

## Introduction

We are pleased to provide this 35th edition of the American Medical Association Election Manual. It includes write-ups from announced candidates for election in June 2021, along with a description of our AMA election process and the current rules governing the conduct of campaigns.

In soliciting this information your speakers suggested that candidates list their sponsoring and endorsing societies, and include relevant biographical information and, if desired, a personal statement. Candidates and their sponsoring societies prepared the text and submitted the copy for publication, and responsibility for the content properly rests with the candidates.

AMA House of Delegates policy requires that each candidate's conflict-of-interest information be available for review. You can [find this information](#) posted on our password-protected web page. We trust you will find this manual user-friendly and robust, but suggestions for future editions are welcome; just send your comments to [hod@ama-assn.org](mailto:hod@ama-assn.org). Nominations will be accepted at the Opening Session of the House of Delegates on Friday, June 11, 2021. Elections for all contested races will be held on Tuesday morning, June 15 at a time to be announced.

Sincerely,

Bruce A. Scott, MD  
Speaker



Lisa Bohman Egbert, MD  
Vice speaker



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## Introduction

Officers and four councils are elected by the American Medical Association House of Delegates (HOD) at the June Meeting. Nominations for these offices are widely solicited throughout the Federation. Campaigns are often spirited and are conducted under rules established by the AMA-HOD, rules that may be modified from time to time. This democratic process allows delegates ample opportunity to become acquainted with the candidates and their views. The elections are by secret ballot and are conducted under the supervision of the Committee on Rules and Credentials and the chief teller, who are appointed by the speaker and vice speaker, who are responsible for overall administration of the elections.

## Announcements of candidacy

Individuals intending to seek election should make their intentions known to the speakers, generally by providing the speakers' office ([hod@ama-assn.org](mailto:hod@ama-assn.org)) with an electronic announcement "card" that includes any or all of the following elements and no more: the candidate's name, photograph, email address, URL, the office sought and a list of endorsing societies. The speakers will ensure that the information is posted on our AMA website in a timely fashion, generally on the morning of the last day of a House of Delegates meeting or upon adjournment of the meeting. Announcements that include additional information (e.g., a brief resume or a slogan) will not be posted to the website as they are in violation of the rules. Printed announcements may not be distributed in the venue where the House of Delegates meets. The speakers may use additional means to make delegates aware of members intending to seek election. (G-610.020[2]) Only a single announcement of candidacy is allowed, after which active campaigning is not permitted until the AMA Board of Trustees (BOT) nominates candidates for AMA councils (mid-April).

*This rule provides a standard mechanism by which individuals can make known their intention to seek office. Printed announcements may not be distributed at an AMA-HOD meeting under any circumstance.*

## Nominations

The AMA-BOT solicits nominations for four elected councils: the Council on Constitution and Bylaws, the Council on Medical Education, the Council on Medical Service, and the Council on Science and Public Health. The deadline for receipt of nominations is March 15 of each year, and the AMA-BOT announces council nominees after its April meeting. Council candidates who have announced their intent to seek election, including those seeking re-election, must submit the necessary nomination materials to the AMA-BOT Office by the deadline.

Officers are nominated by their sponsoring societies; they are not nominated by the AMA-BOT. As a courtesy and to keep the headquarters informed, these candidates are asked to send a letter to the AMA's executive vice president announcing their intention to seek office.

Under AMA bylaws, a delegate may also nominate candidates for council and officer vacancies from the floor.

### Conflict-of-interest disclosures

Under AMA-HOD policy, all candidates for election are required to complete a conflict-of-interest/disclosure of affiliations form prior to their election. Candidates should contact the Office of General Counsel ([ogc@ama-assn.org](mailto:ogc@ama-assn.org)) or the Office of House of Delegates Affairs ([hod@ama-assn.org](mailto:hod@ama-assn.org)) for information on completing the form. Forms must be submitted by March 15 of the year in which someone is seeking election. Completed forms are posted in the "Members-only" section of our AMA website. Completion of this form is required of all candidates for election, including those nominated from the floor. (G-610.020[15])

## Campaigns

Announcements of candidacy are considered separate and distinct from active campaigning. Active campaigns for AMA elective office may not begin until the AMA-BOT has announced the nominees for council seats after its April meeting. Active campaigning includes mass outreach activities such as letters or emails directed to all or a significant portion of the members of the AMA-HOD, communicated by or on behalf of the candidate. (G-610.020[3])

At the Opening Session of the House of Delegates, each officer candidate in a contested election will give a two-minute self-nominating speech. The order of the speeches will be determined by lot. No speeches for unopposed candidates will be given, except for president-elect. When there is no contest for president-elect, the candidate will ask a delegate to place his or her name in nomination, and the election will then be by acclamation. When there are two or more candidates for the office of president-elect, a two-minute nomination speech will be given by a delegate. In addition, the speaker will schedule a debate in front of the AMA-HOD to be conducted by rules established by the speaker. (G-610.020[12])

There are no nominating or seconding speeches for council candidates; the names of those nominated by the AMA-BOT are announced at the Opening Session of the AMA-HOD, after which the speaker will call for additional nominations from the floor.

## Guiding principles for AMA-HOD elections

The following principles have been adopted by the AMA-HOD (G-610.021) and provide guidance on how elections should be conducted and how the selection of AMA leaders should occur:

1. AMA delegates should: (a) avail themselves of all available background information about candidates for elected positions in the AMA; (b) determine which candidates are best qualified to help the AMA achieve its mission; and (c) make independent decisions about which candidates to vote for.
2. Any electioneering practices that distort the democratic processes of the AMA-HOD elections, such as vote trading for the purpose of supporting candidates, are unacceptable.
3. Candidates for elected positions should comply with the requirements and the spirit of the AMA-HOD policy on campaigning and campaign spending.
4. Candidates and their sponsoring organizations should exercise restraint in campaign spending. Federation organizations should establish clear and detailed guidelines on the appropriate level of resources that should be allocated to the political campaigns of their members for AMA leadership positions.
5. Incumbency should not assure the re-election of an individual to an AMA leadership position.
6. Service in any AMA leadership position should not assure ascendancy to another leadership position.

## Campaign rules

This listing of campaign rules reflects policies adopted by the AMA-HOD and procedures developed by the speakers to comply with AMA-HOD actions. Where AMA-HOD policies are listed, the relevant AMA policy number is listed in parentheses following the policy. The rules are listed in general categories. Questions and concerns may be directed to the speakers at [hod@ama-assn.org](mailto:hod@ama-assn.org).

### Expenses, events, parties and other activities

1. Campaign expenditures and activities should be limited to reasonable levels necessary for adequate candidate exposure to the delegates. (G-610.020[10])

Campaign giveaways are covered separately; see below, paragraph 4.

2. Campaign parties are allowed only at the Annual Meeting. A state, specialty society, caucus or coalition may contribute to more than one party, but a candidate may be featured at only one party. Featured means: (a) being present in a receiving line, (b) appearing by name or in a picture on a poster or notice in or outside of the party venue, or (c) distributing stickers, buttons, etc., with the candidate's name on them. At these events, alcohol may be served only on a cash or no-host bar basis. (G 610.020[8])

A candidate may be featured at only one party at the Annual Meeting irrespective of who sponsors the event. Any particular society may, however, contribute to more than one party or campaign event, so long as a candidate is featured at only one event.

★ For 2021, since the Annual Meeting has been suspended, there will be no opportunity for campaign parties.

3. Campaign gifts may be distributed at only the Annual Meeting in the not-for-official-business (NFOB) bag and at one campaign party. Campaign gifts should only be distributed during the Annual Meeting and not mailed to delegates and alternate delegates in advance of the meeting. No other campaign memorabilia shall be distributed at any time. (G-610.020[10])

★ For 2021, since the Annual Meeting has been suspended and there will not be a NFOB bag or campaign parties to distribute campaign gifts, campaign gifts will not be allowed this year.

4. The speaker shall establish a limit on allowable expenditures for campaign-related gifts. In addition to these giveaway gifts, campaign memorabilia are allowed but are limited to a button, pin or sticker. (G-610.020[10])

★ For 2021, since the Annual Meeting has been suspended, your speakers have determined there will be no campaign related memorabilia allowed this year.

5. Candidates for AMA office should not attend meetings of the state medical societies unless officially invited and could accept reimbursement of travel expenses by the state society in accordance with the policies of the society. (G-610.020[13])

### Literature and publicity

1. At the Interim Meeting, campaign-related expenditures and activities shall be discouraged. Large campaign receptions, luncheons, or other formal campaign activities and the distribution of campaign literature and gifts are prohibited at the Interim Meeting. It is permissible at the Interim Meeting for candidates seeking election at the next Annual Meeting to engage in individual outreach, such as small group meetings, including informal dinners, meant to familiarize others with a candidate's opinions and positions on issues. (G 610.020[6])

*This rule prohibits campaign parties as well as the distribution of campaign literature and gifts at the Interim Meeting. Announcements of candidacy (see above) may occur at the Interim Meeting.*

2. Displays of campaign posters, signs and literature are prohibited in public areas of hotels in which AMA-HOD meetings are held because they detract from the dignity of the position being sought and are unsightly. Campaign posters may be displayed at campaign parties, and campaign literature may be distributed in the not-for-official-business bag for members of the AMA-HOD. (G-610.020[9])
3. An election manual containing information on all candidates for election shall continue to be developed annually, with distribution limited to publication on our AMA website, typically on the web pages associated with the meeting at which elections will occur. The election manual provides an equal opportunity for each candidate to present the material he or she considers important to bring before the members of the AMA-HOD. The election manual serves as a mechanism to reduce the number of telephone calls, mailings and other messages members of the House of Delegates receive from or on behalf of candidates. (G 610.020[4])
4. A reduction in the volume of telephone calls from candidates, and literature and letters by or on behalf of candidates is encouraged. The use of electronic messages to contact electors should also be minimized, and if used, must allow recipients to opt out of receiving future messages. (G-610.020[5])

*The HOD office will again send out an email on behalf of all candidates. Candidates have been invited to submit materials of their choosing for inclusion in the email.*

5. No campaign literature shall be distributed and no mass outreach electronic messages shall be transmitted after the Opening Session of the House of Delegates Meeting. (G 610.020[9])
6. Upon request, the AMA Office of House of Delegates Affairs will furnish a candidate with a spreadsheet containing the names and mailing addresses of members of the AMA-HOD, members of AMA councils and the AMA-BOT, and (if requested) other groups such as state and specialty society executives. The file may be used only for the mailing of a single announcement of candidacy or the mailing of campaign-related material(s) after the AMA-BOT has announced council nominations (approximately mid-April), at which point active campaigning is permitted. The AMA Office of House of Delegates Affairs does not provide email addresses for any purpose.

*The file may not be used for mailing holiday cards, letters or other materials, even if not campaign-oriented;*

*or inviting members of the AMA-HOD to events, other than invitations to campaign receptions or parties that will take place in conjunction with the Annual Meeting and that are mailed during the time allowed for active campaigning. Such other use constitutes a violation of the rules.*

## Interviews

Given that the June 2021 meeting will be held virtually, the speakers have instituted the following plan for interviews:

- The speakers will facilitate recording of candidates providing introductory remarks followed by Q & A, which will be made available on the meeting website for delegates to review prior to the meeting.
- Interviews by delegations and caucuses will be permitted with the following guidelines:
  - Caucuses or groups may choose which offices for which they wish to conduct interviews.
  - Any caucus or group electing to interview candidates in a specific race must provide an opportunity for all announced candidates in that race to be interviewed using the same format.
  - The AMA-HOD office will again coordinate contact information for candidates to schedule their interviews; caucuses will need to identify a contact person responsible for scheduling interviews. Contact [hod@ama-assn.org](mailto:hod@ama-assn.org).
  - The candidate/team will be responsible for scheduling the interview.
  - The caucus or group desiring the interview is responsible for arranging technology (e.g., Zoom, Microsoft Teams) and should ensure all parties are familiar with and have access to the chosen technology.
  - Virtual interviews by delegations and caucuses may only be recorded with prior notice to candidates and may only be shared with members of the interviewing delegation/caucus and only after all interviews for a given race are completed.
  - To avoid confusion we recommend that interviews be scheduled on the basis of Central time, and that those setting up interviews immediately confirm the details with each other, including the agreed-upon time.
  - Further details will be provided to candidates and caucuses.

Individuals considering a late announcement of candidacy—whether to seek an existing open position or to fill a vacancy created by an election—should contact [roger.brown@ama-assn.org](mailto:roger.brown@ama-assn.org) **no later than**

**Wednesday, June 9** to complete the required conflict of interest disclosure and to provide contact information. Information will be retained in confidence until the candidacy is made public or otherwise in accord with the candidate's wishes and in compliance with our rules.

## Elections

Nominations will be accepted on Friday, June 11, 2021 during the Opening Session of the House. Uncontested candidates will be elected by acclamation at that time. Voting for contested elections will be held during an Election Session to be held at a specified time on Tuesday morning June 15, 2021. All delegates must be logged on using their specific voting credential for this session.

**Only credentialed delegates are permitted to cast a ballot. If a delegate cannot participate in the Election Session, they may have a designated alternate delegate properly credentialed by Monday June 14, 2021, at 6 p.m. Central time.**

Candidates are listed on the ballot in alphabetical order by name only. AMA bylaws require simultaneous elections that call for the exact number of votes for each vacancy. Each ballot clearly states the number of votes that should be cast and our voting system will ensure that only appropriately completed ballots will be counted. A majority vote of the legal ballots cast is required for election.

If all vacancies are not filled on the first ballot, a runoff election(s) will be held. AMA bylaws dictate that if three or more members of the AMA-BOT or any council are still to be elected, the number of nominees in the runoff election shall be no more than twice the number of remaining vacancies less one. If two or fewer members of the AMA-BOT or council are still to be elected, the number of nominees in the runoff shall be no more than twice the number of remaining



## Jack Resneck Jr., MD



**Jack Resneck, MD, is a proven, dedicated leader who believes our AMA must continue to relentlessly stand up for the values of our profession in these difficult and turbulent times.** As our colleagues around the country put their lives on the line during the pandemic, speak up when they lack essential PPE or testing capacity, and serve as trusted educators for our communities, Jack has never felt prouder to be a physician. As the AMA keeps science at the forefront, secures resources for struggling physician practices, redoubles its efforts to eliminate health inequities, and fights in courtrooms and legislatures to protect physicians and patients, Jack has never felt prouder to be part of the AMA.

Jack knows the great strength of our House of Delegates, where our policy debates are informed by facts and science, and where we learn from each other.

As a practicing physician, **Jack lives medicine's challenges every day, and skillfully communicates those stories to policymakers and the public.** As a trustee and board chair, he kept the AMA focused on issues that matter to physicians and our patients. He has worked relentlessly to reduce prior authorization and other burdens that pull physicians away from our patients. He testified before Congress about the roles that PBMs and others play in soaring prescription drug prices, and the importance of getting digital health and telemedicine right.

Jack worked closely with the AMA's Litigation Center as it fought to protect access to care and block gag rules that restrict our free speech when counseling patients. As chair of the AMA's Scope of Practice Partnership, Jack is working arm-in-arm with state and specialty societies to advance physician-led teams and to #StopScopeCreep. While physicians have seen first-hand the unequal impact of COVID on communities of color, Jack is a vocal advocate for the AMA's growing and vital commitment to address social determinants of health, dismantle racism in health care, and eliminate health inequities.

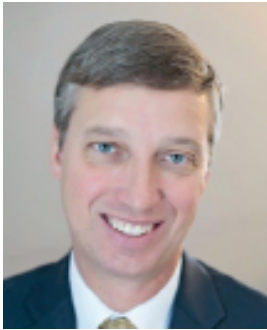
Jack's love for patient care drives his involvement in organized medicine and his desire to ensure that all types of physician practices can thrive into the future. He and his wife Ellen (also a physician) are the parents of two children, ages 13 and 15, for whom Jack hopes to ensure the legacy of a profession that future generations will want to join.

These are challenging times when **physicians and our patients need a strong and unified AMA.** That's why the PacWest Conference, the Dermatology Section Council, the California Medical Association delegation, the Specialty and Service Society (SSS) Caucus, and the AMA Young Physicians Section (YPS) have endorsed Jack Resneck, MD, for president-elect of the AMA.

### Personal statement

*"If elected, I'll keep showing up, sharing our stories about the challenges we face every place and every time policymakers and the public will hear us. I'll work to make sure our physician colleagues know what we are fighting for and why they should be proud to be part of an AMA that stands up for the values of our profession, fights for the interests of our patients, and leads with a sense of focus, relevance, and purpose. I ask for your vote to continue that work alongside each of you."*

### Bruce A. Scott, MD



The Kentucky Medical Association and the Kentucky Delegation are proud to nominate Dr. Bruce Scott to continue as speaker of our House of Delegates (HOD). Dr. Scott's nomination is enthusiastically endorsed by the Southeastern Delegation.

Over the past year, Dr. Scott has worked diligently to preserve the vital functions of our HOD. Faced with the challenges of a pandemic necessitating the cancellation of A-20, Bruce led the effort to craft the first ever virtual meeting of our House to ensure the continued transition of leadership and completion of essential business. When it became clear that the pandemic would not abate in time to hold our scheduled 2020 Interim Meeting, the speakers successfully designed a virtual meeting that protected the rights of delegates and alternate delegates to deliberate issues in live reference committees and HOD sessions including interactive audio and video—a challenge that even the contracted consultants doubted could be accomplished.

Both at in-person meetings and the recent virtual meetings, Bruce has presided over the deliberations of our House with an effective leadership style which combines fairness and a sense of humor. Meetings with Bruce at the podium run smoothly and efficiently. Between our HOD meetings, Dr. Scott is an effective advocate for the actions of our HOD and a respected member of the Board of Trustees (BOT). He is a member of the Executive Committee and chair of both the Audit Committee and the Governance Committee.

Prior to his election as speaker, Bruce served as our vice speaker for four years. His leadership in organized medicine goes back over 30 years. During this time, he served as chair of the AMA-RFS, delegate from the AMA-YPS to the HOD, young physician on the AMA BOT, and a delegate representing Kentucky. On the state level, he has been the governor of his specialty society and president of his state and county medical societies.

Dr. Scott is an actively practicing otolaryngologist in a six-physician private practice, medical director of an ambulatory surgery center and clinical assistant professor at the University of Louisville School of Medicine. He understands the issues facing our profession because he lives them every day.

Bruce is the proud father of three very talented young adults. He remains deeply in love with his wife, Christy, who even after these many months of sheltering at home together continues to "tolerate him." Both look forward to the return of in-person meetings.

#### **Personal statement**

*"Who knew a year ago what challenges lay ahead—for our country, patients, colleagues, families—and for our HOD? No matter the challenges, it is imperative that our HOD continues its role as the policy-making body of our AMA with a fair and deliberative process. Thank you to our AMA team for making this possible. My deepest appreciation to your vice speaker, Dr. Lisa Egbert, and Dr. Roger Brown without whom the virtual meetings would never have been possible. And thank you to all the members of our House of Delegates for your patience, understanding and support. While I yearn for the return to in-person meetings, it is an honor to be speaker of the House of Medicine in any format."*

### Lisa Bohman Egbert, MD



The Ohio State Medical Association and the Great Lakes States Coalition are proud to nominate Lisa Bohman Egbert, MD, for a third term as vice speaker of the American Medical Association. Dr. Egbert's nomination is enthusiastically endorsed by the American College of Obstetricians and Gynecologists.

This past year Lisa has worked diligently alongside our speaker to fashion and execute our June and November 2020 Special Meetings of the House. In addition to her duties as vice speaker and as a member of our Board of Trustees, she is privileged to serve on the AMA Foundation and COLA boards, the Election Task Force, the AMA Council on Constitution and Bylaws, and as a liaison to the AMA Medical Student Section and the AMA Women Physicians Section.

Lisa's previous service to our AMA dates to her days in medical school and includes having served as the student representative on the Women in Medicine Advisory Panel, as a member of the AMA Resident Physician Section Governing Council, and as the chair of the AMA Young Physicians Section. Lisa is honored to have served on the AMPAC Board of Directors and the AMA Council on Medical Service.

At the local level, Lisa is a past president of the Montgomery County Medical Association and is currently serving as the president-elect of the Ohio State Medical Association.

Lisa has been actively involved in organized medicine throughout her medical career because as a practicing soloist in general Ob/Gyn, she directly benefits from our AMA's advocacy. Never has this benefit been more pronounced than this past year during the pandemic. Her pledge is to continue to advocate on behalf of all physicians, and especially to maintain private practice as a viable option for all future generations of physicians.

Lisa received her Bachelor of Science and Medical Doctorate from The Ohio State University. She lives and practices in Kettering, Ohio, and is married to the "other" Dr. Egbert, Brad, who is an anesthesiologist. They have three children, twins, David and Sarah, and their youngest, Matthew.

#### **Personal statement**

*"While the shadow of COVID-19 has affected all of us in many ways, one of the most challenging for me was the cancellation of our in-person meetings. My silver lining was to work side by side with our fabulous speaker to develop and execute our virtual Special Meetings. Never have I been prouder to be a member of this house than I was in November 2020, and I thank every delegate and alternate for making that meeting a success! I humbly ask for your vote to continue my service to you, our AMAzing House of Delegates, as your vice speaker."*

## **Madelyn E. Butler, MD**



In 1998 Madelyn Butler, MD, took a deep breath and used her mortgage on the family home and her life insurance as collateral to pursue her dream of opening a private OB/GYN practice to serve her South Tampa area community.

Today, 23 years later, that dream has blossomed into The Woman's Group, a four-location practice of 24 doctors, nurses, and support staff that serves the Tampa Bay area. Recently, it was named Best OB/GYN Group by both the Tampa Tribune and the Florida Medical Journal.

From her earliest days as president of the Florida Medical Association Medical Student Section, Dr. Butler has held leadership roles at all levels of organized medicine. She understands that when we work together, our Federation can serve as a force-multiplier impacting policymakers and, in turn, improving the quality of care for millions of patients.

Dr. Butler is not only a fierce advocate for the viability of medical practice in all its forms, but also for the ability of young physicians to choose the specialties they love and still thrive in their profession.

She is equally passionate about the importance of nurturing our next generation of physicians and is especially proud that during her year as FMA president, she initiated the policy of adding a medical student, resident, and young physician to every FMA council and committee. Additionally, she advocated for the establishment of a young physician mentorship program and an FMA Leadership Academy.

Dr. Butler has served as FMA speaker, vice speaker, and FMA PAC president. Currently, she chairs the AMA Council on Constitution and Bylaws and is vice-chair of the Florida Delegation. Now she would like to put her experience in medical leadership and her commitment to the advancement of American medicine to work at the next level as a member of the AMA Board of Trustees.

The Florida Medical Association and its AMA delegation respectfully ask you to join with the Southeast Delegation of the AMA, the American College of Obstetricians and Gynecologists, the AMA Anesthesia Section Council, and the AMA Young Physicians Section in their proud support of Dr. Butler's candidacy for the AMA Board of Trustees.

In pre-COVID days Dr. Butler and husband Bill enjoyed traveling and social gatherings with family and friends and look forward to them again post-COVID.

### **Personal statement**

*"I'm proud that the private practice I've built that reflects our Tampa and Bay Area community; from Spanish and Vietnamese to Arabic and Hindi we speak our patients' language and provide them with quality care throughout the stages of their lives."*

## S. Bobby Mukkamala, MD



The Michigan State Medical Society and its delegation to the AMA are honored to nominate Bobby Mukkamala, MD, to continue his service on the Board of Trustees. This nomination is enthusiastically endorsed by the American Academy of Otolaryngology, the Great Lakes States Coalition, the American College of Obstetrics and Gynecology, the American Society of Anesthesiologists, and the AMA Young Physicians Section.

For the past four years, Dr. Mukkamala has served our AMA well and is currently finishing a year as chair-elect of the Board of Trustees.

Bobby has made his rounds through various board assignments, ranging from chairing both the Finance Committee and the Pain Care Task Force, and has learned and contributed every step of the way.

He has served as liaison to many of our AMA sections and councils as a conduit for bidirectional communication in these capacities. He is very deliberate about carrying out the will of our House of Delegates as a board member.

As a result of 20 years in private practice with his wife Nita, an ObGyn, a board member of his local 500-physician PO and recent year as the president of the Michigan State Medical Society during the tumult of the Covid pandemic, his vast experience helps to make an impact during board deliberations.

Bobby is passionate about maintaining and amplifying the physician's voice at the tables where important health care decisions are being made. In his home state of Michigan, he worked closely with the legislature, governor, and chambers of commerce to find a path forward in balancing the public health needs of the people with the economic toll of the pandemic.

### **Personal statement**

*"It has been an absolute honor to serve our organization and, more importantly, our profession on your Board of Trustees. I am forever indebted to medicine for providing a path for my immigrant parents to make a life for themselves in this country. In the past few years, as a trustee, I witnessed too often how physicians' concerns are marginalized by the undue influence of other voices. I am energized to change this dynamic. I am eager to take the experience of the past four years and apply it to our AMA's ongoing efforts to improve healthcare in America."*

## Pratistha Koirala, MD, PhD



The AMA Resident and Fellow Section, the New England Delegation, the Medical Society of the State of New York, the Connecticut State Medical Society, and the American College of Obstetricians and Gynecologists are pleased to endorse Pratistha Koirala, MD, PhD, for election to the resident and fellow seat on the AMA Board of Trustees.

### Personal statement

*"My health care journey started thousands of miles away. I was delivered by my great aunt in our family's mud home, in the foothills of the tallest mountains in the world. My parents named me after the brightest stars. It may seem romantic; in reality, the early experiences of my family are rooted in poverty and a lack of access to health care.*

*Years prior to my birth, my family went bankrupt as my grandmother died of a treatable illness. My family history inspired me to become a physician, but I never expected to share my story with so many families here. **My actions and advocacy are driven by my personal story as an immigrant, as someone who has lived in poverty, as a woman, and as a trainee working with underserved populations.***

*"Over the past year, viewing medicine through the lens of the COVID-19 pandemic has highlighted areas of health care where changes are needed. As a physician scientist, **I understand the power that our AMA has as the trusted voice in medicine and public health.** As we address concerns such as access to personal protective equipment and the impact that practice instability has on both current physicians and trainees, we must also strive for equity in medicine—how to fairly distribute vaccines, address social determinants of health, and increase access to affordable health care. By rising to meet these challenges, we continue to earn the public trust, which ultimately stems from our commitment to science and data."*

Dr. Koirala's medical training started in the Bronx, where she cared for patients living in the poorest congressional district in the United States. She joined the AMA as a medical student and became active in the world of health policy and organized medicine. Over the past decade she has **held multiple leaderships roles at the state and national levels.** Notably, she served on the Executive Council of the Medical Society of the State of New York. In this role she enacted policy passed by their House of Delegates, oversaw financial decisions facing the medical society, and strongly supported new initiatives that grew membership. Currently, she is the resident and fellow member of the AMPAC Board of Directors.

In addition to her leadership experience, **her accomplishments within the AMA are reflective of the value she places in diversity in medicine and health equity.** For example, in 2016, after a fellow medical student confided their DACA status and fear of deportation to her, she led the charge to write and pass an emergency resolution within the AMA House of Delegates which ultimately led to a strong, pro-DACA stance by the AMA.

Dr. Koirala is deeply committed to her patients and our profession. She is also a fierce advocate for all of her colleagues in medicine. She will take the time to listen to your needs and promote your voice on the Board of Trustees.

## Mary Ann Contogiannis, MD



The North Carolina Medical Society (NCMS) and North Carolina Delegation to the AMA are proud to nominate Mary Ann Contogiannis, MD, for election to the AMA Council on Constitution and Bylaws. She is also enthusiastically endorsed by the Southeastern Delegation and the American Society of Plastic Surgeons.

Dr. Contogiannis graduated from the Brody School of Medicine at East Carolina University then pursued a residency in general surgery and plastic surgery. Mary Ann is board certified in plastic surgery and participates in maintenance of certification. She returned home after her training to practice in Greensboro, N.C., and has maintained a solo private practice in plastic surgery.

Dr. Contogiannis is a dedicated and compassionate physician who has a deep commitment to and understanding of organized medicine. From the beginning of her medical career, she has dedicated herself to organized medicine, first by serving as an alternate delegate and then delegate to the AMA Medical Student Section, an alternate delegate then delegate to the AMA Resident Physician Section and later an alternate delegate then delegate to the AMA Young Physicians Section. In 1989, she was elected to the AMA Board of Trustees as a resident member, serving two terms. Mary Ann has also served as a member of the NCMS Delegation since 2001. She has clearly demonstrated her commitment to her profession and the AMA through her years of service.

Dr. Contogiannis is a passionate spokesperson for the profession and patients as demonstrated by the many leadership roles she has held in the NCMS, her county medical society and her state specialty society. Dr. Contogiannis has been an active participant in NCMS' advocacy activities for many years, serving on our Legislative Cabinet, our PAC Board and as a member of the NCMS Board of Directors. Mary Ann is a past president of the NC Society of Plastic Surgeons. Dr. Contogiannis has served in numerous roles in the American Society of Plastic Surgeons (ASPS), including chair of the State Legislative Advocacy Committee and currently serves as at-large member of the ASPS Board of Directors. She would bring a wealth of experience and deep understanding of the workings of organized medicine, with both state and national experience, to a position on the AMA Council on Constitution and Bylaws.

Dr. Contogiannis is distinctive because of her steadfast willingness to serve her profession in countless capacities all while managing and practicing in a busy private practice. She possesses a level of commitment and enthusiasm unique among her peers. Her experience, commitment and passion will bring energy and insight to this important council.

### **Personal statement**

*"As I look at my medical career, I have constantly been drawn to focus on health policy and advocacy beginning as a medical student through the North Carolina Medical Society and the AMA. 36 years later, I have maintained this focus throughout my career, making it a priority to take time to participate in advocacy activities along with my clinical medical activities. As I have advanced through leadership positions in multiple organizations, I have appreciated that each organization must have order and structure in order to be effective but still have a way to adapt to change. The organization's constitution and bylaws are central to achieving these goals.*

*"When the AMA HOD decides there is a need to change the AMA bylaws, it is the Council on Constitution and Bylaws' (CCB) responsibility to accomplish that change within the guidelines of the AMA's Constitution and Bylaws structure as CCB accomplishes the will of the AMA HOD. In my leadership roles in several organizations, I have participated in significant revisions of bylaws, have gained a wealth of knowledge on these procedures, and feel comfortable creating and modifying bylaws. For the past four years I have also served on my local hospital/healthcare system's Bylaws committee. These experiences have prepared me to now serve the AMA on the Council on Constitution and Bylaws."*

### William C. Reha, MD, MBA



There is a common theme running through the many years Bill Reha has spent in leadership roles at all levels of organized medicine.

He believes a solid foundation built upon a well-thought-out constitution and set of bylaws is key for a democratic body to function successfully.

A member of both the National Association of Parliamentarians and its Virginia chapter, Bill has extensive experience revising bylaws for both his state medical and state specialty societies; currently he serves as his hospital's bylaws chair.

Though he enjoyed serving as president of his county, state, state specialty—and this fall president-elect of his national specialty, the American Association of Clinical Urologists—his favorite elected position has always been his six years as vice-speaker/speaker of the House for the Medical Society of Virginia, where his knowledge of rules and bylaws served him and MSV well.

Despite an ever-changing—and challenging—state of legal, regulatory and third-party payer landscape, Bill has thrived as a solo urologist in private practice and believes that all physicians should be able to make medical decisions that are in the best interest of their patients and profession.

At the AMA Bill is vice-chair of the Virginia Delegation and co-chair of the Southeastern Delegation resolutions committee. He has served as a member of three reference committees including as chair of the Reference Committee on Amendments to Constitution and Bylaws.

The Medical Society of Virginia, joined by the Southeastern Delegation, the American Association of Clinical Urologists, the American Urological Association, the Virginia Urological Society and the MSV medical and resident sections, is proud to endorse Bill and asks that you join in supporting him in his request to serve on the AMA Council on Constitution and Bylaws.

Bill and his wife Melanie are the proud parents of four children and adore their four-year-old grandson Mark Daniel, whom they love calling "MD." They enjoy their many friendships in the AMA family and look forward to seeing everyone again as soon as post-COVID allows.

#### **Personal statement**

*"Bylaws are the fundamental blueprint of an organization and great care is required to continually ensure they are relevant to the members they serve."*



## Christopher Libby, MD, MPH



The AMA Resident and Fellow Section, the California Medical Association, the PacWest Conference, and the American College of Emergency Physicians are proud to endorse Christopher Libby, MD, MPH, for election to the resident and fellow seat on the AMA Council on Constitution and Bylaws.

Dr. Libby has been an advocate for his patients and his colleagues since he first joined the AMA as a medical student in 2013. Recognizing the important work the AMA does for the future of our profession, he quickly became involved in multiple facets of organized medicine. He credits the collective wisdom of his physician mentors as well as the residents, fellows, and medical students around him in helping to broaden his understanding of the needs of the next generation

of physicians.

As an emergency physician, Dr. Libby knows that medicine is a team sport and recognizes that the perspectives of all our members are important to ensuring the organization fairly represents its members. As a resident at the University of Central Florida, he was elected as chief resident, where his ability to build consensus while achieving the program's goals earned him the Clinical Humanism award from not only the physicians, but also the nursing and allied health staff throughout the hospital. As a clinical informatics fellow at Cedars Sinai, Dr. Libby now works with physicians from all specialties to help improve the delivery of care via innovative new digital technologies. Dr. Libby will bring the same dedication to the AMA Council on Constitution and Bylaws to ensure that all our members have a chance to have their voices heard at the AMA.

### Service to the AMA & Organized Medicine

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- AMA-RFS delegate on the governing council
- AMA-RFS alternate delegate on the governing council
- AMA-RFS sectional delegate
- AMA-MSS chair
- AMA-MSS regional delegate
- CMA-RFS vice chair of policy analysis
- FMA Board of Governors
- FMA PAC board
- ACEP Clinical Emergency Data Repository Committee
- EMRA Informatics Committee chair
- Member of the American Institute of Parliamentarians

### **Personal statement**

*"The Council on Constitution & Bylaws will be tasked with numerous challenges in the coming years thanks to the opportunities COVID-19 has provided through remote work, telemedicine, and virtual meetings. As the AMA learns from these virtual meetings, CCB will need to continue to ensure that our AMA remains a democratic organization focused on the policy our members pass. I pledge to use my experience preparing for a virtual RFS meeting on the Governing Council, my background in parliamentary procedure, my years of service in the HOD, and my expertise in Clinical Informatics to help CCB best evaluate ways for the AMA to continue its work advocating for our patients and our members within the framework of our Bylaws."*

## Sherri Baker, MD



*As a longtime softball player and team captain, I have had hard losses and heartwarming wins. I have learned many lessons—especially how to both win and lose with dignity and pride and the value of a team. I want to transfer these values and lessons to service on the AMA's Council on Medical Education.*

But athletics are not Sherri Baker's only passion. Sherri practices as a pediatric cardiologist at the University of Oklahoma College of Medicine and is a long-time AMA member and advocate. She has extensive experience in medical education and brings lessons from all these areas to service on the AMA Council on Medical Education.

Through undergraduate training at the University of Oklahoma College of Medicine, her pediatric residency in Hawaii and her fellowship in pediatric cardiology at Duke,

Dr. Baker was involved in advocacy through medical associations at the county, state and national level. After her training, she returned home to practice pediatric cardiology at her alma mater.

Her involvement in organized medicine continued after her return to Oklahoma with her election to the Oklahoma delegation to the AMA. She has served at all levels in the Oklahoma State Medical Association including as speaker and president. Providing health care to all Oklahomans has been an issue for her rural state and she is a leader in addressing the physician shortage through educational and practice initiatives.

Dr. Baker maintains a busy clinical practice and has served as dean for admissions for 14 years. She has led a team that revised the school's admissions process to a quantitative, evidence-based system. At the GME level, she is involved in teaching and mentorship. Two years ago, she completed her recertification and thus is very familiar with issues surrounding CME and MOC.

Through the different stages of her training and career, she has developed an understanding and appreciation for the way that different practice environments and cultures impact how we individually practice medicine. She strongly believes these practice experiences must transfer to educational experiences in order to make us a stronger profession that is best aligned to serve all our patients. Now, Dr. Baker would like to use her years of experience in daily practice and various levels of medical education and advocacy to support the work of the AMA Council on Medical Education.

The Oklahoma State Medical Association, Oklahoma County Medical Society, Oklahoma Rural Physician Section and Tulsa Medical Society are joined by the Southeastern Delegation to the AMA, American Academy of Pediatrics, Cardiovascular Section Council, American Society of Anesthesiologists, AMA Young Physicians Section and Heart of America in asking for your vote to elect Sherri Baker, MD, to the AMA Council on Medical Education.

### **Personal statement**

*"In medicine, there is the honor of taking care of a patient. In medical education, there is the honor of influencing the care of patients for current and future generations."*

## Lou Edje, MD, MHPE



Inspired by her mother's lifelong commitment to teaching, Lou Edje, MD, MHPE, FAAFP, became interested in the evidence-based role teaching plays in medical education, leading her to earn a master's in health professions education at the University of Michigan Medical School where she also teaches.

Today, she holds responsibility as associate dean for graduate medical education at the University of Cincinnati Medical Center.

A new medical article is published every 26 seconds, yet it can take 17 years for application of best practices to become routine for the average physician. How do we train our learners to be prepared for future learning and able to adapt nimbly to change? Dr. Edje's expertise in master adaptive learning makes her uniquely qualified to serve on

the AMA Council on Medical Education.

Lou, long involved in local and state medical organizations, has been active in the AMA as a member-at-large in the AMA Organized Medical Staff Section, in the AMA Academic Physicians Section, serving on reference committees, and testifying before the AMA Council on Medical Education on behalf of learners, her state, and collaborative stakeholders. Having been managing partner of a large, independent, private practice group; chief of staff at a community hospital and in medical education leadership at two major health systems, she has worked with early, mid- and late-career physicians across a range of practice models to help maintain their expertise. As an Ohio delegate, she has also had the privilege of serving as chair of Reference Committee C.

As a candidate for the AMA Council on Medical Education, Dr. Edje brings a threefold set of excellent qualifications:

- **CONNECTED to all three stages of medical education** with leadership experience in undergraduate, graduate and post-graduate education
- **CONNECTED to a full spectrum of specialties** as servant leader of nearly 700 residents and fellows and almost 100 program directors
- **CONNECTED to the future of medical education** as a national speaker on transforming medical education in the area of master adaptive learning

She is most proud of her AMA appointments to the Review Committee for Family Medicine of the Accreditation Council for Graduate Medical Education and to the AMA Ambassador Program Steering Committee.

Now, Dr. Edje would like to put her expertise to work at the next level, serving on the AMA Council on Medical Education.

For her continued service and leadership, the Great Lakes States Coalition and the Ohio State Medical Association proudly nominate Dr. Edje and, respectfully, ask for your vote and support of **Lou Edje for election to the AMA Council on Medical Education**. They are joined in their enthusiastic endorsement of Dr. Edje by the American Academy of Family Physicians, the Ohio Academy of Family Physicians, the AMA Young Physicians Section, the AMA Minority Affairs Section, the Academy of Medicine of Cincinnati and the Cincinnati Medical Association.

### Personal statement

*"This pandemic has been trying for medical education. Instead of waiting for this to pass, it is imperative we continue exploring and developing pragmatic advances that best serve our patients, our learners and our profession."*

Please visit [www.louedje.com](http://www.louedje.com) to learn more about Dr. Edje.

## Robert B. Goldberg, DO



Robert B. Goldberg, DO, is asking your support for re-election to the AMA Council on Medical Education. As an advocate for patients' students' and physicians' rights he has served as president of the Medical Society of the State of New York (MSSNY) and OSMAAP at the AMA. MSSNY, the AMA-YPS and the Rehabilitation Caucus are proud to endorse his candidacy. As a former medical school dean at the Touro College of Osteopathic Medicine (TouroCOM), he is equipped to bring the needs of medical students, faculty, and administration to the forefront of all AMA discussions.

As a medical educator, he serves on the faculty of the Icahn School of Medicine at Mount Sinai and is a clinical professor of PM&R at the Philadelphia College of Osteopathic Medicine, his alma mater. In addition to his former role as dean for the TouroCOM he served as the associate dean for community medical affairs and advocacy and was professor of PM&R and health policy at that institution and was an associate professor of PM&R at the New York Medical College for decades.

As a council member he has been a solid contributor for health policy that pertained to medical education at all levels from the pre-med student through senior physicians. As the subcommittee chair of undergraduate medical education, he helped spearhead several initiatives including one to establish guidelines for medical students whose schools accelerated graduation dates and worked to establish safety measures and protocols for students in the classroom and on clinical rotations.

Dr. Goldberg is a proven innovator in medical education. He was behind the creation of the dynamic flipped classroom that allows faculty to improve their method of delivery for the first two years of the medical school curriculum and creates an environment for student learning that helps bridge the gap between basic sciences and clinical decisions. The platform is a digitally based delivery model which proved to be prescient for the needs that now confront students throughout the nation.

### Personal statement

*"Under my leadership I identified hospital systems new to medical education and established more than 200 residency positions and have introduced successful legislation to address resident 'caps' on positions at many rural and other hospitals.*

*"Continuous Certification is a major concern for all physicians and the need to protect Board Certification achievement status through evidence based, pertinent, affordable, and accessible means is paramount. Will continue to face challenges yet unknown. Inequities in health education and delivery and distribution of medical services is more important than ever. My efforts to address these challenges have been recognized by the NAACP, the Hispanic Medical Association Foundation, and the Association of Black Cardiologists.*

*"Medical school must be less expensive. The Council has prepared a report and convened a task force under me to explore costs and possible alternative funding models.*

*"The need for experience, vision, and drive has never been more important than it is today in medicine. I pledge to serve our AMA to the best of my abilities!"*

## Krystal L. Tomei, MD, MPH



*This past year has solidified the importance of strong voices in medicine, advocating for science, protecting physician practices and adapting all levels of medical education in a rapidly changing world. Though the COVID-19 pandemic has thwarted our ability to gather in person and limited our ability to craft new AMA policy, it has also shown our strength as an organization: translating our policy into meaningful action. As a member of the Council on Medical Education, I helped develop the Council's guiding principles to protect learners at all stages—students, residents and fellows—responding to COVID-19 by recognizing their critical yet vulnerable role in medical care.*

*Medical education does not end after medical school or residency. It is our commitment and passion for lifelong learning which drives physicians towards excellence. We must remain at the forefront of innovation to ensure this future for generations to come. We must persist in removing barriers that prevent us from evolving. Our medical community must, therefore, continually reflect upon our own processes, as self-regulation will best allow us to achieve high quality and high-value education. If re-elected, I will continue to represent the voice of our House of Delegates and ensure that our influence in the medical education community remains steadfast and strong.*

Throughout her 20 years in the AMA House of Delegates, Dr. Tomei has continually been a strong voice for medical education. As a member of the AMA Council on Medical Education, she advocated for eliminating the Step 2 Clinical Skills exam (the USMLE recently announced its discontinuation). She supports the continued expansion of graduate medical education funding and positions. She warns about the adverse impact of non-physician learners on resident education while recognizing the importance of a physician-led care team. Tireless in her advocacy, Dr. Tomei pushes for meaningful change to the continuing certification process. Through these efforts, she pledges to remain the practicing physician's voice, continuing to advocate for our profession's lifelong learning.

Dr. Tomei is the Reinberger Endowed Director in pediatric neurological surgery at Rainbow Babies & Children's Hospital and assistant professor of neurological surgery at Case Western Reserve School of Medicine and is the associate program director of their neurological surgery residency program. She is board certified in neurological surgery and pediatric neurosurgery and actively participates in continuing certification through the American Board of Neurological Surgeons. Dr. Tomei remains active in medical student and resident education and mentoring, particularly among underrepresented groups in neurosurgery. She also serves on the Pediatric Neurosurgery Subcommittee of the Congress of Neurological Surgeons' Education Committee, creating continuing medical education materials for neurosurgeons in practice.

The American Association of Neurological Surgeons, Congress of Neurological Surgeons, AMA Young Physicians Section, American Society of Anesthesiologists, Specialty and Service Society, Neuroscience Caucus, and Mobility Caucus proudly endorse Dr. Tomei for re-election to the AMA Council on Medical Education.

## Harry S. Ajrawat, MD



MedChi, The Maryland State Medical Society and the Maryland Delegation to the AMA proudly nominate Harry S. Ajrawat, MD, FACS, FICS, for the AMA Council on Medical Service. Dr. Ajrawat is endorsed by the American Urological Association, American Association of Clinical Urologists, the American Association of Physicians of Indian Origin, the Greater Washington Association of Physicians of Indian Origin, the Indian American Urological Association, and the Prince George's County Medical Society. He is also supported by our AMA-IMG Section.

Dr. Ajrawat is a board-certified urologist in private practice for more than three decades. He trained at the State University of New York Buffalo and served as administrative chief resident. He then established his private practice in the Washington, D.C., metro area. He is no stranger to the intricacies of the business side of medicine, having served as president and CEO of a large urology practice for over a decade. He has recently opened a new medical practice in National Harbor, Md.

Dr. Ajrawat has been active in organized medicine for several decades. He has been president of MedChi and the Prince George's County Medical Society and served as chair of the Maryland Medical Political Action Committee. He serves as chair of the Unity Insurance Agency Board of Directors and chair of the Maryland Delegation to the AMA.

### Personal statement

*"I would like to leverage my extensive experience to serve our patients and fellow physicians as a member of the Council on Medical Service. 'Healthcare' has become a catch-all term for everything related to physician and ancillary services. **Medical care** is what physicians provide, and 'healthcare' should be the name given to ancillary services provided by nurse practitioners, physician assistants, et al. Medical care should be given under the direct supervision of a licensed, qualified physician.*

*"Pre-authorization requirements and step therapy delay medical care, creating unnecessary obstacles that waste time and endanger patients. Physicians should be making these decisions-not the insurance companies. Insurers' financial interests should not dictate medical care.*

*"The pandemic has highlighted the importance of being prepared and the ability to mobilize quickly, for organizations and for practices. It has also exposed the need for more innovative ways to deliver medical care such as telemedicine. We should continue to strive for telemedicine to be an accepted and appropriately reimbursed form of medical care. I hope to be part of this effort for our AMA.*

*"On a more personal note: I was inspired by my father, Pritam, an anesthesiologist who came to Yale in 1956 for his fellowship. He was in awe of the medical advancements being made by the U.S. I am privileged to practice medicine near our nation's capital, and am proud to be married to Sartinder Ajrawat, another inspirational anesthesiologist in my life.*

*"I have the experience, the energy, and the integrity necessary to help our AMA navigate the complexities of these uncertain times and lead physicians toward a better future for our patients and our profession. I humbly ask for your vote for the AMA Council on Medical Service."*

## Alain A. Chaoui, MD



The Massachusetts Medical Society (MMS), New England Delegation, and the American Academy of Family Physicians (AAFP) proudly endorse the candidacy of Alain A. Chaoui, MD, FAAFP, for election to the AMA Council on Medical Service.

Dr. Chaoui has served as a physician advocate with an effective voice on the local, state, and national levels. As president of the MMS, he enhanced diversity, led a task force on strategic planning, worked tirelessly to broaden, diversify, and increase membership and during his tenure, a women's section was created within the society.

*"My frontline experience in private practice, my service in the trenches and community involvement have made me realize that there are forces outside of our clinics that impact our training and often tie our hands. I formed a multi-disciplinary primary care group to address the needs of patients in my community, following our AMA legacy of putting patients first. An immigrant, I am thankful for the opportunities given to me, and work hard to pay this forward through effecting positive changes to help physicians in training and in practice cope with the increasingly confusing healthcare landscape. Together, physicians can move meaningful payment reform forward, and ensure our patients can access affordable care and medications. Through you, my colleagues, I have learned and continue to learn what works and what does not work. I want to share my voice and my experience to make things better for all of us."*

Dr. Chaoui is a dedicated AMA member and believes that the AMA is in a strong position to bring about changes that will reform our health care system and lead the changes that our patients need and deserve. He is a strong believer that the AMA can and should ensure a better working environment for our colleagues, as well as for our young professional colleagues who are now in medical school and post-graduate training.

Dr. Chaoui is passionate about educating and mentoring future physicians. His passion for mentorship and encouraging minority students and others to join medicine is well known in his community. Medical students routinely rotate and complete their clinical training in his office.

Dr. Chaoui is a primary care physician, board certified in family medicine and president of Congenial Healthcare, LLC, a private practice group he formed in 2018 after 23 years in solo private practice. Within Congenial, he created a behavioral integration model with addiction and mental health treatment. This model provides much-needed care for those in his community who struggle with access.

Within the MMS, working closely with colleagues at the Harvard School of Public Health, Dr. Chaoui helped address physician burnout, spearheading a study that resulted in the declaration of physician burnout "a public health crisis." Together, the group proposed six action items to address burnout and to bring back the joy to the practice of medicine.

Dr. Chaoui will bring his innovative experience in practice and system management, his passion for making a difference, and his vision, to work with his colleagues serving on the AMA Council on Medical Service.

### Michael B. Simon, MD, MBA



It is but once in a generation that we have the ability to remodel our nation's health care system. Over the 32 years that I have been part of our AMA House of Delegates, I have witnessed immense change. We have introduced the concepts of managed care, value-based care, and pay for performance. We have recognized the need to increase access to vulnerable segments of our population, to safeguard against insurance industry greed at the expense of providing care, and to provide mechanisms to ensure minimum benefit standards. The COVID-19 pandemic further challenged our already strained system and spotlighted our vulnerabilities including health disparities, meaningful access to care, and emergency/crisis planning.

As we look to the future, are we at a precipice or on the verge of great opportunity? I choose the later. The AMA needs to seize upon this opportunity to reshape our policies and our legislative strategies. We need to lead the way with innovative thinking aimed at reducing comorbidities to create a healthier America. Our focus needs to be on eliminating health care disparities, ensuring both coverage and access to high quality and affordable care.

Serving on the Board of the Joint Commission for the past six years has further highlighted issues of quality, access, safety, and oversight. With physicians comprising half the board, we have worked to maintain a unified physician stance for meaningful and sensible regulatory reform.

I have worked extensively at the state and federal levels to protect patients, hospitals, and practices from detrimental Out of Network Billing legislation. New York was the first state to enact surprise billing legislation that was truly revolutionary; becoming a model for future efforts. As president of the New York State Society of Anesthesiologists I worked together with the Medical Society of the State of New York to pass that legislation. As chair of the American Society of Anesthesiologists' Committee on Out of Network legislation, I helped lead a national effort to enact surprise medical bill legislation based on the NY law. Network adequacy and fair payments must be ensured if we are going to have a patient-focused health care system consistent with our AMA principles. Patients must be able to maintain choice when it comes to their care and must be assured that there will always be a physician leading their health care delivery.

The threats to the private practice of medicine are real. They are coming from a multitude of directions, including the insurance industry, the federal government, and Wall Street. Never before have so many physicians found themselves employed by other entities. As we re-draft policies, I will work to ensure that physicians who choose to, can remain independent.

Our AMA House is a more inclusive, diverse, more socially aware organization than ever in its history, a trend that we must continue. As we look forward, our House must have robust discussions regarding policies on single payor/Medicare for All, a public option, telehealth, Medicaid expansion, and more. I am prepared to be an engaged, open-minded and thoughtful participant as we embark on system-wide disruptive innovation.



## John T. Carlo, MD



The Texas Medical Association announces John T. Carlo, MD, for the American Medical Association Council on Science and Public Health.

Dr. Carlo was a member of the TMA Council on Science and Public Health from 2008–2014 and was chair from 2013–2014. He is chair of TMA's Council on Socioeconomics.

Dr. Carlo is president of the Dallas County Medical Society and serves on its board. He has chaired the Dallas CMS Community Emergency Response Committee since 2007 and is a delegate to the TMA House of Delegates. He also co-chairs the North Texas Task Force. He was co-chair for the Texas Department of State Health Services Preparedness Coordinating Council. During the 2014 Dallas Ebola crisis,

he was a spokesperson for Dallas physicians, responding to community and media requests for his guidance. TMA President Austin King, MD, gave him a TMA President's Award for his 2014 service.

Dr. Carlo is CEO for Prism Health North Texas, the largest nonprofit agency in the area, providing HIV prevention and treatment, mainly for uninsured patients. Previously, he worked as a program director for the Center for Infectious Disease Research and Policy at the University of Minnesota and served as the medical director and health authority for Dallas County Health and Human Services.

Dr. Carlo frequently serves as an advisor to local and state elected officials nationwide as a consultant for the Naval Postgraduate School in Monterey, Calif. He is on faculty at The University of Texas Southwestern Medical School in the Division of Emergency Medicine. After graduating from UT Southwestern in 2000, he completed internship and residency in general surgery at Baylor University Medical Center in Dallas. He earned bachelor's and master's degrees in biomedical engineering from Tulane University.

### Personal statement

*"The SARS-cov-2 pandemic is the public health crisis of our generation which will have long-lasting effects on our nation's health for years to come. Being on the Texas Medical Association's COVID-19 Task Force, I have been a part of a great team of physician leaders that have been working to advise local elected officials on community mitigation strategies, as well as convey to everyone the most up-to-date information on what the science is telling us. Throughout my professional career, I have both planned for and responded to public health emergencies, including the 2014 Ebola crisis in Dallas, the 2009 H1N1 pandemic, the 2012 West Nile Virus outbreak, and a number of others. However, this pandemic undoubtedly represents our greatest challenge that we must face together, and one that I hope to address through continued service on the AMA's Council on Science and Public Health.*

*"During this crisis we face today, we are afforded a surprising degree of clarity which can create opportunity. The unity of effort, establishment of priorities, and a laser-sharp focus lift what is un-liftable. Just think about how far we have come with telehealth, vaccine innovation and production, and movement of healthcare resources—all at levels unprecedented and not thought possible before.*

*"However, this pandemic exploited many of our vulnerabilities, especially in health equity. SAR-cov-2 shows unquestionably the benefit of having and the harms of not having access to affordable and effective healthcare. It remains the key issue at the nonprofit healthcare organization I lead where as many as 60% of patients we see living with HIV lack insurance. I see every day the harm of layers upon layers of societal marginalization and socioeconomic disparities, but I also see the incredible great things that can happen thanks to our unrelenting drive towards cures and scientific innovation that have led to incredibly effective HIV treatment.*

*"Where we go from here truly depends on us as physician leaders."*

## Mary LaPlante, MD



Mary LaPlante, MD, FACOG, is proudly sponsored for re-election to our AMA Council on Science and Public Health by the American Congress of Obstetricians and Gynecologists. Dr. LaPlante is endorsed by the Great Lakes Coalition, AMA Young Physicians Section, Section Council for Preventative Medicine, and the Specialty and Service Society.

Involved in the AMA since 1987 and the House of Delegates since 1989, Dr. LaPlante has been a delegate to the Medical Student Section, in addition to the Resident and Fellow Section, and Young Physicians Section. She served as alternate delegate for the Medical Student Section and delegate for the Young Physicians Section in addition to the Women Physician Section governing council. She is currently a delegate representing the American Congress of Obstetricians and Gynecologists. She serves as OSMA District 5 Councilor.

Dr. LaPlante is a women's health specialist for the Cleveland Clinic Foundation. She teaches residents in both OB/GYN and family medicine. She understands how issues such as social determinants of health, housing, education and others, impact our ability to provide the best care for our patients. In her current practice, she addresses these issues daily. Her experience at all levels of organized medicine has provided her with insight into what physicians can truly accomplish and the work we need to continue to do to improve the health of all. Dedicated to women's health, she serves on the Ohio Council to Advance Maternal Health.

Born and raised in Cleveland, Ohio, Dr. LaPlante is a graduate of The Ohio State University. She completed her residency in obstetrics and gynecology at the University of Toledo. She is currently on faculty at the Cleveland Clinic Learner College of Medicine of Case Western Reserve University. A lifelong learner, she is currently pursuing an MPH at Kent State University. She currently sits on the STEM Advisory Board for Girl Scouts of Northeast Ohio.

During her service on council, Dr. LaPlante has worked on reports addressing ongoing drug shortages, protecting medical students from hazardous materials, and addressing intimate partner violence in LGBTQQ-IAAP and other individuals. Dr. LaPlante understands advocating for our patients means understanding the challenges affecting physician practice from the grassroots to the national level. She is active with the Academy of Medicine and Northern Ohio and serves as a district councilor for the Ohio State Medical Association in addition to her ACOG and AMA involvement.

### **Personal statement**

*"Public Health is the foundation upon which good healthcare is built. As physicians, our ability to provide quality healthcare is dependent upon a patient's ability to participate in care. The work of our Council on Science and Public Health provides valuable information to our membership and the communities we serve. It is an honor to serve."*

## **Bollepalli (Bo) Subbarao, MD**



The New England Delegation and the Connecticut State Medical Society proudly support Bollepalli (Bo) Subbarao, MD, FAPA, for the AMA Council on Science and Public Health. The AMA-IMG caucus and the American Association of Physicians of Indian Origin also have endorsed his candidacy.

### **Personal statement**

*"Growing up in rural India gives me a unique perspective on our public health challenges. I was educated in India, received my immigrant visa, and completed my residency in Psychiatry at the University of CT. In residency, I joined the US Army Reserve and was deployed five times to Kuwait/Iraq during Operation Iraqi Freedom. I retired as a Colonel in 2011. I focused my work on suicide prevention protocols for our troops and I developed resilience programs to help conserve the strength of our troops. My experience in the Army highlighted the vital interplay between mental health and public health. We cannot have a robust public health infrastructure if we do not address mental health and the still-present stigmas attached in the general population but also to veterans and physicians.*

*"I work with the State of CT Dept. of Developmental Services on reducing restraints and pharmaceutical use, fostering behavioral support approaches in group homes and in individuals with autism and intellectual limitations. I currently serve as a member of the CT Oversight Council of Behavioral Health where I advocate for services that address social determinants of health.*

*"My upbringing and career experiences have nurtured my passion for public health, population health and preventive medicine. With my patients, I engage in discussions of the long-term effects of pharmaceuticals, discuss alternative treatments, self-help measures, lifestyle changes and even the spiritual aspect of healing. Public health education has always, and will continue to be, a core component of my relationships with my patients and their communities.*

*"The COVID-19 pandemic has only underscored to me the weaknesses in our nation's public health infrastructure. I feel strongly that our CSAPH needs to focus on public health as a mechanism to improve access to cost, quality and equity in the delivery of health care in our communities. We must be proactive, not reactive, in our public health approach and in our medical practices, focusing on building trust and relationships between physicians and the communities we serve."*

Dr. Subbarao's medical training began in India, where he was exposed to a country with vastly different public health challenges and infrastructure. Dr. Subbarao has been deeply involved in organized medicine, serving as President of the Hartford County Medical Association and of the Connecticut State Medical Society. Dr. Subbarao has been an alternate, now delegate to the AMA, for over six years.

Dr. Subbarao brings an exceptional viewpoint to public health, from his experiences and education in India to his passion for working with the U.S. troops as a colonel in the U.S. Army. Dr. Subbarao is a passionate advocate. As a community-based academic psychiatrist, he will bring a needed perspective to CSAPH, looking at mental health awareness as a critical component of our public health infrastructure, research and policy.