



Young Physicians Section Delegate's Report from the 2014 Annual Meeting

The Young Physicians Section (YPS) of the AMA was again an active part of the AMA House of Delegates (HOD) meeting in Chicago, Illinois. The preliminary handbook review committee recommendations were made available to members of the YPS assembly prior to the meeting. This process affords each YPS assembly member an opportunity to review each resolution prior to coming to the Assembly. Our vigorous debate on these issues is key to developing the YPS position on each resolution and report. Testimony on behalf of the YPS was offered in several HOD reference committees based on the Assembly's direction to actively support or actively oppose relevant reports and resolutions. Our team approach allows more young physicians to speak on behalf of the YPS in their state and specialty caucuses, as well as in HOD reference committees. An action document with talking points for all YPS active positions was created for members to use throughout the meeting. Without the assistance of members of the assembly, the delegate and alternate delegate would have been unable to speak to all of these items as well as other resolutions deemed relevant to the section.

The YPS considered six resolutions:

- *Resolution 1: Improving Leadership Potential and Preventing Attrition among Early- and Mid-Career Physicians*

Resolution 1 requests that the AMA ask state chapters and specialty societies to institute term limits for their delegations such that aspiring early- and mid-career physicians can remain involved in the AMA and continue to participate in the HOD. In addition, this resolution requests the establishment of new AMA policy that allows each state to have one additional protected delegate seat reserved for early- and mid-career physicians under the age of 50 years. Further, these early- and mid-career protected delegate slots would not preclude additional qualified physicians under the age of 50 years from serving in unprotected state delegate slots.

- *Resolution 2: Alerting Physicians to Deadlines for Maintenance of Certification*

Resolution 2 asks the AMA to continue to work with the ABMS to ensure physicians are clearly informed of the maintenance of certification requirements for their specific Board and the timelines for accomplishing those requirements. This resolution also asks the AMA to encourage the ABMS and its member Boards to develop a system to actively alert physicians to the due dates of the multi-stage requirements of continuous professional development and performance in practice, thereby assisting them with maintaining their board certification.

- *Resolution 3: Re-Evaluating Knowledge Assessment in Maintenance of Certification*

Resolution 3 asks the AMA to work with the ABMS to streamline and improve the Cognitive Expertise (Part III) component of Maintenance of Certification, including the exploration of alternative formats, in ways that effectively evaluate acquisition of new knowledge while reducing or eliminating the burden of a high-stakes examination.

- *Resolution 4: Autonomy in Utilization of CME Funds by Employed Physicians*

Resolution 4 asks the AMA to support physician autonomy by partnering with relevant organizations to encourage medical organizations or institutions that employ physicians and offer financial support towards continuing medical education (CME) to avoid prioritizing institutional goals over individual physician educational needs in the choice of CME coursework.

- *Resolution 5: Change YPS Age to 45*

Resolution 5 asks the AMA to amend §7.50 of the AMA Bylaws by increasing the age cutoff for young physicians to age 45.

- *YPS Emergency Resolution: Use of Unmatched Medical Students as “Assistant Physicians”*

This resolution asks the AMA to oppose special licensing pathways for physicians who are not currently enrolled in an ACGME or AOA training program or have not completed at least one year of accredited post-graduate U.S. medical education.

The **final actions** of the YPS items of business may be found in the enclosed document.

Two of these resolutions (Resolution 1 and Emergency Resolution 1) went forward immediately to the AMA House of Delegates at this meeting, as well as two resolutions that were passed by the YPS Assembly at the Interim meeting.

- *Resolution 1 (renumbered as HOD Resolution 616): Improving Leadership Potential and Preventing Attrition among Early- and Mid-Career Physicians*

The substitute resolution that was passed by our Assembly which requested that the AMA study diversity, particularly by age, among AMA Delegates and develop mechanisms to promote diversity within the House of Delegates with a report back at the 2015 Annual Meeting was passed by the House of Delegates

- *YPS Emergency Resolution (renumbered as HOD Resolution 324): Use of Unmatched Medical Students as “Assistant Physicians”*

The resolution as amended by our assembly asked That our AMA oppose special licensing pathways for physicians who are not currently enrolled in an ACGME or AOA training program, or have not completed at least one year of accredited post-graduate U.S. medical education. This was passed by the House of Delegates

- Resolution 603: Medical Malpractice Rate Discounts

This resolution asked that our American Medical Association encourage member organizations of the Federation to offer access to discounted medical liability insurance premiums. This was well received and passed the House of Delegates.

- Resolution 702: Putting Price Transparency into Practice

This resolution asked that our American Medical Association study appropriate mechanisms through which patients will be able to obtain price data from providers, facilities, insurers and other health care entities prior to the provision of non-emergent services, and that our AMA study the barriers to this goal and serve as a leading voice in this discussion. It addition it asked that our AMA support medical education efforts to enhance cost transparency as a part of undergraduate and graduate medical education, focused on the cost of the tests providers order, as well as the cost of medical equipment and facility fees and finally requested that our AMA provide regular updates to its membership on the path toward enhancing the transparency of cost within the US health care system for both providers and consumers, and how our AMA can be the leading voice in this effort.

This received widespread support and also passed the HOD.

As directed by the YPS Assembly, the section also testified on several other important items of business, including:

BOT Report 26: Conforming Birth Certificate Policies to Current Medical Standards for Transgender Patients (Resolution 5-A-13) (active support); CEJA Report 3: Restrictive Covenants (active support); CMS Report 7: Coverage of and Payment for Telemedicine (active support); Resolution 113: Network Adequacy (active support); Resolution 115: Opposition to Genetic Testing Restrictions Based on Specialty (active support); Resolution 118: Facilitating State Licensure for Telemedicine Services (active support); Resolution 125: Expanding Patients' Choice in the Exercise of Health Insurance Benefits (active support); Resolution 202: Banning Smoking While Driving in Vehicles in Which Minors are Present (active support); Resolution 208: Completing the Electronic Prescription Loop for Controlled Substances (active support); Resolution 211: Release of Provider-Specific Medicare Part B Payment Data by CMS (active support); Resolution 226: Release of Physician Medicare Claims Data (active support); CME Report 6: An Update on Maintenance of Certification, Osteopathic Continuous Certification, and Maintenance of Licensure (active support); Resolution 305: Transparency on Maternity and Paternity Leave Policies for Trainees (active support); Resolution 310: Physician Reentry and Licensure (active support); Resolution 313: Opposition to the FSMB Maintenance of Licensure Program (active support of the second Resolved clause); Resolution 314: Compromising Lifetime Certifications Retroactively (active oppose); Resolution 317: Abolish Discrimination Against IMGs in Medical Licensing Requirements (active support); Resolution 319: Maintenance of Licensure (active support); Resolution 403: Sunscreen and Sun Protection Counseling by Physicians (active support); CSAPH Report 3: National Drug Shortages—Update (active support); CSAPH Report 5: Guidelines for Mobile Medical Applications and Devices (active support); Resolution 503: Comprehensive Access to Safety Data from Clinical Trials (active support of the second Resolved clause); Resolution 511: Regulation of Electronic Nicotine Delivery Systems (active support); CCB/CLRPD Report 1: AMA Policy Directives which are Obsolete, Redundant or Accomplished (active oppose with extraction of AMA Policy H-292.969); and CMS Report 6: Development of Models/Guidelines for Medical Health Care Teams (active oppose, refer back).

Final actions on each of these can be found on the AMA HOD website at: <http://www.ama-assn.org/sub/meeting/reportsresolutions.html>.

For future meetings, I would like to personally encourage everyone to stay for as much of the HOD meeting as possible. Your testimony and influence in your states, specialty societies, caucuses, sections, and councils are an essential part of achieving our objectives in the HOD, multiplying the voice of young physicians in our AMA. By staying for the HOD, you play an integral part in making sure young physicians' needs are heard and considered in every decision the AMA makes.

In addition, I would like to thank everyone for participating in the HOD handbook review process, particularly if you participated in a handbook review committee. This important process lays the groundwork for our positions and makes sure that every issue is looked at for YPS relevance. I hope that everyone will consider volunteering some of your valuable time to this important YPS function. Most importantly, our positions as a Section are an important part of ensuring that AMA policy remains relevant for young physicians.

Lastly, it has been my pleasure to serve as your delegate for all these years. Thank you for entrusting me with this important responsibility of making your voice heard throughout the AMA and by extension by the world at large. Over the time that I have served we have made important advances in ensuring the place of the YPS in the AMA as a voice of the "now" of medicine. So many of you have stepped up to bring your ideas to write and review resolutions and physically cover reference committees, being our eyes, ears, and voices on issues that the YPS needed to be heard on, and I am indebted to each of you who have volunteered and sat through so many hours of testimony so that I could be at other places that also needed me. I want to also give a special thanks to my alternate delegates who have served with me over the years, Jerome Adams, MD, Colin Edgerton, MD, and Hilary Fairbrother, MD, MPH. Without their willingness to shoulder the load, there is no doubt that we would have never been even half as effective

as we were. Finally, a word of gratitude to the YPS staff who always made sure I had everything I needed and provided the final back-up for anything and everything. I look forward to watching where the section goes from here and know that Dr. Fairbrother will push the section to even greater heights with all of your help.

If you have any questions on the actions of the YPS or would like to become more involved in the YPS policy process, please do not hesitate to contact Hilary Fairbrother, MD, MPH (hilaryfair@gmail.com) to find out more.

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AMA-YPS Delegate, 2010-2014
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