

**AMERICAN MEDICAL ASSOCIATION HOUSE OF DELEGATES  
SPECIAL MEETING, JUNE 2020 (S-20)**

Report of Reference Committee F and Amendments to Constitution & Bylaws

Your reference committee recommends the following consent calendar for acceptance:

**RECOMMENDED FOR ADOPTION**

1. Board of Trustees Report 2 - New Specialty Organizations Representation in the House of Delegates
2. Council on Ethical and Judicial Affairs Report 1 - CEJA's Sunset Review of 2010 House Policies
3. Council on Medical Education Report 1 - Council on Medical Education Sunset Review of 2010 House of Delegates' Policies

**RECOMMENDED FOR ADOPTION AS AMENDED**

4. Board of Trustees Report 3 - AMA 2021 Dues
5. Board of Trustees Report 4 - Council on Legislation Sunset Review of 2008 and 2010 House Policies
6. Council on Medical Service Report 1 - Council on Medical Service Sunset Review of 2010 AMA House Policies
7. Council on Science and Public Health Report 1 - CSAPH Sunset Review of 2010 House of Delegates Policies

**RECOMMENDED FOR FILING**

8. Board of Trustees Report 1 - Annual Report

## RECOMMENDED FOR ADOPTION

(1) BOARD OF TRUSTEES REPORT 2 – NEW SPECIALTY ORGANIZATIONS REPRESENTATION IN THE HOUSE OF DELEGATES

**RECOMMENDATION:**

**Recommendation in Board of Trustees Report 2 be adopted and the remainder of the report be filed.**

**HOD ACTION: Recommendation in Board of Trustees Report 2 adopted and the remainder of the report be filed.**

The Board of Trustees recommends that the American Society of Nuclear Cardiology and the Society of Cardiovascular Computed Tomography be granted representation in the AMA House of Delegates and that the remainder of the report be filed.

Your Reference Committee received very limited, but positive, testimony related to new specialty organization representation in the House of Delegates. Therefore, your Reference Committee recommends that Board of Trustees Report 2 be adopted and welcomes the American Society of Nuclear Cardiology and the Society of Cardiovascular Computed Tomography to the House of Delegates.

(2) COUNCIL ON ETHICAL AND JUDICIAL AFFAIRS REPORT 1 – CEJA’S SUNSET REVIEW OF 2010 HOUSE POLICIES

**RECOMMENDATION:**

**Recommendation in Council on Ethical and Judicial Affairs Report 1 be adopted and the remainder of the Report be filed.**

**HOD ACTION: Recommendation in Council on Ethical and Judicial Affairs Report 1 adopted and the remainder of the report be filed.**

The Council on Ethical and Judicial Affairs recommends that the House of Delegates policies that are listed in the Appendix to this report be acted upon in the manner indicated and the remainder of this report be filed.

Your Reference Committee received minimal comments related to this report and therefore recommends that Council on Ethical and Judicial Affairs Report 1 be adopted.

(3) COUNCIL ON MEDICAL EDUCATION REPORT 1 - COUNCIL ON MEDICAL EDUCATION SUNSET REVIEW OF 2010 HOUSE OF DELEGATES’ POLICIES

**RECOMMENDATION:**

**Recommendation in Council on Medical Education Report 1 be adopted and the remainder of the Report be filed.**

**HOD ACTION: Recommendation in Council on Medical Education Report 1 amended by addition to read as follows and the remainder of the report be filed:**

**That the House of Delegates policies listed in the Appendix to this report be acted upon in the manner indicated, with the exception of**

**Policy D-383.996, which should be retained, and the remainder of the report be filed.**

The Council on Medical Education recommends that the House of Delegates policies listed in the appendix to this report be acted upon in the manner indicated and the remainder of this report be filed.

Your Reference Committee received minimal comments related to this report. Your Reference Committee would like to highlight that the report commented that an AMA section would be asked to review policy H-220.996 to consider an updated version, if needed. The Organized Medical Staff Section noted that they would be happy to look at this issue with colleagues in the Academic Physicians Section and the Private Physician Caucus and submit a resolution in November should one be warranted; we thank them. Therefore, your Reference Committee recommends that Council on Medical Education Report 1 be adopted.

## RECOMMENDED FOR ADOPTION AS AMENDED

### (4) BOARD OF TRUSTEES REPORT 3 – AMA 2021 DUES

#### **RECOMMENDATION A:**

**Recommendation in Board of Trustees Report 3 be amended by the addition of an additional recommendation to read as follows:**

**The Board of Trustees recommends that our AMA disseminate and provide broad, prominent, and easy access to information on the financial hardship exemption.**

#### **RECOMMENDATION B:**

**Board of Trustees Report 3 be adopted as amended and the remainder of the Report be filed.**

**HOD ACTION: The recommendations in Board of Trustees Report 3 adopted as amended and the remainder of the report filed.**

The Board of Trustees recommends expanding the number of years over which young physician dues rates increase to the full \$420 rate. The new recommended rates increase over four years, from \$60 to \$420 versus the current two-year period, which better aligns with career and financial situations. All other dues rates remain unchanged. The Board of Trustees recommends that the following be adopted and that the remainder of this report be filed:

Regular Members	\$ 420
Physicians in Their Fourth Year of Practice	\$ 315
Physicians in Their Third year of Practice	\$ 210
Physicians in Their Second Year of Practice	\$ 105
Physicians in Their First Year of Practice	\$ 60
Physicians in Military Service	\$ 280
Semi-Retired Physicians	\$ 210
Fully Retired Physicians	\$ 84
Physicians in Residency Training	\$ 45
Medical Students	\$ 20

Your Reference Committee received several comments related to the proposed four-year phase in of dues for those entering medical practice. The majority of the comments were in support of the new dues structure for physicians in early practice. Many commenters noted, however, the unprecedented challenges many physicians are currently facing because of the COVID-19 pandemic. Your Reference Committee recognizes that the pandemic has created incalculable stress on the financial viability of many physician practices and notes that the dues paying capacity of many individual physicians might be limited in the coming year. Your Reference Committee also notes testimony provided by the Board of Trustees that they understand the economic impact the pandemic is having on colleagues, the profession, and organized medicine. The Board also stated that the AMA has a financial hardship policy in place for individuals that were members in the prior year and request a financial hardship dues exemption for the current year. The Board and the AMA have committed that they will ensure this policy and the standard financial hardship form are included prominently on the AMA join/renew website. Therefore, your Reference Committee recommends that Board of Trustees Report 3 be adopted as amended and applauds the commitment from the Board to provide easy access to financial hardship exemption information.

(5) BOARD OF TRUSTEES REPORT 4 – COUNCIL ON LEGISLATION SUNSET REVIEW OF 2008 AND 2010 HOUSE POLICIES

**RECOMMENDATION A:**

Recommendation in Board of Trustees Report 4 be amended by addition to read as follows:

That the House of Delegates policies listed in Appendix 1 to this report be acted upon in the manner indicated, with the exception of Policy D-120.961, which should be retained as amended below and changed to an H-policy, and the remainder of the report be filed.

**Personal Medication and Medical Supplies in Times of Disaster**

Our AMA urges continued dialogue with the appropriate federal agencies, to convene a meeting of medical societies, health care organizations, and other appropriate stakeholders to: (a) develop a national plan to ensure timely distribution of and access to medications for acute and chronic medical conditions in a disaster; (b) issue guidance to health professionals and the public on the appropriate stockpiling of medications for acute and chronic medical conditions in a disaster or other serious emergency; and (c) deliberate the design, feasibility, and utility of a universal mechanism, which—that provides the essential health and medical supplies and information that can assist emergency medical responders and other health care personnel with the provision of medical care and assistance in a disaster or other serious emergency.

**RECOMMENDATION B:**

Board of Trustees Report 4 be adopted as amended.

**HOD ACTION: The recommendation in Board of Trustees Report 4 adopted as amended and the remainder of the report filed.**

The Board of Trustees recommends that the House of Delegates policies listed in Appendix 1 to this report be acted upon in the manner indicated and the remainder of this report be filed.

Your Reference Committee received a small number of comments related to the policies addressed in Board of Trustees Report 4, The Council on Legislation Sunset Review of 2008 and 2010 Policies. Many of the comments received were related to policy D-120.961, “Personal Medication Supply in Times of Disaster.” Commenters noted that this policy is still relevant and should be retained and updated. The Council on Legislation noted agreement with retaining this policy. Your Reference Committee agrees, and notes that the amendments alter this policy from a directive to an enduring House policy. Therefore, your Reference Committee recommends that Board of Trustees Report 4 be adopted as amended.

(6) COUNCIL ON MEDICAL SERVICE REPORT 1 - COUNCIL ON MEDICAL SERVICE SUNSET REVIEW OF 2010 AMA HOUSE POLICIES

**RECOMMENDATION A:**

**Recommendation in Council on Medical Service Report 1 be amended by addition to read as follows:**

**That the House of Delegates policies listed in the Appendix to this report be acted upon in the manner indicated, with the exception of Policy H-235.966, which should be retained, and the remainder of the report be filed.**

**RECOMMENDATION B:**

**Council on Medical Service Report 1 be adopted as amended.**

**HOD ACTION: The recommendation in Council on Medical Service Report 1 adopted as amended and the remainder of the report filed.**

The Council on Medical Service recommends that the policies listed in the appendix to this report be acted upon in the manner indicated and the remainder of the report be filed.

Your Reference Committee received several comments related to policy H-235.966, “CMS Regulation to Eliminate the Critical Role of the Hospital Medical Staff.” Many noted the importance of this policy to ensure a strong, organized medical staff and maintain patient safety and quality. Additionally, your Reference Committee engaged in considerable discourse related to additional comments related to several policies and feels that many of the recommendations are best addressed by the submission of new resolutions for upcoming meetings. Your Reference Committee believes that such resolutions would be particularly salient for an advocacy-focused meeting in November, as many of the proposed modifications go beyond the intended purpose of a sunset report. Your Reference Committee therefore recommends that Council on Medical Service Report 1 be amended.

(7) COUNCIL ON SCIENCE AND PUBLIC HEALTH REPORT 1 - CSAPH SUNSET REVIEW OF 2010 HOUSE OF DELEGATES POLICIES

**RECOMMENDATION A:**

**Recommendation in Council on Science and Public Health Report 1 be amended by addition to read as follows:**

**That the House of Delegates policies listed in the Appendix to this report be acted upon in the manner indicated, with the exception of Policy H-20.920 and Policy H-455.983, which should be retained as amended below, and the remainder of the report be filed.**

**H-20.920, “HIV Testing”**

**(6) Voluntary Opt-out HIV Testing**

a) **Voluntary Opt-out HIV testing should be provided with informed consent for individuals who may have come into contact with the blood, semen, or vaginal secretions of an infected person in a manner that has been shown to transmit HIV infection. Such testing should be encouraged for patients for whom the physician's knowledge of the patient's serostatus would improve treatment. Voluntary Opt-out HIV testing should be regularly provided for the following types of individuals who give an informed consent: (i) patients at sexually transmissible disease clinics; (ii) patients at drug**

- abuse clinics; (iii) individuals who are from areas with a high incidence of AIDS or who engage in high-risk behavior and are seeking family planning services; and (iv) patients who are from areas with a high incidence of AIDS or who engage in high-risk behavior requiring surgical or other invasive procedures;
- b) The prevalence of HIV infection in the community should be considered in determining the likelihood of infection. If voluntary opt-out HIV testing is not sufficiently accepted, the hospital and medical staff may consider requiring HIV testing.

(7) **Mandatory HIV Testing**

- a) Our AMA opposes mandatory HIV testing of the general population;
- b) Mandatory testing for HIV infection is recommended for (i) all entrants into federal and state prisons; (ii) military personnel; (iii) (ii) donors of blood and blood fractions; breast milk; organs and other tissues intended for transplantation; and semen or ova for artificial conception;
- c) All entrants into federal and state prisons should be offered HIV screening, but it should only be mandatory when risk factors are present;
- d) Our AMA will review its policy on mandatory testing periodically to incorporate information from studies of the unintended consequences or unexpected benefits of HIV testing in special settings and circumstances.

**H-455.983, “Radiographic Contrast Media”**

- (1) Third party payers should provide full reimbursement for the use of the contrast media which is deemed medically necessary by the physician.
- (2) Avoidance of waste in the use of contrast media should be encouraged.
- (3) The development and implementation by hospitals of procedures and policies to help ensure that nonionic contrast media are used when medically appropriate should be supported.

**RECOMMENDATION B:**

**Council on Science and Public Health Report 1 be adopted as amended.**

**HOD ACTION: The recommendation in Council on Science and Public Health Report 1 adopted as amended and the remainder of the report filed.**

The Council on Science and Public Health recommends that the House of Delegates policies listed in the Appendix to this report be acted upon in the manner indicated and the remainder of the report be filed.

Your Reference Committee received several comments related to Council on Science and Public Health Report 1. Some comments were related to H-425.980, “Screening and Early Detection of Prostate Cancer.” Your Reference Committee agrees that screening for prostate cancer is an important men’s health issue and also recognizes and agrees with the rationale of the Council on Science and Public Health – that because of the possibility of age change for testing and the next review for this policy in 10 years, they recommend removing the portion referring to specific ages and for the policy to remain broadly relevant. Questions were also raised about the accuracy of the ages included in the policy; it was noted that the ages currently listed are not up-to-date with current recommendations. Your Reference Committee agrees with the original recommendation of the Council on Science and Public Health.

A comment was submitted regarding Policy H-20.920, “HIV Testing.” Your Reference Committee agrees that these amendments are friendly, strengthen the policy, and modernize the policy to include updated language as specified by experts from the Infectious Diseases Society of America. Your Council on Science and Public Health also agrees that

these changes modernize the policy and supports the language but notes that further refinement of this important policy may be warranted in the near future.

Your Reference Committee also notes the comment related to Policy H-455.983, “Radiographic Contrast Media” and agrees that the statement should include all medically appropriate contrast media. Therefore, your Reference Committee recommends that Council on Science and Public Health Report 1 be amended.

**RECOMMENDED FOR FILING**

(8) BOARD OF TRUSTEES REPORT 1 - ANNUAL REPORT

**RECOMMENDATION:**

**That Board of Trustees Report 1 be filed.**

**HOD ACTION: Board of Trustees Report 1 filed.**

Informational report – no recommendations. The Consolidated Financial Statements for the years ended December 31, 2019 and 2018 and the Independent Auditor’s report have been included in a separate booklet, titled “2019 Annual Report.”

Your reference committee received no testimony in response to the Board of Trustees Report 1. The number of AMA dues paying members increased in 2019, achieving nine years of consecutive growth in membership.