



**YOUNG PHYSICIANS SECTION
2019 ANNUAL MEETING POLICY HIGHLIGHTS**

AMA-YPS ITEMS OF BUSINESS	
AMA-YPS Resolution/Report	AMA-YPS Action (These items will remain as directives until the action requested has been completed.)
Report A: Governing Council Activities/Action Plan Update	<p>Filed</p> <p>Report A is a compilation of activities accomplished by the AMA-YPS since the 2018 Interim Meeting. Updates on AMA-YPS objectives are organized under four main categories: focus; communications; leadership development; and membership and involvement.</p>
Report B: State Medical Society Representation in the AMA-YPS Assembly	<p>Adopted</p> <p>Report B provides an overview of AMA Bylaws language related to the apportionment of state medical society representation in the AMA-YPS. This report includes the 2019 allocations for state medical society representatives in the AMA-YPS Assembly. Further, Report B provides a framework for increasing representation and promoting active participation among state medical societies.</p> <p>Report B includes the following recommendations:</p> <ol style="list-style-type: none"> 1. The YPS Governing Council will continue to work with appropriate YPS committee members and young physician members that are AMA Ambassadors to connect with current and potential members that are part of state medical societies not represented in the AMA-YPS and encourage them to serve as liaisons to the young physicians in their society or identify someone in their society for further outreach. 2. The YPS Governing Council will continue to work with appropriate YPS committee members and young physician members that are AMA Ambassadors to communicate with state societies currently represented in the AMA-YPS Assembly to highlight the work accomplished during the Assembly meetings and facilitate dialogue about increasing representation in the AMA-YPS where appropriate. 3. The YPS Governing Council will continue to reach out to state societies that are eligible for representation in the AMA-YPS Assembly that have not sent a representative in the past two years. 4. The YPS Governing Council will continue to reach out to state societies that are eligible for representation in the AMA-YPS Assembly that have sent less than the allotted number of representatives.
Report C: Specialty Society Representation and Outreach	<p>Adopted</p> <p>Report C presents the criteria for specialty society representation in the AMA-YPS Assembly, gave an update on the level of specialty society representation, and discusses strategies to gain new specialty society representation.</p> <p>Report C includes the following recommendations:</p> <ol style="list-style-type: none"> 1. The YPS Governing Council will continue to work with appropriate YPS committee members and young physician members that are AMA Ambassadors to engage with current and potential members that are part of specialty societies not represented in the AMA-YPS and encourage them to serve as liaisons to the young physicians in their society or identify someone in their society for further outreach. The YPS Governing Council

	<p>will continue to connect with specialty societies that are eligible for representation in the AMA-YPS Assembly that have not sent a representative in the past two years.</p> <ol style="list-style-type: none"> 2. The YPS Governing Council will continue to reach out to specialty societies that are eligible for representation in the AMA-YPS Assembly that have sent less than the allotted number of representatives. 3. The YPS Governing Council will continue to work with appropriate YPS committee members and young physician members that are AMA Ambassadors to communicate with specialty societies currently represented in the AMA-YPS Assembly to share highlights from the work accomplished during the Assembly meetings and facilitate dialogue about increasing representation in the AMA-YPS where appropriate. 4. The YPS Governing Council will reach out to American Rhinologic Society, American Society for Reconstructive Microsurgery, American Society of Neuroimaging, North American Neuromodulation Society and North American Neuro-Ophthalmology Society to notify these specialty societies of their eligibility for representation in the AMA-YPS Assembly.
Report D: AMA-YPS Finance Report	<p>Filed</p> <p>Report D provides information on the AMA-YPS budget and finances.</p>
Report E: Improving Prevention and Emergency Response through Flexible Public Health Funding Based on Population Risks (Resolution 2-A-18)	<p>Adopted</p> <p>Report E responds to Resolution 2-A-18, “Improving Prevention and Emergency Response through Flexible Public Health Funding Based on Population Risks,” which was referred with a report back at the 2019 Annual Assembly Meeting. Resolution 2-A-18 asks the AMA to encourage federal, state, and local agencies to partake in syndromic surveillance, assess risks of local populations for disease, and develop comprehensive plans with other stakeholders to enact actions for mitigation, preparedness, response, and recovery in the event of unexpected infectious disease outbreak.</p> <p>Report E includes a synopsis of the principal topics raised in Resolution 2-A-18: 1) the significance of implementing syndromic surveillance and 2) the allocation of public health funds to support communities in the event of an infectious disease outbreak.</p> <p>Report E includes the following recommendations:</p> <ol style="list-style-type: none"> 1. The AMA-YPS Governing Council recommends that YPS Resolution 2-A-18, “Improving Prevention and Emergency Response through Flexible Public Health Funding Based on Population Risks,” be amended with a change in title to read: <p>IMPROVED EMERGENCY RESPONSE PLANNING FOR INFECTIOUS DISEASE OUTBREAKS</p> <p>RESOLVED, That our AMA encourage <u>hospitals and other entities that collect patient encounter data to report syndromic (i.e., symptoms that appear together and characterize a disease or medical condition) data to public health departments in order to facilitate</u> federal, state, and local agencies to partake in syndromic surveillance, assess risks of local populations for disease, and develop comprehensive plans with other stakeholders to enact actions for</p>

	<p>mitigation, preparedness, response, and recovery (Directive to Take Action); and be it further</p> <p>RESOLVED, That our AMA encourage federal, state, and local agencies to develop funding formulas accounting for population risks and medically underserved areas (Directive to Take Action); and be it further</p> <p>RESOLVED, That our AMA supports flexible funding in public health for “Disease X” <u>unexpected infectious disease</u> to improve timely response to emerging outbreaks and build public health infrastructure at the local level <u>with attention to medically underserved areas</u> (Directive to Take Action); and be it further</p> <p>RESOLVED, That our AMA supports effective <u>encourage health departments</u> to develop public health messaging to reduce climate of fear and panic <u>provide education on unexpected infectious disease</u>. (Directive to Take Action)</p> <p>2. The AMA-YPS Governing Council recommends that YPS Resolution, “Improved Emergency Response Planning for Infectious Disease Outbreaks,” be submitted for consideration at the 2019 Interim Meeting of the AMA House of Delegates.</p>
YPS Resolution 1: Model Legislation for 'Mature Minor' Consent to Vaccinations	<p>Adopted as Amended</p> <p>RESOLVED, That our AMA support physicians in assessing whether a minor has met maturity and <u>medical decision-making</u> capacity requirements when providing consent for vaccinations and in developing protocols for appropriate documentation by physicians (Directive to Take Action); and be it further</p> <p>RESOLVED, That our AMA develop model legislation to aid states in developing their own policies to allow “mature minors” (defined as someone who is old enough to understand and appreciate the consequences of a medical procedure, as determined by their physician), defined as “certain older minors who have the capacity to give informed consent to do so for care that is within the mainstream of <u>medical practice, not high risk, and provided in a nonnegligent manner,</u>” to self-consent for vaccinations. (Directive to Take Action)</p> <p>RESOLVED, That this resolution be immediately forwarded for consideration at the 2019 Annual Meeting of the AMA House of Delegates. (Directive to Take Action)</p> <p>Note: YPS Resolution 1 was forwarded to the AMA House of Delegates for consideration at the 2019 Annual Meeting and was considered as Resolution 027, which was adopted.</p>
YPS Resolution 2: Dispelling Myths of Bystander Opioid Overdose	<p>Adopted as Amended</p> <p>RESOLVED, That our AMA <u>work with appropriate stakeholders</u> to develop and disseminate educational materials aimed at dispelling the fear of bystander overdose via inhalation or dermal contact with fentanyl or other synthetic derivatives, often arising from first responders who lack medical training (Directive to Take Action); and be it further</p> <p>RESOLVED, That our AMA work with appropriate stakeholders to address instances of misinformation in the mainstream media by systematically responding to misleading or factually inaccurate news reporting of bystander overdose (Directive to Take Action); and be it further</p> <p><u>RESOLVED, That our AMA work with appropriate stakeholders to identify those professions, such as first responders, most impacted by opioid overdose deaths in</u></p>

	<p><u>order to provide targeted education to dispel the myth of bystander overdose via inhalation or dermal contact with fentanyl or other synthetic derivatives. (Directive to Take Action)</u></p> <p>RESOLVED, That this resolution be immediately forwarded for consideration at the 2019 Annual Meeting of the AMA House of Delegates. (Directive to Take Action)</p> <p>Note: YPS Resolution 2 was forwarded to the AMA House of Delegates for consideration at the 2019 Annual Meeting and was considered as Resolution 532, which was adopted.</p>
YPS Resolution 3: Basic Courses in Nutrition	<p>Adopted as Amended</p> <p>RESOLVED, That our American Medical Association amend Policy H-150.995, "Basic Courses in Nutrition," by addition to read as follows:</p> <p>Basic Courses in Nutrition H-150.995</p> <ol style="list-style-type: none"> 1. Our AMA encourage effective education in nutrition at the undergraduate, graduate, and postgraduate levels. 2. Our AMA encourage collaboration with appropriate entities to develop and promote relevant nutrition education to enhance patient care and medical trainee education and wellbeing. 3. Our AMA encourage food served in medical trainings and medical conferences be aligned with <u>the dietary guidelines for Americans evidence-based dietary guidelines.</u> (Modify HOD Policy) <p><u>Note: YPS Resolution 3 will be forwarded to the AMA House of Delegates for consideration at the 2019 Interim Meeting.</u></p>
YPS Resolution 4: Ensuring Access to Safe and Quality Care for Our Veterans	<p>Adopted as Amended</p> <p>RESOLVED, That our American Medical Association amend AMA Policy H-510.986, "Ensuring Access to Safe and Quality Care for our Veterans," by addition to read as follows:</p> <p>Ensuring Access to Safe and Quality Care for our Veterans H-510.986</p> <ol style="list-style-type: none"> 1. Our AMA encourages all physicians to participate, when needed, in the health care of veterans. 2. Our AMA supports providing full health benefits to eligible United States Veterans to ensure that they can access the Medical care they need outside the Veterans Administration in a timely manner. 3. Our AMA will advocate strongly: a) that the President of the United States take immediate action to provide timely access to health care for eligible veterans utilizing the healthcare sector outside the Veterans Administration until the Veterans Administration can provide health care in a timely fashion; and b) that Congress act rapidly to enact a bipartisan long term solution for timely access to entitled care for eligible veterans. 4. Our AMA recommends that in order to expedite access, state and local medical societies create a registry of doctors offering to see our veterans and that the registry be made available to the veterans in their community and the local Veterans Administration. 5. Our AMA supports access to <u>similar clinical educational resources for all health care professionals involved in the care of veterans as those provided by the U.S. Department of Veterans Affairs for educational purposes to their employees with the goal of providing better care for all veterans.</u> 6. Our AMA will strongly advocate that the Veterans Health Administration and Congress develop and implement necessary resources, protocols, and accountability to ensure the Veterans Health Administration recruits, hires and retains physicians and other health care professionals to deliver the safe, effective

	<p>and high-quality care that our veterans have been promised and are owed. (Modify HOD Policy)</p> <p><u>Note: YPS Resolution 4 will be forwarded to the AMA House of Delegates for consideration at the 2019 Interim Meeting.</u></p>
YPS Resolution 5: Public Health Impacts and Unintended Consequences of Legalization and Decriminalization of Cannabis for Medicinal and Recreational Use	<p>Adopted as Amended</p> <p>RESOLVED, That our AMA work with interested organizations to collate existing worldwide data on the public health impacts, societal impacts, and unintended consequences of legalization and/or decriminalization of cannabis for recreational and medicinal use, with a report back at I-20 (Directive to Take Action); and be it further</p> <p>RESOLVED, That our AMA continue to encourage research on the unintended consequences of legalization and decriminalization of cannabis for recreational and medicinal use in an effort to promote public health and public safety (Directive to Take Action); and be it further</p> <p>RESOLVED, That our AMA encourage dissemination of information on the public health impacts of legalization and decriminalization cannabis for recreational and medicinal use, with consideration of making links to that information available on the AMA website (Directive to Take Action); and be it further</p> <p>RESOLVED, That our AMA work with interested organizations to develop model regulations to ensure public health and safety in states that have legalized the medical and/or recreational use of cannabis (Directive to Take Action); and be it further</p> <p>RESOLVED, That our AMA work with interested organizations to lobby Congress to allow more sites to conduct research on the risks and benefits of cannabinoid products. (Directive to Take Action)</p> <p><u>Note: YPS Resolution 5 will be forwarded to the AMA House of Delegates for consideration at the 2019 Interim Meeting.</u></p>

The YPS introduced the following resolutions at the 2019 Annual Meeting:

- Resolution 402: Bullying in the Practice of Medicine (Referred)
- Resolution 403: White House Initiative on Asian Americans and Pacific Islanders (Adopted)
- Resolution 502: Destigmatizing the Language of Addiction (Adopted)
- Resolution 702: Peer Support Groups for Second Victims (Adopted as Amended)

The AMA-YPS was an active and integral part of the HOD meeting. As directed by the YPS Assembly, the section testified on 68 items of business that were considered by the AMA HOD. The YPS testified on many significant issues, including:

- Gender equity in medicine: The YPS testified in support of BOT Report 27, Advancing Gender Equity in Medicine, which was presented in response to AMA Policy D-65.989. AMA Policy D-65.989 was created following the adoption of Substitute Resolution 10-A-18, which was adopted in lieu of Resolution 10-A-18, "Advancing Gender Equity in Medicine;" Resolution 11-A-18, "Women Physician Workforce and Gender Gap in Earnings – Measures to Improve Equality;" Resolution 20-A-18, "Advancing the Goal of Equal Pay for Women in Medicine;" and Resolution 21-A-18, "Taking Steps to Advance Gender Equity in Medicine." Of note, the YPS introduced Resolutions 20 and 21.

AMA Policy D-65.989 directed our AMA to draft and disseminate a report detailing its positions and recommendations for gender equity in medicine, including clarifying principles for state and

specialty societies, academic medical centers, and other entities that employ physicians. BOT Report 27 was adopted.

- Pharmacy benefit manager oversight: The YPS proffered an amendment to Resolution 212, Pharmacy Benefit Managers, asked the AMA to advocate for continued coverage of medications used to stabilize palliative and hospice patients for pain and delirium after release from the hospital. The first Resolve of Resolution 212 was adopted as amended. The second Resolve of Resolution 212 was referred. Further, the title of Resolution 212 was changed to read as follows: "Continuity of Care for Patients Discharged from a Hospital Setting."
- Continuing board certification: The YPS offered testimony on various items of business related to continuing board certification. Specifically, the YPS testified in support of CME Report 2, Update on Maintenance of Certification and Osteopathic Continuous Certification (Resolution 316-A-18), which was adopted. In addition, the YPS offered testimony opposing Resolution 308, "Maintenance of Certification Moratorium." Resolution 308 was referred.

Details about the YPS active positions may be found at <https://www.ama-assn.org/about/yps-meeting-documents>. Complete final HOD actions on each of these can be found on the AMA HOD website at <https://www.ama-assn.org/house-delegates/annual-meeting/business-ama-house-delegates-annual-meeting>.

Using a team approach allows more young physicians to speak on behalf of the YPS in front of the reference committees, and it enables our members to bring YPS issues to their state and specialty caucuses. Without the assistance of members of our Assembly, your delegate and alternate delegate would not only have been unable to speak to these items, but would have been far less effective at building consensus between caucuses on our key issues. 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. Thank you to all who participated, we simply could not do it without you.

Please share this report with the YPS members of your state and specialty societies to let them know what we are doing at the AMA. 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 us at Kavita.Shah.Arora@gmail.com or alisha.reiss@gmail.com to find out more.

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