AMERICAN MEDICAL ASSOCIATION HOUSE OF DELEGATES (NOVEMBER 2020)

Report of Reference Committee F

Michael D. Chafty, MD, JD, Chair

1	Your Reference Committee recommends the following consent calendar for acceptance:	
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4	RECO	MMENDED FOR ADOPTION
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6	1.	Report of the House of Delegates Committee on the Compensation of the
7		Officers
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9	2.	Council on Long Range Planning and Development Report 1 – International
10 11		Medical Graduates Section Five-Year Review
12	3.	Council on Long Range Planning and Development Report 2 – Organized
13	0.	Medical Staff Section Five-Year Review
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15	4.	Council on Long Range Planning and Development Report 3 – Establishment of
16		the Private Practice Physicians Section
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18 19	5.	Resolution 606 – Adopting the Use of the Most Recent and Updated Edition of
20		the AMA Guides to the Evaluation of Permanent Impairment
21	RECOMMENDED FOR REFERRAL	
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23	6.	Resolution 602 – Towards Diversity and Inclusion: A Global Nondiscrimination
24		Policy Statement and Benchmark for our AMA

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RECOMMENDED FOR ADOPTION

(1) REPORT OF THE HOUSE OF DELEGATES COMMITTEE ON COMPENSATION OF THE OFFICERS

RECOMMENDATION:

Recommendations in the Report of the House of Delegates Committee on Compensation of the Officers be adopted and the remainder of the Report be filed.

HOD ACTION: Recommendations in the Report of the House of Delegates Committee on Compensation of the Officers <u>adopted</u> and the remainder of the Report <u>filed</u>.

The Committee on Compensation of the Officers recommends that there be no changes to the Officers' compensation for the period beginning July 1, 2021 through June 30, 2022 and the remainder of the report filed. (Directive to Take Action)

Your Reference Committee wishes to extend its appreciation to the House of Delegates Committee on Compensation of the Officers for its report. Testimony in response to the report was limited, but supportive.

(2) COUNCIL ON LONG RANGE PLANNING AND DEVELOPMENT REPORT 1 – INTERNATIONAL MEDICAL GRADUATES SECTION FIVE-YEAR REVIEW

RECOMMENDATION:

Recommendation in Council on Long Range Planning and Development Report 1 be <u>adopted</u> and the remainder of the Report be <u>filed</u>.

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

The Council on Long Range Planning and Development recommends that our American Medical Association renew delineated section status for the International Medical Graduates Section through 2025 with the next review no later than the 2025 Annual Meeting and that the remainder of this report be filed. (Directive to Take Action)

On behalf of our AMA House of Delegates, your Reference Committee wishes to extend its appreciation to the Council on Long Range Planning and Development and the International Medical Graduates Section for their cooperative and collaborative efforts thereby allowing the Council to present a thorough review of the Section's status. Having received no negative testimony, your Reference Committee supports the

Council's conclusion. During testimony, a comment on changing the five-year timeline for evaluating delineated sections was shared. While the Council provided a statement on the rationale for the delineated section review process, your Reference Committee wishes to note that changes to this process are beyond the scope of this report.

(3) COUNCIL ON LONG RANGE PLANNING AND DEVELOPMENT REPORT 2 – ORGANIZED MEDICAL STAFF SECTION FIVE-YEAR REVIEW

RECOMMENDATION:

Recommendation in Council on Long Range Planning and Development Report 2 be <u>adopted</u> and the remainder of the Report be <u>filed</u>.

HOD ACTION: Recommendation in Council on Long Range Planning and Development Report 2 <u>adopted</u> and the remainder of the Report <u>filed</u>.

The Council on Long Range Planning and Development recommends that our American Medical Association renew delineated section status for the Organized Medical Staff Section through 2025 with the next review no later than the 2025 Annual Meeting and that the remainder of this report be filed. (Directive to Take Action)

As was stated in the previous item of business, your Reference Committee is appreciative of the collaboration that has occurred between the Council on Long Range Planning and Development and the Organized Medical Staff Section, which has resulted in a comprehensive review of the Section. Testimony favored the recommendation of the Council.

(4) COUNCIL ON LONG RANGE PLANNING AND DEVELOPMENT REPORT 3 – ESTABLISHMENT OF THE PRIVATE PRACTICE PHYSICIANS SECTION

RECOMMENDATION:

Recommendations in Council on Long Range Planning and Development Report 3 be <u>adopted</u> and the remainder of the Report be filed.

HOD ACTION: Recommendation in Council on Long Range Planning and Development Report 3 <u>adopted</u> and the remainder of the Report filed.

The Council on Long Range Planning and Development recommends that the following recommendations be adopted and the remainder of the report be filed:

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1. That our American Medical Association transition the Private Practice Physicians Congress to the Private Practice Physicians Section as a delineated section. (Directive to Take Action)

2. That our AMA develop bylaw language to recognize the Private Practice Physicians Section. (Directive to Take Action)

Your Reference Committee wishes to extend its appreciation to the Council on Long Range Planning and Development for a very comprehensive analysis of the Private Practice Physicians Congress' request for a change in status to that of a new AMA section. The report prompted only positive testimony.

Your Reference Committee emphasizes that according to the Council on Long Range Planning and Development's recommendation, the Private Practice Physicians Section would be created as a delineated section, subject to a five-year sunset rule and will be reappointed to that status by normal majority vote of the House of Delegates. Your Reference Committee also believes that there is great value in allowing for representation of physicians currently underrepresented in our AMA and that now is the ideal time to be supportive of colleagues who are struggling to maintain their private practices during the hardships of a pandemic.

Your Reference Committee wishes to acknowledge testimony calling for the new Section to be renamed the "Independent Practice Physician Section." In response to this suggestion, the leadership of the Private Practice Physicians Congress reported that the group does not support the name change because they have a 12-year identity as the PPP Caucus/Congress, which has granted the group cache and an alliterate presence easy to remember and instantly identified by our AMA membership. Your Reference Committee believes that if a name change is to be made, it should come from within the group via internal procedures.

RESOLUTION 606 - ADOPTING THE USE OF THE (5) MOST RECENT AND UPDATED EDITION OF THE AMA GUIDES TO THE EVALUATION OF PERMANENT **IMPAIRMENT**

RECOMMENDATION:

Resolution 606 be adopted.

HOD ACTION: Resolution 606 referred.

RESOLVED, That our American Medical Association support the adoption of the most current edition of the AMA Guides in all jurisdictions in order to provide fair and consistent impairment evaluations for patients and claimants including injured workers. (New HOD Policy)

Your Reference Committee wishes to announce that a member of our committee, Stuart J. Glassman, MD, MBA disclosed he served a role in the development of Resolution 606. For this reason, Dr. Glassman recused himself from our deliberations and our recommendation on this item.

AMA Guides to the Evaluation of Permanent Impairment® (AMA Guides®) provide a measurement framework for permanent impairment in patients who have suffered an injury or illness resulting in long-term loss of a body part or reduction of body function. Once a patient has reached Maximum Medical Improvement, AMA Guides is used to assess a patient's impairment and document findings. A properly completed impairment rating report produced using the appropriate AMA Guides content is the gold standard for documenting permanent impairment to support insurance and legal proceedings.

 Our AMA currently supports the use of the most recent edition of *AMA Guides* given it is an AMA product that is promoted and continues to be maintained, including a pending transformation to an online version that will allow for regular updates. For this reason, your Reference Committee concurs with the intent of Resolution 606 and those providing testimony that it is appropriate for AMA to augment its support through the adoption of this new House of Delegates policy. In response to the few who testified before the Committee in opposition to this resolution, your Reference Committee wishes to highlight that the intent of Resolution 606 is to achieve uniformity to the greatest extent possible. We believe that is an appropriate position for our AMA and the path to achieving broader acceptance of updated editions.

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RECOMMENDED FOR REFERRAL

RESOLUTION 602 - TOWARDS DIVERSITY AND INCLUSION: A GLOBAL NONDISCRIMINATION POLICY STATEMENT AND BENCHMARK FOR OUR AMA

RECOMMENDATION:

Resolution 602 be referred with report back at the 2021 **Annual Meeting.**

HOD ACTION: Resolution 602 referred with report back at the 2021 Annual Meeting.

RESOLVED, That our American Medical Association adopt an overarching nondiscrimination policy on the basis of sex, color, creed, race, religion, disability, ethnic origin, national origin, sexual orientation, gender identity, age, or for any other reason unrelated to character, competence, ethics, professional status or professional activities that applies to members, employees and patients. (New HOD Policy)

RESOLVED, That our AMA demonstrate its commitment to complying with laws, rules or regulations against discrimination on the basis of protected characteristics. (Directive to Take Action)

RESOLVED, That our AMA reaffirm Policy H-65.988, "Organizations Which Discriminate," and Policy G-630.040, "Principles on Corporate Relationships," in its overarching non-discrimination policy. (Reaffirm HOD Policy)

RESOLVED, That our AMA reaffirm Policy G-600.067, "References to Terms and Language in Policies Adopted to Protect Populations from Discrimination and Harassment." (Reaffirm HOD Policy)

RESOLVED. That our AMA study the feasibility and need for a comprehensive business conduct standards policy to be fully integrated with the conflict of interest policy, and report back to the AMA House of Delegates within 18 months. (Directive to Take Action)

RESOLVED, That our AMA provide an update on its comprehensive diversity and inclusion strategy to the AMA House of Delegates within 24 months. (Directive to Take Action)

Resolution 602 calls upon our AMA to adopt an overarching nondiscrimination policy; reaffirm current AMA policy; study the feasibility and need for a comprehensive business conduct standards policy to be fully integrated with the conflict of interest policy; and provide an update on our AMA's comprehensive diversity and inclusion strategy.

Your Reference Committee received testimony supportive of the intent of Resolution 602 but noted there were several amendments proffered to broaden inclusiveness, as well as to strengthen the language contained in existing AMA policy. Still others advocated for referral of this item due to the complexity of the requests and the need to develop an integrated response.

Your Reference Committee supports referral of this item to allow our AMA House of Delegates to receive a report back that codifies policies and activities and optimizes the language contained in an overarching nondiscrimination policy. There was limited, but supportive, testimony for a report back to the House of Delegates by the 2021 Annual Meeting. We recognize the investment of time and resources that our AMA has expended thus far and recommend referral to ensure we get this right. Because of the importance of this issue, your Reference Committee recommends that the report be brought back at the 2021 Annual Meeting.

Finally, your Reference Committee draws your attention to Board of Trustees Report 15 (November 2020), "Plan for Continued Progress Toward Health Equity," which is included in the Handbook for this meeting among the informational materials.

- 1 This concludes the report of Reference Committee F. I would like to thank
- 2 Jerry P. Abraham, MD, MPH, David J. Bensema, MD, Veronica K. Dowling, MD,
- 3 Cheryl Gibson Fountain, MD, Stuart J. Glassman, MD, MBA, Lynda G. Kabbash, MD,
- 4 and all those who testified before the Committee.

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