Whereas, The Family and Medical Leave Act (FMLA) requires employers with 50 or more employees to grant up to 12 weeks of unpaid annual leave to allow workers to care for a spouse, child, or parent (except in-laws) with a serious health condition, to take leave for personal health conditions, or to care for newly born or adopted children;\(^1\) and

Whereas, LGBT persons report poorer health as compared to their heterosexual counterparts, including earlier age at disability, increased risk of sexually transmitted infection among MSM, decreased likelihood to obtain preventive cervical cancer screening among lesbian women, and increased incidence of obesity among lesbian and bisexual women;\(^2,3,4,5\) and

Whereas, Results from the 2008 National Health Interview Survey indicated workers with paid leave are significantly more likely to see healthcare providers and to receive preventative screenings independent of insured or uninsured status and health status;\(^6\) and

Whereas, In 2016, a study from the American Journal of Orthopsychiatry asserted that affirming the chosen family of LGBT individuals in family and medical leave policies improved mental well-being;\(^7\) and

Whereas, In 2010, the United States Office of Personnel Management issued regulations to modify its definitions of family member and immediate relative to include “domestic partner and parents thereof” and “any individual related by blood or affinity whose close association with the employee is the equivalent of a family relationship” in order to expand the categories of individuals for whom an employee may use leave;\(^8\) and

Whereas, Arizona\(^9\), the District of Columbia\(^10\), Hawaii\(^11\), Maine\(^12\), New York\(^13\), and Oregon\(^14\) have expanded upon the federal FMLA regulations in favor of the “blood or affinity” model,

\(^1\) 2017 “Family & Medical Leave.” United States Department of Labor.
\(^3\) Ranji, U. *et al*. Health and access to care and coverage for lesbian, gay, bisexual, and transgender individuals in the U.S. Menlo Park, CA: Kaiser Family Foundation; 2014.
\(^8\) 75 FR § 33491 – Absence and Leave; Definitions of Family Member, Immediate Relative, and Related Terms. 2010.
\(^10\) D.C. Code § 32-501(4)
\(^11\) N.Y. Workers’ Comp. Law §§ 4; 201(20)
\(^13\) Wis. Stat. Ann. §§ 103.10(1)(ar); 40.02(21c)-21(d)
\(^14\) D.C. Code Ann. § 32-131.01(C)
which allows FMLA-equivalent benefits for chosen family, domestic partners, and individuals who are dependent or mutually interdependent on the employed individual; therefore be it

RESOLVED, That our American Medical Association advocate that Family and Medical Leave Act policies include any individual related by blood or affinity whose close association with the employee is the equivalent of a family relationship. (New HOD Policy)

Fiscal note: not yet determined

Received: 04/26/18

RELEVANT AMA POLICY:

Nondiscriminatory Policy for the Health Care Needs of LGBTQ Populations H-65.976
Our AMA encourages physician practices, medical schools, hospitals, and clinics to broaden any nondiscriminatory statement made to patients, health care workers, or employees to include "sexual orientation, sex, or gender identity" in any nondiscrimination statement.

Clarification of Medical Necessity for Treatment of Gender Dysphoria H-185.927
Our AMA: (1) recognizes that medical and surgical treatments for gender dysphoria, as determined by shared decision making between the patient and physician, are medically necessary as outlined by generally-accepted standards of medical and surgical practice; and (2) will advocate for federal, state, and local policies to provide medically necessary care for gender dysphoria.
Res. 05, A-16

Health Care Disparities in Same-Sex Partner Households H-65.973
Our American Medical Association: (1) recognizes that denying civil marriage based on sexual orientation is discriminatory and imposes harmful stigma on gay and lesbian individuals and couples and their families; (2) recognizes that exclusion from civil marriage contributes to health care disparities affecting same-sex households; (3) will work to reduce health care disparities among members of same-sex households including minor children; and (4) will support measures providing same-sex households with the same rights and privileges to health care, health insurance, and survivor benefits, as afforded opposite-sex households.

Health Disparities Among Gay, Lesbian, Bisexual and Transgender Families D-65.995
Our AMA supports reducing the health disparities suffered because of unequal treatment of minor children and same sex parents in same sex households by supporting equality in laws affecting health care of members in same sex partner households and their dependent children.