

## AMERICAN MEDICAL ASSOCIATION ORGANIZED MEDICAL STAFF SECTION (I-19)

### Report of the OMSS Reference Committee

Nancy Mueller, MD, Chair

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1 Your Reference Committee recommends the following consent calendar for acceptance:  
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3 **RECOMMENDED FOR ADOPTION AS AMENDED OR SUBSTITUTED**  
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- 5 1. Resolution 2 – Medical Center Auto Accept Policies  
6 2. Resolution 3 – Hospital Website Voluntary Physician Inclusion  
7 3. Governing Council Report A - OMSS Handbook Review: House of Delegates  
8 Resolutions & Reports  
9

10 **RECOMMENDED FOR REFERRAL**  
11

- 12 4. Resolution 1 – Where Was the AMA?  
13 5. Resolution 4 – Drug Shortage Rapid Response Team

1 (1) RESOLUTION 2 - MEDICAL CENTER UNCONDITIONAL  
2 AUTO ACCEPT POLICIES

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4 RECOMMENDATION:

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6 Mr. Chair, your Reference Committee recommends that the  
7 following alternate resolution be adopted in lieu of  
8 Resolution 2 and transmitted to the House of Delegates for  
9 consideration at the 2019 Interim Meeting:

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11 MEDICAL CENTER AUTO ACCEPT POLICIES

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13 RESOLVED, That our AMA study the impact of auto accept  
14 policies on public health and the Emergency Medical  
15 Treatment and Labor Act (EMTALA) in order to protect the  
16 safety of our patients; and be it further

17  
18 RESOLVED, That if a medical center adopts an auto accept  
19 policy, it should be crafted and overseen by the independent  
20 medical staff.

21  
22 Resolution 2 asks that our AMA (1) take the position that a decision on whether a medical  
23 center will adopt an “auto accept” policy (i.e., unconditional acceptance for care of a  
24 patient), including what limitations should apply, be taken only after a review procedure is  
25 defined, after medical and logistic study, by an entity independent of the medical facility’s  
26 administration; and (2) advocate for a center’s independent medical staff to be an integral  
27 party as to whether an “auto accept” policy (i.e., unconditional acceptance for care of a  
28 patient) should be adopted, with what limitations, and if so, what form of implementation  
29 should be instituted, given the proposed policy’s impact on patient safety and care quality.  
30

31 Your Reference Committee heard testimony reflecting the need for acknowledgement of  
32 the potential impact on federal laws and regulations not included in the original language  
33 as well as interest in promoting further study of how auto accept policies could potentially  
34 affect physicians’ ability to care for patients. Your Reference Committee recommends  
35 alternate language to address these concerns.

(2) RESOLUTION 3 - HOSPITAL WEBSITE VOLUNTARY  
PHYSICIAN INCLUSION

RECOMMENDATION:

Mr. Chair, your Reference Committee recommends that the following alternate resolution be adopted in lieu of Resolution 3 and transmitted to the House of Delegates for consideration at the 2019 Interim Meeting:

RESOLVED, That our AMA encourage medical staff leadership to strongly oppose the actions of hospitals and health systems relating to public-facing search functions, such as websites and physician search sites, that may have a discriminatory effect on independent physicians and other classes of physicians (e.g., by not listing or including in search results any such class of physicians).

Resolution 3 asks that our AMA advocate for regulation and/or legislation requiring all credentialed physicians (employed and voluntary) be equally included on the websites (such as "Find a Doctor" sites) of hospitals and other health care facilities.

Your Reference Committee heard testimony supporting the spirit of the resolution but questioning the feasibility of enforcing hospital website requirements using state and federal regulators and policymakers. Your Reference Committee recommends substitute language that places the onus on medical staff leadership to advocate for such policies.

(3) GOVERNING COUNCIL REPORT A - OMSS HANDBOOK  
REVIEW: HOUSE OF DELEGATES RESOLUTIONS &  
REPORTS

RECOMMENDATION A:

Mr. Chair, your Reference Committee recommends that Recommendation 4 in GC Report A be amended by insertion and deletion:

~~That the OMSS Delegate be instructed to support the educational~~ oppose the intent of Resolution 214-I-19, ~~but question the resolution's workload direction to the AMA's Board of Trustees.~~

1 RECOMMENDATION B:

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3 Mr. Chair, your Reference Committee recommends that  
4 Recommendation 19 of GC Report A be amended by  
5 insertion and deletion:

6  
7 19. That the OMSS Delegate be instructed to ~~support the~~  
8 ~~intent of seek amendment of~~ CSAPH Report 3-I-19 to reflect  
9 that AMA action on this issue should be delayed until such  
10 time as:

- 11 • Federal laws and regulations permit the use of  
12 cannabis for treatment; and
- 13 • Physicians have received adequate training on  
14 cannabis withdrawal symptoms.

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16 RECOMMENDATION C:

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18 Mr. Chair, your Reference Committee recommends that GC  
19 Report A be amended by addition of a new  
20 recommendation:

21  
22 20. That the OMSS Delegate be instructed to oppose the  
23 intent of Resolution 804, Protecting Seniors from Medicare  
24 Advantage Plans.

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26 RECOMMENDATION D:

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28 Mr. Speaker, your Reference Committee recommends that  
29 GC Report A be amended by addition of a new  
30 recommendation:

31  
32 21. That the OMSS Delegate be instructed to support the  
33 intent of any resolutions at the 2019 Interim Meeting asking  
34 the AMA to provide free childcare at AMA Annual and  
35 Interim Meetings.

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37 RECOMMENDATION E:

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39 Mr. Chair, your Reference Committee recommends that the  
40 recommendations in GC Report A be adopted as amended.

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42 Governing Council Report A identifies resolutions and reports relevant to medical staffs  
43 that have been submitted for consideration by the HOD at the 2019 Interim Meeting. This  
44 report is submitted to the OMSS Assembly to facilitate the instruction of the OMSS  
45 Delegate and Alternate Delegate regarding the positions they should take in representing  
46 the Section in the HOD.

1 Testimony on Resolution 809, Resolution 810, and CEJA Report 2 supported the  
2 recommendations set forth by the Governing Council, and we therefore recommend no  
3 amendments to the Delegate instructions for these items.

4  
5 Testimony on CSAPH Report 3 suggested that the requested actions are premature given  
6 federal laws and regulations barring use of cannabis for medical treatment and the lack of  
7 professional guidance for physicians surrounding treatment and management of cannabis  
8 withdrawal.

9  
10 Testimony strongly opposed Resolution 214 as written, disagreeing with the Governing  
11 Council's assessment that there is educational merit in the resolution's request. We  
12 recommend that the Delegate be instructed to oppose Resolution 214.

13  
14 Testimony suggested that Resolution 804 be added to Report A, with a recommendation  
15 to oppose. We found the testimony concerning lack of transparency and the bias of  
16 Resolution 804 compelling and therefore recommend that the Delegate be instructed to  
17 oppose the intent of this item.

18  
19 A member of the Young Physician Section requested that OMSS support a still-in-  
20 development YPS resolution advocating that AMA provide free childcare at AMA Annual  
21 and Interim Meetings. Testimony overwhelmingly supported this idea, and we therefore  
22 recommend that OMSS support YPS efforts in this regard.

23  
24 Governing Council Report A includes the following recommendations, which your  
25 Reference Committee has annotated to show recommended amendments:

- 26  
27 1. CEJA Report 01 – Competence, Self-Assessment and Self Awareness  
28 That the OMSS Delegate be instructed to support the intent of CEJA Report 01.  
29  
30 2. Res 203 – Support of Expansion of Good Samaritan Laws  
31 That the OMSS Delegate be instructed to support the intent of Res 203.  
32  
33 3. Res 206 – Improvement of Healthcare Access in Underserved Areas by  
34 Retaining and Incentivizing IMG Physicians  
35 That the OMSS Delegate be instructed to support the intent of Res 206.  
36  
37 4. Res 214 – AMA Should Provide a Summary of Its Advocacy Efforts on Surprise  
38 Medical Bills  
39 That the OMSS Delegate be instructed to ~~support the educational intent of~~  
40 oppose Resolution 214-I-19, ~~but question the resolution's workload direction to~~  
41 ~~the AMA's Board of Trustees.~~  
42  
43 5. Res 215 – Board Certification of Physician Assistants  
44 That the OMSS Delegate be instructed to support the intent of Resolution 214-I-  
45 19.  
46  
47 6. Res 217 – Promoting Salary Transparency Among Veterans Health  
48 Administration Employed Physicians  
49 That the OMSS Delegate be instructed to support the intent of Resolution 217-I-  
50 19.

- 1 7. Res 218 – Private Payers and Office Visit Policies  
2 That the OMSS Delegate be instructed to support the intent of Resolution 218-I-  
3 19.  
4
- 5 8. CME Report 03 – Standardization of Medical Licensing Time Limits Across  
6 States  
7 That the OMSS Delegate be instructed to support the intent of CME Report 03-I-  
8 19  
9
- 10 9. Res 305 – Ensuring Access to Safe and Quality Care for Our Veterans  
11 That the OMSS Delegate be instructed to support the intent of Resolution 305-I-  
12 19.  
13
- 14 10. CMS Report 02 – Addressing Financial Incentives to Shop for Lower-Cost Health  
15 Care  
16 That the OMSS Delegate be instructed to support the intent of CMS Report 2-I-  
17 19.  
18
- 19 11. CMS Report 03 – Improving Risk Adjustment in Alternative Payment Models  
20 That the OMSS Delegate be instructed to support the intent of CMS Report 3-I-  
21 19.  
22
- 23 12. Res 809 – AMA Principles of Medicaid Reform  
24 That the OMSS Delegate be instructed to seek referral for Resolution 809-I-19.  
25
- 26 13. Res 810 – Hospital Medical Staff Policy  
27 That the OMSS Delegate be instructed to seek referral for resolve one and  
28 resolve two and oppose resolve three in Resolution 810-I-19.  
29
- 30 14. Res 811 – Require Payers to Share Prior Authorization Cost Burden  
31 That the OMSS Delegate be instructed to support the intent of Resolution 811-I-  
32 19.  
33
- 34 15. CSAPH Report 01 – Mandatory Reporting of Diseases and Conditions  
35 That the OMSS Delegate be instructed to support the intent of CSAPH Report 1-  
36 I-19.  
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- 38 16. Res 904 – Amendment to AMA Policy H150.949, “Healthy Food Options in  
39 Hospitals”  
40 That the OMSS Delegate be instructed to support the intent of Resolution 904-I-  
41 19.  
42
- 43 17. Res 912 – Improved Emergency Response Planning for Infectious Disease  
44 Outbreaks  
45 That the OMSS Delegate be instructed to support the intent of Resolution 912-I-  
46 19.  
47
- 48 18. CEJA Report 02 – Amendment to E-1.2.2, “Disruptive Behavior by Patients”  
49 That the OMSS express concern over the conclusions of CEJA Report 2-I-19 and  
50 that the report be sent back to CEJA for further work.

1 19. That the OMSS Delegate be instructed to ~~support the intent~~ seek amendment of  
2 CSAPH Report 3-I-19 to reflect that AMA action on this issue should be delayed  
3 until such time as:

- 4 • Federal laws and regulations permit the use of cannabis for treatment;  
5 and
- 6 • Physicians have received adequate training on cannabis withdrawal  
7 symptoms.

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9 20. That the OMSS Delegate be instructed to oppose the intent of Resolution 804,  
10 Protecting Seniors from Medicare Advantage Plans.

11  
12 21. That the OMSS Delegate be instructed to support the intent of any resolutions at  
13 the 2019 Interim Meeting asking the AMA to provide free childcare at AMA  
14 Annual and Interim Meetings.

15  
16 (4) RESOLUTION 1 - WHERE WAS THE AMA?

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18 RECOMMENDATION:

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20 Mr. Chair, your Reference Committee recommends that  
21 Resolution 1 be referred for report back at the 2020 Annual  
22 Meeting.

23  
24 Resolution 1 asks that a member of the executive body and/or Board of Trustees, who is  
25 familiar with this issue, come before the OMSS with an explanation, background, and  
26 history of what has transpired at the public relations, policy and actions departments of  
27 our organization to justify this lack of a public stance on this important issue.

28  
29 Your Reference Committee heard testimony reflecting discomfort with the language of the  
30 resolution and requesting that it be rewritten to reflect actions the AMA could take going  
31 forward instead of examining AMA actions retrospectively. Your Reference Committee  
32 recommends referral of the resolution back to the Governing Council for report back at the  
33 2020 Annual Meeting.

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35 (5) RESOLUTION 4 - DRUG SHORTAGE RAPID  
36 RESPONSE TEAM

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38 RECOMMENDATION:

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40 Mr. Chair, your Reference Committee recommends that  
41 Resolution 4 be referred for report back at the 2020 Annual  
42 Meeting.

43  
44 Resolution 4 asks that our AMA urge the FDA to create a rapid response team to expedite,  
45 in a safe manner, the regulatory approval for new and existing manufacturers of  
46 pharmaceuticals when the FDA has been notified of a potential or actual drug shortage.

47  
48 Your Reference Committee heard testimony reflecting the efforts already taken by the  
49 FDA to address drug shortages. We recommend referral to the Governing Council for

- 1 report back at the 2020 Annual Meeting reflecting the work AMA has done with the FDA
- 2 and other stakeholders, including but not limited to pharmacists, to proactively address
- 3 single source, as well as international single source, drug shortages, disseminate wider
- 4 knowledge of potential shortages and options to remedy those shortages, and greater
- 5 enforcement of existing federal laws and regulations around notification of drug shortages.



- 1 Mr. Chair, this concludes the report of the OMSS Reference Committee. I would like to
- 2 thank Tariq Butt, MD, Robert Jackson, MD, Don Lee, MD, Katie Lozano, MD, and all those
- 3 who testified before the Committee.

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Tariq Butt, MD

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Katie Lozano, MD

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Robert Jackson, MD

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Nancy Mueller, MD  
Chair

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Don Lee, MD