

Resident and Fellow Section

Summary of Actions

42nd Interim Business Meeting November 8-10, 2018 Gaylord National Resort & Convention Center National Harbor, MD

American Medical Association-Resident and Fellow Section Summary of Actions (I-18)

Actions taken by the Assembly are outlined below in two sections: I) RFS Resolutions; and II) RFS Resolutions Submitted to the HOD.

I. RFS RESOLUTIONS

| Resolution | Action | Policy | HOD Action |
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| Late Resolution 1: Extending Pregnancy Medicaid To One Year Postpartum | Adopted | RESOLVED, That our AMA petition CMS to extend pregnancy Medicaid to a minimum of one year postpartum. | None; Will be forwarded at A-19 |
| Late Resolution 2: Developing Sustainable Solutions to Discharge of Chronically-Homeless Patients | Adopted | RESOLVED, That our AMA work with relevant stakeholders in developing sustainable plans for the appropriate discharge of chronically-homeless patients from hospitals; and be it further RESOLVED, That our AMA reaffirm H-270.962 and H-130.940; and be it further RESOLVED, That this resolution be immediately forwarded to the House of Delegates for consideration. | Immediately forwarded at I- 18; HOD Action Referred |
| Late Resolution 3: Affirming the Medical Spectrum of Gender | Adopted | RESOLVED, That our AMA-RFS support initiatives that educate state and federal policymakers and legislators on and advocate for policies addressing the medical spectrum of gender identity to ensure access to quality health care; and be it further RESOLVED, That our AMA-RFS affirm that an individual's genotypic sex, phenotypic sex, sexual orientation, gender and gender identity are not always aligned or indicative of the other, and that gender for many individuals may differ from the sex assigned at birth. | None; |
| Resolution 1: Support for Medicare Disability Coverage of Contraception for Non- Contraceptive Use | Adopted as amended | RESOLVED, That our AMA-RFS encourage work with Center for Medicare and Medicaid Services and other stakeholders CMS prescription benefit plans to include coverage for all FDA-approved contraception, including the levonorgestrel intrauterine device, for non-contraceptive use for patients covered by Medicare in patients covered by Medicare disability insurance. | |
| Resolution 2: Support for Medicare Disability Coverage of Contraception for Women of Reproductive Age | Adopted | RESOLVED, That our AMA-RFS encourage CMS to provide coverage for all FDA-approved contraception for reproductive aged women covered by Medicare disability insurance. | None. |

| Resolution 3: Increasing Rural Rotations During Residency | Adopted | RESOLVED, That our AMA work with state and specialty societies, medical schools, teaching hospitals, ACGME, CMS and other interested stakeholders to encourage and incentive qualified rural physicians to serve as preceptors, volunteer faculty, etc. for rural rotations in residency; and be it further RESOLVED, That our AMA work with ACGME, ABMS, FSMB, CMS and other interested stakeholders to lessen or remove regulations or requirements on residency training and physician practice that preclude formal educational experiences and rotations for residents in rural areas; and be it further resolved RESOLVED, That our AMA work with interested stakeholders to identify strategies to increase residency training opportunities with a report back to the HOD and formulate an actionable plan of advocacy with the goal of increasing residency training in rural areas. | None. Will be forwarded at A-19. |
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| Resolution 4: Promoting Nutrition Education Among Healthcare Providers | Reaffirmed H-465.988 in Lieu of | AMA Policy H-465.988 be reaffirmed in lieu of Resolution 3. | None; New resolution will go forward at A-19 asking for reaffirmation of HOD policy |
| Resolution 5: DACA in GME | Reaffirmed D-255.991 and D-350.986 in Lieu of | AMA Policies D-255.991 and D-350.986 be reaffirmed in lieu of Resolution 5. | None; None; New resolution will go forward at A-19 asking for reaffirmation of HOD policy |
| Resolution 6: Contraception for Incarcerated Women | Adopted as Amended | RESOLVED, That our AMA supports access to contraceptive options for advocates for state and local health departments to work with correctional facilities to provide contraception to incarcerated women prior to release.; and be it further RESOLVED, That our AMA supports incarcerated persons' access to evidence-based contraception counseling, access to all contraceptive methods and autonomy over contraceptive decision making prior to release. RESOLVED, That our AMA encourage partnerships between healthcare providers and correctional care communities, including state and local health departments, correctional facilities and community healthcare centers, so that access to contraception among women recently released from correctional facilities may be | None; Will be forwarded at HOD A-19 |

| | | increased; and be it further | |
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| | | RESOLVED, That our AMA recognize that access to contraception is a serious healthcare concern among incarcerated women; and be it further RESOLVED, That our AMA petition the National Commission on Correctional Healthcare to recognize that access to contraception is a serious healthcare concern among incarcerated women. | |
| Resolution 7: Decreasing Financial Burdens on Residents and Fellows | Referred with report back at A- 19. | RESOLVED, That our AMA partner with the ACGME and other relevant stakeholders to encourage training programs to reduce financial burdens on residents and fellows by providing subsidized access to day care facilities and other basic necessities such as on call meal allowances for residents taking in-house call, and free parking on site, and further be it RESOLVED, That this resolution be forwarded to AMA-HOD at A-19. | None. |
| Resolution 8: Strategies to Reduce Burnout in Medical Trainees | Reaffirmed 291.015R in Lieu of | AMA-RFS policy 291.015R be reaffirmed in lieu of Resolution 8. | None. |
| Resolution 9: Medical Aid in Dying | Referred with report back at A-19. | RESOLVED, That our AMA-RFS support changes to AMA policy to support laws that allow for Medical Aid in Dying; and be it further RESOLVED, That our AMA-RFS support changes to AMA policy to move the AMA towards public support of Medical Aid in Dying; and be it further RESOLVED, That our AMA-RFS support changes to AMA policy which codify that it is within the AMA's Code of Medical Ethics for physicians to involve Medical Aid in Dying in their practice when allowed by law and agreed to by the patient and provider; and be it further RESOLVED, That our AMA-RFS work with appropriate external organizations to ensure that resident and fellow training includes training in Medical Aid in Dying as allowed by law and at the discretion of the trainee, and support policy changes within the AMA which seek to do the same; and be it further RESOLVED, That our AMA-RFS support the AMA in ending its practice of using the term "physician assisted suicide" and instead replace it with the term "Medical Aid in Dying." | None. |

| Resolution 10: Improving Patient Care Through Patient Self- Awareness of Personal Health Information | Not Adopted | RESOLVED, That our AMA-RFS ask our AMA to evaluate methods to garner patient responsibility to provide Protected Health Information (PHI) to their healthcare providers, and be it further RESOLVED, That our AMA-RFS ask our AMA to study the impact such methods may have on health outcomes. | None. |
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| Resolution 11: Delegation of Informed Consent | Adopted as Amended | RESOLVED, That our AMA in cooperation with other relevant stakeholders advocate that a qualified physician be able to delegate his or her duty to obtain informed consent to another provider that has knowledge of the patient, the patient's condition, and the procedures to be performed on the patient. RESOLVED, That our AMA study the implications of the Shinal v. Toms ruling and its potential effects on the informed consent process. | None; Will be forwarded at A-19. |

III. HOD RESOLUTIONS AND REPORTS

| Resolution/Report | Policy | HOD Action |
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| Resolution 203: Support for the Development and Distribution of HIPAA-Compliant Communication Technologies | RESOLVED, That our AMA advocate for continued funding of programs including Income-Driven Repayment plans for the benefit of reducing medical student loan burden. | Reaffirmed |
| Resolution 204: Restriction on IMG Moonlighting | RESOLVED, That our AMA advocate for changes to federal legislation allowing physicians with a J-1 visa in fellowship training programs the ability to moonlight. | Referred |
| Resolution 803: Insurance Coverage for Additional Screening Recommended in States with Laws Requiring Notification of "Dense Breasts" on Mammogram | RESOLVED, That our AMA support insurance coverage for supplemental screening recommended for patients with "dense breast" tissue following a conversation between the patient and their physician; and be it further RESOLVED, That our AMA advocate for insurance coverage for and adequate access to supplemental screening recommended for patients with "dense breast" tissue following a conversation between the patient and their physician. | Adopted as Amended |
| Resolution 911: Regulating Tattoo and Permanent Makeup Inks | RESOLVED, That our AMA encourage the Food and Drug Administration (FDA) to adopt regulatory standards for tattoo and permanent makeup inks that include at minimum the disclosures expected for injectable drugs and cosmetics and mandate that this information be available to both the body licensed to perform the tattoo and to the person receiving the tattoo; and be it further | Adopted as amended |

| | RESOLVED, That our AMA study the safety of any chemical in tattoo and permanent makeup lnks. | |
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| Resolution 912: Comprehensive Breast Cancer Treatment | RESOLVED, That our AMA amend Policy H55.973 by addition and deletion as follows: | Adopted as Amended |
| | Our AMA: (1) believes that reconstruction of the breast for rehabilitation of the postmastectomy cancer post-treatment patient with in situ or invasive breast neoplasm should be considered reconstructive surgery rather than aesthetic surgery; (2) supports education for physicians and breast cancer patients on breast reconstruction and its availability; (3) recommends that third party payers provide coverage and reimbursement for medically necessary breast cancer treatments including but not limited to prophylactic contralateral mastectomy and/or oophorectomy; and (4) recognizes the validity of contralateral breast procedures needed for the achievement of symmetry in size and shape, and urges recognition of these ancillary procedures by Medicare and all other third parties for reimbursement when documentation of medical necessity is provided. | |
| Resolution 951: Prevention of Physician and Medical Student Suicide | RESOLVED, That our AMA request that the Liaison Committee on Medical Education and Accreditation Council of Graduate Medical Education collect data on medical student, resident and fellow suicides to identify patterns that could predict such events. | Adopted |
| Resolution 953: Support for Income- Driven Repayment Plans | RESOLVED, That our AMA advocate for continued funding of programs including Income-Driven Repayment plans for the benefit of reducing medical student loan burden. | Adopted |