

## DISCLAIMER

The following is a preliminary report of actions taken by the House of Delegates at its 2019 Interim Meeting and should not be considered final. Only the Official Proceedings of the House of Delegates reflect official policy of the Association.

### AMERICAN MEDICAL ASSOCIATION HOUSE OF DELEGATES (I-19)

#### Report of Reference Committee F

Ann R. Stroink, MD, Chair

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Your Reference Committee recommends the following consent calendar for acceptance:

#### **RECOMMENDED FOR ADOPTION**

1. Board of Trustees Report 8 – Implementing AMA Climate Change Principles Through JAMA Paper Consumption Reduction and Green Healthcare Leadership
2. Council on Long Range Planning and Development Report 1 – Academic Physicians Section Five-Year Review
3. Report of the House of Delegates Committee on the Compensation of the Officers

#### **RECOMMENDED FOR ADOPTION AS AMENDED**

4. Board of Trustees Report 6 – Physician Health Policy Opportunity
5. Resolution 602 – Preserving Childcare at AMA Meetings

The following resolution was Recommended Against Consideration:

- Resolution 601 – Amending AMA Policy G-630.140, “Lodging, Meeting Venues, and Social Functions”

## RECOMMENDED FOR ADOPTION

- (1) BOARD OF TRUSTEES REPORT 8 - IMPLEMENTING  
AMA CLIMATE CHANGE PRINCIPLES THROUGH JAMA  
PAPER CONSUMPTION REDUCTION AND GREEN  
HEALTHCARE LEADERSHIP (RESOLUTION 615-A-19)

### RECOMMENDATION:

**Recommendations in Board of Trustees Report 8 be  
adopted and the remainder of the Report be filed.**

**HOD ACTION: Recommendations in Board of Trustees  
Report 8 adopted and the remainder of the Report filed.**

The Board of Trustees recommends that the following be adopted in lieu of Resolution 615-A-19, and the remainder of this report be filed.

That our American Medical Association continue to explore environmentally sustainable practices for *JAMA* distribution.

Given previously articulated concerns about potential unintended financial consequences, your Reference Committee lauds the JAMA Network's efforts in accelerating the shift to digital printing for journals in the portfolio, as well as moving forward with a pilot program to migrate *JAMA Surgery* to digital printing in 2020 thereby reducing the overall print circulation for that title by over 90 percent.

Your Reference Committee fully supports the recommendation contained in Board of Trustees Report 8, which serves to address the concerns of our Medical Student Section who championed this matter.

- (2) COUNCIL ON LONG RANGE PLANNING AND  
DEVELOPMENT REPORT 1 - ACADEMIC PHYSICIANS  
SECTION FIVE-YEAR REVIEW

### RECOMMENDATION:

**Recommendation in Council on Long Range Planning  
and Development Report 1 be adopted and the  
remainder of the Report be filed.**

**HOD ACTION: Recommendation in Council on Long Range  
Planning and Development Report 1 adopted and the  
remainder of the Report filed.**

The Council on Long Range Planning and Development recommends that our American Medical Association renew delineated section status for the Academic Physicians Section through 2024 with the next review no later than the 2024 Interim Meeting. (Directive to Take Action)

1 On behalf of our House of Delegates, your Reference Committee wishes to extend its  
2 appreciation to the members of the Council on Long Range Planning and Development  
3 and the leadership of the Academic Physicians Section for their cooperative and  
4 collaborative efforts thereby allowing the Council to present a thorough review of the  
5 Section's status. Having received no negative testimony, your Reference Committee  
6 supports the Council's conclusion.

7  
8 (3) REPORT OF THE HOUSE OF DELEGATES COMMITTEE  
9 ON COMPENSATION OF THE OFFICERS

10  
11 **RECOMMENDATION:**

12  
13 **Recommendations in the Report of the House of**  
14 **Delegates Committee on Compensation of the Officers**  
15 **be adopted and the remainder of the Report be filed.**

16  
17 **HOD ACTION: Recommendations in the Report of the**  
18 **House of Delegates Committee on Compensation of the**  
19 **Officers adopted and the remainder of the Report filed.**

20  
21 The Committee on Compensation of the Officers recommends the following  
22 recommendations be adopted and the remainder of this report be filed:

- 23  
24 1. That there be no change to the current Definitions effective 1 July 1, 2018 as they  
25 appear in the Travel and Expenses Standing Rules for AMA Officers for the  
26 Governance Honorarium, Per Diem for Representation and Telephonic Per Diem  
27 except for the Governance Honorarium and Per Diem amounts as recommended in 2,  
28 3 and 4 below.
- 29  
30 • Definition of Governance Honorarium effective July 1, 2017:  
31 The purpose of this payment is to compensate Officers, excluding Board Chair, Chair-  
32 Elect and Presidents, for all Chair-assigned internal AMA work and related travel. This  
33 payment is intended to cover all currently scheduled Board meetings, special Board  
34 or Board committee, subcommittee and task force meetings, Board orientation, Board  
35 development and media training, and Board conference calls, and any associated  
36 review or preparatory work, and all travel days related to all such meetings. The  
37 Governance Honorarium also covers Internal Representation, such as section and  
38 council liaison meetings (and associated travel) or calls, up to eleven (11) Internal  
39 Representation days.
- 40  
41 • Definition of Per Diem for Representation effective July 1, 2017:  
42 The purpose of this payment is to compensate for Board Chair-assigned  
43 representation day(s) and related travel for Officers, excluding Board Chair, Chair-  
44 Elect and Presidents. Representation is either external to the AMA, or for participation  
45 in a group or organization with which the AMA has a key role in  
46 creating/partnering/facilitating achievement of the respective organization goals such  
47 as the AMA Foundation, PCPI, etc., or for Internal Representation days above eleven  
48 (11). The Board Chair may also approve a per diem for special circumstances that  
49 cannot be anticipated such as weather-related travel delays.

- 1 • Definition of Telephonic Per Diem for Representation effective July 1, 2017:  
2 Officers, excluding the Board Chair, Chair-Elect and Presidents, who are assigned as  
3 the AMA representative to outside groups as one of their specific Board assignments  
4 or assigned Internal Representation days above eleven (11), receive a per diem rate  
5 for teleconference meetings when the total of all teleconference meetings of 30  
6 minutes or longer during a calendar day equal 2 or more hours. Payment for these  
7 meetings would require approval of the Chair of the Board.
- 8 2. That the Governance Honorarium for all Board members excluding, Board Chair,  
9 Board Chair-elect, President, President-elect, and Immediate Past President be  
10 increased effective July 1, 2020 to \$67,000. (Directive to Take Action)  
11
- 12 3. That the Per Diem for Chair-assigned representation for all Board members excluding  
13 the Board Chair, Chair-Elect and Presidents and related travel be increased effective  
14 July 1, 2020 to \$1,400 per day. (Directive to Take Action)  
15
- 16 4. That the Per Diem for Chair-assigned Telephonic Per Diem for Representation be  
17 increased effective July 1, 2020 to \$700 as defined. (Directive to Take Action)  
18

19 Your Reference Committee received no testimony in opposition to the report. Additionally,  
20 your Reference Committee believes that the proposed Honorarium increase for each of  
21 the 16 non-leadership Officers of our AMA Board of Trustees, as well as the Per Diem and  
22 Telephonic Per Diem increases, are modest and deserved given the Board of Trustees'  
23 increasing representation of our AMA.

**RECOMMENDED FOR ADOPTION AS AMENDED**

(4) BOARD OF TRUSTEES REPORT 6 - PHYSICIAN HEALTH  
POLICY OPPORTUNITY (RESOLUTION 604-I-18)

REQUEST TO AMA FOR TRAINING IN HEALTH POLICY  
AND HEALTH LAW (RESOLUTION 612-A-19)

**RECOMMENDATION A:**

**Recommendations in Board of Trustees Report 6 be amended by addition and deletion:**

1. That our AMA encourage and support efforts to educate interested medical students, residents, fellows, and practicing physicians about health policy and assist them in starting or transitioning to careers that involve health policy. (New HOD Policy)
2. That our AMA recognize, encourage, and support the primary health policy training found in the physician specialties of Public Health / General Preventive Medicine, Occupational and Environmental Medicine, and Aerospace Medicine. (Directive to Take Action)
3. That our AMA significantly increase its collaborative efforts with the National Academy of Medicine (NAM) to make physicians aware of existing health policy fellowship training opportunities and help them to apply for and participate in them. (Directive to Take Action)
4. That our AMA engage with alumni of health policy fellowship training programs and joint degree programs and provide opportunities for them to share their health policy experiences with medical students, residents, fellows, and practicing physicians. (Directive to Take Action)
5. That our AMA include health policy content in its educational resources for members. (Directive to Take Action)
6. That our AMA work with the Office of the U.S. Surgeon General to disseminate information to medical students, residents, fellows, and practicing physicians about opportunities to join the Commissioned Corps of the U.S. Public Health Service. (Directive to Take Action)
7. That our AMA consider options for funding a 1-year educational training program for practicing physicians who wish to transition from clinical practice to employment within the health policy sector. (Directive to Take Action)

**RECOMMENDATION B:**

**Recommendations in Board of Trustees Report 6 be adopted as amended and the remainder of the Report be filed.**

**HOD ACTION: Recommendations in Board of Trustees Report 6 adopted as amended and the remainder of the Report filed.**

The Board of Trustees recommends that the following recommendations be adopted in lieu of Resolutions 604-I-18 and 612-A-19 and the remainder of the report be filed:

1. That our AMA encourage and support efforts to educate interested medical students, residents, fellows, and practicing physicians about health policy and assist them in starting or transitioning to careers that involve health policy. (New HOD Policy)
2. That our AMA significantly increase its collaborative efforts with the National Academy of Medicine (NAM) to make physicians aware of existing health policy fellowship opportunities and help them to apply for and participate in them. (Directive to Take Action)
3. That our AMA engage with alumni of health policy fellowship programs and joint degree programs and provide opportunities for them to share their health policy experiences with medical students, residents, fellows, and practicing physicians. (Directive to Take Action)
4. That our AMA include health policy content in its educational resources for members. (Directive to Take Action)
5. That our AMA work with the Office of the U.S. Surgeon General to disseminate information to medical students, residents, fellows, and practicing physicians about opportunities to join the Commissioned Corps of the U.S. Public Health Service. (Directive to Take Action)

Your Reference Committee received testimony that was overwhelmingly supportive of the recommendations contained in Board of Trustees Report 6 and agree there are external organizations that have educational content and programs to enhance the health policy development skills of physicians; however, much of this content and many of these training programs receive minimal promotion.

Testimony further suggested, and your Reference Committee agrees, that use of the term "fellowship" may be confusing as it implies American Board of Medical Specialties and Accreditation Council for Graduate Medical Education recognition and subspecialty status.

Adding recommendation 7, which calls for our AMA to consider funding its own educational training program, aligns with the requests of the authors of Resolution 604-I-18 and Resolution 612-A-19.

1 Your Reference Committee believes that the amended language provided in testimony  
2 and appended to the recommendations contained in Board of Trustees Report 6  
3 delineates tangible steps to achieve success.

4  
5 (5) RESOLUTION 602 - PRESERVING CHILDCARE AT AMA  
6 MEETINGS

7  
8 **RECOMMENDATION A:**

9  
10 Resolution 602 be amended by addition and deletion:

11  
12 **RESOLVED**, That our American Medical Association ~~continue~~  
13 ~~to arrange onsite on-site supervised childcare at no cost to~~  
14 ~~members attending AMA Annual and Interim meetings (New~~  
15 ~~HOD Policy); and be it further~~

16  
17 ~~**RESOLVED**, That our American Medical Association offer on-~~  
18 ~~site supervised childcare at no cost to AMA members and staff~~  
19 ~~for Annual and Interim meetings. (New HOD Policy)~~

20  
21 **RESOLVED**, That Policy D-600.958, be rescinded. (Rescind  
22 HOD Policy)

23  
24 **RECOMMENDATION B:**

25  
26 Resolution 602 be adopted as amended.

27  
28 **HOD ACTION: Resolution 602 adopted as amended.**

29  
30 RESOLVED, That our American Medical Association continue to arrange on-site  
31 supervised childcare at AMA Annual and Interim meetings (New HOD Policy); and be it  
32 further

33  
34 RESOLVED, That our American Medical Association offer on-site supervised childcare at  
35 no cost to AMA members and staff for Annual and Interim meetings. (New HOD Policy)

36  
37 Your Reference Committee heard testimony that was overwhelming in support of  
38 Resolution 602. At the June 2017 inception of Camp AMA, utilization was low with 4  
39 children from 3 families. Beginning with the 2017 Interim Meeting, an average of 16  
40 children from 12 families have registered for use of the childcare services.

41  
42 Several delegates noted that the availability of onsite child care services supports  
43 professional and personal balance, contributes to the well-being of their children, and  
44 facilitates the development of their network. Your Reference Committee believes that  
45 providing childcare will lead to an enhanced meeting experience that supports  
46 inclusiveness and encourages engagement in AMA House of Delegates meetings. Your  
47 Reference Committee also heard testimony that called for the AMA to consider extended  
48 hours and expanding activities for the children.

1 Our AMA Board of Trustees is encouraged to establish parameters to ensure responsible  
2 usage and a positive experience for families that participate in the onsite child care  
3 arranged by our AMA. Your Reference Committee wishes to note that free childcare for  
4 staff would be considered an employee benefit, which is outside the purview of our AMA  
5 House of Delegates.

6  
7 In light of newly proposed policy calling for our AMA to arrange onsite supervised childcare  
8 at no cost to members attending Annual and Interim meetings, Policy D-600.958,  
9 "Childcare at the AMA Meetings," which established the pilot program, should be  
10 rescinded.



- 1 This concludes the report of Reference Committee F. I would like to thank
- 2 Jerry P. Abraham, MD, MPH, David J. Bensema, MD, Michael D. Chafty, MD, JD,
- 3 Lynda G. Kabbash, MD, Candace E. Keller, MD, MPH, A. Lee Morgan, MD, and all those
- 4 who testified before the Committee.

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