Updated.
RES 421-A-15	Raise Minimum Legal Age to Purchase Tobacco Products to 21	Policy H-495.986 Adopted as Amended in Lieu of Resolutions 421 and 424-A-15. Policies H-495.973, H-490.909 and H-495.972 Reaffirmed.	AMA Policy Database Updated.
RES 422-A-15	FDA Tobacco Deeming Rule	Current Policy Reaffirmed.	
RES 423-A-15	Support of Protective Headgear (Helmets) in the Sport of Girls/Women's Lacrosse	Adopted, with Change in Title.	AMA Policy Database Updated.

<b>Report/Resolution</b>	<b>Title</b>	<b>House Action</b>	<b>Status</b>
RES 424-A-15	Child-Proof Packages for E-Cigarette Liquid Refills	Policy H-495.986 Adopted as Amended in Lieu of Resolutions 421 and 424-A-15. Policies H-495.973, H-490.909 and H-495.972 Reaffirmed.	AMA Policy Database Updated.
RES 425-A-15	Ban on Powdered Alcohol Distribution and Sale	Referred.	A Council on Science and Public Health Report on this subject will be prepared for consideration by the House of Delegates at the 2016 Annual Meeting.
RES 501-A-15	Addressing Drug Overdose and Patient Compliance with Targeted Pharmaceutical Packaging Efforts	Adopted as Amended.	AMA Policy Database Updated.
RES 502-A-15	Training in Preconception Counseling and Long-Acting Reversible Contraceptive Methods	Adopted as Amended with Change in Title.	AMA Policy Database Updated.
RES 503-A-15	Health Effects of Reduced Passenger Space for Long Distance and International Travel	Policy D-45.998 and H-45.979 Reaffirmed in Lieu of Resolution 503.	AMA Policy Database Updated.
RES 504-A-15	Refills for Formulations Subject to Waste During Self-Administration	Adopted. Report Back at I-15.	A Council on Medical Service Report on this subject will be prepared for consideration by the House of Delegates at the 2016 Annual Meeting.
RES 505-A-15	Prescription Product Labeling	Policy H-115.994 Adopted as Amended, Policy H-120.988 Reaffirmed,	Our AMA is having discussions with officials of the Food and Drug Administration about establishment of a process that would allow accelerated updates to drug labeling when new evidence becomes available.  AMA Policy Database Updated.
RES 506-A-15	Reduction of Carbon Dioxide Pollution From Energy Production	Policies H-135.949 and d-135.972 Adopted as Amended in Lieu of Resolution 506.	A letter was sent to the Environmental Protection Agency supporting the Administration's efforts to limit carbon dioxide pollution emissions from power plants.  AMA Policy Database Updated.
RES 507-A-15	Next Generation Infectious Diseases	Adopted as Amended.	AMA Policy Database Updated.
RES 508-A-15	Chemicals Used During the Hydraulic Fracturing (Fracking) Process	Substitute Resolution 508 Adopted in Lieu of Resolution 510.	AMA Policy Database Updated.
RES 509-A-15	Long-Acting Reversible Contraception and Teen Pregnancy	Current Policy Reaffirmed.	

<b>Report/Resolution</b>	<b>Title</b>	<b>House Action</b>	<b>Status</b>
RES 510-A-15	Natural Gas Fracking Monitoring to Protect Human Health	Substitute Resolution 508 Adopted in Lieu of Resolution 510.	See Substitute Resolution 508-A-15.
RES 511-A-15	Hepatitis C Treatment	Policy H-440.845 Adopted as Amended in Lieu of Resolution 511.	AMA Policy Database Updated.
RES 512-A-15	Off-Label Use of Hormone Therapy	Referred.	A Council on Science and Public Health Report on this subject will be prepared for consideration by the House of Delegates at the 2016 Annual Meeting.
RES 513-A-15	Increasing Awareness of Nootropic Use	Adopted.	A Council on Science and Public Health Report on this subject will be prepared for consideration by the House of Delegates at the 2016 Annual Meeting.
RES 514-A-15	Funding the Brain Research through Advancing Innovative Neurotechnologies (BRAIN) Initiative	Adopted.	AMA Policy Database Updated.
RES 515-A-15	Oppose EPA Scientific Advisory Board Reform Act  (ITEMS #4 & 21 on Ref Cmte Rpt)	ITEM #21 - Resolved #2, 3 & 4 - Referred for Decision.  ITEM #4 - Resolved #1 - Adopted.	Resolution 515-A-15, submitted by the American Thoracic Society (ATS), asked that our American Medical Association (AMA): 1) reaffirm our strong support for the value of independent scientific advice provided by federal advisory panels; 2) oppose legislation seeking to limit the role of scientists on EPA federal advisory panels and increase the role of industry representatives on such panels; 3) oppose legislation seeking to add additional regulatory steps into the Environmental Protection Agency (EPA) federal advisory committee process; and 4) send a letter to Congress expressing our opposition to legislation that a) reduces the role scientific experts play in the EPA federal advisory committee process b) adds additional process steps to the advisory panel process and c) seeks to increase industry representation on EPA scientific advisory panels. The first resolve asking for our AMA's strong support for the value of independent scientific advice provided by federal advisory panels was adopted (H-460.900), and the remainder of the resolution (resolves 2, 3, and 4) was referred for decision in order to have AMA's advocacy staff review and advise the Board about the pending legislation.  The Board considered a report noting concerns about the unintended consequences of this bill and determined that it is more prudent to reaffirm existing policy in strong support of relying on sound medical science in formulating public health policies and VOTED that in lieu of resolves 2, 3, and 4 from Resolution 515-A-15, Policies H-460.900 and D-460.980 be reaffirmed.



<b>Report/Resolution</b>	<b>Title</b>	<b>House Action</b>	<b>Status</b>
RES 516-A-15	Oppose Secret Science Reform Act  (ITEMS #5 & 22 on Ref Cmte Rpt)	ITEM #22 - Resolved #2 & 3 - Referred for Decision.  ITEM #5 - Resolved #1 - Adopted.	Resolution 516-A-15, submitted by the American Thoracic Society (ATS), asked that our American Medical Association (AMA): 1) reaffirm strong support for the value of the peer review system ensuring openness and fidelity in the scientific process; 2) oppose legislation seeking to limit the science that Environmental Protection Agency (EPA) can use in rulemaking; and 3) send a letter to Congress [to] express our opposition to legislation seeking to limit the science that EPA can use in rule making. The first resolve asking for our AMA's strong support of the peer review system was adopted (H-460.899), and the remainder of the resolution (resolves 2 and 3) was referred for decision in order to have AMA's advocacy staff review and advise the Board about the pending legislation.  The Board considered a report noting concerns about the unintended consequences of this bill and determined that it is more prudent to reaffirm existing policy in strong support of relying on sound medical science in formulating public health policies and in the openness of the peer review system, and VOTED that Policies D-460.980 and H-460.899 be reaffirmed in lieu of resolves 2 and 3 from Resolution 516-A-15.
RES 517-A-15	Addressing Recreational Misuse and Diversion of Controlled Substances	Substitute Resolution 517 Adopted as Amended.	Our AMA is continuing to work in conjunction with other Federation members, key public and private stakeholders, and pharmaceutical manufacturers, to pursue and intensify collaborative efforts involving a public health approach in order to: (1) reduce harm from the inappropriate use, misuse and diversion of controlled substances, including opioid analgesics and other potentially addictive medications; (2) increase awareness that substance use disorders are chronic diseases and must be treated accordingly; and (3) reduce the stigma associated with patients suffering from persistent pain and/or substance use disorders, including addiction.
RES 518-A-15	Increasing Access to Care for Patients with Opioid Use Disorders	Current Policy Reaffirmed.	
RES 519-A-15	Protecting Public Health from Natural Gas Infrastructure	Adopted as Amended.	The Federation was notified of our AMA's willingness to work with interested partners in supporting legislation that would require a comprehensive Health Impact Assessment regarding the health risks that may be associated with natural gas pipelines.
RES 520-A-15	Ban Routine Use of Antibiotics in Animal Feed	Current Policy Reaffirmed.	
RES 521-A-15	Promoting Good Fomite Stewardship in Clinical Settings	Current Policy Reaffirmed.	
RES 522-A-15	Medication Expiration Dates	Adopted.	AMA Policy Database Updated.

<b>Report/Resolution</b>	<b>Title</b>	<b>House Action</b>	<b>Status</b>
RES 523-A-15	Evaluation of Canadian Underground Nuclear Waste Repository	Adopted as Amended.	A letter was sent to the Secretary of State urging the participation of the International Joint Commission to evaluate the proposed underground nuclear waste repository in Ontario, Canada. Our AMA has written Congress in support of S. 2026/H.R. 3483, the "Stop Nuclear Waste by Our Lakes Act of 2015."
RES 524-A-15	Medical Consequences of Nuclear War	Substitute Resolution 524 Adopted in Lieu of 524 and 525.	At the World Medical Association (WMA) General Assembly meeting in Moscow in October 2015, the WMA adopted a policy that encourages its 113 member nations to urge their respective governments to ban nuclear weapons and eliminate those in existence. Our AMA supported this statement and has informed appropriate US officials of the content of the statement. WMA member countries will inform their respective governments of the international support for this policy.
RES 525-A-15	Medical Consequences of Nuclear War and the Need to Abolish Nuclear Weapons	Substitute Resolution 524 Adopted in Lieu of 524 and 525.	See Substitute Resolution 524-A-15.
RES 526-A-15	Recycling Pharmaceutical Profits to NIH Funding	Referred for Decision.	Resolution 526, sponsored by the Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, and Vermont Medical Associations, asked our AMA to support the concept that pharmaceutical companies that can be shown to have profited from intellectual property publicly funded by the American taxpayer should provide for a share of that profit from pharmaceuticals whose research can be attributed to the NIH, and that those funds be made available as supplemental appropriations to support and grow biomedical research at NIH.  The Board considered a report and VOTED that Policy H-460.998 Support of Biomedical Research be reaffirmed in lieu of Resolution 526-A-15.
RES 601-A-15	Engaging and Empowering Our Members	Not Adopted.	
RES 602-A-15	Donating Reimbursements to the American Medical Association Foundation	Referred.	Board of Trustees Report 2 on this subject appears in the Delegates Handbook for the 2015 Interim Meeting. (Reference Committee F)
RES 603-A-15	Transparency of Origins in the Catalogue of AMA Policies	Not Adopted.	
RES 604-A-15	A New Definition of "Women's Health"	Referred.	A Council on Science and Public Health Report on this subject will be prepared for consideration by the House of Delegates at the 2016 Annual Meeting.

<b>Report/Resolution</b>	<b>Title</b>	<b>House Action</b>	<b>Status</b>
RES 605-A-15	Oral Health	Referred for Decision.	<p>Resolution 605-A-15 introduced by the American Academy of Family Physicians, American Association of Public Health Physicians, American College of Preventive Medicine and American Academy of Pediatrics, asked our AMA to endorse Smiles for Life: A National Oral Health Curriculum.</p> <p>The Board considered a report on the evaluation performed through the Corporate Review process on Resolution 605-A-15 which revealed that the AMA does not have internal expertise and there is no HOD policy on oral health education. While oral health education is a positive public health initiative for the many related societies that have signed on as endorsers, adding the AMA's name and endorsing an educational module that the AMA has no control over or has no relationship to the organization's core competency or focus areas appears to be out of compliance with AMA HOD Policy G-630.040 Special Guideline (4c), and VOTED that Resolution 605-A-15 not be adopted.</p>
RES 606-A-15	Informational Reports Submitted to the HOD	Referred.	A Council on Constitution and Bylaws Report on this subject will be prepared for consideration by the House of Delegates at the 2016 Annual Meeting.
RES 607-A-15	Preventing Violent Acts Against Health Care Providers	Adopted as Amended.	A Council on Science and Public Health Report on this subject will be prepared for consideration by the House of Delegates at the 2016 Annual Meeting.
RES 608-A-15	Fiduciary Responsibility and the AMA Interim Meeting	Not Adopted.	
RES 609-A-15	Physician Entrepreneur Academy	Adopted.	A Board of Trustees Report on this subject will be prepared for consideration by the House of Delegates at the 2016 Annual Meeting.
RES 610-A-15	Requirement That There Be No Diminution in Physician Representation on The Joint Commission	Not Adopted.	
RES 611-A-15	Report to American Medical Association by the AMA Appointees to The Joint Commission	Not Adopted.	
RES 612-A-15	Increasing Collaboration Between Physicians and the Public to Address Problems in Health Care Delivery	Adopted.	A Board of Trustees Report on this subject will be prepared for consideration by the House of Delegates at the 2016 Annual Meeting.
RES 701-A-15	Payers Misusing Appropriate Use Criteria	Current Policy Reaffirmed.	

<b>Report/Resolution</b>	<b>Title</b>	<b>House Action</b>	<b>Status</b>
RES 702-A-15	Access to In-Office Administered Drugs	Adopted as Amended.	Our AMA will continue longstanding advocacy with CMS to ensure coverage of in-office administered drugs as a safe and cost-effective alternative to the inpatient setting. This issue is frequently raised in conversations or in comments letters with Agency officials. Our AMA most recently raised this issue in an October 2015 letter to CMS.
RES 703-A-15	Prevention of Physician Credentialing Abuse in Employed Physician Settings	Current Policy Reaffirmed.	
RES 704-A-15	Virtual Credit Card Payments	Substitute Resolution 704 Adopted.	Our AMA has conducted an extensive educational campaign to alert physicians to concerns associated with virtual credit cards (VCCs) and the advantages of standard electronic funds transfer (EFT), including a one-page web resource on VCCs, a CME webinar available as an enduring activity, and a CME education session. VCCs and EFT are also featured in a new Steps Forward module focusing on revenue cycle management. Our AMA has created model state legislation protecting physicians' rights related to electronic payments, including full transparency related to fees associated with VCCs and prior consent on payment method. Our AMA has educated the Federation on this issue, and are interested in collaboration with Federation members on this topic.
RES 705-A-15	Pre-Authorization Simplification and Standardization	Referred. Report Back at I-15.	A Council on Medical Service Report on this subject will be prepared for consideration by the House of Delegates at the 2016 Annual Meeting.
RES 706-A-15	The Electronic Discontinuation of Medications	Current Policy Reaffirmed.	
RES 707-A-15	Pain as the Fifth Vital Sign	Referred.	A Board of Trustees Report on this subject will be prepared for consideration by the House of Delegates at the 2016 Annual Meeting.
RES 708-A-15	"Incident to" Billing and NPI Numbers on Claims	Referred.	A Council on Medical Service Report on this subject will be prepared for consideration by the House of Delegates at the 2016 Annual Meeting.
RES 709-A-15	Requiring The Joint Commission to Conduct Root-Cause Analysis to Determine How its Surveys Allowed Veterans Administration Hospitals to Cause Delay in Treatment and Harm Veterans	Substitute Resolution 709-A-15 Adopted.	The Joint Commission accreditation decisions, as well as information about facility performance on The Joint Commission National Patient Safety Goals and other information, are available via The Joint Commission's Quality Check web site ( <a href="http://qualitycheck.org/">http://qualitycheck.org/</a> ).
RES 710-A-15	Notification to Physicians Regarding COBRA Grace Period	Adopted as Amended.	Our AMA has contacted the Department of Labor to explore the feasibility of notification requirements.
RES 711-A-15	Protecting Against Forced Network Exclusivity of Specialist Physicians	Substitute Resolution 711 Adopted.	AMA Policy Database Updated.

<b>Report/Resolution</b>	<b>Title</b>	<b>House Action</b>	<b>Status</b>
RES 712-A-15	Increasing Prior Authorization Requirements	Referred. Report Back at I-15.	A Council on Medical Service Report on this subject will be prepared for consideration by the House of Delegates at the 2016 Annual Meeting.
RES 713-A-15	"Incident To" Billing for Telehealth	Referred.	A Council on Medical Service Report on this subject will be prepared for consideration by the House of Delegates at the 2016 Annual Meeting.
RES 714-A-15	Hospital Admission Processes and Communication between Patients' Primary Care and Hospital-Based Physicians	Referred.	A Council on Medical Service Report on this subject will be prepared for consideration by the House of Delegates at the 2016 Annual Meeting.
RES 715-A-15	Medical Services - Billing and Collecting	Substitute Resolution 715-A-15 Adopted.	AMA Policy Database Updated.
RES 716-A-15	Principles for Measuring and Rewarding Physician Performance	Referred. Report Back at I-15.	A Board of Trustees Report on this subject will be prepared for consideration by the House of Delegates at the 2016 Annual Meeting.